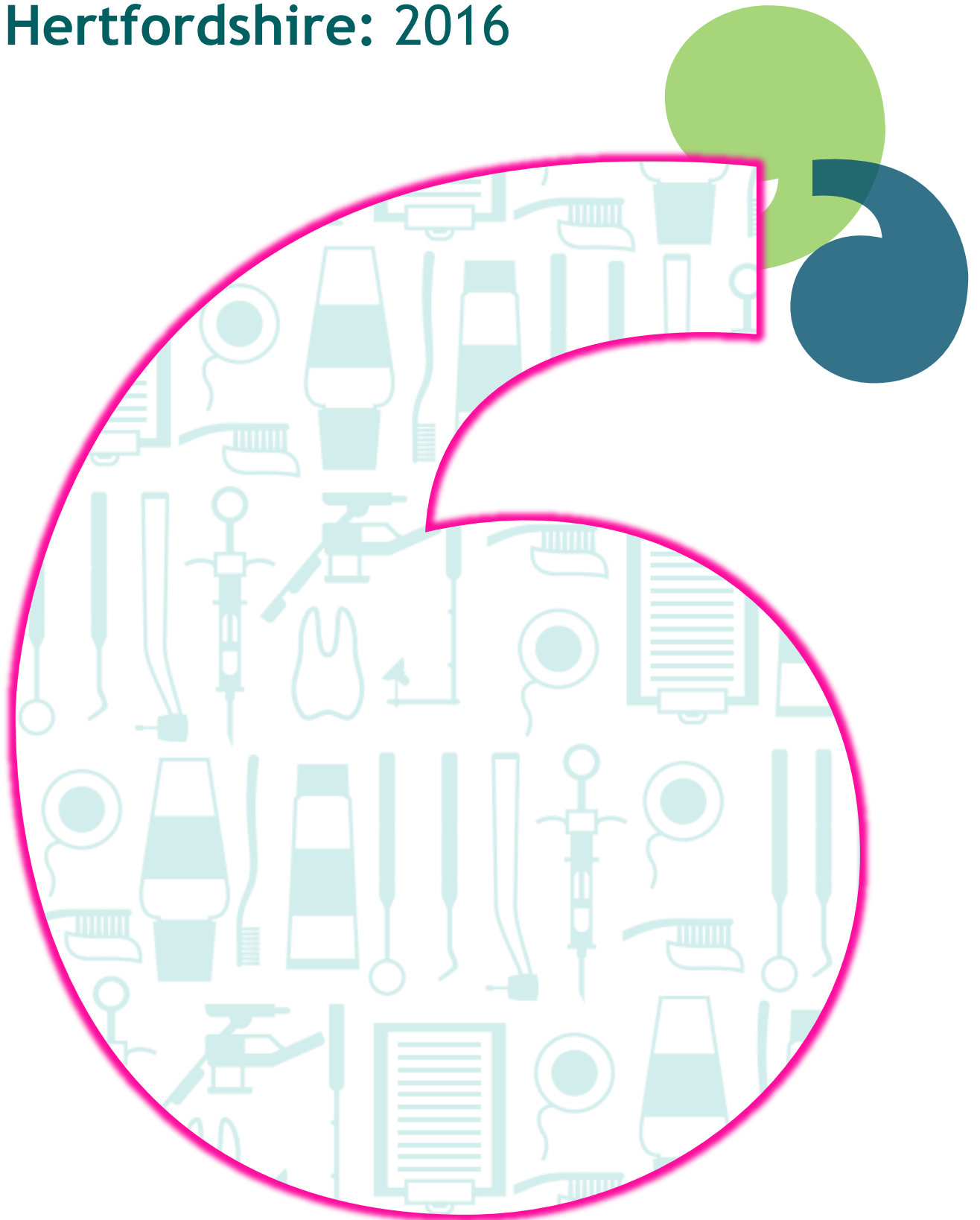


Access to NHS Dental Services in Hertfordshire: 2016



Contents

Executive Summary	2
About Us	3
Introduction & Objectives	4
Methodology	5
What the Public Told Us	6
Online Survey	6
Focus Groups	7
Conclusion	15
Recommendations & Next Steps	16
Appendix	17

Executive Summary

Public Engagement ran from July-September 2015 in the form of an online survey supported by six focus groups with those more seldom heard.

Highlights of what we found:

- Two of the top reasons people gave for not visiting a dentist in last two years was: (1) Cost – feeling the cost was too expensive, or confusing (2) Inability to find a NHS dental practice taking patients
- Patients who needed an NHS dental practice that was accessible for those with sensory and physical needs struggled to find one easily. It was also highlighted that no dental practice had signposted individuals on these cases instead leaving the individual to continue the search themselves.
- Participants living with HIV raised concerns about discrimination, and the need for more training and awareness around HIV
- The Special Care Dental Service provided by Herts Community Trust, was seen as an extremely good service by the participants who used it, or care for those who do.
- Participants were overall unsatisfied with the information currently available on dental practices, and dental costs. Awareness of websites such as NHS choices remained low.
- Most participants were not aware of NHS dental prices and treatment bands, and had not seen this information clearly displayed in their practice.
- Participants raised concerns that treatment plans, and the FP17DC had not been being shared with them ahead of treatment, so patients were unsure if they were receiving NHS or private treatment, and in turn unsure if they would be charged NHS or private fees.

About Us

We represent the people of Hertfordshire, and our aim is to give individuals and representatives of a community, a stronger voice to influence and challenge how health and social care services are provided.

We can do this using the following powers and functions¹

- Through local engagement we gather the views and experiences of local people to build an understanding of why and how people use NHS services. This, along with wider intelligence, is used as evidence to influence providers and decision makers to propose change and improvement.
- Through the Healthwatch Network and Healthwatch England², we share information to identify gaps and trends in order to influence national and local policy regarding health and social care.
- We alert national bodies; such as Healthwatch England, the Care Quality Commission (CQC), and/or council scrutiny committees where appropriate, to concerns about specific providers, health or social care matters.
- We signpost and provide information about people's choices and where to get help if things go wrong.
- We represent local people's voices via our seat on the statutory Hertfordshire Health and Wellbeing Board.

¹ The powers and functions of Healthwatch are set out under section 5 of the Health and Social and Care Act 2012 <http://www.legislation.gov.uk/ukpga/2012/7/contents/enacted>

² The Healthwatch Network is made up of 152 local Healthwatch Organisations. Healthwatch England is the overarching body which guides and supports each Local Healthwatch. Each Healthwatch is independent and funded by the Local Authority not Healthwatch England. For more information please visit <http://www.healthwatch.co.uk/how-we-work>

Introduction

Healthwatch Hertfordshire (HwH) was approached by the local Consultant in Dental Public Health, from East of England Public Health England locally, to support an 'Oral Health Needs Assessment on Access to Primary Care Dental Services.' The role of Healthwatch Hertfordshire was to lead on gathering the lived experiences of people using local NHS dental services for dental treatment, or Oral Health Promotion Programmes to prevent dental decay.

The area covered by the Consultant in Dental Public for the Oral Health Needs Assessment comprised of Northamptonshire, Milton Keynes, Bedford Borough, Central Bedfordshire, Luton, and Hertfordshire. Healthwatch Hertfordshire led on collecting data through the online survey and organising the focus groups for the qualitative survey. This report will focus on the results for Hertfordshire.

Objectives

- To identify trends of how and why people use dental services the way they do.
- To understand how people access information on dental services and whether current methods meet these needs.
- To identify how services can be improved from the public's perspective.

- To identify and share good practice.
- To actively seek views and experiences from groups who have characteristics which are defined as being 'protected' under the Equality and Diversity Act.

The results of the research will be shared with NHS England, Local Dental Committee, Local Authorities, and the CQC to help inform commissioning organisations and health regulators the views and experiences of local patients in accessing dental services.

Methodology

Public engagement for this work ran over a period of 3 months from July -September 2015, and consisted of an online survey supported by six focus groups.

The online survey was promoted through our own social media channels, as well as by NHS and voluntary sector partners.

In conjunction with the online survey, it was important for Healthwatch Hertfordshire to go out and listen and hear the views of people with protected characteristics whose views may seldom be heard. To do this, we set up focus Groups with two Healthwatch

Hertfordshire Service Watch Groups, as well as through group leaders of external organisations.

Focus Groups included:

1. Carers of people with a learning disability;
2. Herts Aid
3. Healthwatch Hertfordshire Mental Health and Learning Disability Group & Healthwatch Hertfordshire Sensory and Physical Disability Service Watch Group.

4. Herts People First
5. Viewpoint service users
6. Watford and Three Rivers Fives Ways Friends Club

As the focus group fitted into an existing pattern of meetings, the turn out rate was high. These semi-structured interviews were conducted by staff members of Healthwatch Hertfordshire with a research background and the Consultant in Dental Public Health from Public Health England with experience in providing Needs Assessments and supported by leaders who normally facilitated each group. Due to the interviews being conducted within a familiar setting there was a sense of continuity. This created a stronger sense of trust between the interviewees and participants, which in turn added to the validity and reliability of the data provided. These interviews were recorded and thematically analysed.

The Consultant in Dental Public Health and Healthwatch Hertfordshire agreed that to protect anonymity for both the participants in the survey and staff members, specific dental practices and dentists within the practices or other dental services would not be recorded in the research.

What the Public Told Us: Online Survey

Out of 212 respondents to the online survey, 126 lived or worked in Hertfordshire³. The key findings will focus on these responses.

Accessibility:

- 68% of respondents had visited a dentist in the last 2 years, leaving 32% that hadn't. Two of the top reasons for this group not visiting the dentist in the last 2 years were
 - i. Cost - feeling the cost of treatment was too expensive, or confusion about how much NHS dental treatment is.
 - ii. Unable to find a practice taking on NHS patients nearby.
- When asked "why did you chose the dental practice you are with?" The most popular answer was proximity to their home or work. The second most popular answer was the good relationship between Dentist and Patient that had existed for some time- so there was no need to find another dentist.
- 94% were happy with the distance they had to travel to see their Dentist and 91% felt their appointment was at a convenient time and day.
- When asked what time of the day people preferred, 49% of people preferred weekdays 8-6, 31% preferred out of hours, and 20% had no preference.
- 92% were happy with the waiting time between booking appointment and seeing the dentist.
- When participants were asked to provide feedback on what their dental practice does well, 37% commented on the staff's manner, friendliness and skills when dealing with anxious

patients, or those with complex needs i.e. characteristics which members of the focus had; 24% commented on the ease of booking appointments and the usefulness of text reminders; 4% mentioned emergency appointments being helpful; 4% commented on proximity of dental practice to home or work; and only 2% commented on disabled access being a positive experience.

'They understand learning disabilities well and treat me with respect.'

'The staff treats me with respect and understands my condition. Everything is explained to me before it happens, so I am less anxious.'

'Immediately after booking your appointment you receive a text message. Then another to remind you of your appointment the day before. It also reminds you that if you are no longer able to attend to call and re-book.'

Receptionists:

- 81% of respondents felt receptionists were friendly and helpful.

"Reception staff have always been very polite and helpful".

'Dentist is friendly, but reception staff can be unwelcoming, but I think that is due to pressure of work'.

'Excellent service in every respect'

Building & Environment:

- 88% felt the building and/or the physical environment of their dental practice met their needs. Those that felt it didn't listed issues such as: - No lifts and steep stairs; no parking or disabled parking and waiting areas

³ A breakdown of demographic information on respondents can be found in Appendix One.

being too small for people to manoeuvre easily.

- There were 2 cases where people who found it difficult to climb stairs were refused to be seen in downstairs' clinics.

'I had to take my twin babies out of their pushchair as the dentist would only see me upstairs even though I asked to be seen downstairs'

'All NHS treatment seems to be upstairs in Broxbourne - I have had ankle surgery and previously had to go up 2 flights of stairs on crutches. This is dangerous.'

Information

- 53% of people turn to family, friends or use word of mouth when trying to find out if Dental Practices are accepting NHS patients. Only 32% used NHS choices.
- When asked where respondents would prefer information to be advertised, suggestions were at GP Practices; for Dental Practices to clearly mark whether they accept NHS patients outside their practice; for there to be a dedicated website/contact with this information about which dental practices are accepting NHS dental patients.
- 55% of people felt there wasn't enough reliable, accessible information about NHS Dental Services.
- When asked what type of information respondents would like more of, the answers ranked as the following:
 1. What to do if you need urgent or emergency NHS dental treatment.
 2. More information on the cost of NHS dental treatment
 3. More information about out of hours NHS dental services
 4. More information on how to look after your teeth day-to day
 5. More information about the location of NHS dentists

6. More information on the benefits of going to the dentist and how often you should have a check-up.

- 90% of respondents had never received oral health advice from a non-dental health professional. However, 63% of people felt it would be helpful for this to happen.

Costs

- When respondents were asked if they were aware of the pricing bands for NHS treatment and what the specific costs were, 66% answered 'No'.
- 79% didn't know the costs for treatment were revised annually.
- And, when asked if they knew what treatments came under each of the three NHS dental treatment band, only 21 people said 'yes'.
- For those that did know about the cost for NHS dental treatment, most people found this out through a leaflet or poster at their dental practice (43%), or was told by a staff member (27%), and 19% went to NHS choices to find this information.
- When respondents were asked where they would look for further information on costs, the most popular answers were split equally between their Dental Practice - leaflet (21%), staff member (24%) and the internet - general search (29) and NHS choices (16%).

What the Public Told Us: Focus Groups

One of the main roles Healthwatch Hertfordshire performs is to continually challenge health inequalities. Part of our commitment within this, is to listen and give voice to groups which are sometimes less heard.

In order to achieve this within our study, we set up a number of focus groups with:- Carers of people with a learning disability; Herts Aid; Healthwatch Hertfordshire Mental Health and Learning Disability Group & Healthwatch

Hertfordshire Sensory and Physical Disability Service Watch Group; Herts People First; Viewpoint service users; Watford and Three Rivers Older People Lunch Club.

Each focus group session was set up through the existing group leader, and lasted between 45- 90 minutes. The questions asked were similar to the online survey questions,

however conducted in a more informal setting- through semi- structured interviews. The participant responses were electronically recorded and then analysed at a later stage.

All participants involved in the focus groups used NHS dental services and not private services.

Carers of People with Learning Disabilities

All participants in this group cared for people who used Special Care Dental Services, provided by Herts Community Trust (HCT). This service provides dental care for people within the community, who for diverse health-related reasons, are unable to receive dental care from general dental practitioners. The participants in this focus group cared for people with learning disabilities that use this service.

- The focus group members highlighted the following points:
- Special Care Dental Services is a much needed service for people with learning disabilities who can't be treated by a general dentist.
- Participants highly rated the skills of staff, both clinically and personally. Stating the importance of specialist training, patience and trust for this group in particular.
- There is no specific time allocated for appointments, which participants felt allowed for treatments to be explained properly, and for breaks to be had if the patient needed this.

- Appointments are flexible and understanding of carers' needs.
- Participants tended to rely on information from friends, family and groups they were part of, such as Carers in Herts. Participants weren't aware of online sources such as NHS Choices until it was mentioned in the focus group.
- Participants felt the special care dental service could be better advertised and promoted. It was suggested that social workers or day centres could be a good way to do this. Participants also suggested social workers could provide 'health packs' with all the health information the person you care for needed. This could include, what services are available, who is entitled to it, and where to find those services.
- Participants noted the long walk to the dental service from the disabled car parking space. This has been highlighted to HCT by the group and is currently being looked into.

'The dental nurse there is ever so nice. If you ring and say 'I'm sorry but I'm running late or I need to cancel' sometimes really last minute, she'll just say 'it's no problem...don't worry and thank you for calling'

"What is great is that the community dentists are specialised and follow you the whole way. So when [my son] had to go to the hospital for dental treatment, they were there supporting him and me. They always speak to [my son] first."

And they'd ask, 'what music have you brought today?', as [my son] would bring a tape to listen to, they'd play it. He'd lay on his back, look at the ceiling whilst they are playing his music. And, they [the dentist] would just take as long as it needs.

'Not many people know about the service. You either find out about it from family and friends in the same position or from your

dentist...and going to meetings like Carers in Herts and things like that. Sometimes I feel like the NHS is reluctant to tell you things.'

'You do tend to go round and round and round and round. And end up getting a bit fed up of having to call so many people to find certain information. And getting hold of a social worker... that's a joke.' [Comment on accessing information.]

Herts Aid

All participants in this group were service users of Herts Aid. The focus group was held in Welwyn Garden City, but participants lived and worked in various parts of the County. Herts Aid is a Hertfordshire based HIV and Sexual Health Charity, which provides support to people living with or affected by HIV.

The focus group members highlighted the following points:

- Compared to the online survey, people in this group travelled further distances to see a dentist. Reasons for the length in travel were:- wanting to see childhood dentists even though they had moved out of area; seeking specialist services that couldn't be provided by dentists near where they live or work; struggling to find NHS dentists near home or work.
- Some participants did not pay for dental treatment as they were in receipt of benefits. Participants in this position expressed concern of not being able to afford dental treatment when they found work.

- All participants were unaware of NHS dental treatment bands and cost. There was confusion about when you pay and what you pay for, most participants believing you automatically pay every visit.
- Participants did not feel there was enough information in the public domain on NHS dental costs, what services are available where, and what peoples' rights are in regards to access.
- No participants in this group were aware of the NHS choices website.
- There was a strong feeling of discrimination by dental practices in the group. Participants did not always disclose their HIV status because of this, or found it difficult to register with practices when they did disclose their status. Although there was a feeling things had improved in regards to training and understanding of HIV for dental professionals and receptionists, the group felt there was still more to be done.

'[My dental practice] is a bit iffy. It's in Ware. The fact that I am HIV positive. When he found out, he literally just stepped back, and it made me feel really uncomfortable then, and haven't been back.'

'I was ringing up different Dental Practices to try and find somewhere, and when I told them

when I was HIV positive, they say "we'll get back to you" or "it's up to the Partner's whether they treat you". I rang one and they said "they'll get back to me" but they are still thinking about it. In the end I was told to ring a number, and this particular Practice in X has got no problem in treating me. The staff there are wonderful and treat you as if you are

normal person. They don't stand back and say "oh, you're HIV", they are good, offer a good service. I would recommend them.'

'[My dental practice] is in X. They have been very good to me. Their manner, everything. I can have a laugh with them and they know I am HIV positive. The receptionist used to work with me before, so I know her, and the dentist is nice too.'

'I travel from Welwyn Garden City to X. I didn't disclose my status, I don't think you need to. For me, it was because I couldn't find any NHS dentists here.'

'I travel from Hemel Hempstead to X. The reason I travel so far is because the type of dental treatment I need I need to be put under.'

'I actually tried to register with a Private dentist here (in X) as there were no NHS ones. And, on the registration form they actually ask you if you "have you ever been exposed to HIV" as the medical history section was very specific. I felt I wasn't comfortable answering

the question, so when I handed back the form to the receptionist she said "you haven't filled in the form completely and we don't treat you if you don't if you don't". So I left, and then went to Herts Aid and they recommended this Dentist in X.'

'I had to go through PALS (patient liaison Service) and they then recommended a dentist, they then actually spoke to the dentist for me, and the dentist said yes "I am happy to take this Patient on" so I got to see someone as a result of that. Without that, I would have had to wait a long time to see anyone.'

'I wonder if people are confusing access to dentists generally and access to dentists because of the condition they have. It seems, {that} to get an NHS dentist is hard for everyone, no matter your condition. Because when I ring up a dentist and say I would like to be a Private patient, they can't take me quick enough. But when you say you would like to be NHS patient, suddenly they have no space.'

Healthwatch Hertfordshire Mental Health & Learning Disability Service Watch Group (MHLDSWG)/ Healthwatch Hertfordshire Sensory and Physical Disability Service Watch Group (SPDSWG)

Both the MHLDSWG and the SPDSWG are chaired and run by Healthwatch Hertfordshire. These groups invite service users and representatives from organisations to feedback their experience of the services they use, highlight concerns and good practice, and is also an opportunity to provide information, talks and discussion on topics for the groups at their request.

The focus group members highlighted the following points:

- That dental practices need to be flexible with appointment times for people with complex needs.
- The importance of disabled parking spaces close to the practice as well as accessible buildings.
- Clear information on NHS dental costs and what treatment is included under each band needs to be made to patients and the public.
- Patients need to be made more aware of courses of treatment and their rights around this.
- Dentists that offer both NHS and private treatment need to be clearer about whether they are charging patients NHS or private fees for treatment, as well as agree this before treatment begins. When a FP17DC form was described to participants, participants stated they had never seen one.
- Some participants of the group felt distrust towards clinicians and a lack

of openness and transparency about treatment needs and cost.

- Some participants needing wheelchair or caring for someone who does found that quite a few dental practices could not offer their services or have downstairs clinics. It was also found that dental

practices did not signpost these patients in these instances. Where some practices did have downstairs clinics, participants noted cases where they or the person they cared for had been made to feel they had 'put the dentist out' by asking to be seen downstairs'.

'One thing I wasn't sure of was whether I was being charged privately, or whether I was being charged an NHS price...I wasn't given an option.'

'Often people aren't clear about what costs will be and whether the treatment is NHS or private.'

'I was told by my dentist that he doesn't do cleaning anymore, and this needs to be done by the hygienist. I was also told I had to see the hygienist before I could come back to have the next treatment. So I paid £18.50 to see the dentist and then another £45.00 to see the hygienist, and the hygienist wasn't very good and rushed me. I asked the dentist if he could talk through my treatment plan with me, but he said I needed to see the hygienist first and then book in another appointment with him, which he charged me again for'

'I have to pay a £24 deposit to see a hygienist. Although I haven't been to my dentist for nearly a year, my £24 is sitting there'.

'I'm an NHS patient and I've paid £300-400 for a course of treatment'.

'Some learning disability patients may need 3 or 4 times the time as another patient'

'Until quite recently I was a rare visitor to the dentist and always had good experience. The dentist didn't really have much to do other than offer me a polish. More recently my dental costs are covered, and I do declare this at the outset, and I have noticed in the recent year I have experienced the dentist say to me that they will do this, this and that, and to come back in six months' time and he'll do the other side and do a little a bit more.'

'I had to discount a number of dental practices, simply because they are inaccessible [for a wheelchair user].'

'Dentist was willing to treat [my son], but he wasn't happy as it meant he had to move downstairs into someone else's surgery, and he didn't like it. He made you feel like he didn't want you there. We felt really awkward'.

Herts People First

Herts People First is a charity is a rights based, self-advocacy service run by and for adults with a learning disability. The focus group was made up of Herts People First service users.

The group highlighted the following:

- The importance of clinical staff asking for and completing the Health Action Plan section within the patient's purple folder⁴.
- Dentists could do more to explain things properly to their patients.
- Participants found it useful for dental practices to write down the date of the next appointment for them.
- Most participants in the group could walk to their dentist and found travelling there convenient. Other participants used specialist services, so a support worker, carer or family member would assist in taking them to the dentist in these instances. Some patients travelled out of area to see a dentist as they preferred to see a childhood dentist that they have a close relationship with.
- None of the participants in this group paid for dental treatment, and were unaware of the costs of NHS dental treatment or which treatments falls under each band.
- Most participants felt the staff at their dental practice were friendly and welcoming. However, a couple of participants felt they weren't always made to feel welcome.
- Half the group did not use the internet and did not have access to a computer to find information online. Information for this group tends to be sourced from support organisations such as Mencap, Herts People First as well as individuals' support workers.

'I have [a purple folder], but they don't ask for it. Sometimes, if you are not properly thinking, you don't pick it up and give it. And, you end up walking out forgetting.'

'Me and mum think we do get treated differently.'

'At my previous dentist, I felt like I was treated different. But [my support worker] helped me move.'

'Sometimes through a purple folder yearly event called 'love yourself' there are stalls and people get information that way. Herts

People First also hold 'dash days' but what we have found is that there is quite a big void on good information, it's hard to find. Sometimes you can find things on the internet, but not everyone has a computer.'

'It's really down to how passionate the support worker is and what information they go out and get for people.'

'My Dentist is pretty friendly and so on, but what I hate being told is 'try and relax' and that's it. But my hands go rather stiff, so I grab hold of the Dentist's arms, you know?...Even my members of staff have to go with me. Because the last thing I don't want

⁴ The purple folder is specifically designed for people with learning disabilities that feel they would benefit with having all their medical information in one place. It is up to individuals to take the purple folder with them to health appointments to aid communication about health needs and treatment. At each health appointment the health professional is supposed to complete

the Health Action Plan (HAP) section within the purple folder, which is a record of what has been agreed between the patient and clinician at the meeting.

More information can be found here:

<http://www.hertsdirect.org/services/healthsoc/disability/purplestar/personwithld/mypurplefolder/>

to happen is to be turned to hospital. It's the last thing.' [A participant who was worried the stress of going to see the dentist would bring on a seizure and in turn end up in hospital].

'No improvements, they don't rush the treatment. It's very easy and they are very caring.'

'I chose my own [dental practice]. It was handy to get up the hill, and is close to where I live. It's really big; it's got a waiting room and lots of surgeries, some upstairs and some downstairs.'

'I have been sticking with my dentist since I was a child. Because I have been going to that same dentist since I was seven. So, I have no reason to change my dentist.'

Viewpoint

Viewpoint is a Hertfordshire based user involvement charity for people with mental health or drug and alcohol problems. All participants involved in the focus group were service users of viewpoint.

- Participants didn't feel treatment plans were agreed with them before a treatment.
- Some participants in this group did not pay for NHS treatment. Those that did, were unaware of the NHS costs and bands, and did not recall seeing this information displayed in their practice. Participants noted having to pay upfront for treatment, but didn't understand why.

- Participants accessed information through friends, family and support groups like Viewpoint. No one in the group had heard of NHS choices.
- It was highlighted that dental practitioners were not always aware of the effects of medications (taken for mental conditions) on the patient's teeth and health in general.
- The group felt receptionists could be more welcoming and supportive. Participants also noted training for receptionists so they communicated better with them. Participants couldn't understand why they had to keep filling in forms which they felt were the same, or why receptionists wouldn't help them.

'Where do we find that information? Can we have a copy of the pricing for NHS treatment please?'

'They ask for your money upfront. But if you go to have your car serviced then you pay afterwards, if you go to do your shopping you pay afterwards.'

'I've just been offered to have my teeth whitened. Just this Dentist, this one particular Dentist. I never really thought I need my teeth whitened, it's never really occurred to me.'

'One of the medications that I take causes me to grind my jaw. I grind it so badly that I have worn away my incisors. But they have only just given me a protector to stop me grinding. The

medication that I am on is causing me to grind my teeth for four years now.'

'I went to a Dentist, and the first thing he asked me was "How are your kidneys?" and I thought this is the man for me. Because I take Lithium and it affects my kidneys. So I thought wow, this guy really knows his stuff. No Dentist has ever said that to me before. I keep going back now.'

'You tell them your dyslexic and can't fill it in there and then and they just go 'oh'. The girls on reception just sing from the hymn sheet, they don't care if you suffer from a mental health problem or are dyslexic.'

'I think an important part of this is understanding people's phobias... some of

them, they are there to do a job, so they just do it. But some actually put you at ease.'

Watford & Three Rivers Five Ways Friends Club

The Five Ways Friends clubs, delivered by Watford and Three Rivers, provides a luncheon service for people aged 55+ and Carers in Watford and Three Rivers. The service aims to promote wellbeing, provide appropriate specialist signposting and referral, as well as reduce social isolation for older people and

Carers by bringing them together for a 2 course meal.

Participants in this focus group were all service users of The Five Ways Friends Club based in Watford.

- There were some in this group compared to the other focus groups felt quite strongly that NHS dental

costs were too expensive and that it puts people off going to the dentist.

- Participants didn't know what the NHS dental prices were or where to find this information.
- Participants felt there wasn't enough information available on dental services, what is provided by the NHS, as well as what people's entitlements are.
- The group also noted that everything is online, but that they don't all have access to the internet.
- Participants had difficulty finding and registering with NHS dental practices. However those registered with practices felt waiting times, and times for appointments were good.

'We chose one [dental practice] because my husband had a toothache...he had to pay £51.00 to have a filling, which I think is absolutely ridiculous. To ask pensioners of 75 years to pay £51.00.'

'Is it possible to get a list of what they charge, as I haven't spoken to anyone who knows the answer to this.'

'When you are trying to find a dentist, you walk into a practice, and they say no as they are private, so you just walk out. What do you do? Where do you go?'

'You can't go to a NHS dentist, as they say their list is full and not taking NHS patients.'

'We are lucky by the sounds of it. We have an NHS dentist and they are very good at letting you know when you are due an appointment.'

Conclusions

Access

In both the online survey and the focus groups, participants felt that the distance they needed to travel to see a dentist was satisfactory. The majority of participants were also happy with the waiting times between making an appointment and seeing their dentist, as well as the time and day offered for that appointment.

Text message reminders were highlighted as very helpful, as were appointment cards specifically for people with learning disabilities.

Through both the online survey and most focus groups, participants expressed difficulty in finding and registering with dental practices taking NHS patients. Patients with the added need of requiring disabled access struggled further. As did patients with HIV. It was also highlighted that no participants had, had experiences of dental practices signposting them on to more accessible practices, instead it was left to the individual to find this information.

Participants living with or affected by HIV raised concerns of discrimination, although the focus group felt things have improved in recent years, it was felt more training and understanding is needed so that people with HIV are not made to feel different.

The special care dental service provided by HCT was seen as an extremely good service by

participants who use them, or care for those who do. However, it was noted that this service could be promoted more.

Information

Participants were not satisfied with the information currently available, and most were not sure where to find this information.

Awareness of websites such as NHS choices remains low. No participants involved in the focus groups knew of NHS choices. Through the online survey and focus groups it was found most people gather information through social networks such as friends, family, and support groups.

It was found that for certain groups such as older people or people with learning difficulties that, online information is not always the most appropriate way to share information.

Costs

The majority of the participants in this study were not aware of the NHS dental prices and treatment bands, and had not seen this information clearly displayed in the practice. Participants also raised concerns about treatment plans, and the FP17DC not being shared with patients ahead of treatment and so individuals registered as NHS dental patients were unsure if they receiving NHS or private dental treatment and in turn being charged NHS or private fees.

Recommendations

1. All dental practices to clearly display NHS costs and treatment bands in their practice.
2. Dental practitioners to make it clear to patients if they are receiving and paying for NHS treatment or private treatment ahead of treatment taking place (FP17DC forms).
3. Dental practices to make clear if they are taking NHS patients or not.
4. Dental staff to be aware and make use of the purple folder used by individuals with learning disabilities.
5. Dental staff to signpost patients with a physical disability to an alternative practice if their premises cannot accommodate.
6. NHS England locally to ensure discriminatory practice does not take place within dental services within Hertfordshire.
7. NHS England to promote information on dental services more widely.

Next Steps

To share the report with the Local Dental Network, NHSE locally and nationally, Healthwatch England and the CQC.

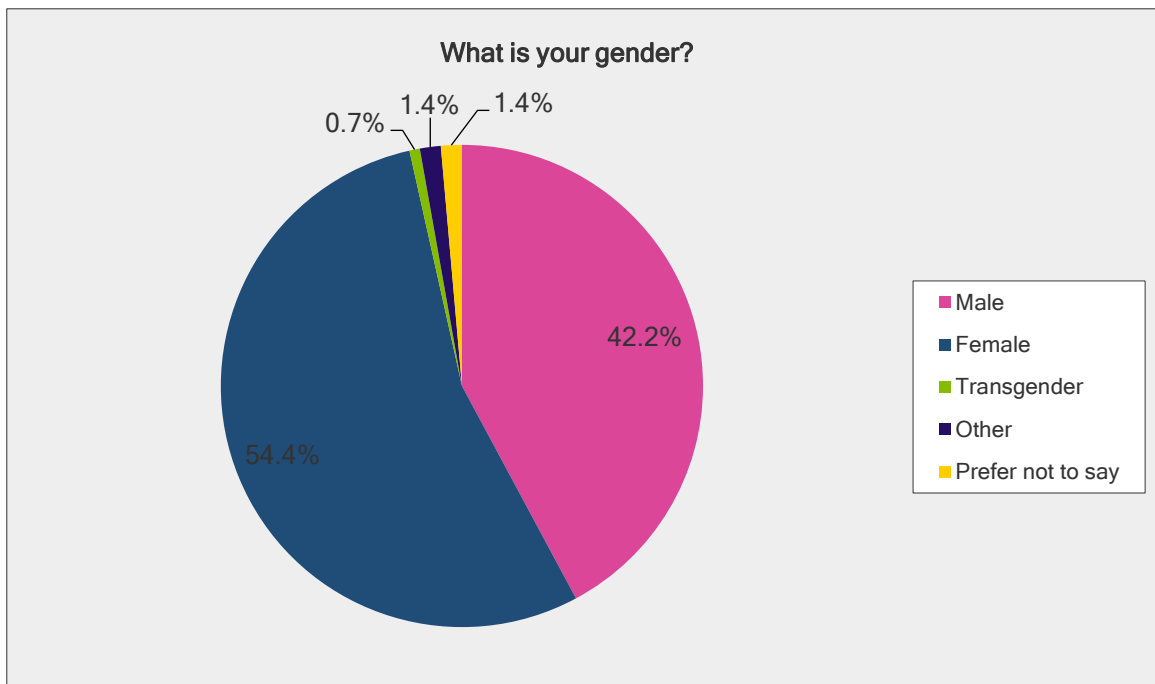
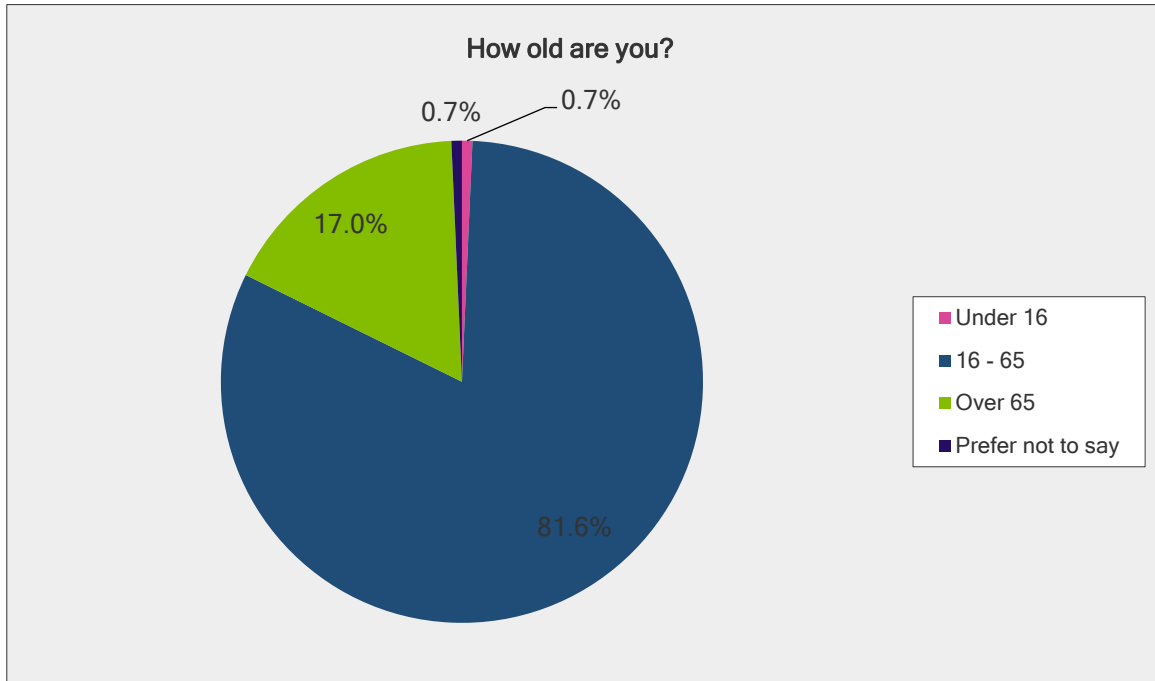
A proposal has been put forward and accepted by Healthwatch Hertfordshire's Quality Improvement Sub Committee (QISC) for Dental Practices to be included as a project within the Enter & View Programme going forward.

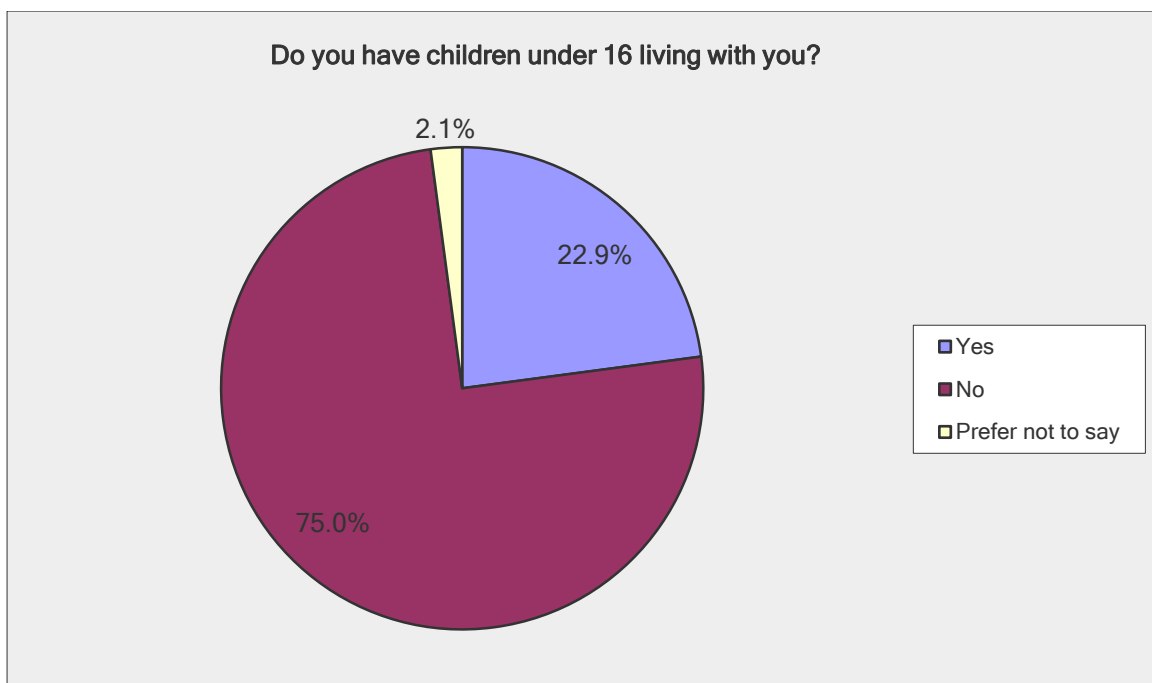
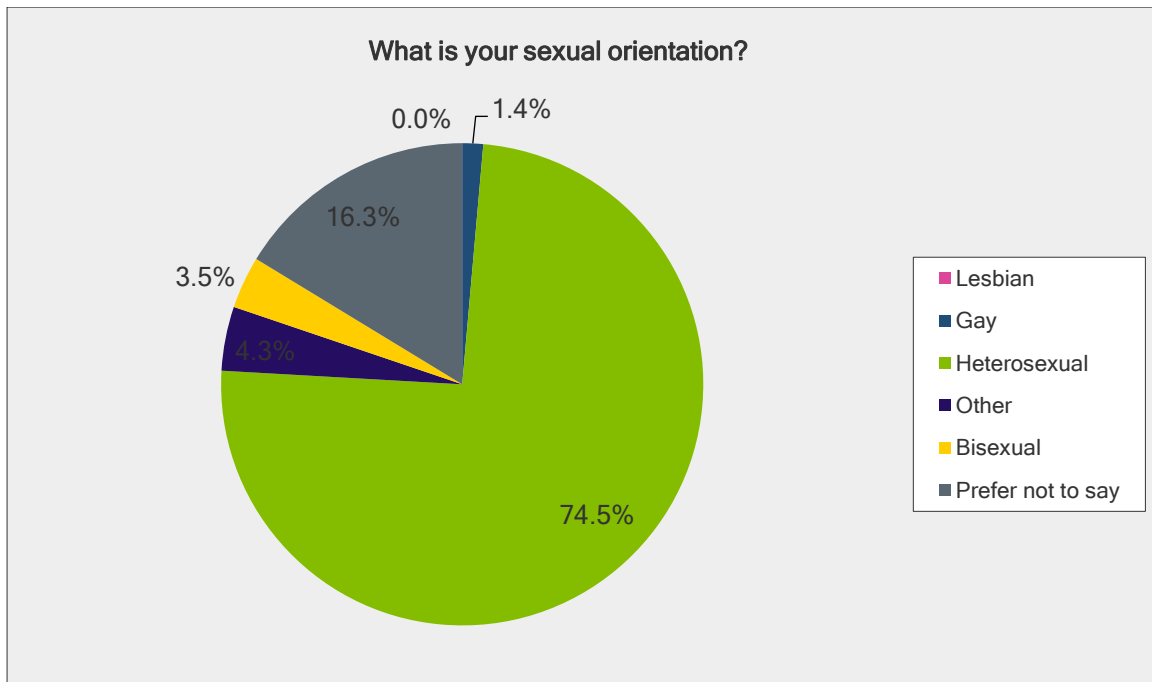
This proposal sets out to pilot 'enter and view' visits within NHS dental practices providing NHS mandatory care⁵ over a 2 year pilot period with the following aims:

- Visit 40 selected practices in each year or more if capacity and time allows across each of the 10 districts of Hertfordshire i.e. 4 practices each year
- NHS practices will be prioritised for visits if there have been queries or concerns made by the public or CQC has an impending visit. If neither of these apply then practices will be selected at random.
- The checklist will be developed based on the following 3 themes:- NHS costs clearly displayed, process for making clear to patients NHS treatments and costs for courses of treatment provided, ground floor surgeries and parking facilities, how the practices care for patients with dignity -this must be evidenced at a basic level.
- The checklist will need to be developed and agreed with user groups, and shared with the NHS and CQC.
- Healthwatch is there to benchmark practices against locally agreed standards developed with service users.
- The results of the 'enter and view' visits will be shared with NHS England dental commissioners and CQC for action if necessary. The results will also be shared with dental practices as recommendations for improvement -it would up to the practices whether or not to implement recommendations made by Health Hertfordshire

⁵ i.e. routine NHS dentistry expected within primary care dental practices

Appendix: Demographics of respondents for online survey.





Do you consider yourself to have a disability or long term health condition?

