Access to NHS Dentistry in West Norfolk

Suggested approach from Maureen Orr, Scrutiny Support Manager

An examination of access to NHS dentistry in the West Norfolk area, including for the families of service personnel.

1. Background

1.1 Norfolk Health Overview and Scrutiny Committee (NHOSC) added 'Access to NHS Dentistry in West Norfolk' to its forward work programme in October 2017. This followed Communities Committee's consideration of the 'Norfolk Armed Forces Community Covenant Strategy and Action Plan' on 6 September 2017. Communities Committee noted that there was an issue regarding access to NHS dental services for the families of service personnel in West Norfolk which required scrutiny.

NHOSC agreed to look not only at the service families issue but also at access for the wider public in West Norfolk as councillors were aware of instances where residents had difficulty finding an NHS dentist in the area.

- 1.2 NHS dental services in Norfolk are commissioned regionally by NHS England Midlands and East (East) (M&E(E)). The local dental practices are independent businesses working under contract for the NHS. The contract is determined at national level.
- 1.3 NHOSC last received a report on access to NHS dentistry (across the whole county) in July 2014. At that stage there did not appear to be any major problems regarding access to routine dental care, although the LDC mentioned there were some issues with availability of restorative dentistry at hospital, availability of general anaesthetic services at hospital for patients with special needs, availability of periodontal / endodontic specialists and variable provision of domiciliary dental care.
- 1.4 Norfolk Local Dental Committee (LDC) confirmed in July 2014 that communication between local dentists and the NHS England M&E(E) commissioners was generally good and problems could be addressed and dealt with where possible.
- 1.5 Members of NHOSC also received the updated Oral Health Needs

Assessment for East Anglia (OHNA) by email in October 2014, with a summary in the NHOSC Briefing in November 2014. With regard to access, key messages in the OHNA were:-

- Dental service provision in East Anglia bears little relation to oral health need. There are discrepancies between the availability of services and need, and patients do not always get the right care when they access dental services.
- People in marginalised or deprived groups in East Anglia are more likely to have poor oral health and less likely to access services.
- Compared to the national average the number of children in East Anglia who receive preventative treatments was low.

More specifically for Norfolk:-

- There was good provision of NHS dentistry in some areas with material and social deprivation (e.g. Great Yarmouth) but provision was low in others (e.g. King's Lynn and Thetford).
- King's Lynn was amongst the areas with the lowest percentage of child population visiting an NHS dentist (less than 60%).
- Less than 50% of the adult population in King's Lynn had visited an NHS dentist in the previous 2 years. (The OHNA contained no information on the numbers of people using private dentistry).
- The percentage of dental treatment courses with domiciliary visits was lower than the English average in all areas except for Broadland, Great Yarmouth and South Norfolk. (The OHNA contained no information about whether the patients with most need for domiciliary service were able to access it).

A link to the 2014 OHNA is included in NHS England M&E(E)'s report at Appendix A.

Further information about dental health in children and young people in West Norfolk (and the rest of the county) is available in the following link to the Norfolk Joint Strategic Needs Assessment Briefing Document:-

http://www.norfolkinsight.org.uk/resource/view?resourceId=1584

1.5 Healthwatch Norfolk selected 'Dental services in West Norfolk' as one of its priority areas for in-depth research in 2017-18. It has been gathering feedback about dental services for children and young people in West Norfolk to identify where improvements could be made. The actions / recommendations from its report are:-

Regarding access for families of service personnel at RAF Marham

• Using the Armed Forces Covenant, local dentists will be asked to offer places for families of current serving personnel to ensure they are not disadvantaged, as a first step to improving access

for families. To achieve this, we recommend that an event is to be held where dentists can attend the Base and offer places where families can "sign up".

- To assist with the issue of transport Healthwatch Norfolk has identified a contact at West Norfolk Community Transport and will meet them to discuss next steps and introduce them to RAF Marham's Community Development Officer in order to discuss potential solutions / routes.
- NHS England to consider patient registration to enable patient records (both military and civilian population) to follow the patient if they were to be moved or be stationed in a new area.

Regarding access for the wider population

- NHS England to consider looking at the current service provision in Norfolk and an updated Oral Health Needs Assessment should be carried out.
- Healthwatch to share individual service provider feedback with the local dental practices (where it has obtained specific feedback) along with the report, for information / comment.
- Service feedback will be added to Healthwatch's internal evidence database and published on its public-facing website (where it has consent to do so), which will enable the public to make informed decisions about their and their children's dental care.
- The findings of Healthwatch Norfolk's 'mystery shopping' exercise will be shared with NHS England Midlands and East as they manage service listings on NHS Choices. When contacting dental practices directly with the feedback received, Healthwatch Norfolk will also share findings specific to their service with the recommendation to update and keep this page updated, given that it is the public-facing resource for finding NHS services in the local area.

The Healthwatch report will be shared with the local Professional Dental Network, Care Quality Commission, Public Health (Norfolk County Council), NHS England and any other relevant stakeholders.

1.6 NHS England M&E(E), Healthwatch Norfolk and representatives from RAF Marham and the Norfolk County Council Armed Forces Covenant Team have met to understand and look for solutions to the access issues that exist for the families of service personnel at RAF Marham.

2.0 Purpose of today's meeting

- 2.1 The focus for today's meeting is on access to NHS commissioned dental services in West Norfolk. Preventative services, including the Norfolk Health Child Programme and oral health promotion services in Children's Centres and schools, are commissioned by Norfolk County Council Public Health and are within the remit of the Community Services Committee.
- 2.2 NHS England M&E(E) has been asked to supply the following information for the West Norfolk area:-
 - The number and location of dental practices offering NHS dentistry
 - The number of dentists providing NHS dentistry
 - The population per dentist
 - The number and location of practices currently able to take on new patients
 - The trend in child and adult access rates
 - The trend in child and adult dental health
 - Orthodontic treatment waiting times

NHS England M&E(E)'s report is attached at **Appendix A** and a representative will attend the meeting to answer Members' questions.

- 2.2 Healthwatch Norfolk and RAF Marham will present jointly to NHOSC including the following information:-
 - Healthwatch Norfolk's report on the findings of its research into access for children and young people in West Norfolk and its recommendations for action
 - Progress towards improved access to dental services for the families of service personnel at RAF Marham.

Healthwatch Norfolk's report is attached at **Appendix B** and representatives from Healthwatch Norfolk and RAF Marham will attend the meeting to answer Members' questions.

2.3 Norfolk Local Dental Committee was asked to provide its comments about provision of dental services in West Norfolk. Its report is attached at **Appendix C** and a representative will attend the meeting to address any questions that may arise.

3.0 Suggested approach

- 3.1 After hearing from the representatives of NHS England M&E(E), Healthwatch Norfolk and RAF Marham and Norfolk Local Dental Committee NHOSC may wish to explore the following areas:-
 - (a) Does NHS England M&E(E) consider that sufficient dental

services have been commissioned to cover the west Norfolk area?

- (b) West Norfolk has fewer NHS dentists per head of population than the average for Norfolk and the Midlands and East area and on 4 May 2018 only one practice in the area was taking on new NHS patients. Given that dental practices are independent businesses and the General Dental Services contract is agreed at national level, how can NHS England M&E(E) support local practices to expand services, particularly in geographic areas of highest need?
- (c) Given the increasing difficulty in recruiting dentists, which is referred to in the Local Dental Committee's report (Appendix C), can NHS England M&E(E) do anything to speed up the time taken for an NHS performer number to be provided to dentists coming into the UK for the first time, or take any other measures to improve workforce supply?
- (d) Does NHS England M&E(E) have any data, or any way of collecting data, about the proportion of residents who use private dentistry in West Norfolk and the proportion who do not use dental services at all?
- (e) NHS England M&E(E)'s report says that orthodontic services within West Norfolk are 'limited'. Is an orthodontic service generally considered a specialist service for which people are expected to travel or should a full service be available within the district?
- (f) Healthwatch Norfolk's report mentions that using the Armed Forces Covenant local dentists will be asked to offer places for families of current serving personnel and there is a recommendation for an event to be held at the RAF Marham base to facilitate this. When is this expected to take place?
- (g) How does NHS England M&E(E) work with local planning authorities and others (such as the Ministry of Defence) to plan for future need for dental services in West Norfolk?

4.0 Action

- 4.1 NHOSC may wish to:-
 - (a) Make comments to the commissioners based on the information received at today's meeting.
 - (b) Support the recommendations that Healthwatch Norfolk made to the NHS commissioners:-

- NHS England to consider patient registration to enable patient records (both military and civilian population) to follow the patient if they were to be moved or be stationed in a new area.
- NHS England to consider looking at the current service provision in Norfolk and an updated Oral Health Needs Assessment should be carried out.

Or make additional recommendations.

- (c) Ask for an update in the NHOSC Briefing or for a future meeting regarding progress with provision for families of service personnel at RAF Marham.
- (d) Ask for further information for the NHOSC Briefing or to examine other aspects of dental services at a future committee meeting.



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