

NHS Dentistry in East Sussex

1. Introduction

- a. This report provides an update on the previous year's report to HOSC on the following:
 - i. developments in access in Special Care Dentistry (SCDS) and general dentistry
 - ii. wheelchair access
 - iii. the Oral Health Needs Analysis which indicates the volume & location of additional dental services to be commissioned
 - iv. additional capacity already commissioned and
 - v. other developments and challenges.
 - vi. The document "*Commissioning NHS Primary Care Dental Services: Meeting the NHS Operating Framework Objectives - January 2008*" makes reference to the fact that PCTs have a legal duty to provide or commission dental services to meet all reasonable requirements. Production of an up-to-date local oral health needs assessment and a measurement of dental access requirements are the first step towards the shaping of improved local NHS dental services

2. Access

- a. Access in terms of waiting times for Special Care Dental Services (SCDS), formerly called Community Services, are shown in Table 1 below. Compared with the waiting time at the end of March 2007, the latest waiting times are all less apart from the dental clinic in Seaford which is 7 weeks, and the domiciliaries in Uckfield & Crowborough which are 13 weeks.
- b. Regarding the proposed merger of Seaford Clinic with Peacehaven there has been no progress on this during the year and it is still on hold until the staffing changes are complete. It is now considered that the PCT will be writing to the users of Seaford Special Care Dental Clinic in the Spring or early summer of 2009 explaining its intentions.

Table 1 Trends in Waiting Times for Special Care Dentistry Services

SPECIAL CARE DENTAL SERVICE WAITING TIMES

| Dental Service | Waiting time (weeks) | |
|--|----------------------|---------------------------------------|
| | as at 31.03.07 | as at 30/9/08 or as at 31/7/08* |
| Dental clinics | | |
| Hastings, Arthur Blackman Clinic | 5 | 2 |
| ABC at Conquest OP site | | |
| Ore, Ore Clinic | 3 | 5 |
| Uckfield and Crowborough | 10 | 7 |
| Hailsham and Heathfield | 40 | 7 |
| Eastbourne, Ian Gow Health Centre | 25 | 6* |
| Peacehaven, Child & Family Centre | 12 | 2 |
| Seaford, Health Centre | 2 | 7 |
| General Anaesthetic Lists | | |
| Children : | | |
| Bexhill Day Surgery Unit | 8 | 8 |
| Eastbourne Day Surgery Unit | 4 | 4 |
| Adults requiring Special Care : | | |
| Hastings, Conquest Theatre | 37 | 18 |
| E/b DSU - Sp Needs Adults | 7 | 4 |
| Uckfield Community Hospital | 4 | 4 |
| Domiciliaries | | |
| Hastings | 10 | 0 |
| Ore | | 3 |
| Uckfield & Crowborough | 10 | 13 |
| Hailsham and Heathfield | | 0 |
| Eastbourne, Ian Gow Health Centre | 25 | 0* |
| Peacehaven | 15 | 4 |
| Seaford | | 0 |

- c. The change in access to general NHS dental services can be monitored by the four methods previously reported. The tables below show that although the amount of dental services has increased (Table 2) the number of unique patients treated over the previous 24 months has declined (Table 1). This probably reflects the timelag between an increase in activity being delivered and an increase in unique patients being treated. It may also reflect more courses of treatment being provided to existing patients. A high majority of patients continue to consider that the time to obtain an appointment was as soon as necessary (Table 3).

Table 1
Patients seen in previous 24 months

| AREA | Mar-06 | Mar-07 | Mar-08 | % change | |
|---------|----------|------------|----------|-------------------|--------------------|
| | | | | March 06-March 08 | March 07- March 08 |
| HRPCT | 103412 | 105807 | 103732 | 0.31% | -1.96% |
| ESDWPCT | 184724 | 186071 | 173887 | -5.87% | -6.55% |
| SHA | 2170487 | 2134288 | 2027024 | -6.61% | -5.03% |
| ENGLAND | 28144599 | 28,097,705 | 27049228 | -3.89% | -3.73% |

Source : end of year Dental Service Division (DSD) statements & Vital sign reports, Information Centre

Note March 08 figures not validated

Table 2
General activity delivered (Units of Dental Activity (UDAs) performed)

| AREA | Mar-07 | Mar-08 | % change |
|---------|----------|----------|----------|
| HRPCT | 297986 | 317173 | 6.44% |
| ESDWPCT | 476204 | 510221 | 7.14% |
| SHA | 5371518 | 5649986 | 5.18% |
| ENGLAND | 73650200 | 76961043 | 4.50% |

Source:information centre

Table 3
Patient responses to questionnaires on their opinion of time taken to get an appointment

| Question | HRPCT | | ESDWPCT | | SE Coast SHA | |
|----------------------------------|-----------|-------|-----------|-------|--------------|------|
| | Frequency | % | Frequency | % | Frequency | % |
| It was as soon as necessary | 1419 | 87.85 | 1432 | 87.37 | 10670 | 85.7 |
| It should have been a bit sooner | 82 | 5.08 | 99 | 6.04 | 888 | 7.13 |
| It should have been much sooner | 34 | 2.11 | 38 | 2.32 | 305 | 2.45 |
| No response | 78 | 4.83 | 69 | 4.21 | 580 | 4.66 |
| Invalid | 2 | 0.12 | 1 | 0.06 | 7 | 0.06 |
| Total | 1615 | 100 | 1639 | 100 | 12450 | 100 |

Source: DSD Vital Signs Report Sept 08

- d. The volume of calls to Patient Advice and Liaison Service seeking information on dentists accepting new NHS patients was at a similar level this year compared with last year. (77 calls in 2008/9 and 75 calls in 2007/8 in the same period of January to end of October). The map of East Sussex in Figure 1 shows those practices accepting new patients. The number of practices accepting new patients is higher than last year (ESDW PCT 22 practices compared with 20 and HRPCT 14 practices compared with 10).

Figure 1 (see separate sheet)
Map of Practices accepting NHS patients

3. Wheelchair Access

The map in Figure 2 shows which practices have wheelchair access. (All SCDS practices have wheelchair access.) There is usually one practice in each major town. The combination of whether a practice has wheelchair access and is accepting new NHS patients is shown in Figure 3. Urban areas have practices which are both accepting new patients and with wheelchair access, apart from in Crowborough and Hailsham. The PCTs continue to improve the number of existing practices with wheelchair access by offering capital grants. Access is improved through commissioning new practices through the tender process, with the tender specification requiring premises to be Disability Discrimination Act (DDA) compliant.

Figure 2 (see separate sheet)
Map of Practices with wheelchair access

Figure 3 (see separate sheet)
Map of Practices showing Practices with both wheelchair access and accepting NHS patients

4. Oral Health Needs Analysis

- a. The analysis was produced for each PCT to provide a baseline assessment of the current position in terms of calculated treatment need over the next few years. It identifies areas for service change in line with local/national priorities, identifies areas of poor availability and unmet need, it aims to improve access and capacity, to reduce inequalities and improve oral health of the local population. The main headlines are as follows:
- b. Population growth, age, density, ethnicity & deprivation overlaid against current service provision to highlight unmet need at ward level
- c. Factors affecting oral health- diet, oral hygiene, fluoride, tobacco & alcohol
- d. Current general provision meets needs of 57% population in ESDWPCT & 61% in HRPCT. To meet the needs of a higher proportion of the population, 60% in ESDWPCT & 67% in HRPCT, a total of 45,000 and 27,700 UDAs should be commissioned over the next 3 years, respectively. Activity should be commissioned in Eastbourne, across Lewes, and the Wealden in ESDWPCT , and in Rother and Hastings in HRPCT.
- e. Additional orthodontic activity (UOA) needs to be commissioned in both ESDWPCT & HRPCT (6800 UOA and 5581 UOA per year in each PCT respectively)
- f. Secondary care; Oral & maxillofacial surgery and orthodontic services are available locally. However more specialized restorative services are only currently available by referral to the main London hospitals. A local service would enhance provision to patients, through appointment of a new consultant led service and linked to newly commissioned specialists in primary care
- g. Oral health promotion is essential to preventative care. PCTs continue to support Brushing Schemes for children
- h. The oral health needs assessments and plans presented to the PCT Boards in November 2008 are available on request.

5. Additional Capacity Commissioned

- a. Additional general and orthodontic services have been commissioned on a temporary basis from existing Providers. Also a tender process has been undertaken to commission general dental services in Crowborough and Hailsham, and orthodontic services in ESDWPCT. These practices have offered extended practice hours, including evenings and Saturday mornings to further improve access. This will then result in practices in all urban areas having wheelchair access and accepting new patients, when they are opened in the next few weeks. Further tender processes for additional general dental services are planned in the next few weeks. A business case for a local restorative consultant is being developed across East Sussex, Brighton & Hove.

6. Promotion of NHS Dental Helpline

- a. Patients can find an NHS dentist through a number of routes, namely Websites, telephone helpline, PCT brochures on services, including:
 - i. www.nhs.uk/pages/homepage.aspx
 - ii. www.nhsdirect.uk
 - iii. www.eastsussexdownswealdpct.nhs.uk
 - iv. www.hastingsandrotherpct.nhs.uk
 - v. PCT helpline on 0300 1000 899 (0830 to 1700 Monday to Friday)
 - vi. Patient Care Advisors on 08444 772545 (830-1800 Monday to Friday)
 - vii. NHS Direct 0845 4647
- b. Surveys suggest that many patients are unaware of the methods available to find an NHS dentist. Therefore the local dental helpline is being promoted through flyers and advertisements.

7. Other Developments & Challenges

- a. The new contract introduced in April 2006 required general dental services to be reported under one of four bands of treatment. This meant the dentist & the PCT could not evidence the detail of the work provided in the bands. So for example a band 2 could be claimed by a dentist doing one filling or several fillings. The level of detail of the dental services provided has increased from 1 April 2008, enabling better benchmarking of services.
- b. New quarterly reports called 'vital signs' allow aspects of performance, quality, trends to be monitored at PCT and contract level 'at a glance'.
- c. Promotion and support for Clinical Governance has been given, to help improve the quality assurance systems of these independent practitioners.
- d. The Emergency Dental Service is being reviewed.

8. Summary

- a. Progress has been made in improving access by increasing the capacity of dental services, extending practice hours, increasing DDA compliance where practicable, and increasing patients' awareness of how & where to make an appointment with an NHS dentist.

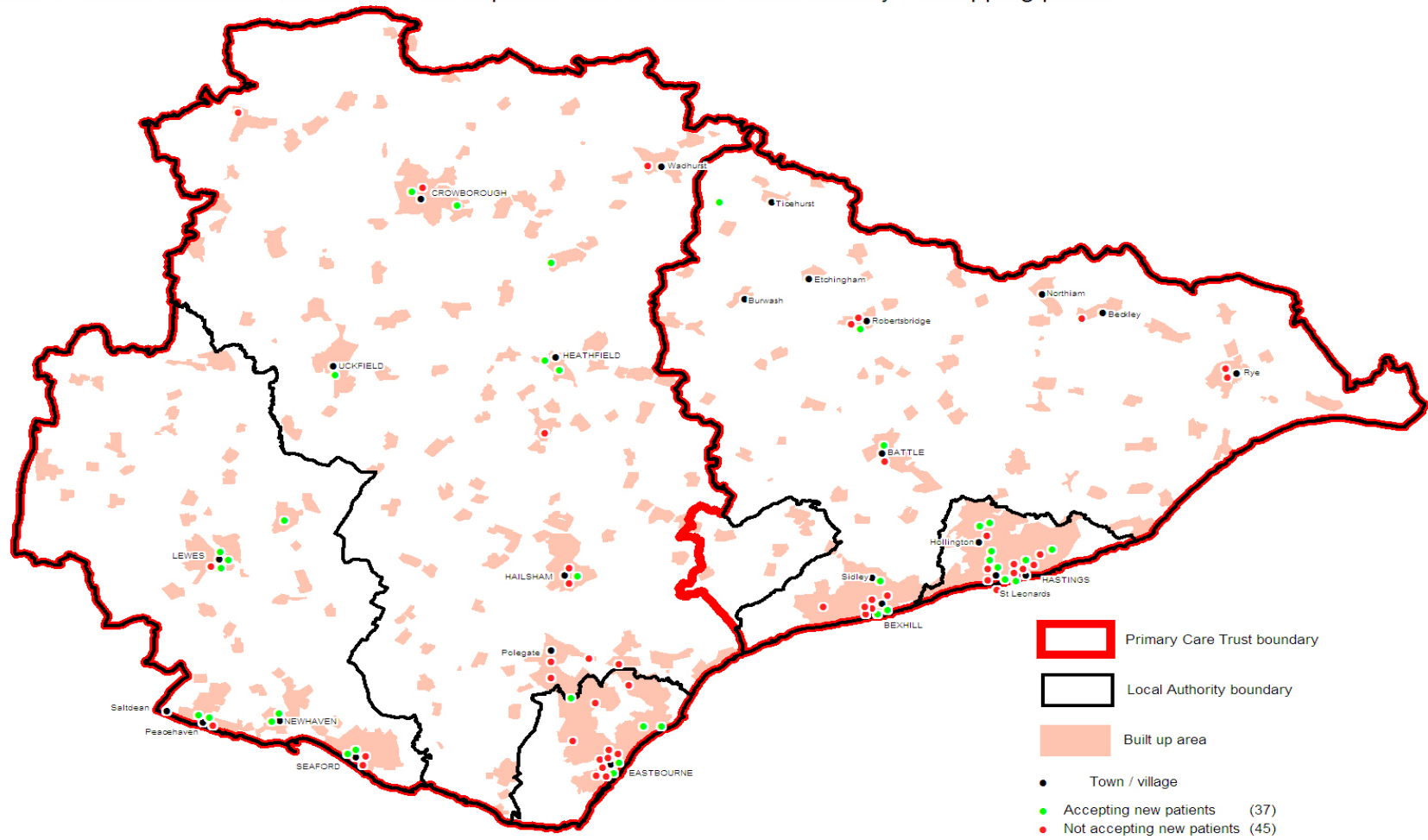
Jane Hewitt; Dental Services Development Manager

Phil Hamlin, Special Care Dental Services

Alan Lewis, Dental & Optometry Lead

NHS dental practices in East Sussex accepting new patients, November 2008

Note: Practice locations not exact as some points have been moved to identify overlapping points

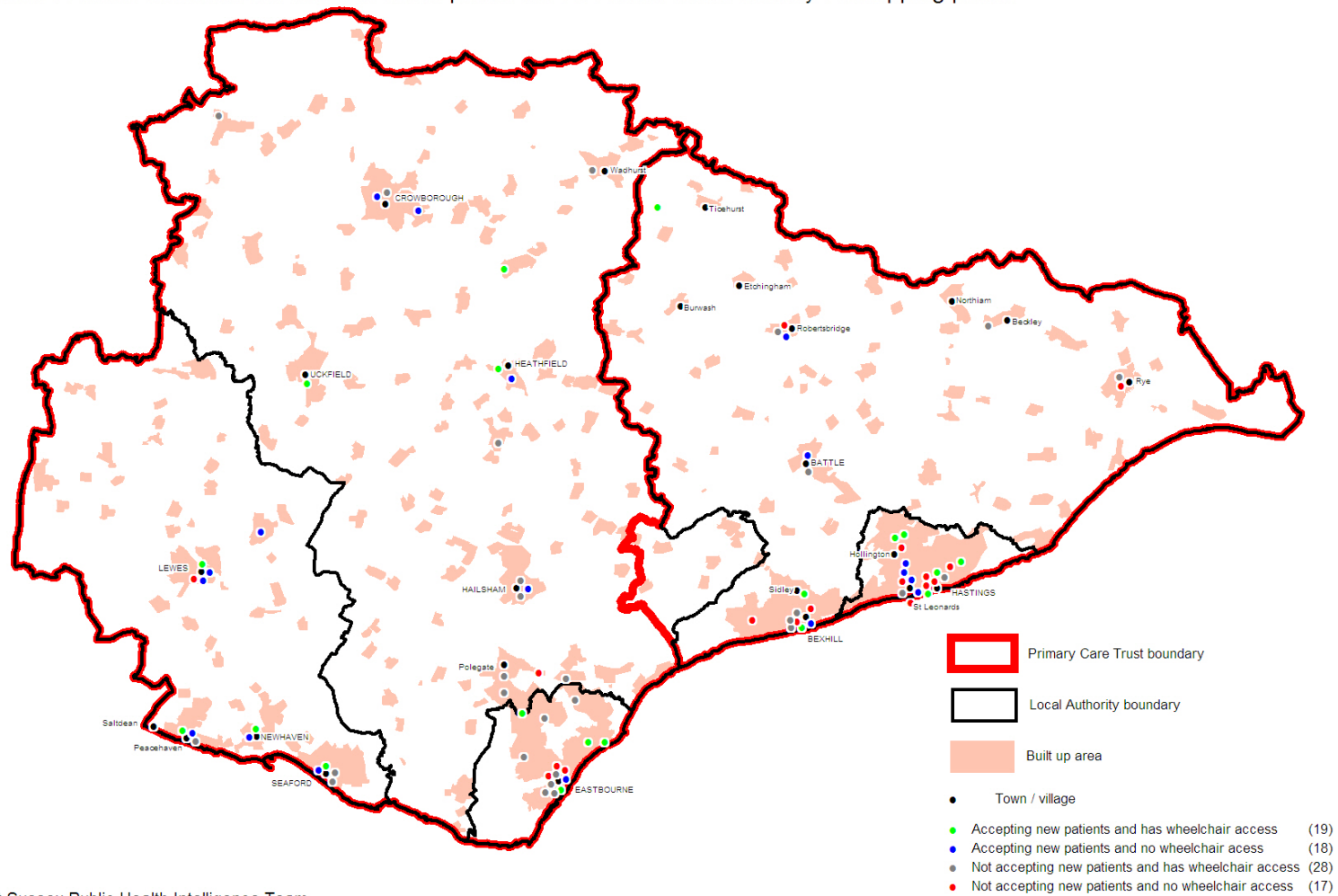


East Sussex Public Health Intelligence Team

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NHS dental practices in East Sussex with wheelchair access and accepting new patients, November 2008

Note: Practice locations not exact as some points have been moved to identify overlapping points



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