

Yorkshire and the Humber Sheffield Scrutiny Committee – 16 March 2022 – Dentistry

1. Background

NHS England and NHS Improvement (Yorkshire and the Humber) is responsible for the commissioning and contracting of all NHS dental services across South Yorkshire & Bassetlaw (SY&B). Dental services include, Primary Dental Care (general high street dentistry, Urgent Care, Community Dental Services and Orthodontics) and secondary care.

The purpose of this paper is to describe oral health in Sheffield, provide an update on the provision of primary care dental services since the last discussion on the subject at Scrutiny Committee in February 2021, and give an overview of relevant NHS England and NHS Improvement (NHSEI) workstreams.

2. Oral Health Needs Assessment

Following on from the 2015 SYB Oral Health Needs Assessment, a rapid Oral Health Needs Assessment (Y&tH) has been completed in 2022. The purpose of this work is to help understand the oral health inequalities across Y&tH and the evidence base. This will inform the principles that will underpin strategy and work programme development address inequalities and meet population need and demand.

In summary, headline information includes:

Inequalities in oral health exist with those in the most deprived areas experiencing poorer oral health across all age groups as is demonstrated in the population of Sheffield.

Particular consideration could be given to those that have both the greatest dental need and experience challenges in accessing routine and urgent dental care including individuals and communities that are deprived and vulnerable children known to the social care system, individuals with severe physical and/or learning disabilities, poor mental health, older adults, homeless, asylum seekers, refugees and migrants.

The population is ageing, have more complex oral health and health needs and managing the dental needs of older people is challenging and may require specialist skills.

The COVID-19 pandemic initially resulted in reduced access to primary care dental services for the population of Yorkshire and the Humber, which is now improving. Dental services are not equitably distributed, and a health equity audit approach is currently being developed to determine equity of access to dental services in Yorkshire and the Humber, including urgent care services.

The recommendations from the 2022 Rapid Oral Health Needs Assessment will inform the development of the NHSEI Dental Strategy for Yorkshire and the Humber.



While NHSEI has the remit for providing dental services, Sheffield City Council has the statutory responsibilities around oral health improvement, including responsibilities in relation to water fluoridation and for commissioning evidence based oral health improvement programmes to meet the needs of the local population. Partnership working and complementary commissioning is important between local authorities and NHSEI, through a community approach maximising the skills of the wider health and social care workforce by making every contact count. An example of this is the flexible commissioning referral pathway whereby health visitors in Sheffield are able to refer children at high risk of poor oral health to dental practices signed up to the flexible commissioning programme.

3. Dental Provision in Sheffield

NHS England commissions primary care services from 66 dental practices in Sheffield.

4. Impact of Covid-19 Pandemic

A briefing for all stakeholders which described the situation in relation to primary care dental service was distributed in January 2022 and is attached for information.



5. Current initiatives

5.1 National £50m investment in NHS Dental Services

Funding has been allocated to the North East and Yorkshire region, as part of a national initiative to improve access and increase dental appointment availability for both examinations and treatment.

The expectation is for this care to be delivered outside of core hours, such as early morning/evenings and weekends and is expected to be used before 31 March 2022. This investment is part of a focus on dental services over the coming months, as services aim to return to pre-pandemic levels.

In Sheffield this has provided between 600 and 900 additional urgent care and subsequent stabilisation appointments for patients (dependent on the complexity of treatment) across 6 dental practices between 7 February and 31 March 2022.

5.2 Dental Access Project

It has been decided to continue to provide additional investment to support access for patients. Funding to support a number of practices for a further 12 months from 1 April 2022 has been confirmed and NHSEI will be working with those practices who have received funding in Sheffield to support increased access to dental services. There are currently 12 practices in this scheme in Sheffield.

5.3 Flexible Commissioning Programme

A recent evaluation of the Flexible Commissioning Programme, demonstrated that it is possible to commission dental services differently in a format that supports delivery of preventive care to improve oral health and reduce inequalities, offer access to new patients and develop the dental workforce. The scheme will be extended for a further 12 months from 1 April 2022, which will enable further refinement and evaluation to support targeting of resources based on the oral health needs assessment to reduce oral health inequalities. NHSEI will also be exploring opportunities to extend the scheme to other practices in targeted locations in line with the recent oral health needs assessment. There are currently 21 flexible commissioning practices in Sheffield.

5.4 Review of Community Dental Services

The NHS Community Dental Services in Yorkshire and the Humber (Y&tH) provide dental care for adults and children with additional needs and those from other vulnerable groups whose needs cannot be met by the general dental services. Sheffield Teaching Hospitals NHS Foundation Trust are commissioned to provide the Community Dental Service in Sheffield. They provide a range of services, which include special care and paediatric dentistry including treatment under general anaesthetic. Contracts with all providers of Community Dental Services across Y&tH end in September 2023.

A service review commenced in February 2022. This will set out key recommendations to inform discussions in relation to future service design, commissioning intentions and approaches which includes potential geographical footprint to ensure equitable provision and access to sustainable services and proportionate allocation of funding based on need. Terms of Reference for this review have been developed and it is anticipated that the review will be completed by September 2022.

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Accessing dentistry through Covid-19

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Introduction

Since the first lockdown in March 2020, access to NHS dentistry has been a key issue for people in Sheffield and beyond. Over the last 12 months, 1 in 4 calls and emails to the Healthwatch Sheffield office have been about this topic.

Throughout 2020 and much of 2021, the overall theme was one of confusion; people didn't feel able to access clear information about the changes to dentistry services over the course of the pandemic.

In later 2021 and into 2022, this has turned to frustration for many. We are still hearing from people each week who are finding it impossible to access an NHS dentist, whether for routine treatment or more urgent care.

We know that dentists have been trying to treat patients where they can, and there are systems in place which aim to support people to access urgent care. The expectation from NHS England is now that dental practices should be delivering 85% of the treatment they're contracted to do, in order to receive their full funding. However, the feedback we hear from individuals does not seem to reflect this progression. The impact on people who have been trying to access dental care has been significant, and we know the many people have been left distressed and in pain.



1 in 4
calls and emails to Healthwatch
Sheffield were about accessing
NHS dentistry*

*Feb 2021 – Feb 2022

Accessing dentistry through Covid-19: a timeline

NHS policies and updates	What people told us/what we did
Spring 2020	
<p>Critical emergencies (eg uncontrolled bleeding) are being treated face to face. Other urgent cases are being handled via telephone, with advice on self-care, and prescriptions for pain medication or antibiotics. Urgent Dental Centres are then set up, treating some patients with urgent needs by referral.</p>	<p>People were unsure how to access treatment – enquiries focussed on what people should do when they were in pain, and what to do if they didn't have a regular dentist.</p> <p>Finding clear information about the scope of what might be offered was difficult for the public and for us.</p>
Summer 2020	
<p>Local dentists begin to re-open to deliver urgent care. They can only offer limited appointments and treatment, but it's more than before. Non-urgent care continues to be managed by telephone, with NHS policy around triaging patients.</p>	<p>Healthwatch across Yorkshire & Humber highlighted joint issues, including concerns for some who were impacted more severely e.g. people with hearing loss. Communication from dentists has been mixed – with some still unclear about whether treatment is resuming.</p>
Autumn 2020 and Winter 2020-21	
<p>Dental provision across the city becomes mixed, with some practices offering routine work and others treating only urgent cases.</p> <p>NHS England is working towards recovery by increasing the amount of dental treatment each practice should deliver in order to receive their full funding – in Autumn 2020 this is 20% increasing to 45% through Winter.</p>	<p>People tell us they're not being triaged when they phone a dental practice. We worked with regional dental commissioners to help individuals when dental practices were not following the triage guidance set out by NHS England, but the larger issue remained.</p> <p>A rift was also emerging between NHS and private treatment – many people began to tell us they were offered prompt private treatment, but NHS waiting lists were 18-24 months long.</p>

Spring 2021

NHS England expects each practice to be delivering 60% of their contracted amount.

Policy remains that practices should be triaging patients in order to meet urgent need – regardless of whether patients have a regular dentist or not.

We are hearing that patients without a regular dentist are finding it much harder to access care – people are being told that they need to be ‘registered’ with a dentist in order to get an appointment, and practices are not always triaging people who ring them.
The gap between NHS and private treatment appears to be widening.

Summer 2021

Guidance from Spring 2021 remains in place.

Enquiry numbers were the lowest since the start of the pandemic during this time. We were still hearing from some people who were struggling to access care, but for the most part these were enquiries about more routine treatment.

Autumn 2021

Dentists are expected to deliver 65% of their contracted treatment.

Advice from the NHS is around managing expectations, though they acknowledge there is a significant backlog in treatment.

Frustration from the people we speak to is becoming significant. In increasing numbers, people are telling us they are only offered private care, which they cannot afford. NHS waiting lists are routinely over two years long, or practices have closed their waiting lists altogether due to their length.

Winter 2021-22

Dentists are expected to deliver 85% of their contracted treatment. Triage to prioritise patients with more urgent needs is still in place.

We’re hearing from more people who can’t access any NHS dentistry at all, and are becoming desperate.
Healthwatch England launched a [national campaign](#) calling on central government to urgently address the issues, and we’ve supported this locally.

Latest updates

#fixNHSdentistry

The concerns we've been raising about local people's access to dentistry haven't been happening in isolation. People all over England have been sharing similar issues with their local Healthwatch.

In response, our umbrella organisation Healthwatch England have launched a national campaign, calling on the government and NHS England to fix NHS dentistry; to speed up dental contract reform and provide significant and sustained funding to tackle the underlying problems of dental access and affordability.

For more information, see our news article [here](#).

Availability of NHS dentistry in Sheffield

In December 2021, 21 out of Sheffield's 50 dental practices said online that they were accepting new NHS patients. This doesn't fit with what local people had been telling us, so our team did our own mystery shopper exercise. This painted a very different picture:

- **Just one dental practice said they could actually book us an NHS appointment** (and the patient would need to visit the practice to provide photo ID and a proof of address first in order to do this)
- 8 practices said they **couldn't add us to a waiting list**, with most giving no further information. Only 2 of the 8 said they expected to reopen their waiting lists in 2022
- 12 practices said we could go on their waiting list, but these **waiting lists were extremely long**. One practice said "at least a year", while all the others said "18-24 months" or "2 years plus". To give us a sense of timing, one practice said that there were 700 people on their list, and they've only managed to take 2 off in the last 2 months
- Several practices offered us **private treatment**, suggesting we could book an appointment much sooner (January or February 2022) if we signed up to their private treatment plan

Key themes

Based on our conversations with local people, clear themes have emerged about trying to access NHS dental care in Sheffield.

Below we have detailed the themes we believe are the most prominent, and most concerning. It is important to note that many of these issues impact even more severely on those who were already finding it difficult to access care – whether that's due to lack of stable housing, low income, existing physical or mental health challenges, or communication barriers – and will further widen health inequalities.

People have found it difficult to get clear information

When Covid-19 restrictions first came into force, dentistry provision had to change rapidly. The impact on dental treatment was more significant than some areas of health and social care due to the high-risk nature of dental treatments, which produce aerosolised particles. During this period of initial change, people found it difficult to find out what they could access, and as a local Healthwatch we also had challenges finding accurate information.

As the situation developed further, and dental practices resumed some face-to-face treatment, people still struggled to find information about what they could expect. We worked with regional dental commissioners to try to develop clear answers, but this didn't always match up with people's experience of phoning practices.

There was particular confusion about people being told they needed to 'register' with a practice despite NHS England telling us this was not the case. Confusion also focused on the expectation that patients be triaged when they have suspected urgent needs – people were telling us regularly that this hadn't happened. The lack of clarity about this and many other aspects of care, such as pricing, waiting lists, and what was considered 'urgent', has led to frustration for many.

Some people were unable to access urgent care

NHS policy since the beginning of the pandemic has been that dentists should prioritise people with the most urgent needs. For most of the last two years, this has meant that patients should phone a dentist and be triaged, before being offered treatment, interim support such as medication, or advice on self-help.

However, this has not been the case for many of the people we spoke to. Many people say they have been left without treatment when they have been in severe pain, or were unable to eat or speak properly.

We have explained NHS triaging policy to many of the people we've spoken to – a large number of whom had already phoned several dental practices and had not been triaged at all. With this information, we have been able to raise issues with the Yorkshire & Humber dental commissioning team, passing on details of practices who have not triaged patients, and have been able to support some individuals to access the urgent care they needed. However, we suspect that many people have not known their rights to treatment (partly due to the difficulty in finding clear information, as outlined above), and will have missed out on care altogether when they were not appropriately triaged.

People who have a regular dentist have had a different experience to people who don't

Triaging policies mean that urgent care should be available to anyone who needs it, regardless of whether they have a regular dentist or not. However, this wasn't the case for some of those we spoke to.

Many of the people who were unable to access urgent care told us they didn't have a regular dentist before the pandemic. In contrast, some people who did have a regular dentist were even able to get routine check-ups.

A growing rift: NHS vs private care

One of the most significant concerns we have is the increasing inequity of dental provision, between those who can afford private treatment, and those who cannot.

As outlined by our mystery shopping exercise (page 4), several practices made clear that we could access private dental treatment long before we would be able to access equivalent NHS care. This is further evidenced by the many people who have been telling us the only timely treatment they were offered (or in some cases, the only treatment at all) would mean paying private fees.

When even NHS dental treatment is prohibitive in cost for some people, this lack of availability will further compound health inequalities for many families.

Waiting lists for NHS appointments are extremely long, and the demand at some practices is so high that they have closed their waiting lists. This leaves people with few or no options for affordable care.

The impact of delayed treatment

We are increasingly hearing from people who tell us they're concerned about their future health due to delays in getting treatment.

Some people have been left in dental pain, which is having a knock-on effect on their wider physical health, as well as their mental health. Others need more routine treatment or check-ups, but are worried that going for several years without this will lead to future health problems that could have been avoided. We're especially hearing this from people who have given birth during the pandemic, and haven't been able to make use of the free dental care they're entitled to, as well as people with young children who want to ensure they get a healthy start.

Children's access to NHS dentistry

Children's access to NHS dentistry is becoming a key concern for the parents we've spoken to. For children born during or shortly before the pandemic, parents have never had the opportunity to take them to an NHS dental appointment. We are becoming increasingly concerned that the only young children who are currently getting early access to dental care are those with families who can pay for private appointments.

This has an impact on their early dental health, but also sets up challenges for the future. We know that going to the dentist at a young age helps children get used to dentists – some children just aren't getting this chance.

Personal stories

This is a small sample of the stories we've heard recently. They are typical of the key issues we've heard over the last two years

- Pam* needs to have dentures fitted after having her remaining teeth removed. Dental practices won't even put her on a waiting list, and seem to have a blanket policy that dentures aren't an 'urgent' issue, despite its effect on Pam's life: **"I can't eat or talk properly... I can't afford to go private... It is affecting my mental health"**
- Kiera* called all the dentists in Sheffield who said they were accepting new NHS patients online, but found this didn't actually mean she could get an appointment – they offered to put her on a waiting list which would be two years long or more: **"I am willing to travel as far as needed as I am getting quite desperate at this point"**
- David* needs to see a dentist, but all the ones he calls say they can only offer him private treatment. He told us he is currently unemployed and doesn't have the money: **"£200+ I don't even have that in my bank account right now"**
- Esi* needs her wisdom teeth removing as they are causing constant pain. However, the dentists she called said this wasn't serious enough to require 'urgent' care and she will have to manage with pain medication: **"The pain is keeping me awake at night"**
- Mohamed* can't find the right information about how to access care. He is surprised when we tell him he doesn't need to be 'registered' with a dentist like he does a GP. It doesn't match up with his experiences, as he's been rejected by many practices: **"Contacted several dentists who have all said that I must be registered with them as an NHS patient to be seen."**
- Jo* tells us she can't even get onto a waiting list for an NHS dentist, and she doesn't know what to do. She doesn't need urgent care but she's worried that smaller issues will become worse if they're left alone: **"I have called upwards of 30 dentists which online say they are taking on NHS patients and literally none of them are"**



*names have been changed



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