

<b>HEALTH SCRUTINY COMMITTEE</b>	AGENDA ITEM No. 6
<b>9 JULY 2019</b>	<b>PUBLIC REPORT</b>

Report of:	NHS England and NHS Improvement – East of England	
Contact Officer(s):	David Barter, Head of Commissioning, NHS England and NHS Improvement – East of England	Tel. 0113 824 9032

**NHS ENGLAND RESPONSE TO THE HEALTHWATCH REPORT ‘FINDING AN NHS DENTIST IN PETERBOROUGH AND WISBECH’**

**R E C O M M E N D A T I O N S**

It is recommended that the Health Scrutiny Committee:

1. Consider and comment on the report from NHS England and NHS Improvement in response to the Healthwatch report ‘Finding an NHS dentist in Peterborough and Wisbech’ and make any recommendations

**1. ORIGIN OF REPORT**

- 1.1 This report is being presented at the request of the Health Scrutiny Committee.

**2. PURPOSE AND REASON FOR REPORT**

- 2.1 This report has been produced at the request of the Health Scrutiny Committee to provide information regarding actions if any that are being taken by NHS England and NHS Improvement in response to the Healthwatch report ‘Finding an NHS dentist in Peterborough and Wisbech’
- 2.2 This report is for the Health Scrutiny Committee to consider under its Terms of Reference Part 3, Section 4 - Overview and Scrutiny Functions; paragraph No. 2.1 Functions determined by Council - Scrutiny of the NHS and NHS providers.

**3. BACKGROUND AND KEY ISSUES**

Healthwatch Cambridgeshire and Healthwatch Peterborough undertook Enter and View visits to Dental Access Centres in Peterborough and Wisbech between September – November 2018. In January 2019 a report was published ‘**Finding an NHS dentist in Peterborough and Wisbech**’.

The Health Scrutiny Committee are concerned at the findings within the report and requested that NHS England produce a report to address the findings and recommendations contained in the Healthwatch report.

- 3.1 NHS England and Improvement welcomes the work undertaken and the feedback contained in the report.

The key findings were identified as follows:

- Due to the lack of routine and urgent dental appointments in Peterborough and Wisbech NHS dental practices, people are going to the Dental Access Centres for help
- The number of people being turned away without treatment from the dental access centres is substantial and increasing
- People do not know that formally registering with an NHS dental practice is no longer a possibility since April 2006
- People appreciate the high quality of care and the caring nature of staff at the Dental Access Centres
- There are not enough NHS dentists or dental nurses regionally and there are significant problems with recruitment
- Poor transport links make it hard for some people to access dental health care in the Fenland area

In addition, it was found that:

- Children have no priority for either routine or emergency appointments, unless they have additional needs and disabilities
- There is not enough preventative oral health education
- The number of children having multiple tooth extractions is increasing

Healthwatch Cambridgeshire and Healthwatch Peterborough recommend that NHS England and NHS Improvement:

- 1) Continue to work with partners and gather public views in regard of the proposed changes to both urgent and routine dental care.
- 2) Review the need for dental services in Cambridgeshire and Peterborough, and commission activity in line with demand.
- 3) Ensure that information about dentists on the NHS Choices website is up to date and accurate.
- 4) Direct dentists to take steps to increase dental care for children.

Recommend that the Cambridgeshire and Peterborough Public Health Team and Public Health England:

- 5) Commission an oral health campaign across Cambridgeshire and Peterborough targeting children and families.

Recommend that Cambridgeshire Community Services NHS Trust:

- 6) Review accessibility of information in both Dental Access Centres to ensure this complies with the NHS England Accessible Information Standard
- 7) Review availability of interpreting and translation services and maximise use of NHS England's newly commissioned service.

Please see below NHS England and NHS Improvement comments against the points raised:

### 3.2 **Due to lack of routine and urgent dental appointments in Peterborough and Wisbech NHS dental practices, patients are seeking care from Dental Access Centres**

In hours dental care is commissioned by NHS England and NHS Improvement across the Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) area. This includes both routine and urgent dental care which is delivered by general dental practices. Dental access centres are commissioned to provide urgent dental care for patients without access to a regular dentist.

The contractual mechanism is via General Dental Service (GDS) contracts and Personal Dental Service (PDS) agreements. GDS contracts are not time limited, whilst PDS agreements have an end date.

In total there are 23 contracts/agreements in Peterborough and 58 contracts/agreements in the Cambridgeshire area providing general dental care.

### 3.3 **Access rates for adult patients seen in the previous 24 months and child patients seen in the previous 12 months as a percentage/number of the population, by patient type and LA**

Name	Adult (18+)		Child (0-17)		Total	
	31 Dec 2018		31 Dec 2018		31 Dec 2018	
	%	No.	%	No	%	No
Peterborough City Council	42.2	62,807	59.6	29,824	46.6	92,631
Cambridgeshire County Council	45.7	234,621	57.0	76,726	48.0	311,347
Norfolk County Council	54.9	399,731	55.6	94,453	55.0	494,184
Suffolk County Council	55.0	331,963	59.9	91,577	56.0	423,540
Essex County Council	50.9	590,875	55.5	170,983	51.9	761,858
England	50.4	22,052,439	58.6	6,953,918	52.2	29,006,357

Source: NHS Dental Services, NHS Business Services Authority (BSA).  
NHS Dental Statistics: 2018-19, Second Quarterly Report

Access rates for Peterborough City Council area are below average for adults at 42.2% which is the lowest adult access rate in the area. However, the access rate for children is higher than average at 59.6% and is the second highest access rate in East.

Access issues have been identified in the Cambridgeshire and Peterborough CCG area, with some patients struggling to access both routine and urgent dental care. Patients requiring NHS dental care able to access services from a dental practice that has capacity to take on additional/new NHS patients. Practices are able to open and close their lists to new patients and do not require consent from NHS England and NHS Improvement to do this. Lists can open and close frequently and patients may find when contacting a practice again that they are accepting patients.

### 3.4 **Urgent care and stabilisation pilot**

NHS England and NHS Improvement are aware that patients have had difficulties in accessing urgent and routine dental care at general dental practices and have been working with the local dental networks and local dental practices with the view to implement the urgent care and stabilisation pilot scheme.

This pilot scheme will allow new NHS patients to be seen, the cause of their dental pain treated and then the patient will be put on a phased course of treatment in order to stabilise their oral health. This is to encourage dental motivation for oral health improvement instead of patients attending practices only when in pain. Stabilised patients would then be encouraged to enter into a normal pattern of dental examinations in general dental practice.

Two engagement events were held in March and May 2019; one in Peterborough and the other in King's Lynn. Invitations to the events were sent out to local practices. The objectives of the pilot were discussed, and expressions of interest invited.

NHS England and NHS Improvement are assessing the expressions of interest with the view that practices will commence working under pilot arrangements by the end of July 2019.

**3.5 The number of people being turned away without treatment from the dental access centres**

Since 2017/18 NHS England put additional capacity in place for urgent care at the dental access centres. This additional capacity was rolled forward into 2018/19 and 2019/20. The additional funding has totalled £310k.

NHS England and NHS Improvement commenced a review of dental access centres in 2018/19 and are currently working with the providers to gain comprehensive data to inform future commissioning decisions. As part of this review it is proposed that the current services will continue under pilot arrangements for two years from October 2019.

**3.6 People do not know that formally registering with an NHS dental practice is no longer a possibility since April 2006**

A Regulatory change in 2006 resulted in the ending of formal patient registration. Since then practices have included patients on a database in their practice and therefore patients may not realise that the registration process is not a guarantee that they will receive ongoing care from a practice as an NHS patient. A practice is only responsible for a patient whilst they are in a course of treatment.

NHS England and NHS Improvement is trailing a small number of prototype practices across England. Practices working under this system have a capitated patient list. There are a number of practices in East Anglia and Essex working under prototype arrangements including one in Cambridgeshire.

**3.7 People appreciate the high quality of care and the caring nature of staff at the Dental Access Centres**

NHS England and NHS Improvement acknowledges the high standard of care being provided and continues to work with the provider to ensure that patients continue to experience a high quality, caring service.

**3.8 There are not enough NHS dentists or dental nurses regionally and there are significant problems with recruitment**

It has been reported that recruitment of dentists has been problematic in some areas, this can be worse in the more rural areas. In addition, there have been delays in performers joining the national performers list which is managed by Capita.

NHS England continues to work with Capita and holds regular meetings. Processes and systems have been put in place to ensure that performer list applications are dealt with as smoothly as possible. There has been a reduction at a local level in the delays incurred in processing applications.

The Local dental network chairs in East Anglia and Essex are working in conjunction with Health Education England and Essex University with a view to looking to expand current training for dental therapists into areas of East Anglia including Peterborough. It is hoped to include setting up a Foundation training year for dental therapists.

The possibility of offering an extension to the current Foundation Training Scheme in order to

retain newly qualified dentists in the area is also being explored and it is hoped that this could be piloted under the Health Education England advancing dental care programme.

Whilst there have been some changes to the training programmes of dental nurses, including the introduction of apprenticeships providers have not reported any significant issues with the recruitment of dental nurses.

**3.9 Number of dentists with NHS activity, for years ending 31 March, England - NHS England region geography and CCG**

	2016/17			2017/18		
	Total number of dentists	Population per dentist	Dentists per 100,000 of population	Total number of dentists	Population per dentist	Dentists per 100,000 of population
Cambridge & Peterborough	440	1,992	50	457	1,936	52
West Norfolk	61	2,855	35	64	2,736	37
North Norfolk	74	2,305	43	67	2,566	39
South Norfolk	116	2,098	48	109	2,109	47
Great Yarmouth and Waveney	116	1,852	54	121	1,782	56
Norwich	170	1,166	86	165	1,314	76
East	1,930	2,223	45	1,987	2,177	46
England	24,007	2,302	44	24,308	2,274	44

*Source: NHS Dental Statistics for England: 2017-18.*

**3.10 Poor transport links make it hard for some people to access dental health care in the Fenland area**

Transport links and road networks can be problematic for rural populations; however, accessibility will be considered in future commissioning decisions.

**With regard to the wider provision of dental healthcare for children in Peterborough and Fenland, Healthwatch found that:**

**3.11 Children have no priority for either routine or emergency appointments, unless they have additional needs and disabilities**

Providers of NHS dental services should provide both urgent and routine care to patients. The general dental services contract includes all patients, whether adult or child. This also applies to both DACs and Out of Hours providers. Practices are only responsible for the care of the patient whilst they are under a course of treatment, have another issue in two months or have an item under guarantee. In effect this means patients are not guaranteed access to an NHS dental appointment at that practice in the future.

**3.12 There is not enough preventative oral health education**

The Office of Chief Dental Officer England has instigated an initiative Starting Well aimed at dental access and preventive care for young children, and the Local Dental Networks (LDNs) have been working with the profession to encourage them to see children (under the age of two) under this scheme.

There are other initiatives as part of public health programmes (see point 5 below).

**3.13 The number of children having multiple tooth extractions is increasing**

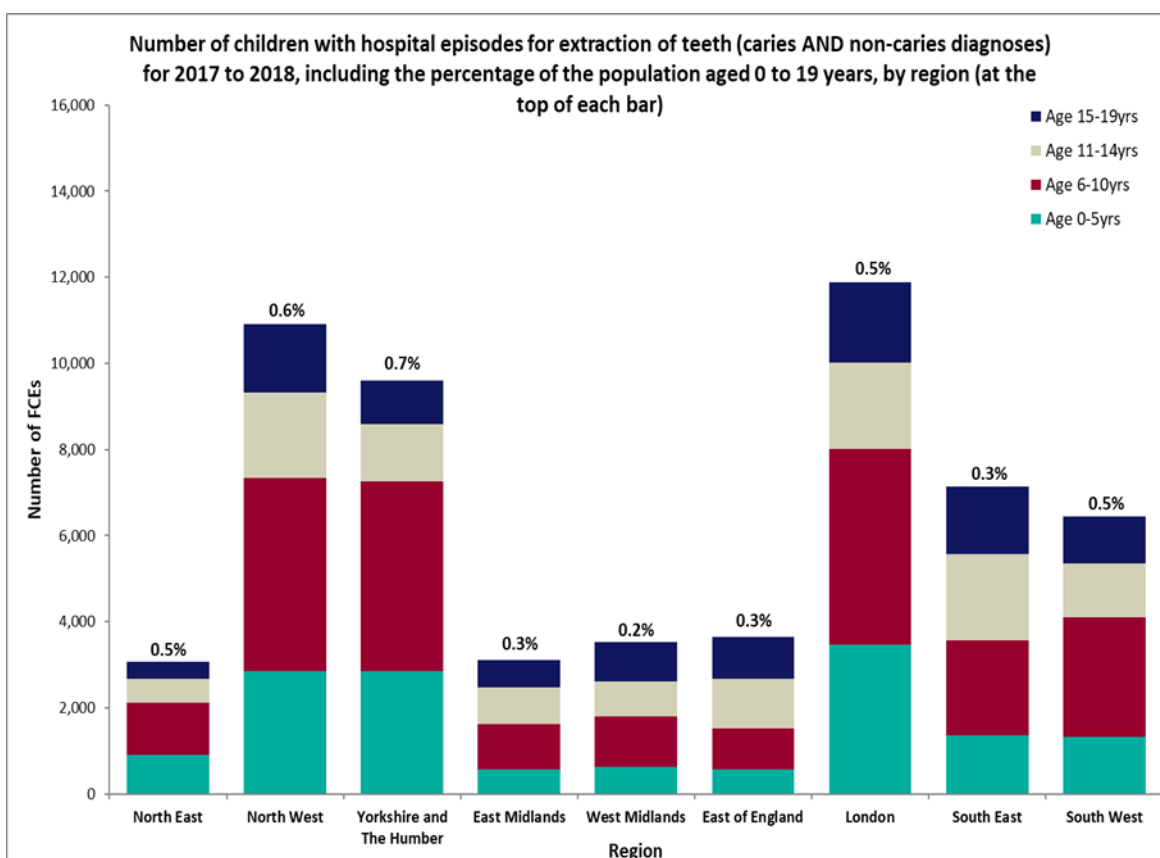
Whilst any dental extractions in children is regrettable, the estimated population for 0-5 years in 2017/18 was 19,419, of these it can be seen in the table below there were 14 consultant episodes resulting in extractions.

**3.14 The number of Finished Consultant Episodes (FCEs) for children and adolescents aged 0-19 for hospital dental extractions during 2017-18 in the Peterborough area**

LA Name	Age 0-5yrs	Age 6-10yrs	Age 11-14yrs	Age 15-19yrs	Total 0-19yrs
Peterborough	14	13	38	33	98

Source: National Dental Epidemiology, Programme for England: oral health survey of five-year-old children 2017 - A report on the inequalities found in prevalence and severity of dental decay (Revised 17/05/2018)

The table below shows regional comparison of 0-19 year olds.



Source: National Dental Epidemiology, Programme for England: oral health survey of five-year-old children 2017 - A report on the inequalities found in prevalence and severity of dental decay (Revised 17/05/2018)

**Recommendations**

**3.15 1) Continue to work with partners and gather public views in regard of the proposed changes to both urgent and routine dental care.**

NHS England and NHS Improvement is committed to working with public health, other colleagues and stakeholders to gain a better understanding of access to primary dental care

across the geography and the factors that may affect this. As such the dental strategy group was formed to take this work forward. This includes the identification of service gaps, changes in demand for services and identification of new builds/population changes and the implications for planning primary care dental services. Health profiles and areas/pockets of deprivation across the East of England will be considered.

3.16 **2) Review the need for dental services in Cambridgeshire and Peterborough, and commission activity in line with demand.**

NHS England and NHS Improvement dental strategy group is currently reviewing dental access in areas where there are known access issues. The review will inform commissioning intentions, with the view that activity will be commissioned in line with need.

As part of the work programme the urgent and oral health stabilisation pilot is being set up and discussions are underway with the provider of the dental access centres with regard to the next two years, commencing 1 October 2019.

Data collection during the pilot will further inform commissioning intentions.

3.17 **3) Ensure that information about dentists on the NHS Choices website is up to date and accurate**

The responsibility of maintaining the information regarding dental practices on the NHS website lies with dental providers. This is not currently a contractual obligation, however as part of contract reviews encourage practices to keep their profile updated.

3.18 **4) Direct dentists to take steps to increase dental care for children**

Access rates for children in the Peterborough City Council area are higher than average at 59.6%, with rates in Cambridge City Council being slightly lower than average at 57%. The England rate is 58.6%.

NHS England and NHS Improvement are currently reviewing how a national initiative which has been developed by the Chief Dental Officer to improve the uptake of children as a first check-up outlined in “Delivering Better Oral Health” will be implemented by the Autumn. The initiative is intended to promote an increase in children’s attendance at the dental practices.

The overall aim is to increase the attendance by younger children, (by their third birthday) and in the longer term to improve oral health and decrease the number of extractions in children. This will require the support and sign-up to the initiative by general dental practices along with the co-operation of Local Authorities (through existing Oral Health schemes).

The main aims of the initiative is:

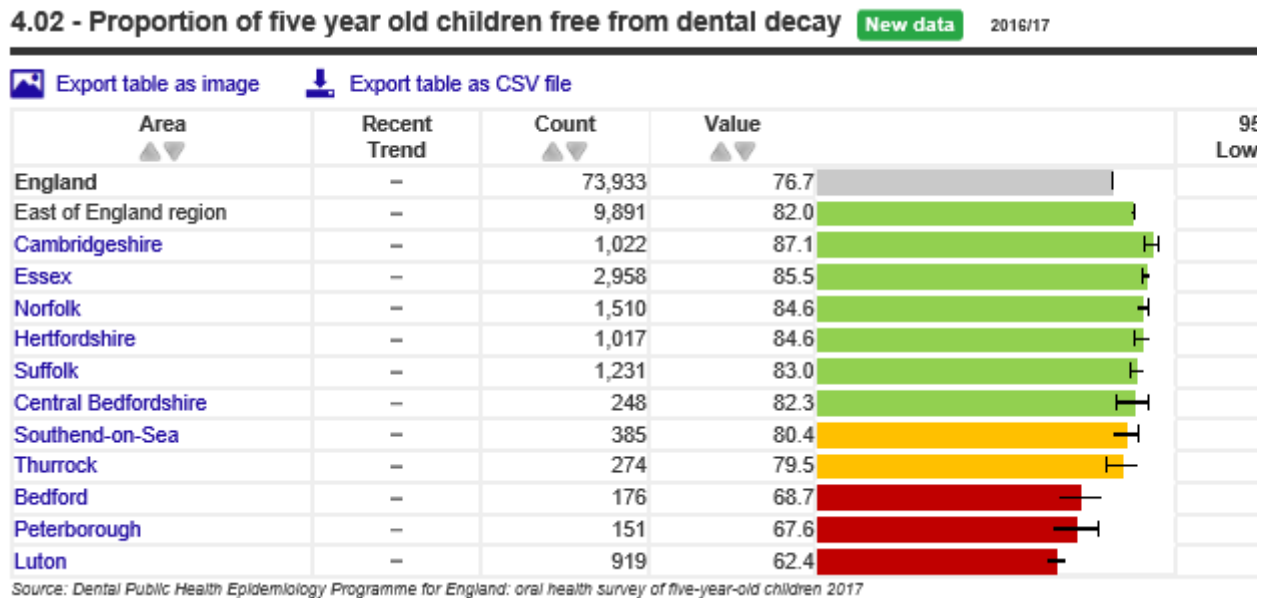
- to improve the uptake of dental services for children under the age of three
- to maintain the oral health of children
- to support a high profile public awareness programme
- to enable practices to participate in the initiative
- a reduction in hospital based General Anaesthetic for young children

An event for dental practices with Chief Dental Officer as key speaker was held in Basildon on 11 June 2019. Additional engagement is planned.

3.19 **Healthwatch recommend that the Cambridgeshire and Peterborough Public Health Team and Public Health England:**

3.20 **5) Commission an oral health campaign across Cambridgeshire and Peterborough targeting children and families**

On local dental health promotion – there is wide health inequality in children’s dental health around Cambridgeshire and Peterborough, which the following extract from the PHE ‘public health outcomes framework’ demonstrates well. This is likely to be associated with levels of deprivation. Cambridgeshire has the highest percentage of 5 year old children free from dental decay in the East of England region at 87.1% while Peterborough is second lowest in the region at 67.6%.



A national Children’s oral health/smile community pharmacy public health campaign was run from May until mid-June 2019. Pharmacies were contractually obliged to participate in this campaign that has been agreed nationally by Public Health England (PHE), NHS England and NHS Improvement and the Pharmaceutical Services Negotiating Committee (PSNC). The campaign was supported using national toolkits which were provided to pharmacies.

In Peterborough an oral health project to address the poor outcomes in Peterborough has started. Health Visitors provide families with a toothbrushing pack (baby toothbrush, tube of fluoride toothpaste, information leaflet) at their 12-month Health Visitor check, this is still ongoing. PCC Public Health produced 2 infographics and translated the information leaflet into 12 languages, multiple copies were distributed to children’s centres and pharmacies.

Dental health promotion work forms part of the community dental service contract. A procurement has been undertaken during 2018/19 for community dental services in East Anglia. Dental health promotion initiatives are part of the new contracts and are linked with local authority initiatives.

**Healthwatch recommend that Cambridgeshire Community Services NHS Trust:**

3.21 **6) Review accessibility of information in both Dental Access Centres to ensure this complies with the NHS England Accessible Information Standard**

Following this report NHS England and NHS Improvement have reminded the Trust of their obligation to ensure that this information is readily available to patients.

3.22 **7) Review availability of interpreting and translation services and maximise use of NHS England’s newly commissioned service**



NHS England and NHS Improvement has recently secured a new supplier for interpreting and translation services in East Anglia, offering more languages. Providers can access the service through an automated telephone system which should speed up access to interpreters. All relevant stakeholders have been advised of the change in service.

#### **4. CONSULTATION**

4.1 *N/A*

#### **5. ANTICIPATED OUTCOMES OR IMPACT**

5.1 The Committee will consider the report and make any recommendations as necessary.

#### **6. ALTERNATIVE OPTIONS CONSIDERED**

6.1 *N/A*

#### **7. IMPLICATIONS**

##### **Financial Implications**

7.1 *N/A*

##### **Legal Implications**

7.2 *N/A*

##### **Equalities Implications**

7.3 *N/A*

#### **8. BACKGROUND DOCUMENTS**

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

8.1 [Finding an NHS dentist in Peterborough and Wisbech](#) – Healthwatch Report published January 2019

#### **9. APPENDICES**

9.1 *None*

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