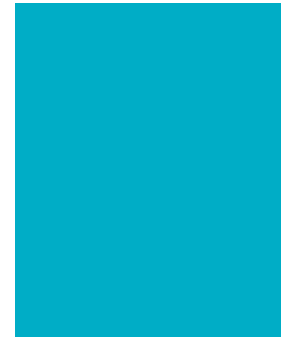


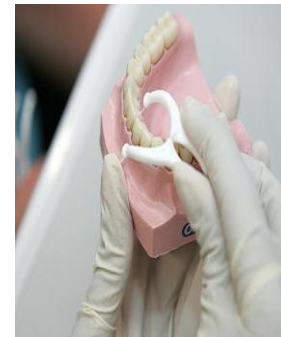
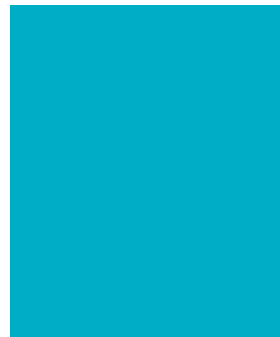
IMPROVING DENTAL CARE AND ORAL HEALTH – A CALL TO ACTION EVIDENCE RESOURCE PACK



NHS England Dental
Analytical Team

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Introduction to this pack

- This data pack has been produced to support the ‘call to action’ to stimulate debate in local communities – amongst dentists, dental care professionals, patients and public, dental commissioners, health and wellbeing boards and other stakeholders – as to how best to develop NHS dental services.
- We have included a number of graphs and information on oral health in England, demand and access to NHS Dental services and patient experience.
- We would welcome suggestions on how to build and improve the pack.

Summary headlines

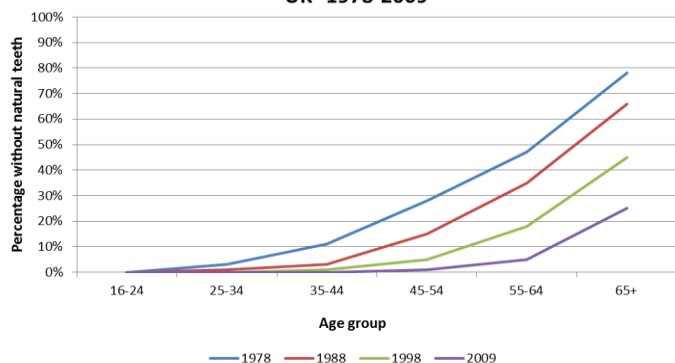
- Oral health has been improving for both adults and children
- There are regional and socio-demographic differences in oral health across England
- The number of patients accessing NHS dentistry has increased steadily since 2008
- Patient experience of NHS dentistry has improved in recent years
- For secondary care, the main inpatient dental admissions are for the treatment of dental caries (tooth decay)

Oral Health

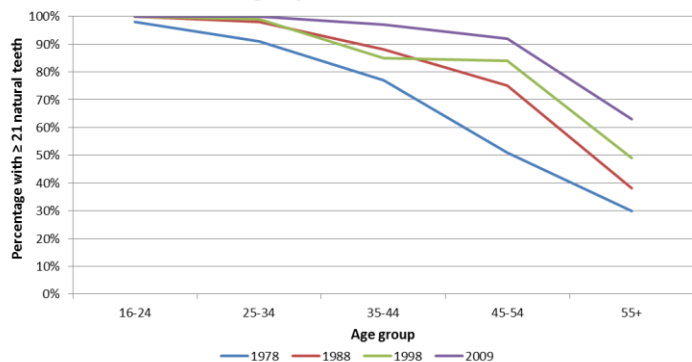


Adult oral health has been improving over time

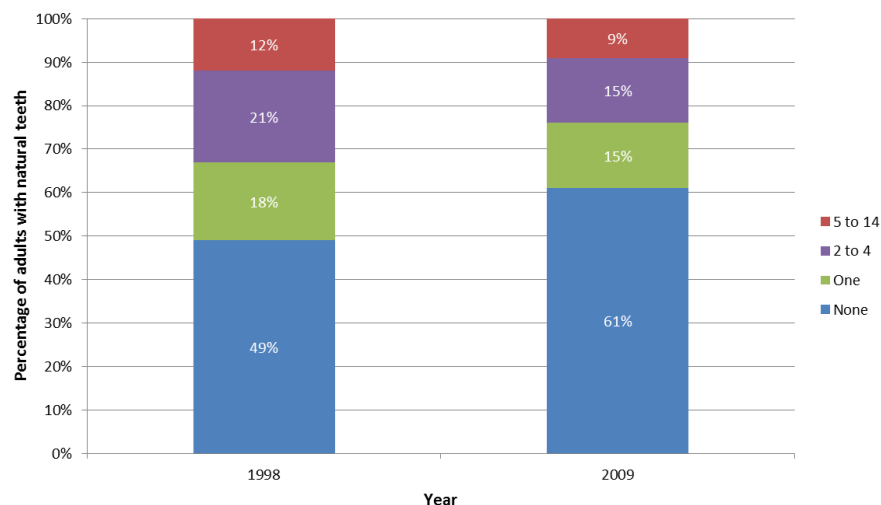
Percentage of adults without natural teeth, by age group, UK* 1978-2009



Percentage of adults with 21 or more natural teeth, by age group, UK* 1978-2009



The number of reported dental problems experienced at least occasionally in the preceding 12 months, England 1998-2009

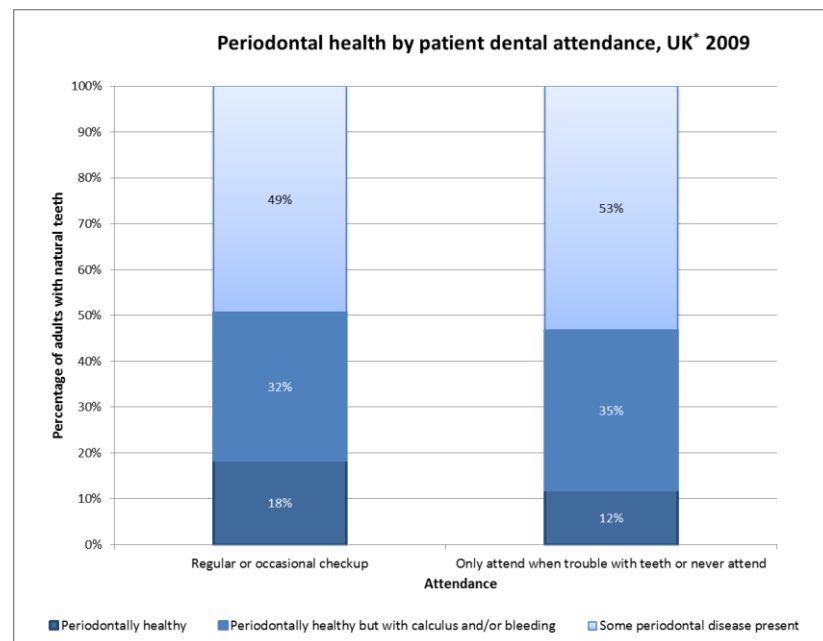
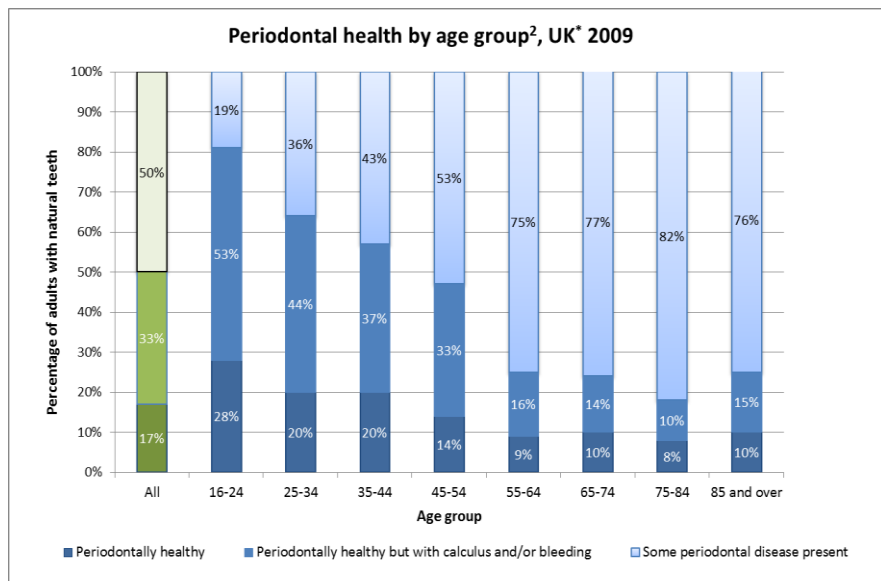


Between 1998 and 2009 the percentage of adults with teeth in England who have reported experiencing one or more problems on the Oral Health Impact Profile scale (OHIP-14), fell by 12 percentage points; 51% in 1998 to 39% in 2009.

The prevalence of periodontal (gum) disease increases with age and is more likely for those who did not visit the dentist regularly

In 2009 17% of adults with teeth had no evidence of periodontal (gum) disease¹ (see slide 20 for full definition).

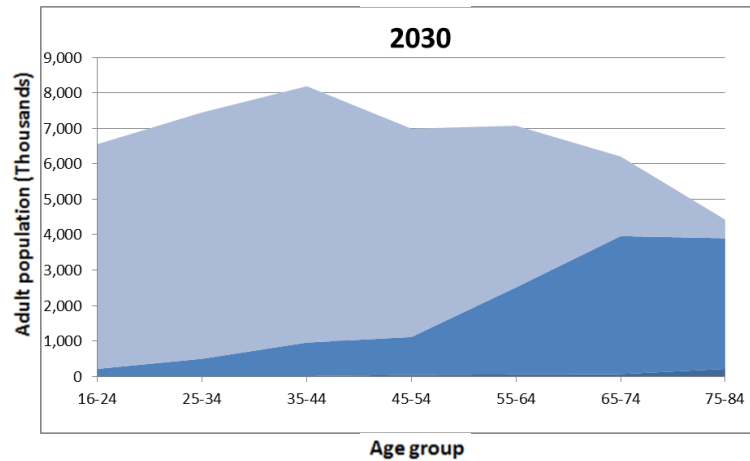
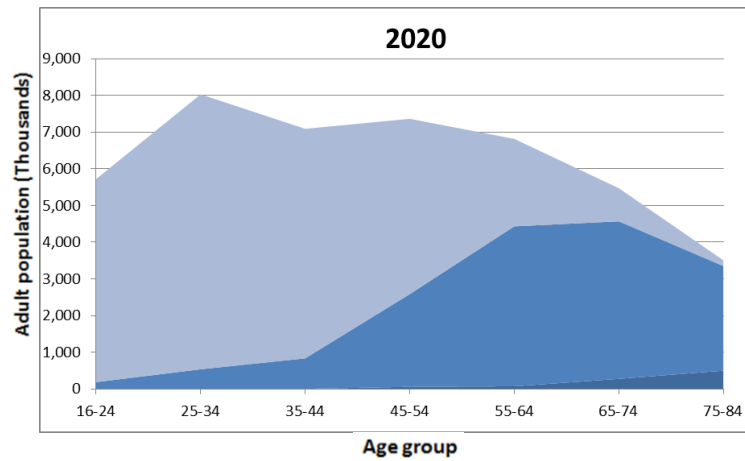
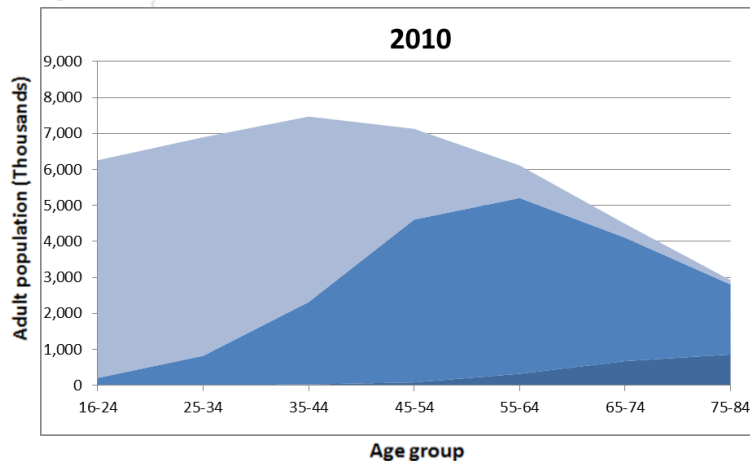
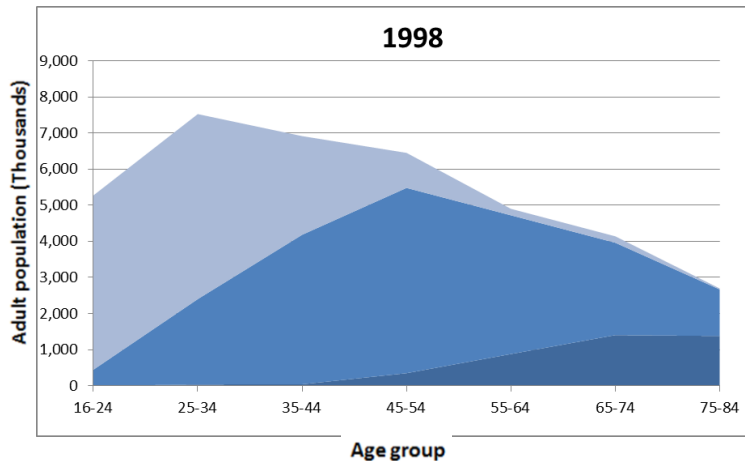
Good periodontal health was much more prevalent amongst adults under 45 years than in older age groups.



It can also be seen that regular attendance is associated with good periodontal health

Time series and future projection of adult dental health: 1998-2030

■ No natural teeth ■ Less healthy teeth⁴ ■ Healthier teeth⁴

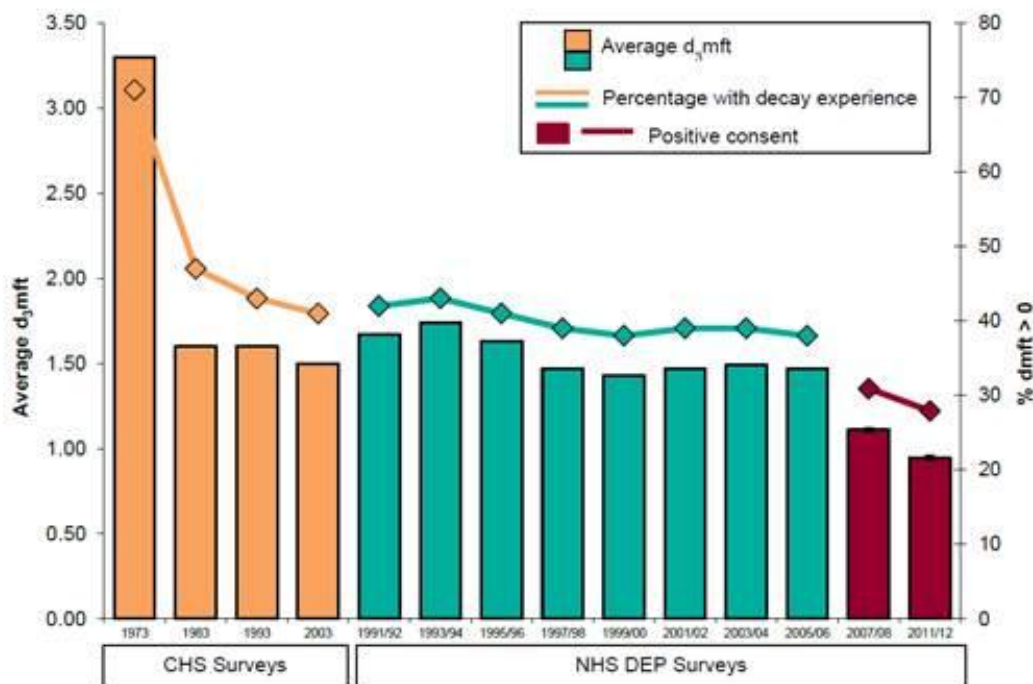


[4] Healthier is defined as those having 18 or more sound, untreated teeth.

Less healthy is defined as those with less than 18 sound, untreated teeth.

Children's dental health has also been improving over time

Results of caries surveys of five-year-olds in England from the Children's Dental Health Surveys and NHS Dental Epidemiology surveys, 1973 to 2012



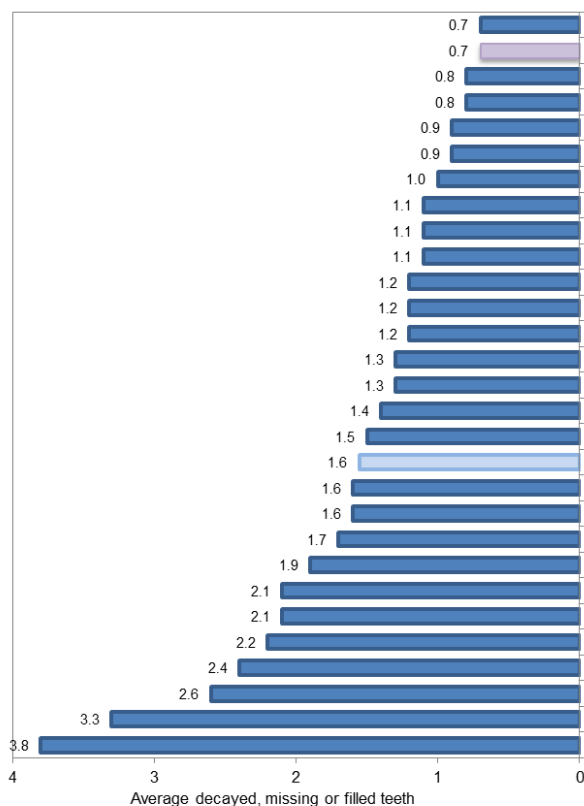
' d_3mft ', seen on this graph, is a standardised way of measuring dental health, which involves visual-only examination for missing teeth (mt), filled teeth (ft) and teeth with obvious dentinal decay ($d3t$).

The axis on the left (related to the bars on the graph), is the average number of missing, filled or decayed teeth found in the 5 year old dental examination.

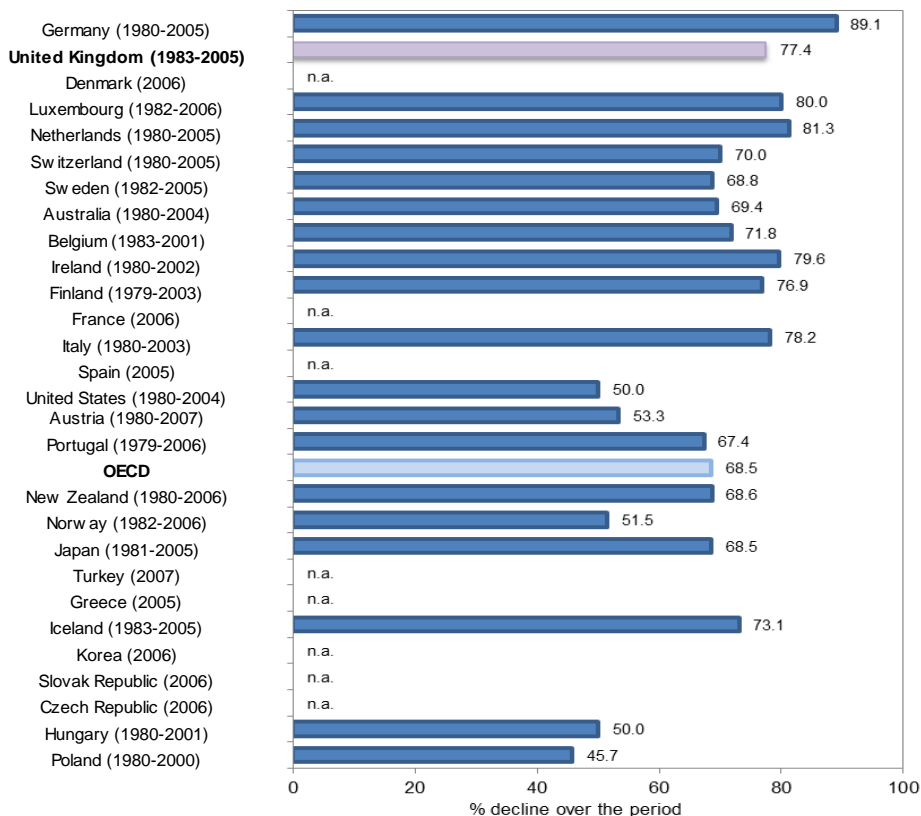
The axis on the right (related to the line on the graph) is the proportion of the 5 year old children examined, who were found to have no missing, filled or decayed teeth.

International comparisons of dental health for 12 year-old children

Average number of decayed, missing or filled teeth, 12 year-old children, 2006 (or latest year available)

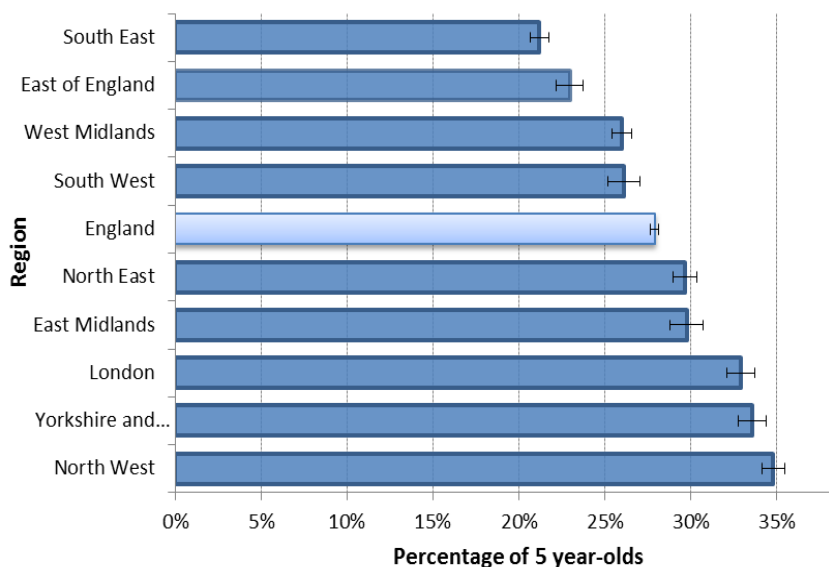


Decline in average number of decayed, missing or filled teeth, 12 year-old children, 1980-2006



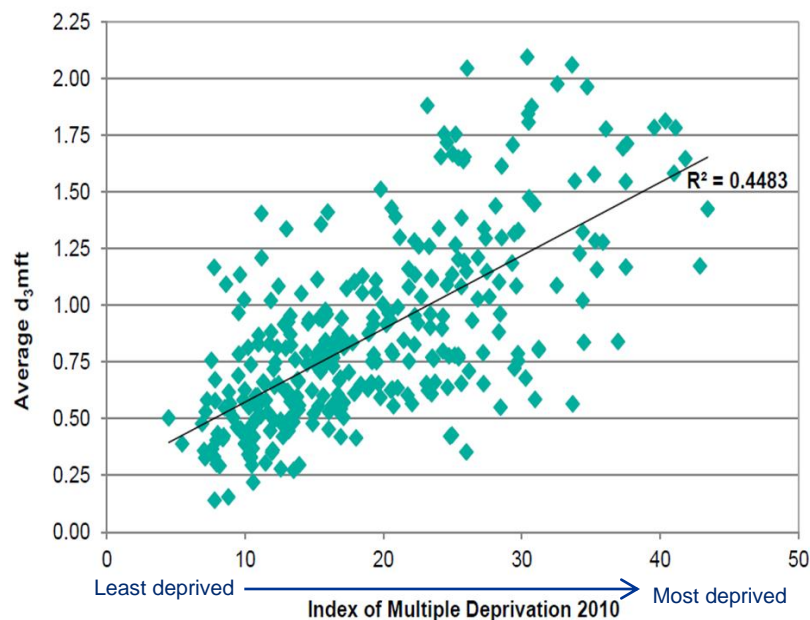
Regional and deprivation variations in children's dental health – a survey of 5 year-old children

Percentage of 5 year-old children with decay experience including 95% confidence limits, by Government Office Regions, 2012



There is regional variation in the prevalence of tooth decay in the 5 year olds surveyed.

Correlation between the rate of decay among 5 year-old children and deprivation score. Lower tier local authorities in England 2012

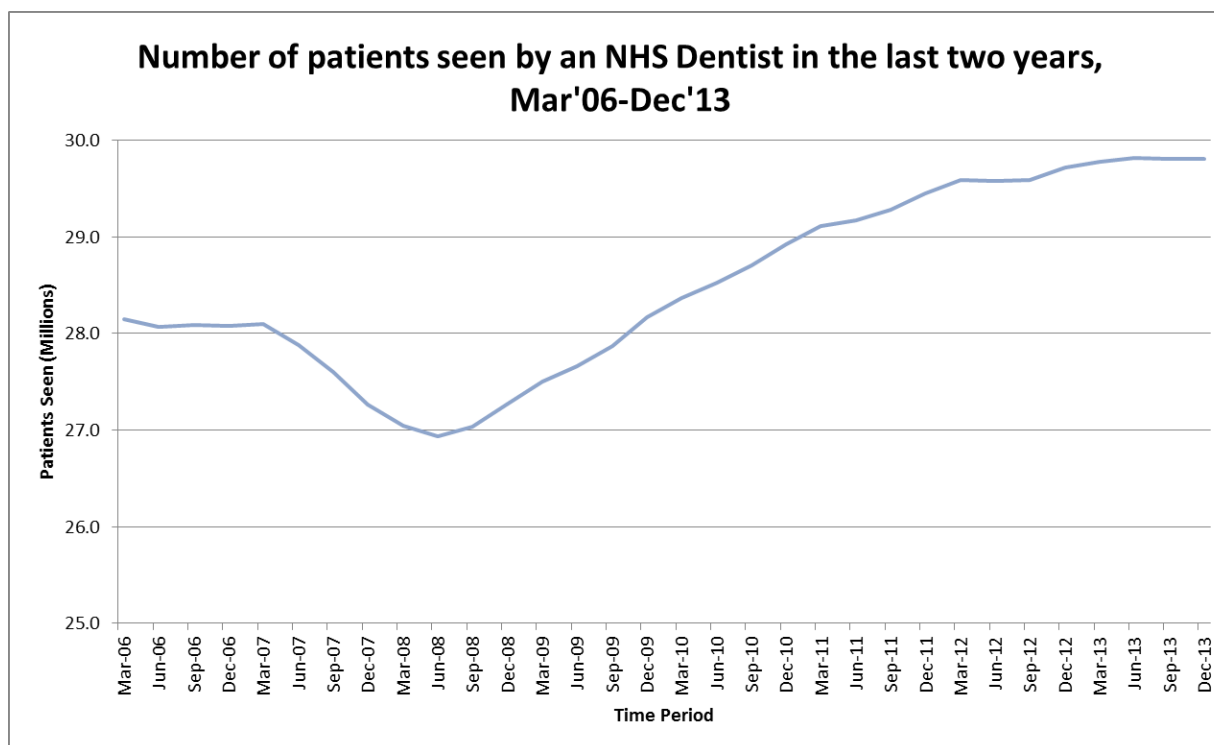


For those 5 year olds with decay, the extent of the decay correlates with deprivation. The more deprived the area the higher the rate of decay found in the 5 year olds surveyed.

Access



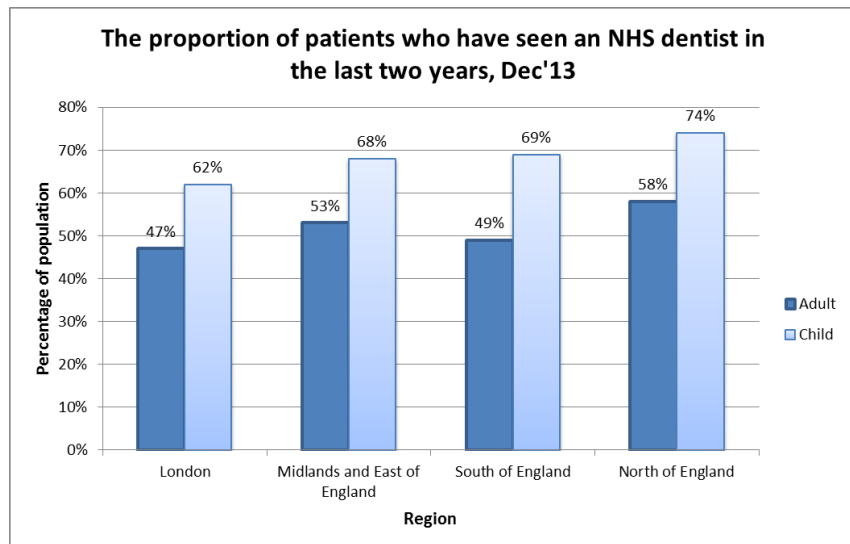
The number of patients accessing NHS dentistry has increased steadily since 2008, to 29.9 million patients in December 2013



Access is measured by the number of patients who have had visited an NHS dentist in the preceding two years.

This time period was chosen as NICE (National Institute of Clinical Excellence) guidelines recommended the public should visit the dentists at least once every two years.

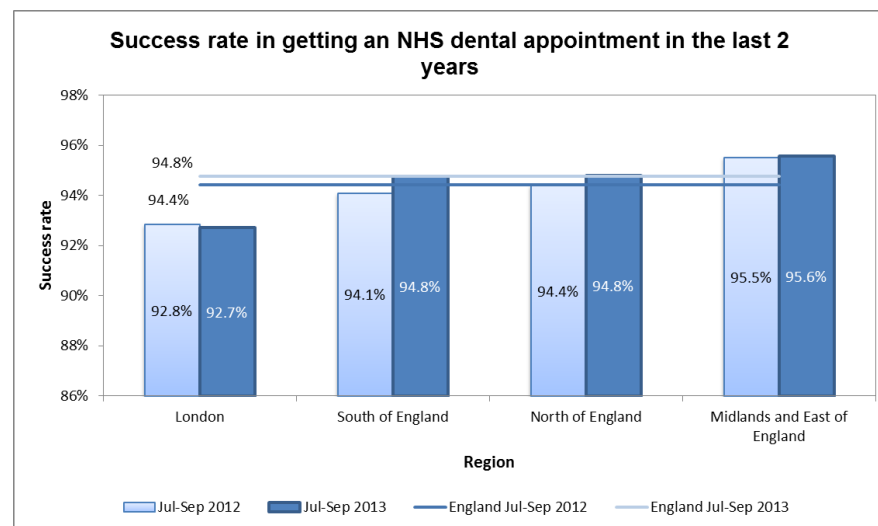
Regional variation in access to NHS dentistry



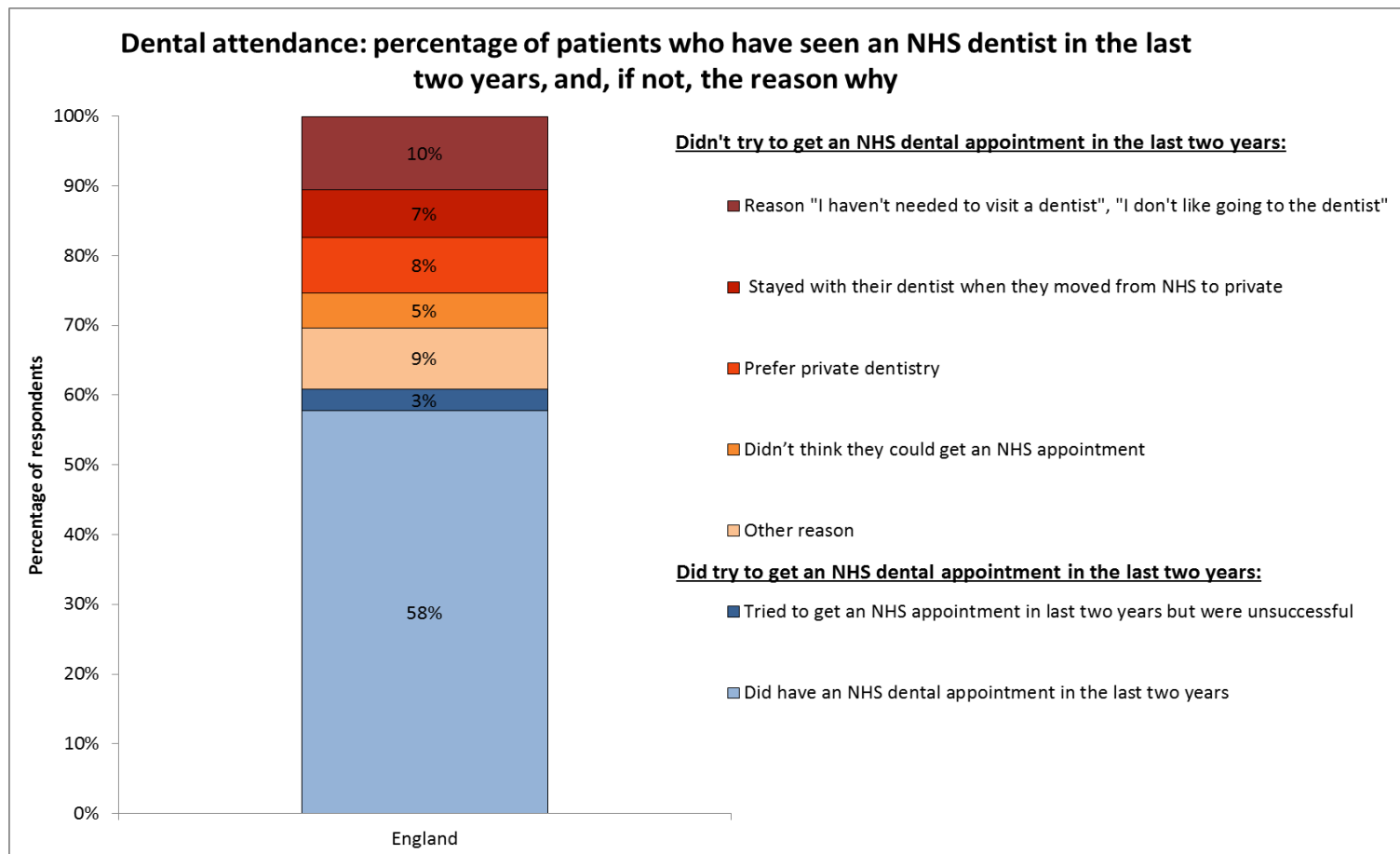
By Region, a higher proportion of the population see an NHS dentist in the North (for both children and adults), with the lowest levels found in London.

In England, 94.8% of adults who tried to get an NHS dental appointment in the last two years were successful.

There was little variation across regions, with all regions having a success rate above 92%.



Overall picture of dental attendance in England

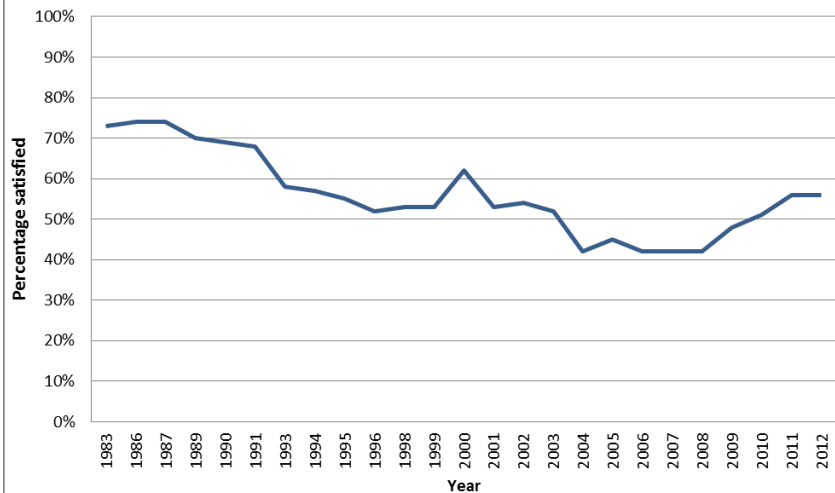


Patient experience



Trend of patient satisfaction with NHS dental services had been on the decline until 2009 and has since been increasing

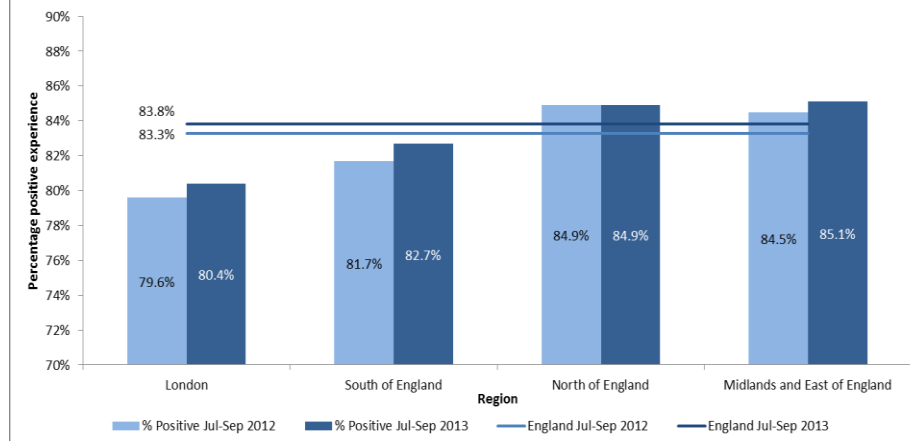
Percentage of respondents that were satisfied with NHS dentistry, according to their own experience or what they had heard



The British Attitudes Survey has asked about NHS dental satisfaction on/off since 1983. The most recent figure gives NHS dental satisfaction at 56% (based on their own experience or what they have heard).

More recently, the GP Patient Survey has asked adults who have tried to get an NHS dental appointment in the last two years about their experience of NHS dental services and 83.8% rated it as positive.

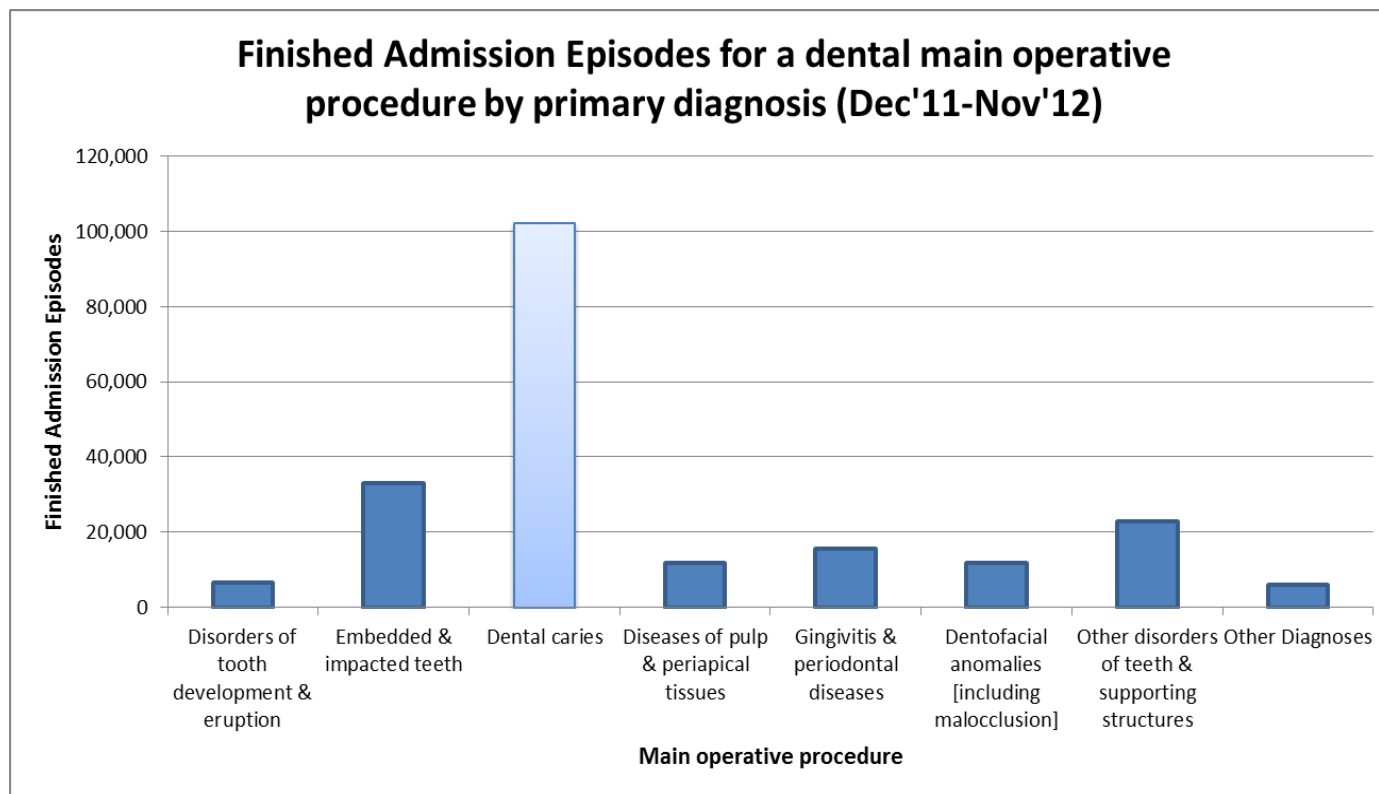
Percentage of respondents that tried to get an NHS dental appointment in the last two years and describes their experience as positive



Secondary care



Caries (tooth decay) is the main diagnosis for inpatient dental procedures taking place in secondary care³

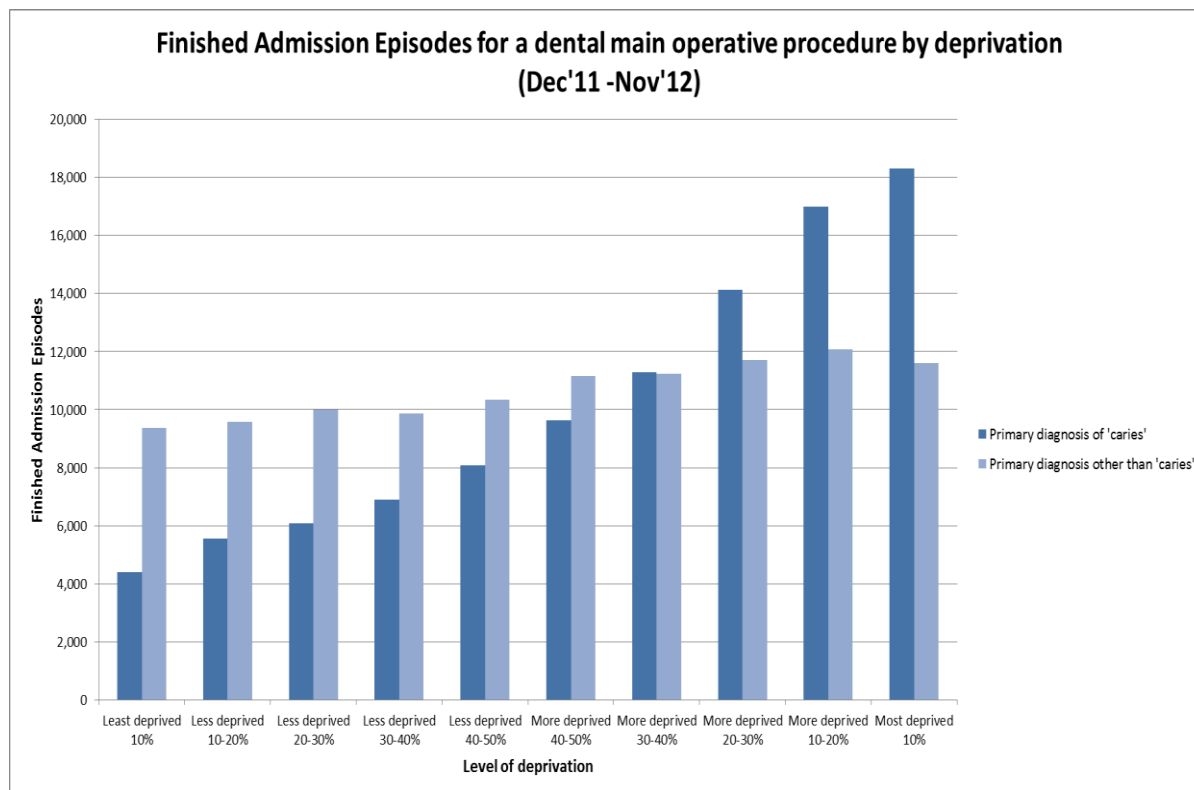


There were 209,874 finished admission episodes (FAEs) for which the primary operative procedure was dental in 2011-12.

Just under half of these FAEs were for caries (tooth decay).

A number of these inpatient caries treatments in secondary care, are when there is a necessity for general anaesthetic

Hospital inpatient admissions for dental caries (tooth decay) are higher for those from more deprived areas³



The number of 'dental caries' FAEs as a primary diagnosis increases along with increasing socio- economic deprivation.

Amongst the least deprived 10% of the population 31.9% of FAEs for dental procedures were due to 'caries', whereas amongst the most deprived 10% of the population 61.2% of FAEs for dental procedures were due to 'caries'.

Footnotes:

Slide 6 - Periodontal disease:

- Footnote 1: The definition of the periodontal categories:
 - **'Periodontally healthy'** is defined as no bleeding, no calculus, no periodontal pocketing of 4mm or more, and in the case of adults aged 55 or over, no loss of periodontal attachment of 4mm or more anywhere in their mouth.
 - **'Some periodontal disease present'** is defined as pocketing and loss of attachment of 4mm or more, around at least one tooth
- Footnote 2: For the 85 and over 'some periodontal disease present' category, as the sample size was so small these estimates are unreliable and analysis using these figures may be invalid.

Slide 18 & 19 - Secondary Care:

- Footnote 3: definition of secondary care terms used for this analysis:
 - **Inpatients:** Inpatients are patients who are admitted to hospital & occupy a bed, including both admissions where an overnight stay is planned and day cases.
 - **Finished admission episodes:** A finished admission episode (FAE) is the first period of inpatient care under one consultant within one healthcare provider. FAEs are counted against the year in which the admission episode finishes. Admissions do not represent the number of inpatients, as a person may have more than one admission within the year.
 - **Main Procedure Codes:** The following procedure codes have been used to identify the FAEs used in this topic of interest:
 - F08 - Implantation of tooth; F09 - Surgical removal of tooth; F10 - Simple extraction of tooth; F11 - Preprosthetic oral surgery; F12 - Surgery on apex of tooth; F13 - Restoration of tooth; F14 - Orthodontic operations; F15 - Other orthodontic operations; F16 - Other operations on tooth; F17 - Operations on teeth using dental crown or bridge; F63 - Insertion of dental prosthesis.

Sources used for this data pack

- **Adult Dental Health Survey 2009 (slides 5, 6 & 7):**
<http://www.hscic.gov.uk/pubs/dentalsurveyfullreport09>
- **National Dental Epidemiology Programme: 5 year old and 12 year old dmft surveys (slides 8 & 10):**
<http://www.nwph.net/dentalhealth/>
- **OECD International Comparison (slide 9):**
http://www.oecd-ilibrary.org/social-issues-migration-health/health-at-a-glance-2009/dental-health-among-children_health_glance-2009-12-en
- **GP Patient Survey Dental Results (slides 13, 14 & 16):**
<http://www.england.nhs.uk/statistics/category/statistics/gp-dental-statistics/>
- **Health and Social Care Information Centre (slides 12,13,18 & 19):**
 - **Number of patient seen by NHS dentist figures:** <http://www.hscic.gov.uk/searchcatalogue?productid=14185&returnid=1683>
 - **Secondary Care Inpatient Dental figures:** <http://www.hscic.gov.uk/catalogue/PUB10466/prov-mont-hes-admi-outp-ae-apr-nov-12-13-toi-rep.pdf>
- **British Attitudes Survey (slide 16):**
<http://www.bsa-29.natcen.ac.uk/read-the-report/health/satisfaction-with-the-nhs.aspx>