

## Healthwatch Harrow Dental Panel Event

Wednesday 17<sup>th</sup> November 2021, 5pm-6.30pm

In November 2021 Healthwatch Harrow held a Dental Panel Event to which the residents of Harrow were invited to ask their questions to our panel members in relation to dentistry in Harrow. The meeting was chaired by Ash Verma, Chair of Enterprise Wellness and our panel members were:

- ❖ Martin Skipper- Network Manager-London Dental Consortium
- ❖ Sudhir Radia - Dentist in Harrow
- ❖ Ayesha Masood - Oral Health Promotion-Whittington Hospital Trust
- ❖ Dr James Tomson - Assistant Clinical Director for Harrow, Brent & Barnet community dental services

The event provided an excellent opportunity for Healthwatch Harrow to ask questions directly posed from the residents to the panel and for the panel to explain the issues experienced which were as follows:

- ❖ Dental Access
- ❖ Dental Charges
- ❖ Patients with LD and autism



This following contains the questions and the responses given:

### Questions & Answers:

#### Panel Introduction and impact of Covid

**Martin Skipper is from the LDC** which is a Membership body for local dental committees that represent NHS primary care practitioners. Added exposure that dentistry has received from other stakeholders, although not positive now, but will lead to changes in the future that will benefit everyone.

The Strength or willingness for integration, development and collaboration from other stakeholders nationally, on a London level and on a local level has been phenomenal. Hopefully in the future we will see a stronger integrated primary care NHS dental service which shows the dividends in the reduction of the health inequalities and improvement in overall health outcomes.

**Sudhir Radia is a Dental practitioner** practicing in Harrow since 1977, a co-opted member of the local dental committee and volunteer for Healthwatch Harrow and has been feeding back some of the concerns of the Dental Practitioners, who are aware of how the pandemic has a severe effect on treatment for patients. Dentists feel sorry about this but there are limitations/restrictions, and we need to be careful as Dentists are the only profession that comes within 6 inches of the patients nose and mouth, there is also a restriction on number of patients that can be seen. Brexit has also been an issue where ancillary staff have left causing a shortage of dental nurses. We hope all the other stakeholders will take this on

board especially the CCG who need to provide services to residents and look at more funding to help the dentists to implement the extra infection controls.

**Ayesha Masood, Oral Health Promotion-Whittington Hospital Trust** and part of community dental services. My focus is preventive intervention, evidence based, in the community. I work in oral health promotion services and manage the programme across NW London and North Central London which includes Harrow.

The Pandemic has affected everyone. Due to the government advice and guidelines - dental access was the biggest barrier. Now during recovery phases for new patients finding a new dentist is a challenge capacity for turning back to 60% is making patients who are existing list patients, (regular attenders), may have appointments available for them but the challenge is for new patients in the community. Through our preventative programme we carried out engagement activities giving out messages focused around prevention, top tips, how they can fix the problem, in terms of schools the education programmes were affected - zoom sessions and parent workshops were key elements in the last few months.

**James Tomson, Community Dental Service**, based in Alexander Ave Health Centre. Usually, we see patients referred to us who are special needs, we see children and adults with special needs, LD and anxiety and we provide services under anaesthetic.

Difficult over the last few months during the pandemic we were running the urgent care hub which shows demand, which is still continuing. Aware of the issues of dentist access remit is with the more vulnerable groups and we are committing more hours and increase access, but it is challenging.

**Ash:** Dentistry is in the spotlight. Not enough understanding how the service works, questions around cost and pricing, access and also challenges with people with disabilities.

**Q: How does the pricing work - it's not a free service?**

**Martin:** Dentist are not free under NHS, there are NHS charges, and they are set by Department of Health every year and fall into 3 bands:

Band 1 course of treatment: £23.80

Band 2 Course of treatment: £65.20

Band 3 Course of treatment: £282.80

Charges for emergency are the same as Band 1. There are cases where you could be exempt from paying. You can check exemptions from NHS Charges on the NHS BSA website:

<https://services.nhsbsa.nhs.uk/check-my-nhs-exemption/start>

Private Dental charges will vary from practice to practice - they will list both NHS and private charges.

**Sudhir:** New contract came in and was changed from currency payment to UDA (unit of dental activity). Instead of money it's the bands are now classed as units. UDA are paid differently to Dentists; minor payment is coming from the government. A dentist may not be keen if a patient needs a lot of work coming in under band 2 some dentists could lose money if some patients need more work.

**Q: A parent was asked to pay for treatment for their 14 year old child - why was there a charge?**

**Sudhir:** All children under 18 are free or in full time education, if treated under the NHS

If the parent said they were going to pay then they would, some patients will agree to pay and may have agreed to be accepted as a private patient.

**Q: Cost for repairing dentures - a patient had to pay £300 in Pinner and then read that denture repair should be free?**

**Sudhir:** If dentist accepts to take the patient on the NHS, then it would be free. If a patient goes to a private laboratory, then they are not covered by the NHS. We would need to look at the circumstances of the case.

**Q: Is there an ombudsman for the dental services?**

**Sudhir:** You can complain to the NHS - first thing is to complain to the practice if they are not happy with the outcome they can go to the ombudsman where the decision will be final.

**Q: Annual check for teeth - £28 - what will I get for that money:**

**Sudhir:** Should include a check-up if radiographs are needed, oral hygiene and simple advice or scale and polish. If gums are in serious trouble it will jump to £53 - depends on the dentist and also the patient if they want to accept the private work. Basic things are done for Band 1. There are repercussions for bad oral hygiene.

**Q: From patients' perspective - what is the minimum that should I be doing and how often - is once a year enough and what should I have done and is age a factor?**

**Ayesha:** The Recall system works - patient by patient. If the need is higher than the frequency of dental appointments can be from 2 months to 2 years - guidelines from NICE show the Recall system - guidelines - are indicated on the individual needs e.g., if the patient is diabetic there could be more appointments than a non-diabetic patient. In general, twice a year is recommended and if you take care then once a year - as per the patient needs. There is an age factor, teeth can be more sensitive - older people would need more frequent appointments - there are a number of factors e.g., smoking which can affect frequency also.

**Q: Why are dentists not registering new NHS patients?**

**Sudhir:** Dentists are providing a service and run their own practices. All the equipment is paid by the dentist, they may also have many regular patients on their books so will treat them first. Depends on the capacity of number of UDA that the practice has been provided with then they will treat those patients. If you go regularly, you should get priority as the dentist knows you. They have also been cases where patients do not turn up. Due to the restrictions the number of patients being seen has reduced. Difficult to see as many patients as they were seeing pre-pandemic.

**Q: Most dentists surgery websites don't seem to reflect availability of appointments how can one find which dentist have availability for NHS treatments?**

**Sudhir:** Availability changes from day to day, patients make appointments, and they fill up. Some dentists will have some emergency appointments. This is unfair to say why don't you have appointments on your website - how many GPs have availability on their website? Dentists can also carry out different services with their patients - these cannot be done very quickly or just by chance if someone walks in. Dentist may not have a full website because of the cost plus it needs to be maintained.

**Q: Are there any local or national policy issues that need to be addressed - how can we champion some of these difficulties is there a process?**

**Martin:** List of practices with an NHS contract which you can contact which is with the NHS. Practice may have patients which have booked up appointments already, so it may not be immediately. Volume of people calling is high and people with appointments already is also high. There is no longer any registration at dental practices - people don't have a dentist unless they are making routine appointments. They could re-introduce registrations - may bring problems prior to pandemic there was 56% of population access dental and the system was at capacity - you would need to increase capacity.

**Q: Equal access - Harrow is a diverse borough. Is there a challenge for different communities in having equal access to dentistry services?**

**Sudhir:** Dentist are aware of diversity and equality policies - most practices are required by CQC to follow these policies. Different ethnic minorities - could be language problem, Dentist do not get translators to the practice - however there are ways of understanding people.

**James:** there is a problem - language is a major issue, can use translation service. Cost is problem for some of the patients who are not exempt all the time. Ongoing medical treatment with other services and have to prioritise what is more urgent and can be down to cost access and transport. Transport is a major factor Severe demand for domiciliary visits - we have to prioritise who need the urgent need. Some patients depend on transport.

**Access to Dentist**

**HWH Q: Re: Access.** We understand the issues, but as a Healthwatch we find it's still not acceptable - we have received a number of phone calls as people can't get through to the dentist. What do you propose - what should we be advising people on how to get the right service?

**Martin:** Agree - system needs to change and be reviewed. Dentistry is part of the NHS. Provide people with the right links and direction back to the NHS and call the practice. Access is under strain even before the pandemic. Dentistry needs to increase resources and

be considered by NHS as a proper part of the NHS. The LDC Confederation and British dental association and dental stakeholders trying to do this - you can write to your local representatives. Hopefully with reforms coming to the health service through the health and social care bill which is going through with the integrated care system and partnerships hopefully strengthen the local voice - to include dentistry. Fundamental reform is needed and needs to be considered within the rest of the health service.

**HWH:** The route from the HWH perspective is to raise issues through the local borough committee which Healthwatch Harrow sit on which feeds into the integrated care programme - is the dental service seen as the integrated care programme?

**Martin:** Not yet - dental commission sits with NHS England - transition deadline is April 2023. LDC are talking to integrated care systems they need to start thinking about dentistry now. Talking to local authorities and feedback to Healthwatch England so they have local intelligence. Through local level individuals and how they receive their care.

**Ash - HWH to flag with Healthwatch England**

**Q: Links between oral health and hypertension and diabetes - is there a link?**

**Ayesha:** Not aware of a link between dental health and hypertension. There is a link between diabetes and oral health, people with diabetes are more likely to have poor gum health and gingivitis. Number of research out there but not enough evidence at the moment. We see there are links between diabetes and poor oral health - patients who are diabetic need more attention and regular appointments.

**James:** More of the link you would find is diabetic patients are more prone to poor oral health. People with Diabetes would need more concentrated dental care.

**Q: Diabetes Harrow has as sizeable Asian population who have higher incidents of diabetes - is this on the radar?**

**James:** Does not reflect different ethnic community not restricted to Asian group there is a link but does not reflect the incidents.

**Q Any adjustments that dentist can make for patients who are autistic or people with Learning Disabilities?**

**James:** They are able to access services, compliance and operation can be difficult, and we have clinicians who are trained which helps. There are other advanced options such as sedation. We have to accept that there are number of patients who on the spectrum that are seen in practices.

**Poll 1) Do your local dental services meet your needs? (11 participants)**

Yes: 45%  
No: 36%  
Not sure: 18%

**Audience Member:** Not a good question, you may put not due to the conversation that we are having. Dentists will still see people, so not enough for the dentist to provide the service, if you put no people will complain about the dentists - need to be careful how you structure these questions.

**Sudhir:** There is a 4% intolerance in this underperform or over performed - dentist will not be reimbursed.

**HWH Q: Reasonable adjustment for Autism and Learning Disabilities - as a standard practice across Harrow what approach is taken towards providing reasonable adjustment, do they happen, do they need support with awareness training? How do those practices support those people?**

**James:** Since 2015 all health care services have autism awareness training. Engagement with special schools to introduce oral health at a young age also work with learning disability team in Harrow and Barnet who can signpost and can facilitate special requirements. Its important to talk about oral health as part of general health and wellbeing. Dental is not really highlighted - unless people are having problems. Better awareness with different health specialities and learning disability teams

**HWH Q:** - Sudhir - how would you know if someone had a Learning Disabilities or autism - how would you know?

**Sudhir** - We are not informed, sometimes the parents will tell us. Historically there used to be community dental services who worked with special needs/care. It was easier to refer to this service and they would treat the patient - they need a lot of care, and we are not trained in treating people with Learning Disabilities or Autism as they will react differently.

**HWH:** Can work with Community Connex to raise awareness with dentists who are not familiar with the complex needs - some adjustments to support people with Learning Disabilities and make it easier for the dentist.

**James:** up to 16-18 year olds are classed as children - 18 onwards may lack support as considered as adults

**Erinna - Oral Health Promoter (Whittington) promoters in Harrow.** General advice for dentists who see children with autism, just small thing e.g. what time is good, making sure surgeries are quiet, showing the social story board is important how to brush teeth, knowing the dentist. Dentist to take it stage by stage - making them more comfortable.

**Louise - Oral Health Promoter (Whittington) promoters in Harrow:** We work with schools, who are joining the Supervise Tooth Brushing programme - work with the parents, and there is a difficulty in finding an NHS dentist. We are working with dentist to see who is

taking on new patients, we are training the school nurse, health visitor team, midwife, early years training staff - main contact for families and health.

**Ayesha:** We do cover work in SEN schools and workshops. RE: Diversity - run a programme with Romanian community, so also special needs training.

**Louise:** Oral health promotion- translated leaflets and provide information in their own language. Also doing other languages as well - we now have a website, so all the information is in one place - we also do online sessions with parents and children.

**Ayesha:** They have the top tips to advice parents and also dentists. We can discuss reasonable adjustments. We do see complex cases.

**Sudhir:** Independent Dentists need to operate economically so some surgeries may not be able to accommodate people with special needs if adjustments need to be made to the surgery.

**Sudhir:** Healthwatch can support the services for more resources.

**Ayesha:** - Suggestion patten in last 18 months, we are getting better in dental access, and in a better position, those who are struggling at the moment the situation will be getting better.

**Q: Do you have a role to play in promoting the vaccination programme?**

**Sudhir:** Many dentists volunteered to apply the vaccine in the early stages, but were not required, pharmacies are now doing this.

**Questions from the audience**

**Audience member:** As member of Patient Participation Group, and network of PPGs in Harrow and have been involved in health care services - I have always brought up how we leave dentistry out of all the discussion as if it is not part of NHS. We do need to raise these issues as we do with other areas of the NHS. I have learnt so much from the speakers -  
Question: CBCT scan which gives a good overall picture of dental health, this is useful information but difficult to get funding for these scans - are you losing out if you do not have money to afford a scan?

**Sudhir:** CBCT - latest technology, very useful but the cost is high, and you need an expert to diagnose and giving the result. The machines are expensive so there would be extra charge for this. Professionals are needed to diagnose the scan.

**James:** CBCT - it is expensive, but we will use it within reason.

**Poll 2) Has it been easy to access dental care during the pandemic? (12 participants)**

Yes: 8%  
 No: 92%  
 Not sure: 0%

**Poll 3) How do you feel about your own dental health? (12 participants)**

Positive: 67%  
 Negative: 25%  
 Not sure: 8%

**Summary**

**Ash:** Greater need for further exposure of dentistry. We can check with other Healthwatch's to see what they are experiencing. There are issues around access especially with people with learning disabilities. Registrations also is something we can look at. Our role as a Healthwatch is to listen to the needs and concerns of residents and patients and providers across the health and social care spectrum. We like to think we become part of the wider voice on needs and solutions moving forward and championing certain things. This service, Dentistry, warrants raising profile and further championing.

**Information links**

Community Dental Services Brent & Harrow;	<a href="https://www.whittington.nhs.uk/document.ashx?id=6443">https://www.whittington.nhs.uk/document.ashx?id=6443</a>
You can check exemptions from NHS Charges on the NHS BSA website:	<a href="https://services.nhsbsa.nhs.uk/check-my-nhs-exemption/start">https://services.nhsbsa.nhs.uk/check-my-nhs-exemption/start</a>
NHS lists patient charges here:	<a href="https://www.nhs.uk/nhs-services/dentists/dental-costs/understanding-nhs-dental-charges/">https://www.nhs.uk/nhs-services/dentists/dental-costs/understanding-nhs-dental-charges/</a>
The national audit office has put together this handy summary of dentistry:	<a href="https://www.nao.org.uk/wp-content/uploads/2020/03/Dentistry-in-England.pdf">https://www.nao.org.uk/wp-content/uploads/2020/03/Dentistry-in-England.pdf</a>
The LDC website;	<a href="https://ldc.org.uk/">https://ldc.org.uk/</a>
Whittington Health - Meet the Team	<a href="https://www.whittington.nhs.uk/default.asp?c=42319">https://www.whittington.nhs.uk/default.asp?c=42319</a>
Harrow Oral Health Promotion Team:	<a href="https://www.whittington.nhs.uk/default.asp?c=42368">https://www.whittington.nhs.uk/default.asp?c=42368</a>
Community Dental Service Brent and Harrow - contact page	<a href="https://www.whittington.nhs.uk/default.asp?c=25273">https://www.whittington.nhs.uk/default.asp?c=25273</a>
The British Society for Disability and Oral Health	<a href="https://www.bsdh.org/index.php/oral-health-resources">https://www.bsdh.org/index.php/oral-health-resources</a>