

Dentistry in Barnsley

What we are hearing about access to NHS dental services in Barnsley.



About us

We are the independent champion for people who use health and social care services in Barnsley. We are here to make sure that those running services put people at the heart of care.

Our sole purpose is to understand the needs, experiences and concerns of people who use health and social care services and to speak out on their behalf. We focus on ensuring that people’s worries and concerns about current services are addressed, and work to get services right for the future.

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Introduction

The dental sector has faced particular challenges during the pandemic due to the close proximity of the dentist to the airways of patients and the many treatments involving aerosol generating procedures (AGPs). The use of high speed drills in dentistry is classed as an AGP.

Prior to the pandemic, Healthwatch (nationally and locally) were recording problems with residents accessing dental services. However, from March 2020 there was a sharp increase in the number of residents contacting their local Healthwatch as dentists closed their doors during the first wave. We were advised that if a resident was in urgent need of dental treatment which was life threatening; they would be seen at one of the Urgent Dental Centres which were being set up around the country. Our nearest one was Sheffield, although actual locations were not given out to prevent residents turning up without an appointment. All other urgent cases were dealt with by the three As:

- Advice
- Antibiotics
- Analgesics

In the main, residents accepted this and acknowledged that routine appointments were being delayed and that patient and staff safety was paramount. As time has gone on and other services have re-opened, dentists have struggled to reach anywhere near pre-pandemic capacity. There are a number of contributing factors including the extra infection prevention and control measures, social distancing, ventilation, PPE requirements and complex contracting and commissioning challenges.

This is the latest update (November 2021) from the Dental Commissioning Leads for Yorkshire and the Humber

The current advice to patients is:

- If your teeth and gums are healthy, a check-up or scale and polish may not be needed for up to 24 months.
- When you come into the surgery for an appointment, please remember that social distancing remains in place and you will still need to wear a face mask upon entering the practice.
- The infection control process for dentistry has not changed with the lifting of COVID-19 restrictions - masks and hand hygiene measures are still required.
- It is important that dental practices continue to follow this guidance. They are a healthcare setting and are doing all they can to ensure your safety when you come to the practice.
- Every dental practice is working extremely hard to provide care to patients within the restrictions and guidance. Please be respectful at all times.
- All NHS dental practices are following the guidance, and private dental practices are recommended to follow them by the health regulator, the Care Quality Commission.

- Similar public health measures are also still in place for hospitals and GP practices. The advice is that the infection prevention and control measures in dentistry should continue to be followed until further notice.
- Dental practices will continue to have restrictions on leaving time between patients to ventilate rooms - this has an impact on how many patients they are able to see each day.
- All dental practices are prioritising patients for treatment based on urgency and priority groups, such as children or those more at risk of dental disease.



Accessing dental care



Dental practices are open, however practices will need to prioritise patients with the most urgent need.

If you need help from a dentist:

- Contact your regular dentist or if you do not have one, call any NHS dental practice.
- You will be given advice or offered an appointment if appropriate.
- For urgent dental care that cannot wait, out of hours or at weekends, please ring NHS 111 or use the NHS 111 online service.



Please do not visit your dental practice unless you've been advised to. This will ensure that the practice can continue to provide essential care safely.

What Healthwatch Barnsley are hearing

Comments received on dental services



Over 70% of the calls we have received on dental services have been regarding residents being unable to access routine dental appointments, either because they are not “registered” with a dentist or their dentist is only covering emergency treatment.

Here are some comments and feedback that we have received over recent months with regards to dentistry in Barnsley:

 “Due to covid-19 I have been unable to have any dental work done. I understand social distancing and PPE and all that but please give us a little bit of advice and help. I've been struggling with toothache now since the middle of April and it's doing my head in. My dentist won't see me as it isn't classed as an emergency”.

 “Lack of information either nationally or globally. It feels like a forgotten service. Treatment began in January still unfinished in September. GPs unable to prescribe antibiotics for tooth infection. I had to phone daily to plead for treatment; Dehumanising and humiliating. I had a good relationship with my dentist - that has now been destroyed”.

 “I am so stressed and suffer from mental health issues I can't get an appointment I have suffered with gum disease for quite some time now and wear partial dentures but I have 2 loose teeth which are making my dentures loose and I'm so afraid of the loose teeth falling out and then dentures not fitting at all. The loose teeth are at the front so I'm so anxious all the time which is affecting my sleep what can I do I can't afford to go private”.

 “I contacted the dentists a year ago to advise of pain in my teeth, I could not get an appointment until Jan this year. I finally got an appointment for the tooth and discomfort. On the day of my check-up an X-ray was taken and the dentist told me that my teeth were fine. The pain persisted and eventually the tooth fell out at the dinner table, leaving only the root in. I called the dentist and obtained another appointment. The dentist tried to remove the root but could not (not their fault) I needed to be referred to the hospital, closest appointment being the end of Feb. After my appointment I began to have severe pain where the root had been pulled at. I phoned the dentist to ask for help or stronger pain killers and was advised that only the Dr could only help us with this. I called my GP surgery and was advised only the dentist could help with that. I called 111 to see what else could be done, was assessed over the telephone and later that evening the dental hospital rang to tell me only the dentist could help. Today I have spent over 1 hour on the phone either talking to dentists, hospitals or doctors or on hold and the end result is to go to the dentist which was my first port of call and where I was turned away. Is there a reason patients are passed from pillar to post to be sent back to pillar? Is it a cost saving technique used in the hope patients will get fed up? Trust me if this is the case and you have someone with the pain that I was experiencing in my face this person is not going to give up, they would even go as far as writing a review due to being so irritated by 1. The tooth and 2. The processes. Please sort out your systems and don't have people chasing about. The wait we don't mind, but at least help me with the pain”.

Where residents have been able to gain appointments we have had good feedback.



“All the staff I have met are caring and always have a smile, my dentist is so good and always says what he is doing, making sure I am in the least pain possible”.



“Each time I have been to have work done, reception have been polite and professional. They have always been able to offer an appointment to suit and the dentists are amazing! I used to be very nervous, as do most but they explain everything and made me feel at ease each time. Top quality treatment very time and certainly wouldn't hesitate to recommend. Keep up the good work!!”

We also received an increasing number of calls from residents who were unable to get an NHS dental appointment:



“Client asked how she could access a dentist. She is not registered with the NHS and has been told she can only access private treatment. She can't afford this and needs help now as she is in a lot of pain.”



“Dentist is only offering emergency services no scheduled treatments”.



“I have called over 20 dentists in the area, NHS and private. I cannot find any who are taking on patients”.

What we have done

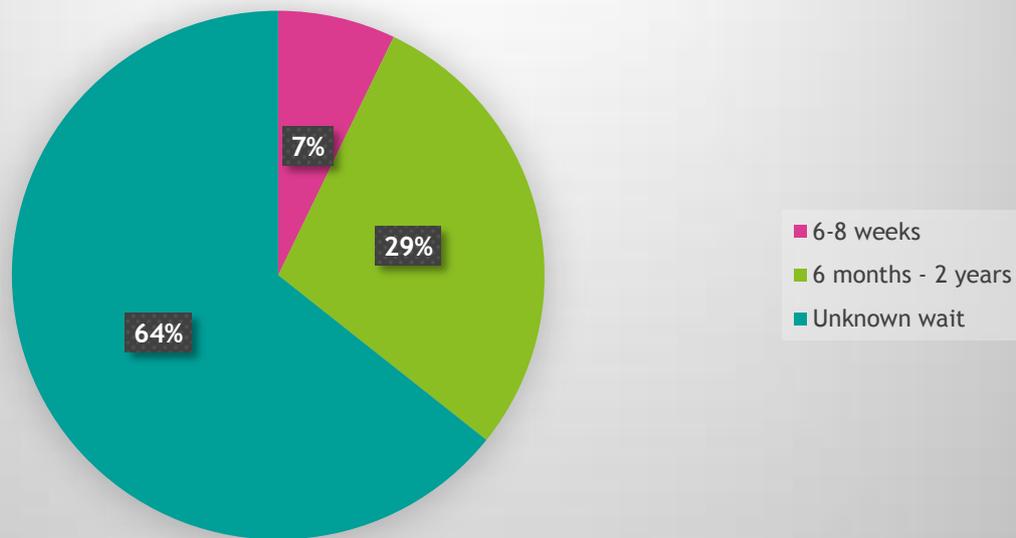
We have passed our intelligence on to Healthwatch England and continued to attend timely meetings/briefing sessions with the Dental Commissioning Team for Yorkshire and the Humber.

Healthwatch England continue to lobby in Parliament and recently teamed up with the British Dental Association to write to the Chancellor of the Exchequer to consider the future of NHS Dental Services in the 2021 Spending Review (appendix a).

During October 2021, Healthwatch Barnsley contacted 28 dental surgeries in the Barnsley area to ask if they were currently accepting new NHS patients. Only 2 could offer an appointment for a routine dental check on the NHS, and both had a 6 to 8 weeks waiting time. Many of the surgeries said they were accepting NHS patients but the waiting time was anything from 6 months to 2 years.

16 of the dental surgeries we contacted said they are not currently taking on NHS patients and are not currently operating a waiting list. They either had no idea when they would be taking on NHS patients for routine treatment or they already had an unmanageable waiting list.

Waiting times for a routine NHS dental appointment in Barnsley (October 2021)



We asked if the wait for a routine NHS appointment would be the same for children. 6 of the surgeries said they would see a child (under the age of 16) for a routine check-up within 6 to 8 weeks.

Next steps

Healthwatch Barnsley will continue to collect intelligence about local NHS dental services (or lack of) and will follow the journey as the commissioning comes under the newly formed Integrated Care Systems which will have a more local approach.

Our fear going forward is that all the previous good work which has been done around oral hygiene will now fall by the wayside as residents are not able to get routine NHS dental care. These are often residents with, for example, complex health needs, living in areas of high deprivation or from minority ethnic groups.

The link between oral health and overall body health is well documented and backed by robust scientific evidence, as is the link between inequitable access and exacerbated health inequalities. We are seeing an increase in residents whose mental health is being compromised due to not being able to get dental treatment - replacement crowns and dentures are not classed as emergencies. This is obviously affecting residents that are unable to eat due to loose teeth or ill-fitting dentures.

Alongside this are concerns that dental practices will no longer be attracted to the outdated NHS contracting model, or that many dental practices (which are, of course, private businesses) will face a capital spending problem due to the nature of the practice. A large proportion are in converted old residential buildings which makes it difficult to retrofit air handling equipment to increase the number of air changes, thus reducing the waiting time between successive appointments.

Appendix a



Rt Hon Rishi Sunak MP
Chancellor of the Exchequer
Sent by email

Dear Mr Sunak,

The 2021 Spending Review and the future of NHS Dentistry

We are writing on behalf of the dental profession, current dental patients and the broader public across England.

NHS dentistry faces an unprecedented backlog. The initial suspension of face to face care, and ongoing restrictions mean over 30 million appointments have been lost since lockdown, and patients and the NHS will be feeling the impact for years to come.

Dentistry has risen to be the number one issue raised with Healthwatch over the last 18 months, and the volume of feedback continues to grow. From April to June 2021 feedback was up 55% on the previous three months, and 794% higher when compared with the same period in 2020. Nearly 4 in 5 people (79%) of those sharing their stories said they had found it difficult to access timely care.

The coming Spending Review is an opportunity to determine the shape of *any* recovery plan.

Even before COVID, England lacked an NHS dental service capable of meeting patients' needs. Now the pressures of the pandemic mean ongoing access problems, widening health inequalities, and many dental team members reconsidering their futures in the NHS. The service is now at risk of a double whammy of increased demand and reduced supply.

It is our shared view that the approach taken in past spending reviews cannot be revisited. In 2015 commitments to annual inflation-busting increases in patient charges served as real barrier to patients on modest incomes. With flatlining budgets, what has been dubbed 'contributions' has morphed into a substitute for meaningful state investment. Even cash for the fundamentals - the epidemiological surveys on which any coherent oral health strategy should rest - have remained in doubt.

On core funding for high street services, no attempt has been made to keep pace with either inflation or population growth. The gulf is such that the BDA has estimated it would take an additional £879m to restore resourcing to 2010 levels.

The Government has acknowledged that the system NHS dentistry works to is unfit for purpose and has pledged reform. This Spending Review will determine whether necessary resources are in place to underpin the promised rebuild. Patients deserve an adequately funded system that

delivers dental care for all those who need it. It is crucial that further increases in patient charges are not used to help balance the books, and that funds are in place to guarantee the research required to measure and meet patient demand.

Ultimately, dentistry is a cradle to grave service the NHS offers which primarily focuses on maintaining good health. If the Government and the NHS are committed to the prevention agenda, then we need meaningful reform. 'Do more with less' cannot be the mantra underpinning any new model for NHS dentistry.



Sir Robert Francis QC
Chair, Healthwatch England



Eddie Crouch
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cc. Rt Hon Sajid Javid MP, DHSC, Maria Caulfield MP, DHSC, Sara Hurley, NHSE, Ed Waller, NHSE, Sharon Egan, DHSC

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