# HEALTH AND WELLBEING SCRUTINY COMMITTEE

# UPDATE ON GENERAL DENTAL ACCESS

# **REPORT OF NHS ENGLAND**

## 1. PURPOSE OF THE REPORT

1.1 To provide an update to Sunderland Health and Wellbeing Scrutiny Committee in respect of general dental services following the recent hand back of a small NHS dental contract on Hylton Park Road (contract ended 31 May 2021) and the Covid-19 pandemic.

#### 2. BACKGROUND

- 2.1 Primary care dental services operate in strict accordance with the National Dental Regulations and must evidence compliance with General Dental Services Regulations and the Dental Charge Regulations.
- 2.2 The Regulations do not require a patient to be 'registered' with a practice, they operate on a demand led basis with a patient being the direct responsibility of the NHS dental provider only whilst they are in an 'open' course of treatment. Whilst practices do tend to see their patients on a regular basis, there is no contractual obligation on them to provide on-going regular care.
- 2.3 The Regulations outline the mandatory dental services, clinical governance and quality assurance responsibilities of a primary care NHS dental provider to ensure safe, high quality dental care is provided nationally.
- 2.4 The Regulations set out the contract currency which is measured in units of dental activity (UDAs) that are attributable to a 'banded' course of treatment prescribed under the regulations. (See attached leaflet at appendix 1 for further information)
- 2.5 The provider of the Hylton Park Road practice (BUPA) gave notice on their NHS contract with effect from 31 May 2021 citing lack of demand in the area and financial viability. The NHS contract was for 2400 UDAs and treated 488 patients in the 24 months prior to closure. The contract had historically under-performed against its commissioned activity target.

## 3. CURRENT ACCESS TO NHS DENISTRY

- 3.1 There are currently 22 NHS general dental practices across Sunderland commissioned to provide a total of 538,319 UDAs per year. Historically approximately 90% of the total commissioned capacity in Sunderland has been delivered.
- 3.2 Three dental updates have been provided to local stakeholders to ensure they are kept informed of the current position in light of the on-going Covid-19 pandemic

(the latest version is attached to this report). From these briefing the Committee will be aware of the real challenges our NHS dental practice teams have and continue to face.

- 3.3 The proximity between a dentist and a patient's airway and the relatively high number of aerosol generating procedures (AGPS) have affected the way care is provided dentists must abide by important infection control guidelines to combat COVID-19. This has an impact on the number of patient's practices can see in a single day.
- 3.4 Throughout the pandemic, the NHS has supported dental teams with income protection and a staggered approach to returning dentistry to pre-pandemic levels.
- 3.5 In line with national standard operating procedures, dentists are continuing to prioritise patients with the highest need or priority, such as children and those most at risk of oral disease. There are no circumstances when a practice should prioritise a routine cases over an urgent case as it is a condition of income protection that they prioritise all known and unknown patients to the practice who require urgent dental care if contacted directed or via 111 service. Ultimately, dentists and their teams are skilled clinicians and they use their clinical judgement to assess and respond to patient need.
- 3.6 NHS England's Chief Dental Officer has issued advice and guidance to dental professionals throughout COVID to ensure safe practice and access to care for patients.

#### 4. SAFELY RESTORING ACCESS

- 4.1 NHS Dentistry is an important clinical and preventive service, so our focus is now on supporting dentists and their teams to see as many patients as safely as possible.
- 4.2 However, we are mindful that current infection prevention control arrangements will continue to prevent a return to normal practice throughput and have therefore retained income protection measures.
- 4.3 Whilst contracts remain in place for 100% of contracted activity, claw-back of funding will not be applied to practices delivering at least 60% of contracted UDAs. Put simply this means that practices' income is protected provided they deliver at least 60% of their dental activity levels.
- 4.4 In addition to the income protection measures, practices are able to access free PPE via a national on-line portal.
- 4.5 Whilst restoration of NHS dental activity continues, a return to full capacity will be dependent on the further easing of Covid-19 infection prevention control measures.
- 4.6 As practices continue to prioritise seeing patients with the greatest clinical need, this will likely mean a delay for patients seeking more routine dental care such as check-ups, We are therefore asking patients for their understanding and cooperation during this unprecedented and difficult time for the NHS, whilst we work with NHS dental practices to explore opportunities to increase the clinical treatment capacity available within the constraints of the Covid pandemic and

infection control measures that are required to ensure that care can be delivered safely for both patients and staff.

- 4.7 Some of the local measures put in place to date to support access for patients include:
  - establishment of 3 urgent dental care centres for Sunderland to supplement the existing in-hours urgent dental care hub accepting referrals from general dental practitioners and NHS 111;
  - Incentives for practices to treat patients who have not been seen in the practice within the previous 24 months (adults) and 12 months (children) who require urgent care;
  - additional triage capacity into the integrated NHS 111 North East and North Cumbria Dental Clinical Assessment services; and
  - additional weekend and bank holiday out of hours urgent dental care treatment capacity.
- 4.8 In summary, all primary care dental practices are open, however practices will need to prioritise patients with the most urgent needs.
- 4.9 Progression to resume the full range of routine dental care is being risk-managed by individual practices in line with the national standard operating procedure. This means they will be seeing those patients with the most urgent issues first, followed by those that have open courses of treatment, prior to offering more routine dentistry appointment.
- 4.10 Whilst most primary care dental services are provided in general dental practice, the community dental service has an important role in the provision of dental care for vulnerable groups who may need treatment in an alternative setting, to accommodate their needs. Sunderland and South Tyneside NHS Foundation Trust provides this service across Sunderland, Gateshead and South Tyneside. The service also provides community based oral health promotion, supplementing the services commissioned by Sunderland Local Authority.

## 4 **RECOMMENDATION**

4.1 The Health and Wellbeing Scrutiny Committee is recommended to note and comment on receive the update and information provided.

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