

Briefing note for:

Subject:	Access to NHSE Dental services in West Berkshire
Date/Time:	Tuesday 13th December 2022
Attendees:	David Chapman –System Clinical Lead for Pharmacy Optometry & Dental Services Sue Whiting – Deputy Director for Direct Commissioning Service Delegation Nilesh Patel- Chair-Thames Valley Local Dental Network Hugh O’Keeffe- Senior Commissioning Manager, Dental NHS England (BOB & Frimley)
Location:	Virtual-MST
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Introduction:

On 1st July 2022 the Buckinghamshire, Oxfordshire and Berkshire West (BOB) Integrated Care Board took delegated responsibility for Dentistry, alongside Pharmacy and Optometry. Integrated Care Boards (ICBs) have an explicit purpose to improve health outcomes for their whole population and the delegation will allow the ICB to integrate services to enable decisions to be taken as close as possible to their residents. The ICB is working to ensure their residents can experience joined up care, with an increased focus on prevention, addressing inequalities and achieve better access to dental care and advice.

The ICB discharges its responsibility for dental commissioning with officers in NHS England who provide operational leadership within ICB governance structures.

1. Dental services and current NHSE provision in Berkshire West:

Primary and community dental services are commissioned via contracts which fall within the NHS (General/Personal) Dental Services Regulations 2005. Some of these services provide direct patient access and others are accessed via professional referral. Secondary care (hospital) providers deliver services on referral under NHS standard contracts.

NHS Patient Charge Regulations apply to the contracts falling within the 2005 Regulations, but not to services provided under NHS standard contracts for service delivered in acute hospital settings. The patient charges relate to the bands of

treatment delivered in primary care. Services are delivered under treatment Bands 1, 2 and 3. The link below provides more details:

<https://www.nhs.uk/nhs-services/dentists/dental-costs/how-much-will-i-pay-for-nhs-dental-treatment/>

Providers of NHS primary care services are independent contractors in receipt of cash limited financial allocations from the NHS. All practices also deliver private dental care. Some provide NHS services to all groups of patients, but some are for children and charge exempt patients only. The providers are required to deliver pre agreed planned levels of activity each year, known as Units of Dental Activity (UDAs). The UDAs relate to the treatment bands delivered by the practices. Patients are not registered with practices but are encouraged to attend at regular intervals with the regularity of attendance based upon their assessed oral health needs. In the Thames Valley area (Berkshire, Oxfordshire and Buckinghamshire) prior to the pandemic, about 1.1m people (52% of the population) attended an NHS Dentist on a regular basis (attendance within a 2-year period).

Details of practices providing NHS dental care can be found on:

<https://www.nhs.uk/service-search/find-a-dentist>

In addition to the services delivered in primary care there are other NHS dental services. They are:

- **Unscheduled Dental Care (UDC)** – most ‘urgent’ treatment needs are met by the local dental practices. In addition to this there are services that provide back-up in the day and on evenings, weekends and bank holidays. Urgent dental care be accessed via the practice normally attended by a patient or via NHS 111
- **Orthodontics** - these services are based in ‘primary care’ but are specialist in nature and provide treatment on referral for children for the fitting of braces.
- **Community Dental Service** – a services for patients who have additional needs which makes treatment in a primary care setting difficult. This service also provides some of the unscheduled dental care.
- **Hospital services** – for more specialist treatment needs delivering Oral and Maxillofacial Surgery and Orthodontic services.
- **Tier 2 Oral Surgery** (more complex extractions) and **Restorative** (Root canal, treatment of gum disease and dentures) – provide more complex treatments than in primary care but do not require treatment in hospital

The tables below detail NHS Dental services available in West Berkshire:

Primary Care services:

Service	Number	Units of Activity	Contract value
GDS contracts	20	172,502	£4.9m
Full NHS (includes UDC)	11	163,483	£4.5m
Child only	9	9,019	£400k

Onward referral services:

Service	Provider	Area covered	Contract value
Orthodontics	Newbury Orthodontic Centre	Berkshire West	£600k
Community Dental Services	Berkshire Healthcare NHS Foundation Trust	Berkshire	£3m
Hospital services	Royal Berkshire NHS Foundation Trust	Choice applies	£2.7m
Tier 2 Oral Surgery	Rodericks	Berkshire West	£380k
Tier 2 Restorative	Dr A Rai	Berkshire West	£230k

2. Main content of report

Impact of COVID-19 on Dentistry

Primary Care

Since the onset of the pandemic dental services have faced major challenges. Enhanced infection control procedures, necessitated by the types of procedures carried out in dental surgeries, led to reduced dental capacity. This reduced access to services and increased waiting times for treatment. The delays in providing treatments has also meant that patients' treatment needs have increased which has meant that in many cases, treatment is taking longer to complete. Service capacity has been very gradually increased as infection rates have dropped, under strict guidance aimed at keeping patients and staff safe. Primary Care services returned to 100% capacity in July 2022, but a significant backlog of treatments has built up over the 2 year period of reduced capacity.

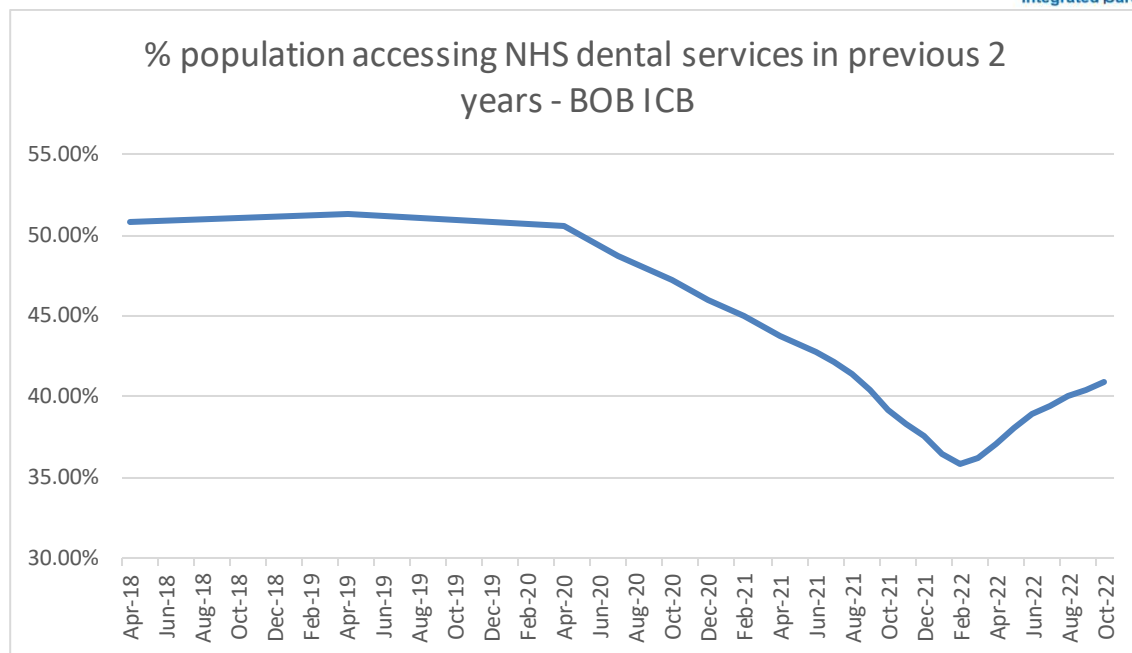
The challenge has been the same for all dental services, including hospital services where there has been a growth in the number of patients waiting more than the NHS constitution standard of 18 weeks.

The backlog of care from earlier in the pandemic means that many patients, including those with a regular dentist, have struggled to access routine care. Whilst patients are not registered with dental practices, many patients have historically booked a dental check-up on a 6 monthly basis. The National Institute for Health and Care Excellence (NICE) guidance states this is not clinically necessary in many instances and clinically appropriate recall intervals are between 3 to 24 months dependent upon a patient's oral health, dietary and lifestyle choices.

Practices provide urgent dental care as part of their core service offer to patients. However, it may be necessary for patients with an urgent need to contact more than one practice as each practice's capacity will change daily dependent upon the number of patients seeking urgent care. This may require patients to travel further to access care.

A common misconception is that practices are attempting to convince patients to be seen privately rather than on the NHS, this is because practices are contracted to provide a set amount of NHS dentistry per year and so are unable to increase the number of NHS appointments they can offer within their normal practice hours. However, some can increase their private hours and therefore number of private appointments available. In some instances, practices may have filled their NHS appointments but still have private appointments available which is why sometimes patients may only be offered a private appointment.

Access as measured by the number of unique patients attending in the previous 2 years has been improving since early 2022. The graph below shows the impact on dental access because of the pandemic and how it has been improving in recent months:



Access has been particularly challenging for patients who have not attended a local NHS practice in recent years. This may be because they have recently moved to the area or choose not to attend regularly. In order to help to address this, additional funding was offered to all practices in the South East region in December 2020 to provide sessions outside normal contracted hours for patients who did not have a regular dentist and had an urgent need to receive dental treatment. There are 4 practices in BOB, detailed below, that currently have the staffing levels to safely undertake additional sessions **for urgent care**, specifically for patients that would be new to the practice.

- Haddenham Dental, Haddenham, Buckinghamshire, 01844 292118
- Gentle Dental Care, Reading, Berkshire, 0118 945 2900 / 0118 945 5555
- Smile Dental Care, Twyford, Berkshire, 0118 832 1803
- Peachcroft Dental Practice, Abingdon, Oxfordshire, 01235 - 532672

These services can either be contacted directly or via NHS 111. These practices deliver a total of 56 hours of access per week.

The offer of funding additional sessions remains open so that should other practices subsequently determine they have the staffing levels to safely deliver additional NHS sessions, these will be established. Should any patient need urgent dental care, or they have been able to access temporary urgent care and still require further treatment to stabilise their oral health, or need dental treatment before undergoing certain medical or surgical procedures, or be a Looked After Child they will be able to contact one of the above practices to obtain treatment. This relates to urgent need, which remains the priority while the backlog of routine care is addressed, and these practices

may not be able to provide routine care for patients that do not have an urgent clinical need.

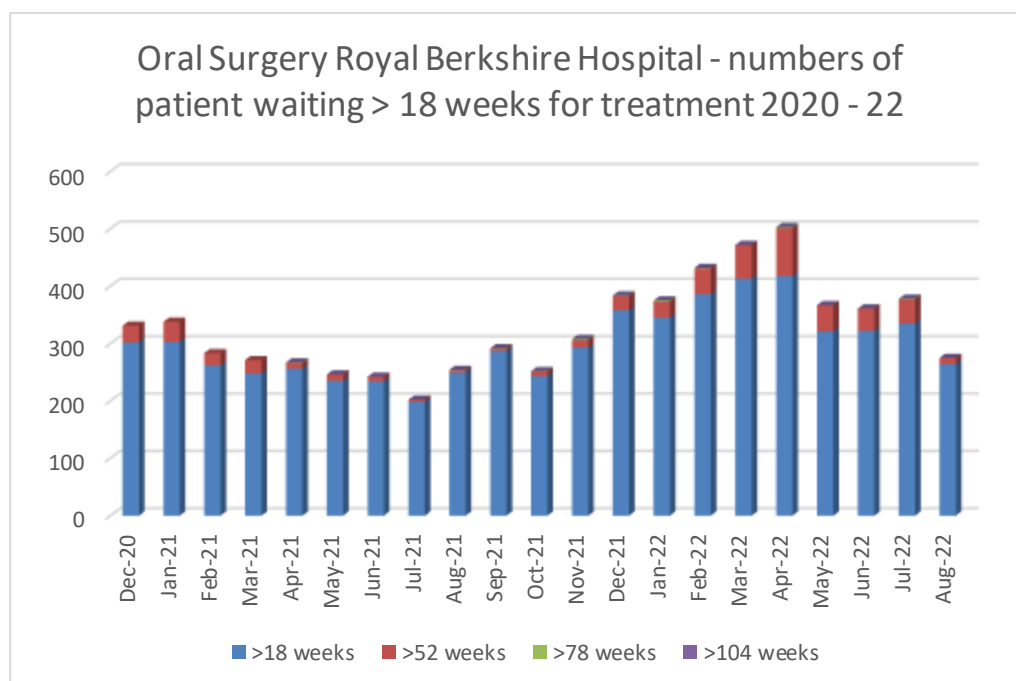
National contract changes will take effect in November 2022. These are designed to increase practice capacity, re-allocate resources where appropriate, review recall intervals and improve patient knowledge about whether patients are accepting new patients via the nhs.uk website.

These measures are a first phase of a programme designed to support patient access and improve oral health.

Referral services

There has been a similar impact for referral services with increased waiting times for treatment and backlogs of referrals that need to be addressed.

Hospital services have targets to eliminate the number of patients waiting more than 104 weeks by July 2022 and those waiting more than 78 weeks by March 2023. The graph below reports on progress at the Royal Berkshire Hospital where the number of patients waiting for dental treatment has been falling since April 2022. The hospital has met the national target for July. However, there are likely to be further challenges as winter approaches.



Community Dental Services provided by the Berkshire Healthcare NHS Foundation Trust provide care for vulnerable patients, such as adults with learning disabilities and children. Restoration and Re-set funding has been invested into the service for the period up to 31st March 2023. This has helped reduce the number of patients waiting for treatment in clinic and under General Anaesthetic in hospital.

There are community-based tier 2 services for Oral Surgery and Restorative Dentistry designed to provide treatment for patients whose needs are too complex to treat in primary care but who don't need to go to hospital. The Oral Surgery service has also had a significant backlog of patients and Restoration and Re-set monies have been invested up to 31st March 2023 to help address this challenge.

3. Next steps and review

- Maintain Additional Access sessions and review approach required in to 2023-24
- Continue to monitor access to primary care dental services with the aim of maintaining improvements in access
- Implement national dental contract changes at local level to take effect during 2022-23
- Review impact of Restoration and Re-set investment and review approach required for 2023-24
- Work with the dental profession to consider whether greater flexibilities can be applied locally to the dental contract to facilitate access and support them with workforce challenges
- Implement programme of re-commissioning key referral services to achieve sustainable access and to meet needs of key patient groups, such as children, patients with more complex treatment and management needs and older patients
- Continue to engage with stakeholders such as Healthwatch, supporting them to provide information to patients about access to care
- Work with other stakeholders to strengthen oral health improvement arrangements through contribution to other health improvement programmes and other interventions that may impact such as water fluoridation

Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board
November 2022