

Inquiry into dentistry in Wales

Evidence from the Board of Community Health Councils and the 7 CHCs in Wales



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About the Board and Community Health Councils

The Board of Community Health Councils (the Board) is pleased to provide this submission to the Senedd Health and Social Care Committee's inquiry into Dentistry on behalf of the 7 Community Health Councils (CHCs) in Wales.

CHCs are independent bodies that reflect the views and represent the interests of people living in Wales in their National Health Service (NHS). CHCs encourage and support people to have a voice in the design, planning and delivery of NHS services.

There are 7 CHCs in Wales. Each one is made up of local volunteer members who live in the communities they serve, supported by a small team of paid staff. Each CHC:

- Carries out regular visits to health services to hear from people using the service (and the people providing care) to influence the changes that can make a big difference
- Reaches out more widely to people within local communities to provide information, and to gather views and experiences of NHS services. CHCs use what they hear to check how services are performing overall and to make sure the NHS takes action to make things better where this is needed
- Gets involved with health service managers when they are thinking about making changes to the way services are delivered so that people and communities have their say from the start
- Provides a complaints advocacy service that is free, independent and confidential to help people to raise their concerns about NHS care and treatment.

The Board of CHCs (the Board) exists to support, assist, advise and manage the performance of CHCs. It represents the collective views of CHCs across Wales.

Hearing from people about their NHS care

Since we first started living with restrictions in March 2020 because of the coronavirus pandemic, our volunteer members and staff have worked hard to continue to amplify peoples' voices in their NHS during these challenging times – working in new ways aimed at keeping everyone safe.

As the restrictions have changed in response to the levels of risk in our communities, CHCs have been able to reintroduce face-to-face activities in their local communities. Visits to hear from people while they are receiving NHS services continues to be more limited.

CHCs continue to do whatever they can to enable people to share their views and experiences in lots of different ways. This has included on-line and text as well as more traditional ways including in person, phone and post. CHCs have also developed new ways of hearing from people including on-line focus groups and Facetime chats with people being cared for in our hospitals.

People across Wales have been able to share their views and experiences of the NHS with us by completing our national and local surveys. The direct feedback we receive is only one way in which CHCs hear from people about their NHS services.

CHCs also find out about people's views and experiences in other ways:

- through enquiries coming into CHC offices
- patient/service user stories being shared with the complaints advocacy service
- contacts with local community networks
- information coming into us from community representatives and groups
- social media discussions

- monitoring of health board activities and performance.

We know that many of the people who share their views with us through our on-line surveys do so because they have strong feelings about their NHS experience. We often hear very good or very poor experiences. We know that what we hear doesn't reflect everyone's experience.

People appreciate that staff are working hard to keep people safe and provide the best possible care, treatment and support as all parts of the NHS continue to struggle to cope with staff shortages and increasing demand.

We are very grateful to the people who share their views and experiences with us. We also want to thank everyone working so hard every day so that health and care services can recover and transform the way NHS services are provided for all of us in the future.

Our evidence focuses on what CHCs have heard about the challenges people in Wales face keeping their teeth and gums healthy. The challenges have been made worse by COVID-19 but were not caused by it. For far too many people, the problems in dentistry were widespread for a long time before the pandemic hit.

Alongside getting to see a GP – before and during the pandemic, CHCs across Wales have heard most of all about their difficulties in seeing an NHS dentist or orthodontist.



Getting to see an NHS dentist

Getting routine dental care

Finding out how

It should be easy for people to make an appointment to see an NHS dentist as regularly as they need. If people don't know how to find a dentist, or how much it will cost to see one, for example if they are new to an area, it should be easy to find out. This is not always the case in Wales. For far too many people, it is difficult to know where to start.

The information on NHS websites is too often limited, out of date or inconsistent.

There is confusion about whether people can 'register' with a specific dentist for routine and ongoing NHS care (even though the dental contract changes in 2006 removed the need to register with a practice); whether health boards gather and provide information on which dentists in the area have space to take on new patients; or whether any dentists have NHS appointments available to see someone for a check up or other non urgent care.

In some cases people are simply being told to telephone around the NHS dentists in hope that one of them will be prepared to see them.

For some people not knowing what is available 'on the NHS', how much it will cost them for NHS treatment, or what financial help they can get means they are put off from seeking treatment, leading to bigger problems later on.

It's not enough to display what's available, what the charges are and what financial help people may be offered when people get to an NHS dental surgery - or to rely on the information published on an NHS Wales or other NHS website, even if that information is helpful when someone is able to find it.

Getting to an appointment

We've heard that for some people, particularly in many rural areas, the distances people have to travel to finally get to see a dentist makes things even more difficult and costly.

Being able to easily access dental surgeries has proved difficult for some disabled people, who have found that getting into and moving around some dental surgeries can be challenging.

Appointment times for routine dental care and treatment can also limit people's ability to get the care and treatment they need, particularly those with work and caring responsibilities. Their commitments often mean that they are unable to take up appointments in the usual '9-5' hours of operation.

Urgent dental treatment

We have seen that there is a significant increase in the number of people requiring urgent dental treatment. For lots of people, getting to see a dentist for urgent treatment has been difficult and for some impossible. This has often been made worse when people have been told they are not an emergency - even though they have been in extreme pain or their dental problem is having a big impact on things like their ability to eat.

For some people, the connections between the 111/out of hours service and local dental helplines for dealing with urgent dental pain or infection simply didn't work well.

Getting an urgent appointment through the local dental helpline was a 9am scramble. We heard that once the appointments had quickly gone, people faced having to wait to call back again the next day, with the 111 service unable to support people with pain relief.

Waiting for dental care

Previously 'registered' patients

For people who were registered with a dentist before the pandemic, it hasn't always been easy to get a routine appointment again with the same dentist for a check up.

This is because some people have been told they have been de-registered because they haven't had a check up for some time – even though it hasn't been possible or easy to do so because of the COVID-19 restrictions or they didn't know their dental practice was offering appointments again.

Disrupted treatment

Many people were going through a course of treatment which stopped when the pandemic hit.

While the reasons for this were clear and well understood, the impact of COVID-19 safe practices in dentistry alongside the already limited NHS capacity has meant that the recovery of dental care has been and remains painfully slow for many people.

In many cases this has meant that the progress made has been lost, and the condition of people's mouths has worsened – leading to tooth loss and making on-going treatment more challenging and more costly.

Long waits to be seen

The length of time people tell us they are waiting is most often described to us in years rather than weeks or months – if they can even get on a waiting list.

The impact of waiting too long is different for everyone. The things we hear most often are:

- **Pain and discomfort**

We've heard from lots of people about living with pain and discomfort waiting for dental treatment and what this has meant for their mental health and wellbeing. What we have heard has been heartbreaking.

For some people the effect has limited what they eat, and how they eat it.

For others the effect has limited their ability to carry on with their day to day lives as they can't concentrate, sleep well or work effectively.

For many people problems with their teeth and gums affect their self-confidence and how they feel about themselves.

In some cases, we have heard that the impact of living with the pain and discomfort is so difficult it had led to people thinking about ending their lives.

- **Relying on painkillers and other medicines**

For lots of people, the only way they have been able to cope with the pain and discomfort while waiting for treatment is to use painkillers. When they are waiting a long time, they worry more about becoming reliant or addicted to painkillers, and the damage this can do to their health and wellbeing more broadly.

In some cases we have heard that people were relying on antibiotics, which only dealt with the symptoms and not the underlying cause. When this happened people worried about antibiotics becoming less effective because of overuse, and what this may mean for them in the longer term.

- **Self treatment**

When dental practices haven't been able to provide appointments, some people have told us they were advised to use temporary filling kits and treat themselves.

This was often costly and didn't help. This is because for some people the kits were tricky to use or if they managed to use them the temporary fix didn't last long enough. Buying more kits cost even more money.

Devastatingly, for some people, the desperation they have felt has led to them pulling their own teeth out.

Joined up healthcare?

We've heard from some people whose dental care needs are directly linked to a wider healthcare condition such as diabetes, osteoporosis and cancer. They worry about the impact of their condition on their teeth and gums, and in turn the impact of waiting too long for dental treatment on their wider condition.

Pregnant women and those who recently had a baby have told us they have been unable to access free dental care during maternity. For some their pregnancy caused problems with their teeth and gums, eg., due to sickness. For others their ability to afford to pay for treatment may also be affected due to their absence from work.

For many young people, their inability to get orthodontic treatment is having a significant and fundamental impact on their self-confidence and mental health and well-being. This is at a time when the pandemic has already had such a devastating impact on them in so many other ways.

For young people, it feels obvious that clinical decisions on access to treatment should take account of their wider mental health and wellbeing needs.

A two tier dental system

Pressure to go private

Since the easing of restrictions and the re-opening up of dental practices, CHCs have heard more and more about the pressures they feel to 'go private'.

Some dental practices that were previously offering NHS dental treatment were no longer doing so, and people couldn't find an alternative practice easily.

Some dental practices were still offering NHS dental treatment, but it was almost impossible to get one of the available appointments.

Some people were told they could only get an appointment for their child if they themselves were registered as a private patient.

In many cases, people have told us they could easily get an appointment quickly with the same dental practice – as long as they did so privately.

This is leading to a lot of frustration and concern, with people feeling that private patients are being prioritised over their own treatment, even though their need may be much greater.

Children and young people

The wide scale and potentially devastating effects of the pandemic on children and young people is clear. Getting the right help and advice at an early enough age helps keep teeth and gums healthy throughout their lives.

Many parents have told us how anxious they are that their children have not been able to see a dentist at all since the pandemic.

For some children and young people, the impact of the pandemic and the cost of living crisis on healthy eating may, without access to good dental care and treatment, have a life-long impact on their teeth and gums.

For many people and families, travelling long distances to get to see an NHS dentist who is offering appointments for children is something they simply cannot afford, even if public transport or other means of transport is available to get them there.

When dentistry works well

When we hear from people who have been able to see a dentist for checks up and treatment, the feedback we get is almost always good, even though most people don't enjoy the experience itself. This is often from people who have been with the same dental practice for a long time.

We hear that dentists provide care and treatment in a caring and sensitive way, taking time to put people at ease and providing good advice focused on keeping teeth and gums healthy.

Reforming dentistry in Wales

In April 2022, CHCs saw the national roll out of the new Dental Services Reform contract. Dental practices were able to choose whether to take on the new contract or stay on the 'Units of Dental Activity (UDA) contract. CHCs think that the new arrangements are rightly based on shifting the balance to increase access, focus on prevention and self-care, and prioritised risk based treatment. A focus on dentistry within a wider public health agenda is key.

CHCs initial worries that dental practices may not shift over to the new contract, or that the introduction of the contract may mean that dental practices would stop providing NHS dental care at all are not happening on a widespread basis.

It appears that so far, although a few dental practices have ended their NHS contracts, other dental practices in the area are picking up those contracts.

However, there is a clear need for better public communications about what the changes mean for us and our dental care and treatment. CHCs have seen some examples of clear misinformation being provided to people when practices stop providing NHS care.

If dental reform is going to make the kind of systemic change that is needed to stop the widening of a two tier system and overturn the longstanding shortage of NHS dental provision care and treatment then its reform programme must drive change quickly.

It must tackle the issues affecting people across Wales:

- **Better information about NHS dentistry**

People need to be able to easily see where and how they can access services, the charges they may need to pay, and the help that is available to them. They should not be left alone to search for an NHS dentist, and the confusion around registration needs to end.

NHS services need to have a clear and up to date picture of the scale and extent of the need for NHS dentistry so it can properly plan to meet that need. In some areas, health boards do not have a clear picture of the number of people in their population waiting for an NHS appointment.

- **Dealing with access and affordability**

Simply put, NO ONE should be excluded from the dental services they need because they can't get in to see a dentist locally or because they can't afford to pay.

The reform agenda and investment in dentistry in Wales MUST achieve this and quickly tackle the longstanding issues once and for all – so that everyone in Wales, wherever they live and whatever their circumstances can get the dental advice, care and treatment they need.

Further evidence

As well as this evidence, the Board and CHCs have published a range of reports that provide more detail about what we've heard about getting to see a dentist in Wales:

- **Access to dental services** Aneurin Bevan CHC, July 2022

<https://aneurinbevanchc.nhs.wales/what-we-have-to-say/report-library/report-library/dental-mystery-shopper-july-2022/>

- **Access to dentists during COVID-19 pandemic** Powys CHC, July 2021

<https://powyschc.nhs.wales/files/report-library/access-to-dentists-during-the-covid-19-pandemic-report/>

- **Access to NHS Dental Care in Powys** Powys CHC, July 2022

<https://powyschc.nhs.wales/files/report-library/access-to-dentists-july-2022/>

- **Accessing NHS dental care: Getting to the root of the problem** Swansea Bay CHC, February 2022

<https://swanseabaychc.nhs.wales/what-we-have-to-say/report-library/sb-chc-thematic-reports-2021/dental-report-feb-2022/>

- **Have you got a dentist?** Hywel Dda CHC, April 2021

<https://hywelddachc.nhs.wales/files/reports/have-you-got-a-dentist/>

- **Is the NHS getting better living with COVID? What we heard from people in Wales between April and September 2021** Board of CHCs

<https://boardchc.nhs.wales/files/what-people-have-told-us-report-april-sept-2021/>

- **NHS dental services across Swansea Bay Health Board: a report on patient experience** Swansea Bay CHC, March 2020
<https://swanseabaychc.nhs.wales/what-we-have-to-say/report-library/sb-chc-thematic-reports-2020/dental-experience-report-march-2020-pdf/>
- **NHS dental service availability report** South Glamorgan CHC, November 2020
<https://southglamorganchc.nhs.wales/files/reports/reports-2020-21/dental-secret-shopper-exercise-report-english-pdf/>
- **Orthodontic services in Wales: Hearing about the experiences of young people** Board of CHCs, December 2020
<https://boardchc.nhs.wales/files/what-weve-heard-from-you/orthodontic-services-in-wales-chc-national-report/>

www.boardchc.wales