Classification: Official



Intermediate Minor Oral Surgery services in Nottinghamshire

Public Consultation Report

February 2022

Contents

Introduction	3
Intermediate Minor Oral Surgery	3
Background	3
Public Consultation	4
The Proposal	4
Respondents	6
Responses	8
Location	8
Travel and Transport	8
Premises	9
Service Provision	9
Conscious Sedation	10
Workforce	10
COVID-19	11
Current IMOS Services	11
Patient Survey	12
Other Themes	12
Consultation Process	13
Bassetlaw Engagement	14
Outcome	16
Appendix 1. Public Consultation Information	18

What are Intermediate Minor Oral Surgery Services?	. 18
Why is the consultation taking place?	. 19
What are the current IMOS services in Nottinghamshire?	. 19
What are the proposed IMOS services in Nottinghamshire?	. 19
What are the benefits of the proposed IMOS services?	. 21
What factors were considered in developing the proposed IMOS services?	. 21
Are the patient charges for the proposed IMOS services the same as for the current IMOS services?	. 22
How can I provide feedback?	. 22
Appendix 2. Bassetlaw Engagement Information	. 23
What are Intermediate Minor Oral Surgery Services?	. 23
Why is the engagement taking place?	. 24
What factors are being, or will be, considered in developing the new IMOS services?	. 24
Will the patient charges for the new IMOS services be the same as for the current IMOS services?	. 25
How can I provide feedback?	. 25
Appendix 3. Bassetlaw Engagement Poster	

Introduction

Intermediate Minor Oral Surgery

Oral surgery is surgical treatment in the mouth. This includes the removal of teeth. Most oral surgery is undertaken in general dental practices, although some patients are referred elsewhere for treatment. The most complex oral surgery is undertaken in hospitals. Sometimes the treatment required is beyond the remit of a general dental practice, but not sufficiently complex to be undertaken in a hospital. In these instances, treatment may be undertaken by an Intermediate Minor Oral Surgery (IMOS) service.

IMOS services treat patients aged 16 years and over who are referred by their regular dentist for specific oral surgery treatment. Sometimes this involves conscious sedation, which is the use of medication to help patients to relax during treatment. When the treatment has been undertaken, patients return to their regular dentist for ongoing care. IMOS services do not offer general dental services or treatment for children.

Background

The contractual arrangements for the current IMOS services in Nottinghamshire will soon end, along with those for the other IMOS services across the East Midlands. These contracts are time-limited and cannot be extended. New IMOS services are being developed to meet Nottinghamshire's current and future needs, with the views of stakeholders playing an integral part in this process.

An online engagement exercise for IMOS patients, the public and dental professionals was undertaken in mid-2021. This was followed by a market engagement exercise for current and potential IMOS service providers. These jointly constituted the first stage of the consultation process on the new IMOS services. A proposal for the new services was subsequently developed, informed by a needs assessment.

Public Consultation

A public consultation was undertaken to capture feedback on the proposal for the new services, forming the second stage of the process. The consultation ran from 23 November 2021 to 21 December 2021, with responses to the questions submitted via a dedicated online portal. The information and questions were also available in alternative formats on request.

The public consultation was promoted via the following channels:

- 1. NHS England and NHS Improvement consultation website
- 2. NHS England and NHS Improvement consultation App
- 3. NHS England and NHS Improvement Twitter feed
- 4. Patients referred to an IMOS service in Nottinghamshire; 20% of recently referred patients were invited to participate using the contact details associated with their referral. This was deemed a sufficient proportion of patients to constitute a representative sample
- 5. Primary care dental bulletin
- 6. Local Dental Network bulletin
- 7. E-mail to dental professionals, with QR code links to the public consultation
- 8. Dental professional webinar
- Engagement sessions for Integrated Care System and Clinical Commissioning Group representatives

A number of stakeholders also cascaded the details of the consultation to maximise its reach.

The Proposal

The proposal was for IMOS services to operate from two locations in Nottinghamshire:

1. Nottingham

2. Mansfield

The detail of the proposal is in Appendix 1.

Respondents

A total of 25 responses were received (Table 1, Table 2, Table 3, Table 4).

Table 1. Respondent type

	Number
Patient	5
Member of the public	3
Carer	0
Dental professional	15
Non-dental healthcare professional	0
Voluntary sector representative	0
Other	2
Prefer not to say	0
Not answered	0
Total	25

Table 2. Sex of respondents

	Number
Female	15
Male	9
Non-Binary	0
Prefer not to describe myself	0
Prefer not to say	1
Not answered	0
Total	25

Table 3. Age of respondents

	Number
16 - 24	1
25 - 34	0
35 - 59	18
60 - 74	2
75+	2
Prefer not to say	2
Not answered	0
Total	25

Table 4. Disability status of respondents

	Number
Yes	1
No	23
Prefer not to say	0
Not answered	1
Total	25

Responses

The responses received were analysed thematically under the headings below, alongside selected quotations pertinent to the themes. The quotations are verbatim, although in some instances they do not represent entire responses in the interests of brevity and the preservation of respondent anonymity.

Location

Nottingham and Mansfield featured in a number of responses. Some respondents felt these proposed locations would work well, while others remarked on the lack of patient and referrer choice they would confer. It was suggested that the north of the county was underserved, with Ollerton proposed as an alternative location to Mansfield.

"The proposed changes are an excellent idea"

"Offering several sites across the city would allow patients choice in terms of convenience of location for them as well as provider."

"Better coverage for the whole of Nottinghamshire not just central and south"

"I don't think the north of the county will be very well provided for by having Centre at Mansfield. Mansfield residents have very good transport services to Nottingham. Maybe Ollerton would be better able to serve the north."

Travel and Transport

Some respondents stated that the majority of IMOS patients would access services by car and therefore the proximity of services to public transport was not relevant. Others felt it would be sensible to have good public transport links. It was highlighted that the proposed locations would result in increased travel for most patients, leading to inconvenience and higher costs. It was also expressed that some patients may be reluctant to travel long distances. The availability and cost of parking was raised, with its importance for those receiving treatment under conscious sedation given particular mention. "Most people don't use the train. Why base it near the train station?"

"Regarding location, it makes sense for the premises to have good public transport links and ideally good parking too."

"will mean increase travel for the majority of service users resulting in increased cost and inconvenience"

"a few extra kilometres should not make a difference to convenience on any practical level"

Premises

Some respondents were concerned that there may be a lack of premises able to accommodate the IMOS services, considering the capacity required. The cost of suitable premises was also cited as a concern.

"I am concerned that larger premises will be required and this will severely restrict the number of practices that could accommodate this rationalised service."

"acquiring suitable locations in this area is difficult and expensive as a large facility will be necessary to accommodate the work load"

Service Provision

Service capacity was mentioned in several responses, with respect to waiting times and the accommodation of patients with post-treatment complications. Making appointments available early in the morning, in the evening and at weekends, was suggested.

It was felt the proposed service model could monopolise the market, in turn compromising resilience and quality of care. Conversely it was expressed that it could facilitate greater investment than the current service model. *"If they developed a complication - national average rate of dry socket is 10% - then this would need to be fitted into an already tight schedule."*

"Appointment flexibility to meet the needs of the patient i.e. early morning, evening, weekend"

"There is potential risk that a monopoly providing the service will have less accountability in terms of quality of care to patients."

"Having fewer, larger services may facilitate more investment in each service"

Conscious Sedation

Consolidating the provision of conscious sedation for IMOS treatment to a smaller number of locations was welcomed. The importance of appropriate infrastructure to support the delivery of conscious sedation, including parking and recovery facilities, was mentioned.

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"It would be a benefit to centralise sedation services to a few dedicated centres."
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"I agree that rationalising the service is required and that there are many advantages associated with having a reduced number of locations(better for providing sedation, training and monitoring purposes."

"The site would need adequate parking and recovery for the sedation cases."

Workforce

Workforce featured in several responses. Concerns included potential recruitment issues, a limited choice of employers and the scope for skilled IMOS staff to be lost. While the option to engage temporary staff to cover periods of absence was presented, the impact of this on the continuity of care was cited.

With regard to training opportunities, the proposed model was viewed both as supportive and problematic.

"performers would have less choice of workplace/employer, meaning there may be loss of skilled surgeons from the service"

"ensure daily service provision with bank staff covering internal sickness, holidays, maternity leave"

"performers "parachuted in" would not have the same commitment to continuity of care"

"Fewer providers would result in reduced training opportunities."

COVID-19

It was acknowledged that the COVID-19 pandemic had stretched the current IMOS services, leading to increased waiting times for treatment. However, the efforts of the existing providers in addressing this were well received.

"covid pressures have tested the resilience of the service and that waiting lists have increased"

"The current service is recovering from COVID well within Notts. This is due to the hard work of all of the current providers to drive down wait times."

Current IMOS Services

A number of responses referenced the current IMOS services. These included positive feedback and the issue of internal patient referrals.

"There are many well set up and experienced IMOS clinics currently offering an excellent service to patients"

"The proposal would stop the practice of disproportionate self-referral internally at existing IMOS locations."

Patient Survey

The results of a survey of 86 IMOS patients were detailed. The reported level of patient satisfaction was very high, although the supporting text stated that the survey pertained to Lincolnshire rather than Nottinghamshire.

Other Themes

Some responses focussed on describing the merits of particular premises that they felt would be suitable from which to operate IMOS services. The financial and contractual elements of service provision also featured. These topics were not relevant to the consultation.

Consultation Process

Most respondents commented on the consultation process. Some stated how they learnt of the consultation: e-mail, an online presentation, an engagement exercise, a Teams meeting, and a chance finding were mentioned. Some felt that the consultation was not widely publicised or that further consultation was required.

It was shared that the consultation process had been informative and a willingness to remain abreast of the feedback was communicated. In contrast it was stated that some stakeholders expected to receive information on the consultation, or an opportunity to provide input to the proposal, prior to public release.

Hope was expressed that feedback from the current IMOS workforce would be taken into account.

Selected quotations from the comments on the consultation process are included below. They are verbatim, but as with the quotations above some have been shortened in the interests of brevity and anonymity.

"I have been consulted via Market Engagement Event, Consultation, Teams Meeting and Email. The information provided has been informative, and it would be useful to be abreast of the feedback provided"

"Consultation doesn't appear to be widely publicised"

"I would hope the commissioners would take into account the views of the extremely experienced clinicians (performers as well as providers) who are currently providing the service."

Bassetlaw Engagement

On 1 July 2022¹ the geographic structure of the NHS will change. This change will transfer the responsibility for the commissioning of dental services in Bassetlaw from NHS North East and Yorkshire, to NHS Midlands. On account of the change, an IMOS engagement was undertaken in Bassetlaw from Thursday 3 February 2022 to Monday 14 February 2022. Its purpose was to capture views on the future delivery of IMOS services for Bassetlaw from those in the district.

The engagement consisted of information and a series of questions. It was available online, with a poster advertising the link and QR code circulated electronically to stakeholders for dissemination. The detail of these materials is in Appendix 2 and Appendix 3. Printed copies of the poster, and the information and questions, were delivered to dental practices identified by Doncaster and Bassetlaw Local Dental Committee. These practices were subsequently visited on closure of the engagement to facilitate the retrieval of responses.

A total of 10 responses were received, covering a range of themes. These included dissatisfaction with the requirement to travel outside of Bassetlaw for IMOS treatment and the difficulty associated with undertaking this journey by public transport. There was a clear preference for an IMOS service in Bassetlaw and both Worksop and Retford were proposed as locations.

It was acknowledged that there were previously issues with the IMOS referral process and that these had since been resolved. Current waiting times were highlighted as a problem, although satisfaction was expressed with the current services and their reliability was noted. The scope for future IMOS services to provide emergency appointments and advice via e-mail was considered important.

Selected quotations from responses to the engagement are presented below. These are verbatim, although in the interests of brevity and anonymity some have been redacted.

¹ The date included in the engagement information was 1 April 2022, based on a previous timescale

"I feel the main problems are: 1. Waiting lists and the time taken to deal with patients who may be in pain, 2. The distance patients have to travel."

"It would be better if there was an IMOS service in either Retford or Worksop"

"Current waiting lists are far too long particular when patients are in discomfort and pain. Patients in Bassetlaw are currently travelling to far to access services particularly those reliant on public transport, who have to use 3 + changes."

"A worry with Bassetlaw joining a new area is that a service will not be located within the Bassetlaw area. Due to difficult transport links to other areas it is vital that a service is located in Bassetlaw after the switch. This should ideally be located in Worksop or Retford as these have the best transport links."

"Needs to have ability to email for advice and also scope in the system for emergency appointments."

Outcome

NHS England and NHS Improvement express their gratitude to all of the respondents to the public consultation on IMOS services in Nottinghamshire. The insight demonstrated in the responses was of great value, as was the range of themes considered.

The proposal in the public consultation was designed to align IMOS service provision with Nottinghamshire's current and future population and its oral health needs, as identified by a needs assessment. While the proposal was deemed clinically, logistically, and financially viable, there were clear benefits to developing an alternative model based on the consultation feedback and the Bassetlaw engagement.

The alternative model reflects the consultation feedback and Bassetlaw engagement responses. It remains aligned with current and future needs and demonstrates clinical, logistical and financial viability. Within the alternative model, IMOS services would operate from four locations in Nottinghamshire:

- 1. Nottingham West
- 2. Nottingham East
- 3. Mansfield
- 4. Worksop

With respect to waiting times, Nottingham's projected population growth has been used to model future IMOS service capacity. The number of appointments will be increased, to ensure provision is adequate and that patients receive treatment within 18 weeks of referral.

Regarding concerns about the cost of travel, patients on low incomes who incur travel costs when accessing IMOS services can claim reimbursement through the Healthcare Travel Costs Scheme (HTCS)². The HCTS reimburses the cost of public transport, fuel, parking, taxi fares (where agreed in advance) and travel costs for

² https://www.nhs.uk/nhs-services/help-with-health-costs/healthcare-travel-costs-scheme-htcs/

escorts where it is medically necessary for patients to be accompanied. In response to feedback, NHS England and NHS Improvement will work on increasing awareness of the HCTS, so the cost of travel does not restrict access to IMOS services.

The National Health Service (Procurement, Patient Choice and Competition) (No. 2) Regulations 2013³ detail the requirements that the NHS must comply with in the commissioning of services. Developing a service model in a fair and transparent way, that ensures quality and efficiency, is central to the process. Based on this premise, a comprehensive review of all relevant factors, and the necessary governance processes and approvals, it has been decided to proceed with the alternative IMOS service model outlined above.

It is anticipated the new IMOS services in Nottinghamshire will be operational and treating patients from April 2023.

³ https://www.legislation.gov.uk/uksi/2013/500/contents/made

Appendix 1. Public Consultation Information

Have your say on Intermediate Minor Oral Surgery services in Nottinghamshire

Public Consultation

What are Intermediate Minor Oral Surgery Services?

Oral surgery is surgical treatment in the mouth. This includes the removal of teeth. Most oral surgery is undertaken in general dental practices, although some patients are referred elsewhere for treatment. The most complex oral surgery is undertaken in hospitals. Sometimes the treatment required is beyond the remit of a general dental practice, but not sufficiently complex to be undertaken in a hospital. In these instances, treatment may be undertaken by an Intermediate Minor Oral Surgery (IMOS) service.

IMOS services treat patients aged 16 years and over who are referred by their regular dentist for specific oral surgery treatment. Sometimes this involves conscious sedation, which is the use of medication to help patients to relax during treatment. When the treatment has been undertaken, patients return to their regular dentist for ongoing care. IMOS services do not offer general dental services or treatment for children.

Why is the consultation taking place?

The contractual arrangements for the current IMOS services in Nottinghamshire will soon end, along with those for the other IMOS services across the East Midlands. These services were established in 2017 when Nottinghamshire's population and its oral health needs were different to those today. New IMOS services are being developed to meet Nottinghamshire's current and future needs. Feedback on the proposed changes is important and this consultation is your opportunity to share your views.

What are the current IMOS services in Nottinghamshire?

The current IMOS services operate from nine locations in Nottinghamshire:

- 1. Five locations in Nottingham
- 2. Carlton
- 3. West Bridgford
- 4. Keyworth
- 5. Mansfield

What are the proposed IMOS services in Nottinghamshire?

The proposed IMOS services would operate from two locations in Nottinghamshire:

- 1. Nottingham
- 2. Mansfield

The map below shows these proposed locations and off-peak journey times by car. The proposal is for the service to be located no more than 2.5km (1.55 miles), as the crow flies, from the main railway station at each proposed location.





Off peak journey time by car, in minutes, from the proposed IMOS service locations

What are the benefits of the proposed IMOS services?

- All locations will be accessible by car, train and bus
- Choice of appointment times will be improved
- Treatment will be undertaken within 18 weeks of referral
- Conscious sedation will be available at all locations
- Scope for managing complications following treatment will be improved
- Service resilience will be improved

What factors were considered in developing the proposed IMOS services?

A broad range of factors were considered, to ensure the proposed services meet Nottinghamshire's current and future oral health needs. These included:

- Population and projected population growth, to ensure sufficient service capacity
- Population oral health, to align service locations with the areas where oral health is poorest and the need for services is greatest
- Deprivation, as those living in deprivation have the poorest general health and oral health and the greatest need for treatment
- Ethnicity, on account of differences in general health and oral health between ethnic groups
- Travel time by car, train and bus, for accessibility
- Current IMOS service usage, to identify areas from which patient numbers are lower than expected
- Feedback from previous IMOS engagement exercises, to incorporate the views of those who engaged

- Guidance on the commissioning of oral surgery services, to ensure best practice is adopted
- Financial provision, so that best use may be made of all available funding

Are the patient charges for the proposed IMOS services the same as for the current IMOS services?

Yes. The standard NHS charge for assessment and oral surgery treatment will apply. This is currently £65.20. There will continue to be no charge for patients who are exempt from patient charges.

How can I provide feedback?

By clicking the link below, you will be directed to a series of questions. All feedback is important, and it will be analysed and shared after the consultation closes.

If you have a query, or if you require the information or questions in an alternative format, please contact <u>england.em-dentalengage@nhs.net</u>.

Appendix 2. Bassetlaw Engagement Information

Have your say on Intermediate Minor Oral Surgery services for Bassetlaw

Engagement

The engagement will close on 14 February 2022

What are Intermediate Minor Oral Surgery Services?

Oral surgery is surgical treatment in the mouth. This includes the removal of teeth. Most oral surgery is undertaken in general dental practices, although some patients are referred elsewhere for treatment. The most complex oral surgery is undertaken in hospitals. Sometimes the treatment required is beyond the remit of a general dental practice, but not sufficiently complex to be undertaken in a hospital. In these instances, treatment may be undertaken by an Intermediate Minor Oral Surgery (IMOS) service.

IMOS services treat patients aged 16 years and over who are referred by their regular dentist for specific oral surgery treatment. Sometimes this involves conscious sedation, which is the use of medication to help patients to relax during treatment. When the treatment has been undertaken, patients return to their regular dentist for ongoing care. IMOS services do not offer general dental services or treatment for children.

There are currently no IMOS services in Bassetlaw. Some patients from Bassetlaw use the IMOS service in Gainsborough, Lincolnshire. Others use IMOS services elsewhere in the East Midlands and South Yorkshire.

Why is the engagement taking place?

The contractual arrangements for the current IMOS services in the East Midlands and South Yorkshire will soon end. These services were established when the population and its oral health needs were different to those today. How the NHS is organised is also changing. Bassetlaw will become part of the Midlands region on 1 April 2022, when the responsibility for its NHS services will transfer from South Yorkshire.

A public consultation on the future provision of IMOS services in the East Midlands was undertaken in late 2021 and the feedback is currently being analysed. In light of the forthcoming transfer of NHS services in Bassetlaw to the Midlands region, this engagement is being held.

Your feedback is important. This engagement process is your opportunity to share your views on the future provision of IMOS services for Bassetlaw.

What factors are being, or will be, considered in developing the new IMOS services?

A broad range of factors are being considered, to ensure the new services meet Bassetlaw's current and future oral health needs. These include:

- Population and projected population growth, to ensure sufficient service capacity
- Population oral health, as poor oral health increases the need for treatment
- Deprivation, as those living in deprivation have the poorest general health and oral health
- Ethnicity, on account of differences in general health and oral health between ethnic groups

- Travel time by car, train and bus, for accessibility
- Current IMOS service usage
- Guidance on the commissioning of oral surgery services, to ensure best practice is adopted
- Financial provision, so that best use may be made of all available funding
- Feedback from previous IMOS public consultation and engagement exercises
- Feedback submitted in response to this engagement

Will the patient charges for the new IMOS services be the same as for the current IMOS services?

Yes. The standard NHS charge for assessment and oral surgery treatment will apply. This is currently £65.20. There will continue to be no charge for patients who are exempt from patient charges.

How can I provide feedback?

By sharing your views below. All feedback is important, and it will be analysed and shared after the engagement closes.

If you have a query, or if you require the information or questions in an alternative format, please contact <u>england.em-dentalengage@nhs.net</u>.

Appendix 3. Bassetlaw Engagement Poster

Have your say on Intermediate Minor Oral Surgery Services for Bassetlaw

Please scan the QR code or follow the link below to access information and leave feedback on Minor Oral Surgery services for Bassetlaw. The engagement closes on 14 February 2022.



https://forms.office.com/r/t3wJnNsmHK

All feedback is important, and it will be analysed and shared after the engagement closes.

If you have a query, or if you require the information or questions in an alternative format, please contact <u>england.em-dentalengage@nhs.net</u>.