

Special Care Adult and Paediatric Dental Services South East Engagement Report



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1. Background

NHS England is responsible for directly commissioning Special Care and Paediatric Dental Services. This includes a wide range of services relating to the provision of dental services for both children and adults unable to attend mandatory dental services due to having additional needs. These may relate to physical or learning disabilities or may be where a patient needs enhanced support to receive treatment.

Contracts to provide Special Care and Paediatric Dental Services in the South East of England are due to expire on 31st March 2022.

In advance of commissioning new services we gained feedback from patients, the public and a wide range of stakeholders to consider how services procured can best meet the needs of patients.

There are currently eight contracts in place to provide Special Care and Paediatric Dental Services in the South East. These contracts were due to end on 31st March 2021. Due to the COVID pandemic the recommissioning of services was paused for so existing arrangements have now been extended to 31st March 2022. The existing contracts are valued at around £40m.

Public Health England carried out a needs assessment to help identify existing and anticipated need for the services as well as feedback on existing services from the public and organisations supporting different patient groups who use these dental services. A summary of public feedback is included in this report. This has been used alongside feedback from patients, stakeholders and the profession to influence service design before inviting tenders for the new contracts.

2. Engagement summary

We gained views from patients and carers through an online survey and a hard copy survey in easy-read format. We asked questions about waiting times, the distances people were prepared to travel and the time and day of appointments and have considered these responses to help inform the procurement.

We also provided a phone number for patients and carers to call if they wanted a hard copy sending out to them or to provide their views by phone.

The survey included multiple choice questions which could be easily compared across different areas e.g. how far people currently travel to special care and paediatric appointments, how they get there and what times of the day and week they would like to have appointments. There were also opportunities for respondents to include free text comments about these dental services. The easy-read survey was simplified to ask patients what they thought was good or could be improved with the service.

The survey ran from 20 June to 5 August 2019.

We also asked for feedback from the following stakeholders across the South East of England:

- Local dental committees
- Local dental networks
- Managed orthodontic clinical networks
- Health Education England
- Health overview and scrutiny committees
- Health and wellbeing boards
- Healthwatch organisations
- Directors of Public Health
- Acute trusts
- STP/ICS leaders
- CCGs
- MPs

We gained views from the existing Special Care and Paediatric Dental service workforce as well as from general dental providers referring patients to the service.

A number of market briefing events were put in place giving the profession an opportunity to provide feedback as well as to hear more about the proposed procurement. Feedback from these events has also been considered in finalising details of the procurement.

3. Patient feedback and actions taken

In total 480 patients and carers provided feedback, 223 of these completed the online survey and 257 people completed the easy-read hard copy survey.

3.1. Easy-read survey

An easy-read survey was produced so that patients to make it easier for some patients to put forward their views.

Through this survey patients commented on what they thought was good about the current service, what they didn't like, what could be improved and a space was also provided to put forward any other comments on the service.

What is good

In response to the question asking what is good about special care or paediatric dental services patients said that they receive good treatment, their needs are understood, there is clear communication with them, they are given extra time for appointments and the services are caring and friendly.

What don't you like about this service

When asked what they didn't like about these dental services patients said that waiting times were too long between being referred and getting an appointment, that they are afraid of going to the dentist (fear in general, sharp tools and people getting too close), that it is painful, the lack of suitable facilities (e.g. bariatric chair and wheelchair facilities) and also didn't like some elements of the environment (such as smells, noises and heat).

What can be improved

Patients said they'd like a shorter wait between being referred for treatment from the service and getting an appointment, they'd like there to be less pain, to have facilities in place for their needs (e.g. wheelchair hoist) and that they'd like improvements to the environment including toys, music, a better smell and air conditioning.

Other

Patients were also able to provide comments on any other aspect of the service. Common themes raised were around being able to build a relationship with the dentist/dental staff and having bariatric and wheelchair facilities. A number of people were also keen to say that they value the service and don't want to lose it.

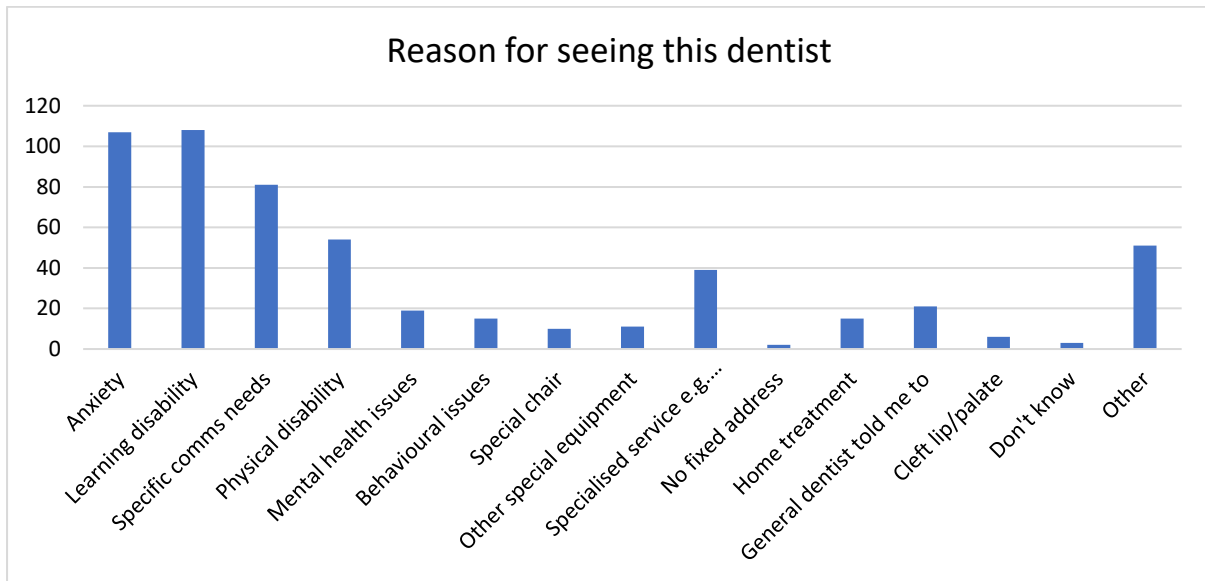
3.2. Online survey

The online survey was completed by 233 people across the South East.

Patients, carers and members of the public were able to complete the survey. The majority of respondents identified the dentist they saw as being a Special Care or Community dental service.

Patients were asked to answer a number of multiple choice questions but were also given the opportunity to provide comments. We received feedback on the following areas:

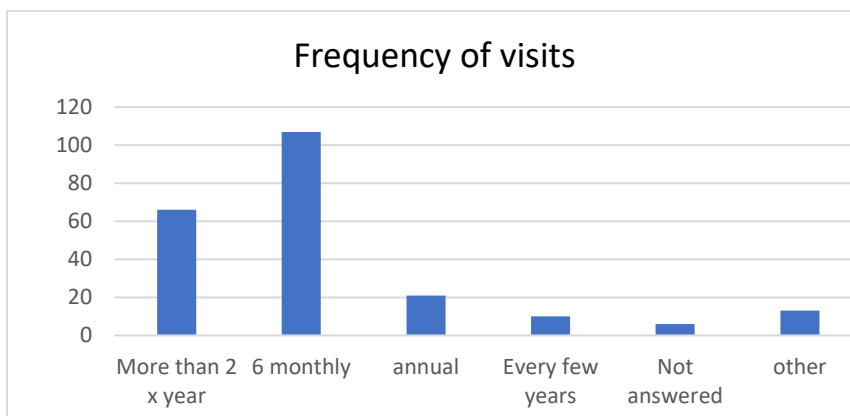
3.2.1. Reason for seeing this type of dentist



People were asked why they saw a special care or paediatric dentist. The main reason given was due to having a learning disability (108 people) closely followed by having high levels of anxiety (107).

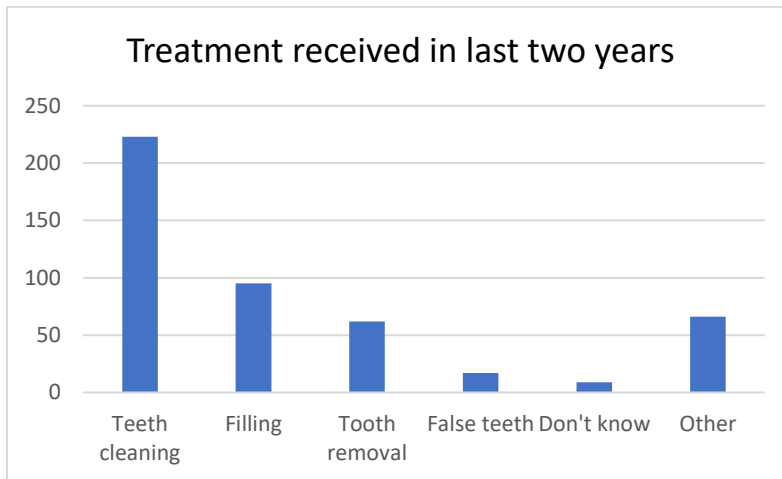
Many people cited more than one reason for seeing this type of dentist, for example, having high anxiety as well as having a learning disability or mental health issues. Only four people stated anxiety alone as the reason for seeing this type of dentist.

3.2.2. Frequency of visits



There was a high frequency of seeing the dentist with 78% of people having seen their dentist at least twice in the last year. For many people this was for a check-up which would be reflected in the number of six-monthly visits but a significant number of people had seen their dentist more than twice in the last year.

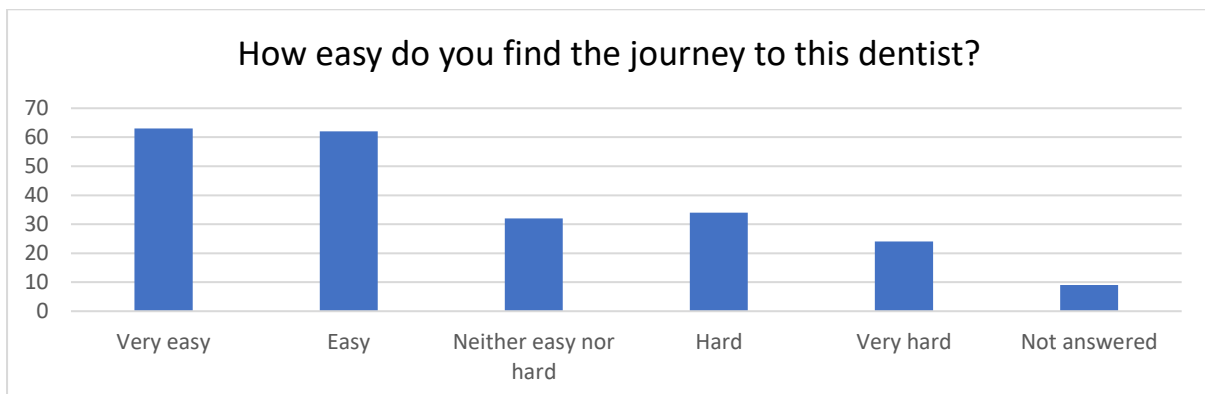
3.2.3. Reason for visit



All respondents had their teeth cleaned on dental visits which is likely to have been part of a routine check-up but a large number of people (28%) had a tooth removed or had a filling (43%).

3.2.4. Ease of travel to appointments

People were asked how easy they found their journey to the dentist.

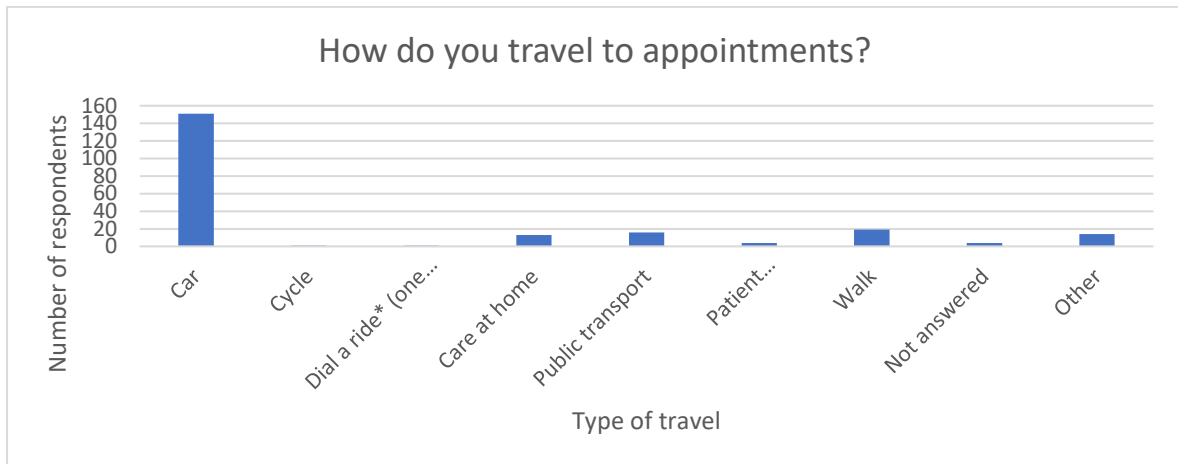


26% of people said they found the journey to the dentist either hard or very hard. The reasons given for this were often about the patients' condition and behaviour e.g. autism/dementia and high anxiety making any travel difficult rather than the actual means of transport to get there.

Some people stated they had mobility issues and needed a taxi or wheelchair, this highlights the need to ensure all practices are accessible.

A few respondents mentioned parking difficulties and poor public transport but this was not a commonly made comment.

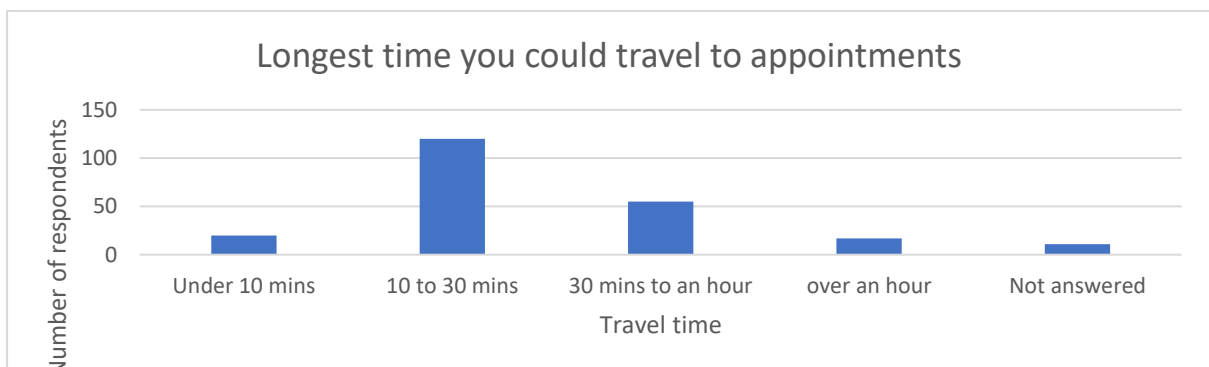
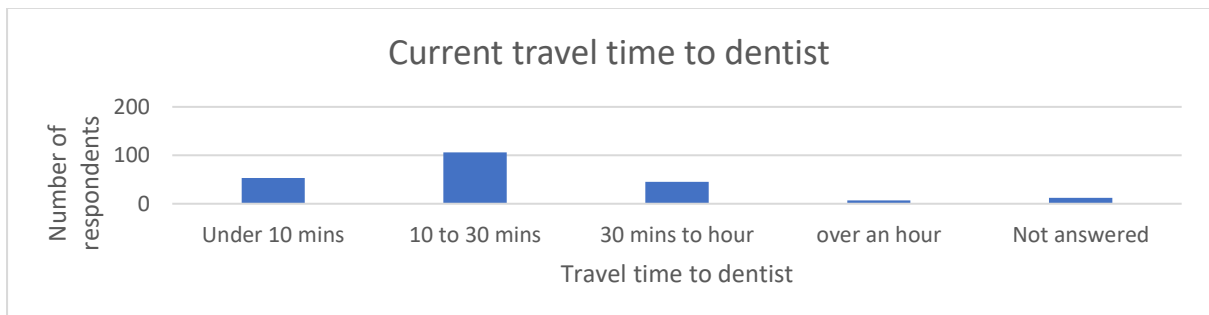
3.2.5. Type of travel



68% of respondents said that they travel to appointments by car, 9% walk, 7% use public transport and 6% have care at home. Other methods of transport used included by wheelchair and by taxi.

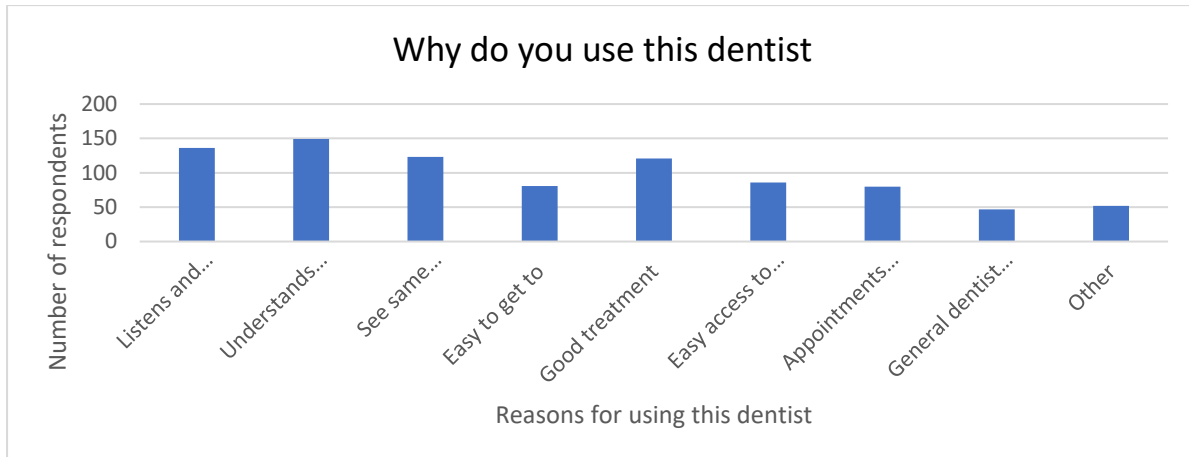
3.2.6. Travel times

People were asked what their current travel time is to appointments and how long they would be prepared to travel to get this specialist care.



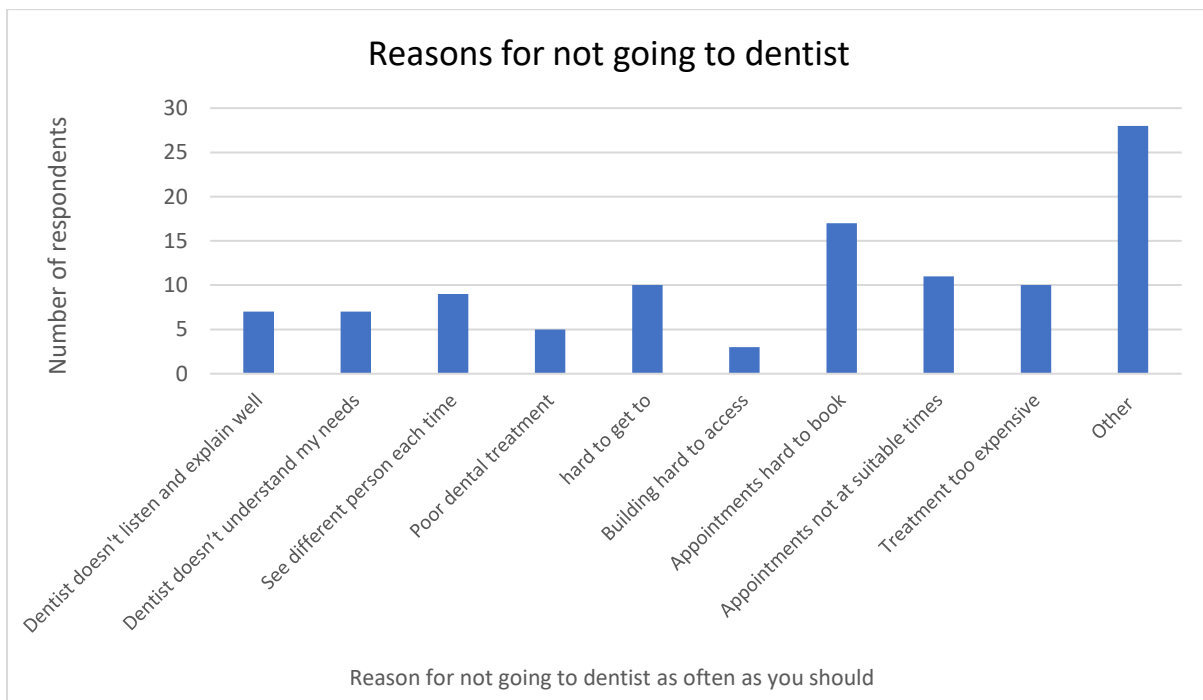
91% of people currently travel for less than an hour to get to appointments, this figure did not change significantly when asked how long people would be prepared to travel for appointments. For most people the journey time is between ten and thirty minutes. On the whole people did not find their journey time to be unacceptable.

3.2.7. Reasons for using this dentist



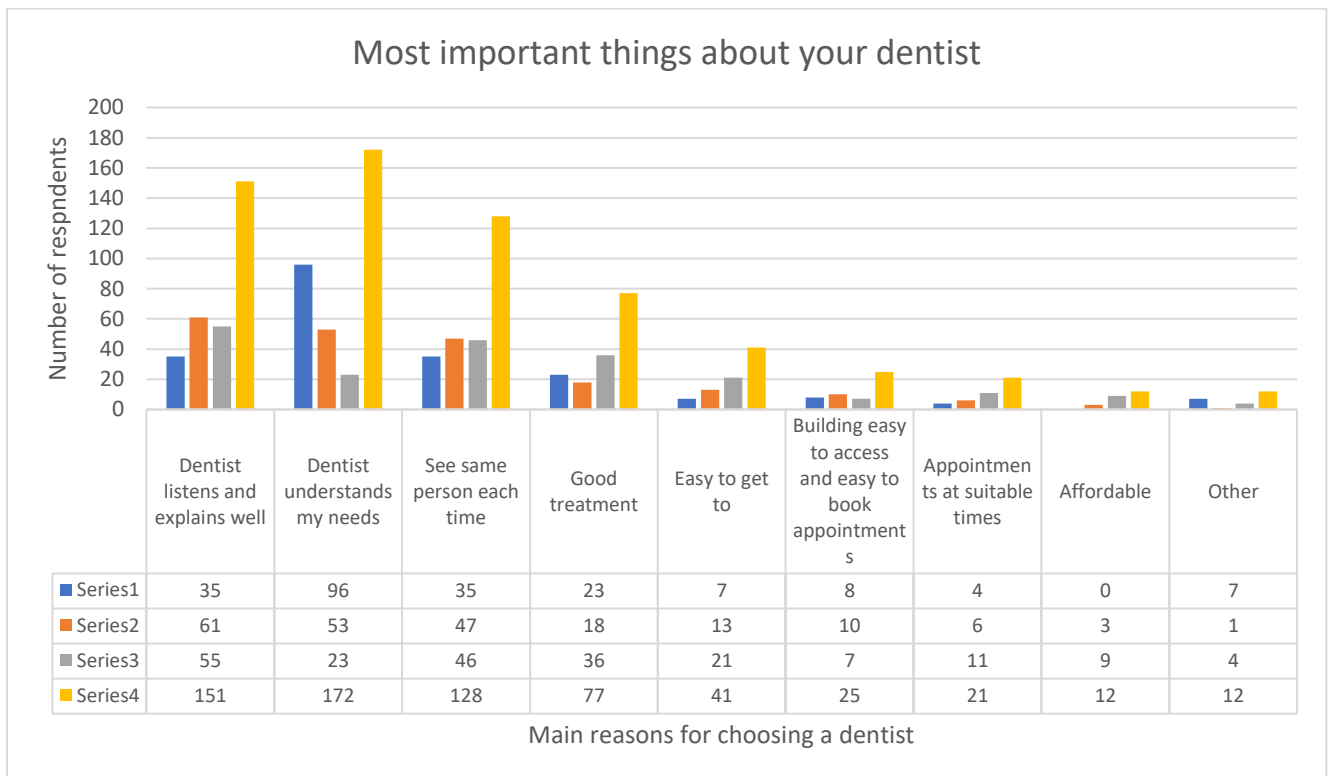
Reasons for using this particular dentist were due to them understanding the patient's needs, listening and explaining well, seeing the same person each time and receiving good treatment. A number of people provided positive feedback on the care and treatment received from their current dentist.

3.2.8. Reasons for not going to the dentist



People were asked why they don't go to the dentist as often as they should. Less than half of respondents answered this question suggesting that most go to the dentist regularly. Twenty-eight people answered the question with the main reasons for not going to the dentist being the difficulties associated with behavioural and anxiety issues as well as some people saying they had difficulty with the lack of flexibility and being able to rearrange appointments.

3.2.9. What is most important to you about going to the dentist



Respondents were able to select their top three things that are most important to them when seeing a dentist. Series 1 on the graph shows the number of people who selected this reason as their number one choice, series two shows where this was chosen as the second most important reason and series 3 shows the third most important reason. The final column on the graph (series 4) is a cumulative figure for all people who selected this reason in their top three choices.

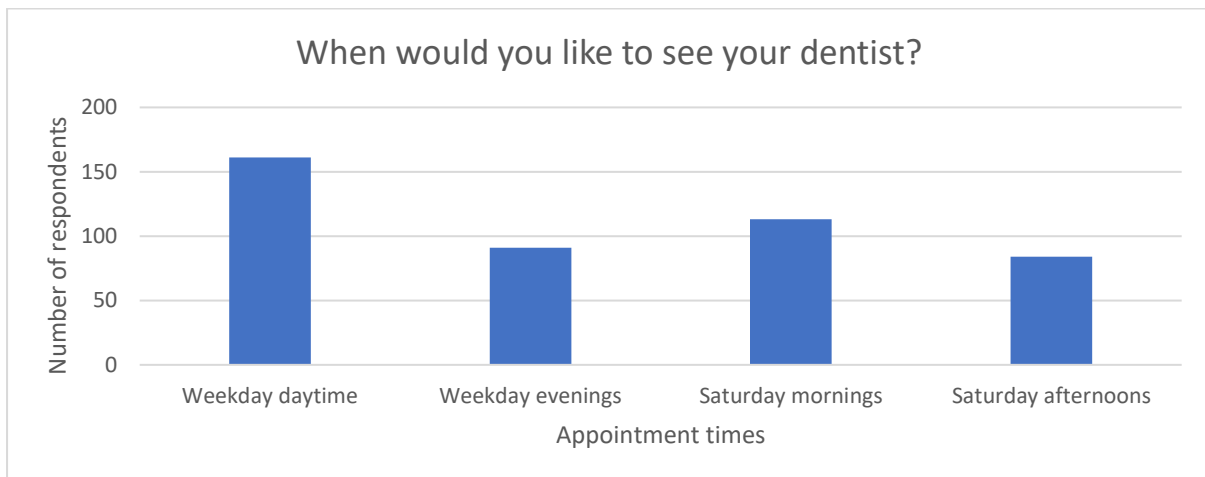
The top three most important reasons for seeing a dentist are:

- the dentist understands my needs
- the dentist listens and explains well
- seeing the same person each time

Appointment times and access were not ranked as being very important by a large number of people though accessibility is critical for some patients.

Other reasons stated included being able to have home visits, understanding children and their complex medical needs, having longer appointments and adapting to the patient's needs.

3.2.10. When would you like to see the dentist



Patients could select more than one option for preferred appointment times.

Most patients were happy with weekday daytime appointments though if given the option would also like to have weekend or evening appointments.

3.3. Patient feedback via existing providers

Existing special care and paediatric dental providers also asked their patients to provide feedback on the services. A number of common themes emerged from this feedback:

- Anxiety – many patients of these services are very anxious and value having a patient and understanding service
- Appointments – patients welcome flexibility of appointments, the need to have slots available for urgent treatment and the need to improve the booking service
- Communication – clear communication is essential for these patients as well as having caring and friendly staff
- Environment – as patients of this service have additional needs they said they'd like distractions whilst waiting for their treatment as well as having a calming environment
- Physical disabilities – need to consider adjustments and special equipment
- Travel – easy access with nearby parking
- Waiting times – need shorter waiting time from referral to appointment
- Treatment – the need for good quality treatment

3.4. Patient feedback summary

Some key themes from the different patient feedback received were:

- there was generally very positive feedback on existing services and workforce
- it is essential to have a service that is understanding, caring, patient and has good communication
- the time from referral to appointment is too long
- patients of these services have complex needs with a lot of anxiety about dental visits but this is often linked to other issues e.g. learning disabilities, dementia
- there is some evidence of poor dental health in patients with additional needs shown by the high number of appointments and of teeth being removed or fillings put in place so patients may benefit from more health prevention information and support
- there is an increase in the need for care at home
- appointment times and days are not as important as the flexibility of appointments e.g. changing at short notice due to patients having good and bad days
- continuity of care/building relationships is important in building trust and reducing anxiety
- the need to tailor service to individuals due to complex problems

4. Dental profession feedback

4.1. Community dental service workforce

We asked for feedback from people currently working for Community Dental Services. We received 148 responses from staff working for providers across the South East in a number of different positions.

Staff were asked if some patients could be seen by general practice with 23% of respondents saying this could be introduced. There was some support for sharing care with 49% of respondents saying that some patients could have shared care with general practice. 69% of those completing the survey felt that shared care with general practice would improve patient care pathways. A large number (88%) of respondents felt that their current service is limited in some way.

Respondents were asked about specialist care and training to provide special care adult and paediatric dental services with 61% stating that they had received additional training.

They were also asked to comment on the different levels of care provided by their service with 53% stating that their service provided different levels of care (identified as being levels 1,2,3a and 3b).

81% felt that patient care pathways are consistently applied across their service

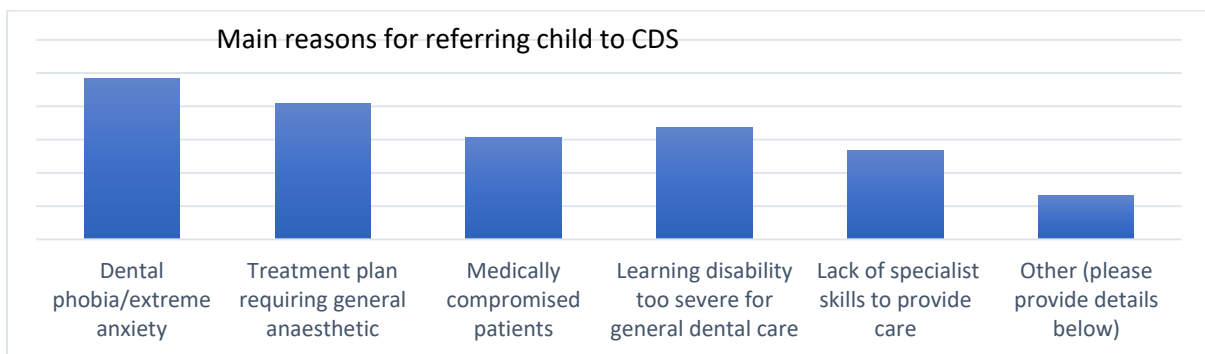
In summary the feedback showed that the service currently sees a wide range of patients with varying needs and at different levels of care and that some had undertaken specialist training in providing these services. There was support for working more closely with general dental providers and that some services currently provided by Community Dental Services could be provided by general dental practitioners.

4.2. General dental profession

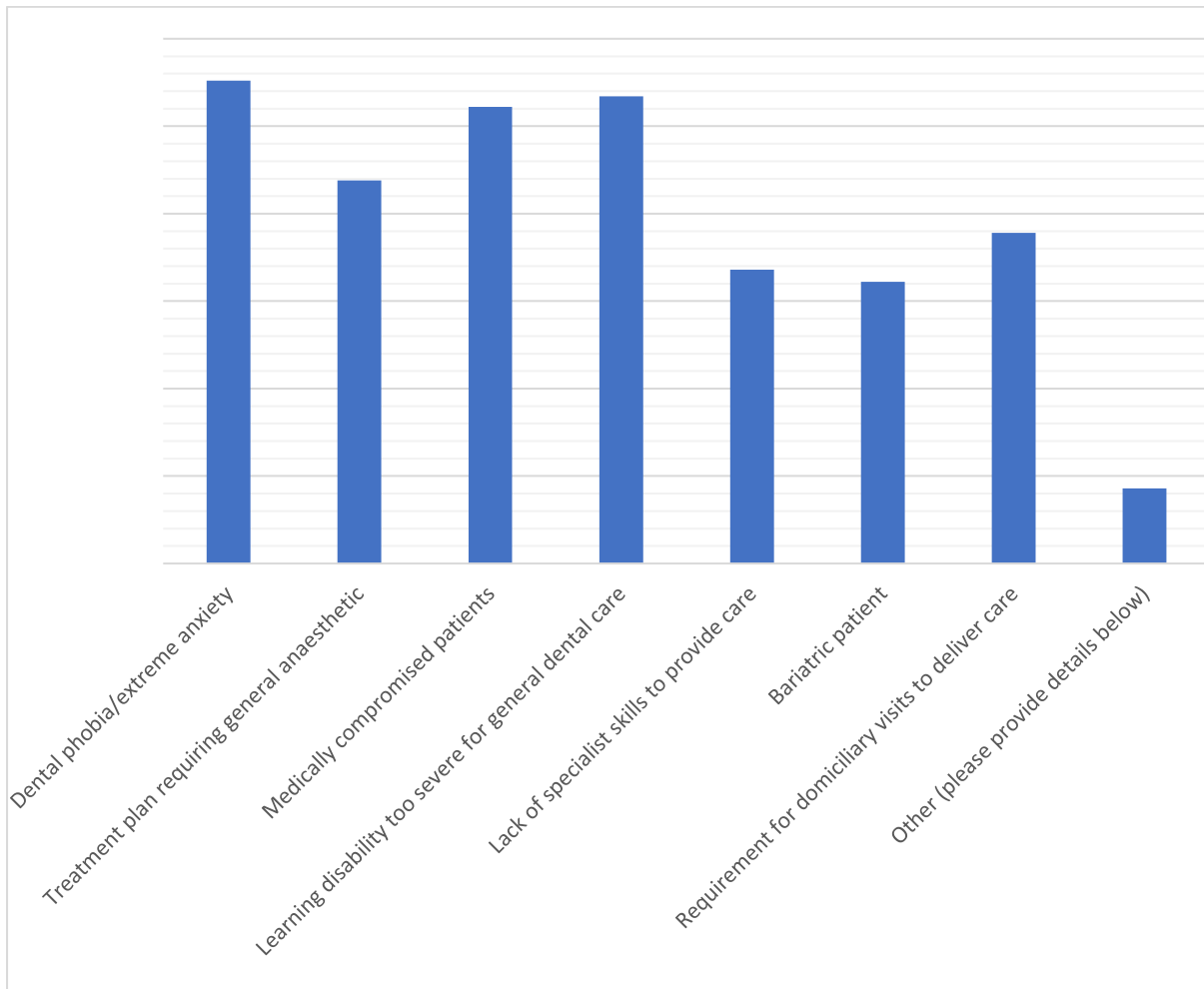
We also asked for feedback from general dental professionals and received 52 responses with responses from each area. The highest number of responses came from the Sussex area.

4.2.1. Referrals to Children’s Community Dental Services

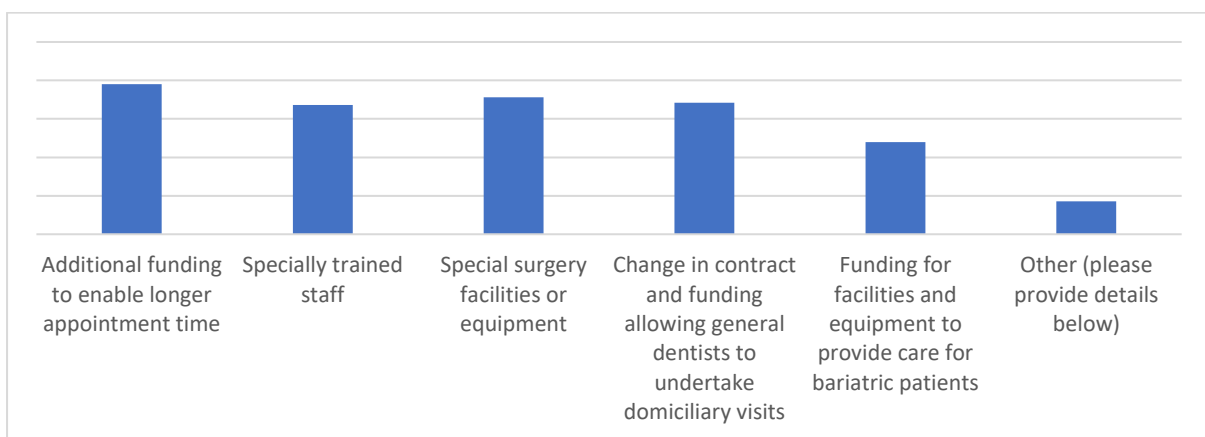
General dental providers were asked for their main reasons for referring children to the Community Dental Service. Responses were spread across a number of reasons with the top three reasons being due to dental phobia or extreme anxiety, due to treatment requiring a general anaesthetic and due to some children having a severe learning disability.



4.2.2. Main reasons for referral of adults to Community Dental Services



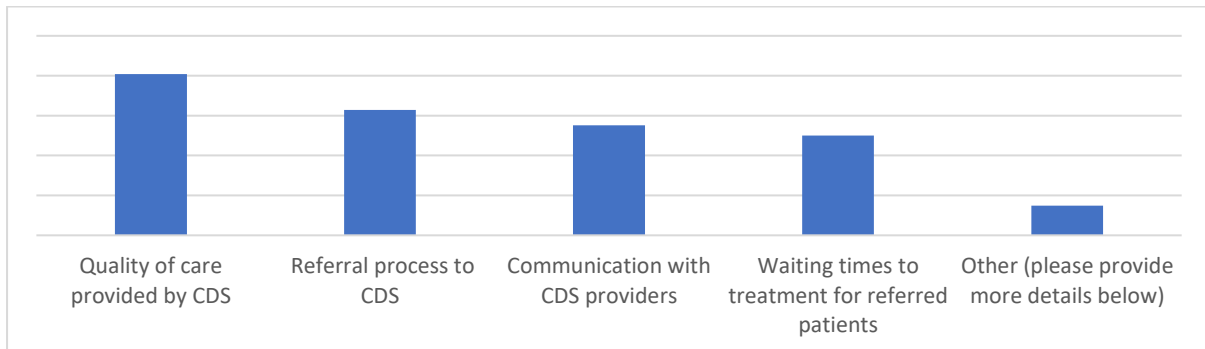
What would help you treat more patients in your own practice



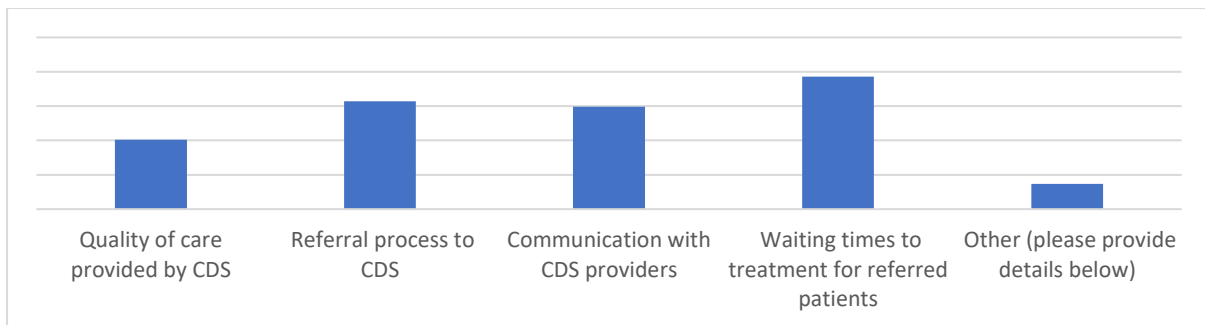
A number of general dentists felt that with some additional support they could treat more patients in their own practice (sedation was mentioned as a service they could provide if given NHS funding to do so)

Some felt it was unreasonable to ask GPs to take on this work and felt that CDS was a necessary additional service

What's working well with the CDS



What needs improving



Stakeholder feedback

We wrote to key stakeholders across the South East and Dorset to advise them of the planned procurement and asked for feedback on Special Care and Paediatric Dental Services

5. Actions for the commissioning of services taken as a result of the feedback

After reviewing the feedback a number of changes and additions have been included which will be considered when procuring new contracts for these services:

- Providers will need to describe how they will communicate with patients with different needs
- They will also be asked what adjustments they will make to ensure that they provide a welcoming environment for patients for example they may make changes to their waiting areas by having music and toys available
- All providers will need to ensure that the premises they use are fully accessible and comply with the Equality Act. They will also need to describe any other arrangements that they have in place, for example for wheelchair users
- Bidders will need to provide information on parking and public transport near to their premises, this will be considered as part of the evaluation of bids
- Bidders will also be asked what health prevention initiatives they will put in place to help to improve patients' dental health e.g. leaflets to educate them on good oral hygiene
- Services for care home residents/domiciliary care will be included as part of the contract specification