# Developments in NHS Dentistry

# Information paper for Local Authority Health Overview and Scrutiny Committees

Bristol
North Somerset
South Gloucestershire
Bath & North East Somerset

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#### 1 Purpose

To update local authority health overview and scrutiny committees and other stakeholders on progress in delivering NHS dental services in Bristol, North Somerset, South Gloucestershire and Bath & North East Somerset

#### 2 Background

Commissioning of NHS dentistry passed to Primary Care Trusts (from the department of health) in 2006, along with a new national dental contract.

Some dentists left the NHS at this time, and access to dentistry fell to very low levels in some areas.

National investment in access to dentistry has improved this situation, along with better signposting through the use of a local dental helpline. The latest GP patient survey results (December 2011) indicate that 96% of people who tried to find an NHS dentist in the last year were successful<sup>1</sup>.

However, many people did not try to find an NHS dentist, and of those, 12% did not think they could get an NHS dentist. In fact there are 65 NHS dental practices accepting new patients across the area as shown below:

|                            | Practices accepting new NHS patients |  |  |  |  |
|----------------------------|--------------------------------------|--|--|--|--|
| Bristol                    | 27                                   |  |  |  |  |
| North Somerset             | 13                                   |  |  |  |  |
| South Gloucestershire      | 13                                   |  |  |  |  |
| Bath & North East Somerset | 12                                   |  |  |  |  |

Providing current information about the availability of NHS dentistry is now one of our greatest challenges to improving access to NHS dentistry and to improving oral health.

Planning and commissioning of dental services from primary care through to hospital services is overseen by a Steering Group with representation from each of the four PCTs, local dental advisors (dentists working in the local area) and a lay member who is a member of the Bristol LINK.

#### 3 Access to General Dental Services

General Dental Services is the term used to describe high street primary care dental services – most people's first point of contact with NHS dentistry will be through this service.

The services provided by General Dental Services are described in the patient charges leaflet which is attached at appendix 1.

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<sup>&</sup>lt;sup>1</sup> Average across Bristol, North Somerset, South Gloucestershire and Bath & North East Somerset

#### 3.1 Availability of NHS dentistry

It is widely known that in some areas of the country availability of NHS dentistry has been poor and that a number of dentists left the NHS at the time of the introduction of the new national dental contract in 2006.

Locally since 2006 we have commissioned new services both by increasing capacity at high quality existing providers and by introducing brand new practices.

Targeting services is based on high need (high levels of decay in the local population) and on availability of existing services, so new practices may be located in areas where there has not been a dentist for some years, and /or in areas identified as at high risk of oral health need.

Since the new practices have opened, many patients have had their first NHS dental appointment, and some have returned to the NHS for the first time since 2006.

However, particularly in Bath and Bristol, there are now more services available than are being used. We think this is partly because people still think they cannot get an NHS dentist. The GP patient survey which now asks questions about access to dental services, certainly indicates this is the case.

The priority for the local PCTs now is to ensure that every effort is made to change perception both about the need to visit the dentist regularly, and the availability of local dental services. Local awareness-raising initiatives, in partnership with practices have included press coverage, participation in events such as the Harbour Festival and direct advertising. A successful bid for DH funding will secure further direct advertising and promotion activities in the early part of 2012.

#### 3.2 Helpline

In order to provide accurate and timely information about the availability of dental services and the locations of practices accepting new patients, the local PCTs commission a dental helpline for signposting patients to available NHS dental services. The helpline opened in 2007/8. It now receives 1400 calls per month (average April – September 2011).

Patients looking for a new NHS dentist are advised of 2-3 dental practices currently accepting new patients close to their home address.

The dental helpline number is 0845 120 6680.

In April 2014, the local Avon dental helpline will transfer to the new NHS 111 service which is being introduced. A separate briefing on NHS 111 was provided to local Overview and Scrutiny Committees in late 2011.

#### 4 Urgent dental services

#### 4.1 In-Hours

Patients who do not have an NHS dentist and are in dental pain, are able to telephone the NHS dental helpline (see above). The helpline will triage patients

and if required can make an urgent appointment for them with a dentist in Bristol or BANES the same or next day.

#### 4.2 Out of Hours

Patients who find themselves in dental pain out of hours can ring the out of hours triage service for advice, which sometimes includes self-care. Some patients are invited to attend an appointment at an Out of Hours base or in some cases an appointment may be made for the in-hours clinics as described above.

The out of hours service is available from 6-9 every evening and from 9-5 on weekends, clinics are not available at all of these times however all patients who need to be, will be seen within 48 hours.

Clinics are held in central Bristol, Bath and Weston.

#### 5 Community dental services

'Community dental services are' best described as primary care dental services for patients who have special needs. The dental treatment the patient receives is consistent with that provided in primary care practices, however due to the patient's other special needs they cannot access care in a practice, or care in a practice would not be appropriate. These patients include the following groups

- Adults and children with learning difficulties
- Adults and children with physical disabilities whose local practice is not in an accessible location or premises (although choice is improving in this area)
- Patients with anxiety about dental treatment,
- Older people who are housebound either in their own home or in a residential home

A review of the locations aiming to improve equity of access to CDS across the four PCTs is underway and will be reported on separately to health scrutiny committees and LINKs later in the year.

#### 6 Specialist dental services

#### 6.1 Orthodontics

Orthodontic services offer dental treatment that aims to improve the appearance, position and function of crooked or abnormally arranged teeth. These services are provided under primary care contracts with local private providers, and under the secondary care contract with the hospitals. These contracts are paid for by the PCTs.

Orthodontic treatment is only commissioned by the NHS for children under the age of 18 and as such there are no NHS charges payable by patients.

A review of orthodontic services is underway with a view to:

- reducing waiting times
- ensuring equity of access

- ensuring a high quality service
- ensuring value for money

The review is close to completion and health scrutiny committees and LINKs will be updated. It is currently thought there will be very little change to service provision however waiting times should be reduced through close partnership working with the providers.

The PCTs would like to note the positive experience of working with the providers in reviewing and working to improve these services.

#### 6.2 Secondary care services

Secondary care specialist dental services are provided at the Bristol Dental Hospital, Southmead and Frenchay Hospitals, Weston General Hospital and the Royal United Hospitals in Bath.

Priorities are to continuously improve the referral pathway to ensure consistent access to services, to maintain acceptable waiting times for treatment, and to ensure value for money across the service. These services are covered by the 18 week target.

#### 7 Fluoridation and oral health improvement

The PCTs have a responsibility to improve oral health by prevention as well as by access to treatment. This is delivered through initiatives such as:

- training of school nurses and health visitors
- training of care home staff
- targeted tooth brushing advice
- the application of fluoride varnishes to children at high risk of dental decay
- schemes to provide toothbrush and toothpaste to children

In the summer of 2010, the Avon Fluoridation Project Board was formally stood down as it was clear there was insufficient local evidence on the effectiveness of alternatives to adding fluoride to the Bristol water supplies. At this time the Strategic Health Authority was requested by all four Primary Care Trusts to defer making a decision to commission a feasibility study, which was agreed.

From the experience in Southampton, it was clear that local information would be needed in the event that there was to be a formal consultation process. In addition, the Coalition Government's position on fluoridation was not known, nor was the outcome of the Judicial Review into the process applied by South Central Strategic Health Authority available. Subsequently, the Judicial Review found for the Strategic Health Authority, which demonstrated the importance of local robust data on alternatives.

To support the collection of local evidence, the Avon Oral Health Improvement Strategy has been updated, together with an agreed Action Plan and a programme for evaluating the outcomes of the interventions for service users. Work is ongoing to implement this Strategy and collect local data.

#### 8 Patient satisfaction

There is a variety of data available regarding patient experience of NHS dental services, including data collected by the Business Services Authority who process all claims for dental activity submitted by NHS dentists. The national GP Patient Survey also includes a set of questions around dental access every six months. A short description of the relevant indicators can be found below.

#### 8.1 Vital signs patient satisfaction surveys

The guidance for the Vital Signs patient satisfaction surveys is available on the Business Services Authority website<sup>2</sup>. The latest data relates to the quarter

ending in December 2011 and is shown below:

|   | Bristol | North<br>Somerset | South<br>Glos | Bath &<br>North<br>East<br>Somerset | South West Strategic Health Authority | England |
|---|---------|-------------------|---------------|-------------------------------------|---------------------------------------|---------|
| % of patients satisfied with the dentistry they have received             | 95.4%   | 96.4%             | 95.5%         | 95.4%                               | 95.2%                                 | 94.6%   |
| % of patients satisfied with the time they had to wait for an appointment | 91.5%   | 94.4%             | 90.3%         | 94.4%                               | 91.7%                                 | 89.8%   |

#### 8.2 GP patient survey

In the most recent period (April to September 2011, published in December 2011), 1.4 million adults were asked about access to NHS dentistry in the previous two years. Participants were asked if they had tried to obtain an appointment with an NHS dentist, and if so, whether it was with a practice they had been to before and had they been successful. They were also asked what their overall experience was of NHS dentistry. Patients who hadn't tried to obtain an NHS dentist in the previous two years were asked to select the main reason why they hadn't tried.

Local results are highlighted in the tables below.

<sup>&</sup>lt;sup>2</sup> http://www.nhsbsa.nhs.uk/Documents/Quarterly\_Vital\_Signs\_Report\_Guidance\_PCT.pdf (page 5)

Table 1: Patients who succeeded in getting an appointment

|                               | In the last 3 months | In the last 6 months | In the last year | In the last 2 years |
|-------------------------------|----------------------|----------------------|------------------|---------------------|
| Bristol                       | 94%                  | 94%                  | 94%              | 93%                 |
| North Somerset                | 96%                  | 97%                  | 97%              | 95%                 |
| South<br>Gloucestershire      | 97%                  | 98%                  | 97%              | 96%                 |
| Bath & North<br>East Somerset | 97%                  | 97%                  | 96%              | 95%                 |

## Reasons why patients didn't try to obtain an appointment:

|                   | Not<br>needed<br>to visit a | No<br>longer<br>have<br>any<br>natural | Not had time to visit a | Don't<br>like<br>going to<br>the | Didn't<br>think<br>they<br>could<br>get an<br>NHS | On a<br>waiting<br>list for<br>an NHS | Stayed<br>with their<br>dentist<br>when<br>changed<br>from NHS | Prefer to go to a private | Find NHS<br>dental care<br>is too | Another |
|-------------------|-----------------------------|--|-------------------------|----------------------------------|---|---------------------------------------|--|---------------------------|-----------------------------------|---------|
|                   | dentist                     | teeth                                  | dentist                 | dentist                          | dentist   | dentist                               | to private   | dentist                   | expensive                         | reason  |
| Bristol           | 18%                         | 7%                                     | 2%                      | 5%                               | 12%   | 0%                                    | 21%  | 20%                       | 5%                                | 10%     |
| North Somerset    | 9%                          | 7%                                     | 1%                      | 6%                               | 15%   | 1%                                    | 33%  | 19%                       | 2%                                | 7%      |
| South             |                             |  |                         |                                  |   |                                       |  |                           |                                   |         |
| Gloucestershire   | 15%                         | 7%                                     | 2%                      | 9%                               | 10%   | 1%                                    | 22%  | 22%                       | 2%                                | 11%     |
| Bath & North east |                             |  |                         |                                  |   |                                       |  |                           |                                   |         |
| Somerset          | 12%                         | 5%                                     | 1%                      | 5%                               | 15%   | 1%                                    | 28%  | 24%                       | 3%                                | 6%      |

#### 8.3 NHS Choices

All local dental practices are included on NHS Choices and users can leave 'ratings' and comments. A priority for the PCTs is to set up providers so that they can update their own NHS Choices page and respond to comments where necessary.

#### 8.4 Enquiries to the Patient Advice and Liaison Service

The PCTs' Patient Advice and Liaison Service deals with a number of enquiries regarding dental services. Many of these relate to patient charges, referrals for specialist treatment and concerns about primary care dental treatment received. The PALS teams often work closely with practices to achieve a satisfactory outcome for both practice and patient. In a small proportion of cases issues raised by patients eventually result in wider involvement by the PCT and other health service bodies with the practice to improve the performance of a practice or an individual dentist through the PCT's contract and performance management arrangements. Formal complaints are dealt with in a similar way.

#### 9 Recommendations

To note the comments above and to provide feedback to the Avon Dental team if wished.

**Anna Masserick** 16 February 2012