Agenda Item:

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Dorset Health Scrutiny Committee

Dorset County Council



Date of Meeting	16 November 2015
Officer	Director for Adult and Community Services
Subject of Report	Healthwatch Dorset report on their investigations into dental services in Dorset.
Executive Summary	Healthwatch Dorset carried out a "mystery shopping" exercise on all dental practices in Dorset, centring on issues around access and charges. They produced a report on their findings, together with a number of recommendations for action. In response, action has been taken by NHS England and NHS111 (detailed in the attached report).
Impact Assessment: Please refer to the protocol for writing reports.	Equalities Impact Assessment: Not applicable. Use of Evidence: Report provided by Healthwatch Dorset. Budget: Not applicable. Risk Assessment: Having considered the risks associated with this decision using the County Council's approved risk management methodology, the level of risk has been identified as: Current Risk: HIGH/MEDIUM/LOW (Delete as appropriate) Residual Risk HIGH/MEDIUM/LOW (Delete as appropriate)

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	Other Implications: None.
Recommend ation	That the Committee note and comment on the findings and actions contained within the report.
Reason for Recommend ation	The work of the Health Scrutiny Committee contributes to the County Council's aim to protect and improve the health, wellbeing and safeguarding of all Dorset's citizens.
Appendices	Healthwatch Dorset Dental Services Report
Background Papers	Briefing for Dorset Health Scrutiny Committee, 8 September 2015: http://www1.dorsetforyou.com/COUNCIL/commis2013.nsf/MIN/74C6A60469BE644480257EAF00463EB8?OpenDocument Primary Care Dental Services in Dorset – a report by Healthwatch Dorset (circulated to members via e-mail in May 2015): http://www.healthwatchdorset.co.uk/sites/default/files/primary_care_dental_services_in_dorset.pdf
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Appendix 1



Dental services in Dorset

Background

Healthwatch Dorset has received many comments relating to NHS dental services across Dorset, Poole and Bournemouth, a number of which relate to lack of clarity about NHS dental charges and concerns about how to find an NHS dentist. Healthwatch England has also recently undertaken a review of dental services focusing on access to and quality of services.

Discussions we had with the NHS England Wessex (now NHS England South) Primary Care Contract Manager also highlighted concerns about whether patients are informed about NHS dental charges prior to treatment, whether patients seeking NHS dental treatment are treated differently to those who seek private care and whether patients are able to receive all treatment clinically necessary as NHS care.

The Project

To develop awareness of the local situation, to feed into the evidence gathered nationally by Healthwatch England and others and to highlight areas of concern to NHS England South, Healthwatch Dorset undertook a review of NHS dental services in Dorset, Poole and Bournemouth with particular interest to:

- 1. Ascertain whether people can easily access current information about which practices are accepting new NHS patients.
- 2. Identify if dental charges are made clear to people (whether information is clear and accurate when given verbally or on websites).

The review had three components:

- 1. The feedback we had already received from patients and the public (through our website, via community engagement events, through Citizens Advice Bureaus, via feedback forms and other engagement opportunities).
- 2. A "mystery shopping exercise" conducted by telephone.
- 3. A comparison of information provided on practice websites with that on the NHS Choices website.

Overall, in the "mystery shopping exercise" callers were greeted with courtesy and attended to promptly. But findings also suggest that there is some work to be done in ensuring that information about which practices are accepting NHS patients is accurate and easily accessible.

The full report can be found on Healthwatch Dorset's website at this address: http://www.healthwatchdorset.co.uk/resources/reports

Recommendations

As a result, the recommendations arising from our investigations were:

- 1. Information should be made available by practices to patients and the public across different media on paper, online (including website and social media accounts, if the practice has them) and over the telephone.
- 2. The information made available by practices to patients and the public should be consistent across all media.
- 3. Information should be checked regularly to ensure that it is comprehensive, accurate, and up-to-date and includes information about whether the practice is currently accepting new NHS patients.
- 4. Practices should be aware of, and able to signpost to, other sources of information for patients and the public (e.g. NHS Choices website).
- 5. All practices should ensure that their information on NHS Choices is accurate and regularly updated.
- 6. Accurate information about "out of hours" and emergency dental services should be readily available both through practices and NHS 111.
- 7. All patients should be made aware of the charges before treatment begins and those on low incomes or in receipt of benefits should be advised about their options before treatment begins, to ensure that patients do not pay more than they need to. (We draw practices' attention to the work undertaken by Which? in their "Clean Up Dental Costs" campaign).
- 8. Comprehensive information about how to raise a concern or make a complaint should be readily available, both in hard copy on practice premises and online. On websites this information should preferably be on a single page with an obvious Home page link.
- 9. Practices should make readily available information about how they have collected patients' feedback on their services, how they have responded to it and what changes have been made as a result.

After our report was published, we were approached by community groups working with homeless people and made aware of difficulties people were facing in accessing dental services. We brought them together with commissioners from NHS England to discuss the problems and NHS England has incorporated actions to meet those problems in their Action Plan below.

Outcomes

NHS England have adopted an 8-point Action Plan:

- 1. Highlighting our findings to all dental contractors
- 2. Reminding contractors that they should keep their practice's information on the NHS Choices website up to date and giving guidance on how to do that
- 3. Identifying practices with NHS contracts but who are identifying that they only take private patients that they must provide NHS services
- 4. Redesigning advertising material to reflect the fact that NHS111 and NHS choices are access points for people requiring routine or urgent care
- 5. Developing a "myth buster" information sheet for patients
- 6. Reviewing the Toothbus service (mobile dental service) in Dorset, particularly in relation to hard to reach groups
- 7. Circulating advertising and myth buster information to patients and the public
- 8. Working with Healthwatch Dorset to identify further actions including embedding patient feedback into contract management and commissioning

All 8 actions have been taken and Healthwatch Dorset is in ongoing discussions with the NHS England team about embedding feedback into their contract management and monitoring.

As a result of reading our report, a local GP approached us and raised concerns about access to treatment for people experiencing acute dental pain. He told us that people are inappropriately sent to GPs and local minor injuries / GP walk in centres by the NHS111 service. The Minor Injury Unit and GP walk in service are not qualified or trained to manage dental pain. GPs also report that patients with dental pain who are registered with dentists are sent back to GPs for antibiotics when they could have been prescribed by the dentist.

All this is a source of frustration for GPs and results in a delay to people receiving the treatment and pain relief they need.

Working through the same GP, we gathered evidence on these issues from another 30 GPs across the county.

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We met on a number of occasions with NHS England Primary Care Contracts Managers, with representatives of Dorset CCG (which commissions the NHS111 service) and with South Western Ambulance Service NHS Foundation Trust (which provides the NHS111 service), to discuss the issues.

The outcome is that NHS111 have put in more training to help their call handlers "interpret" the pathway better, to ask the right questions and so direct people to the right services.

And the GP who had first brought our attention to the issues is now able to say:

"Things have got better. 111 are now triaging dental patients to see dentists rather than doctors. This is a great improvement and means they now see the right person with the right skills. Thanks for your help with this."

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