

# Dentistry

Feedback from patients and practitioners  
May 2024

# Background

In 2023/24 dentistry was made the number one priority in Healthwatch South Tyneside's Operational Plan following a substantial increase in the number of people asking us for help or sharing their experiences of trying to access NHS dental care.

Feedback suggested the following areas remain a concern in terms of available dental services:

- Unable to register as an NHS patient with dental practices in South Tyneside.
- Websites of dental practices being out of date. For instance, some say they are accepting NHS patients, but are not.
- Inadequate advice provided to those seeking help, particularly with regard to emergency appointments and 111 services.
- Capacity within the dental system to cope with demand, resulting in long lead times for patients to be seen.
- Prioritisation of emergency work, and the status of prevention work, for example, current six-monthly check-up levels versus pre Covid-19 levels.

GOAL: To understand the challenges facing dental practices and raise awareness of available services to local residents and share the concerns of local residents with dental practices to encourage service improvement.



# Methodology

We obtained patient feedback on their experiences of NHS dental services in a number of ways during the year.

This included face-to-face sessions with local groups, participation in a regionwide survey by the North East and North Cumbria Integrated Care System, a dental practice consultation and calls received from members of the public.

## Have Your Say

As part of our work with the “Have Your Say” project, published in March 2024, a generalised question relating to participants’ recent experiences of dentistry was incorporated:

1. What are your thoughts/experiences of dental care/oral health.

The full report can be read [here](#).

These are the groups we attended and numbers we engaged with.

Group	Total number of participants spoken to
St Hilda’s (drop-in)	3
Apna Ghar	3
South Tyneside Adult Carers (STACS)	2
Naffi Break (Veterans’ group)	2
Happy at Home	10
South Tyneside Adult Recovery Service (STARS)	7
South Tyneside Asylum seekers and Refugee Church Help (STARACH)	1
Vision & Hearing Support	2
<b>TOTAL</b>	<b>30</b>

## Dental practice consultation

In January 2024, staff contacted 16 of the 25 dental practices in South Tyneside by telephone. Thirteen of the 25 practices offer NHS dental services (see *Appendix 1: dental surgeries contacted by phone*).

We spoke with staff, explaining the reason for our call and arranged a suitable time for further discussion should they wish to engage.

We were able to speak face to face with three practice managers, responsible for six local dental surgeries, and one other via email and telephone.

Participants were given the option to remain anonymous. This was their preference.

A set of four broad questions were asked to enable participants to comment freely, enabling us to gain insight into the challenges being faced by dental surgeries, based on – but not limited to – the areas raised below.

The questions focused on several areas including:

- NHS patient waiting lists.
- Recruitment
- Emergency appointments.
- Missed appointments.

## Regional dental survey by North East and North Cumbria Integrated Care System

We worked in collaboration with the Healthwatch network in North East and North Cumbria (NENC) and the North East and North Cumbria Integrated Care System (ICB) to gather evidence from people who have accessed services and the wider population.

Key aims of the research included:

- Identifying the need for further investment in dentistry services to improve access and how to deliver this.
- Considering innovative ways to improve access to NHS dentistry – particularly in ‘cold spot’ areas.
- Developing an improved communications plan to inform residents of their options.

ICB also wanted to understand the experiences of residents trying to access dentistry care when they needed it, including:

- How people access the support they need.
- People’s knowledge of what to do when they need help.
- Testing how services respond to someone needing help.

More than 3,500 responses were received to the survey across the region, including 215 in South Tyneside. Healthwatch South Tyneside generated these responses by a sponsored social media campaign, mystery shopper phone calls and getting paper copies of the survey completed during visits to local groups.

Group	Date attended	Total number of paper surveys collected
Action Station (drop-in)	March 11	6
Key Community Food Bank	March 11	2
Happy at Home	March 27	24
Alzheimer’s Society	March 27	7
Cleadon Park Primary Care Centre	April 15	4
<b>TOTAL</b>		<b>43</b>

See full analysis of the North East and North Cumbria survey in *Appendix 3*.

### Public advice and information

Between April 2023 and March 2024, Healthwatch South Tyneside was contacted on 12 occasions by members of the public asking for support and advice regarding dental treatment, registering with an NHS dentist and making appointments.

Of the 12 contacts, 11 were negative in nature, stating inability to find an NHS dentist, de-registration with little or no notice, difficulty with dentures and being unhappy with care.

We were told of some issues which took place during lockdown in 2020 which have only been recently resolved. Several patients were advised by the dental practice they were speaking with to register for private treatment.

# Findings

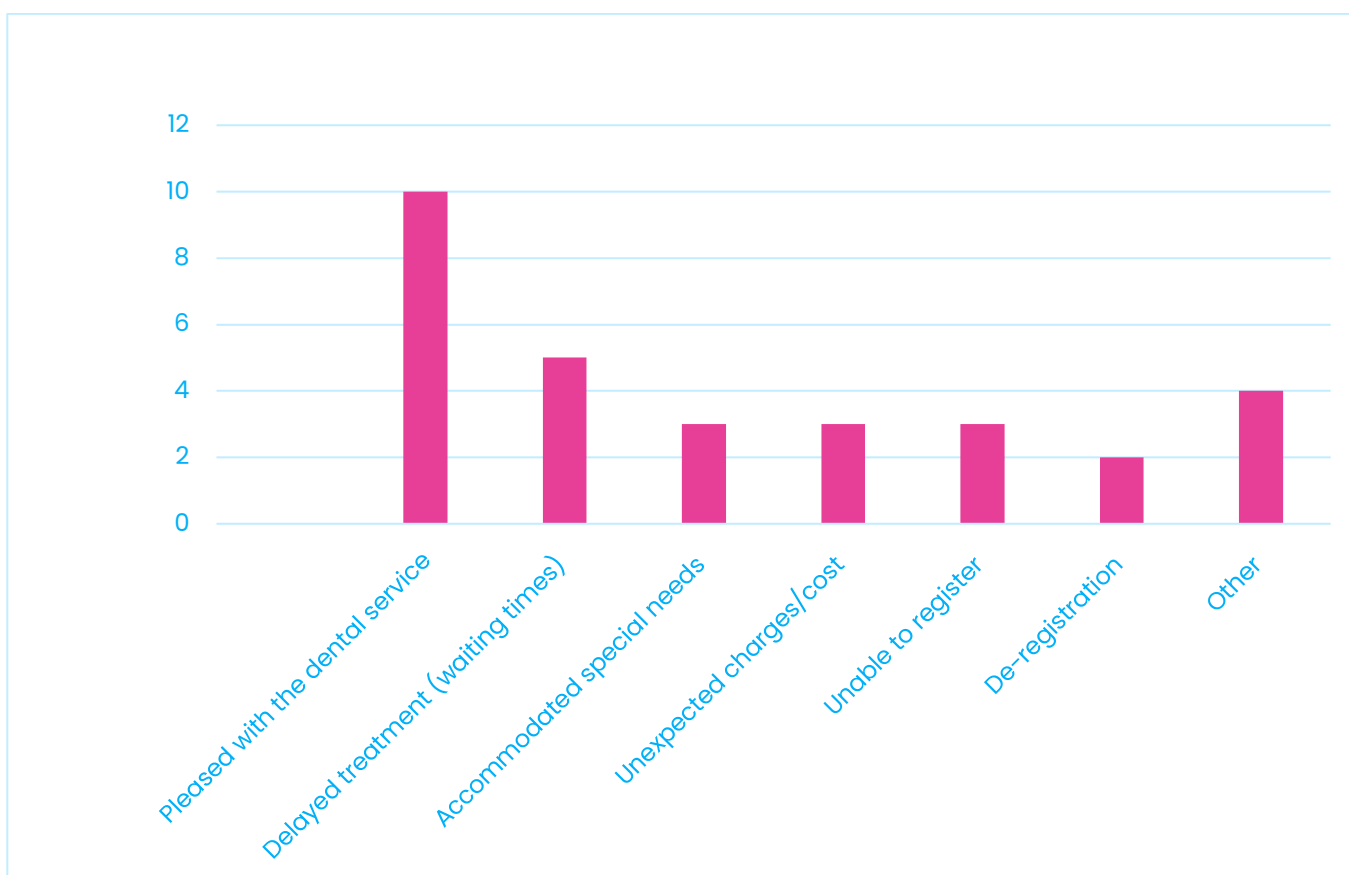
The feedback we received from the variety of methods undertaken during the year was mixed, with some patients very happy with the service they received.

However, some common themes emerged from those raising issues about local dental services.

## Have Your Say

We spoke to 30 people at visits to eight groups as part of our “Have Your Say” project.

These were the themes raised.



## Positive feedback

Some people were very positive and told us that they were pleased with their dentist and saw them regularly for check-ups. Others praised their dentists who they felt accommodated specific needs, such as being seen in a ground floor room and

carrying out home visits.

Comments included:

“I get six monthly calls from my dentist. They made facilities for me as I can’t get upstairs.”

“My dentist is great”.

“My daughter has additional needs, and the dentist sometimes checks her at school.”

Others simply said that they had “no problems”.

## Communication

Delayed treatment and lengthy waiting times was the second most frequent theme. We were told about the way that practices responded, managed patient expectations, and waiting times.

“Receptionists need to show compassion.”

“I was asked to book a six-month appointment when I went downstairs to reception they said, “they didn’t have any for nine months!”

“Waited a year for a denture.”

## Dental costs

Unexpected charges were frequently mentioned:

“I had to wait three months for a denture – in the end I just had to pay £400 for it as I couldn’t wait.”

“No problems registering but after being told it was free care, I received a bill for £100.”

“Informed that if son’s retainer broke then the parent would have to pay for a new one. Son had a seizure and parent had to pay £92.”

## Registration

We were told how people were unable to register to be seen at a practice in South Tyneside for NHS dental care. Often this was a practice where people were usually seen but told they were no longer eligible as they had not been seen for some time:

“Not registered anymore.”

“Can’t register.”

Families also told us they could not register the whole family:

“Kids are registered but not myself and my husband – I don’t know where to go for treatment – I need a filling.”

Some people believed their language barrier prevented their registration:

“Two years in the UK and not registered with a dentist.”

## What could have been better

A number of comments received mentioned problems with dentures, either ill-fitting or long waiting times before the new denture could be fitted.

“The dentist made me a denture and it’s too big.”

“Waited a year for a denture.”

Patients were frustrated at being de-registered from a practice following little or no notification.

Comments mentioned in the ‘other’ category included a person who never attends a



dental clinic, another who had no teeth, dentures being too big and a patient advised that they would be categorised as a DNA (did not attend) after giving short notice to cancel an appointment.

## Dental practice consultation

Dental practice staff were very candid in their response to our questions. This is what they said:

- There has been a high increase in demand from unregistered patients.
- Dental practice waiting lists exceed well over 100 patients, with practice staff not able to consider these until further NHS dentists have been recruited. Registered patients can be waiting five weeks to see a dentist.
- Non-attendance is high, despite reminders being sent to patients.
- A number of dental practices are not registered with the NHS 111 service to offer emergency appointments. These surgeries hold a number of appointments for emergencies per dentist on a daily basis.
- Shortage of NHS dentists and dental nurses, meaning surgeries are left vacant in some instances up to five days per week as there are not enough dentists to use the facilities.
- The profession is finding it difficult to recruit NHS dentists. An increasing number of dentists and dental practices are leaving the NHS and going private.
- NHS dentist remuneration is seen as the barrier to retention and recruitment of dentists and dental nurses.
- Offering access sessions means increasing the workload. Those registered with the NHS to offer these sessions are asked to prepare weekly reports.
- Reception staff regularly receive verbal abuse. One organisation offers an employee assist programme. This is free to staff and is a supportive resource. In all settings staff teams seem to rely on each other for moral support and wellbeing checks.
- We were told how dental practices are coming up with innovative ways to try to alleviate some of the waiting list pressures. Dental Therapists are taking on additional roles such as fillings. Agency staff being used. On one occasion a clinician attended a mentoring course and is overseeing the work being carried

out by overseas dentists who are employed as dental nurses, unable to fully practice in the UK.

- A better system for bringing dentists from overseas was seen as a way forward. The current system is seen to be causing delays in recruitment.
- Early intervention. One dental practice is hoping to return to school visits, matching pre pandemic levels.

Dental practices have different policies when it comes to de-registering a patient. Some allow a two-year period of non-attendance whilst others allow three years. The pandemic prevented many patients from attending a dentist.

A handout was shared, explaining to a patient why they had been de-registered. This seemed to be given only if the patient made a formal complaint. See *Appendix 2: Patient De-Registration Explanation Sheet*.

## Regional dental survey by North East and North Cumbria Integrated Care System

The information received in the surveys was inputted to the NENC dentistry site to be linked with our partners' research and included in the overall report.

See full analysis of the North East and North Cumbria survey in the attached report at *Appendix 3*.

## Public advice and information

Comments we received from the 12 calls taken from members of the public seeking advice and information included:

"I used 111 twice to get emergency dental appointments. I felt both times the dentist did minimal work and suggested further private treatment."

"I am currently on maternity leave and cannot find an NHS dentist to use my maternity certificate."

“I was fitted with a denture prior to the pandemic and after several repairs to the denture was told this year that the denture was temporary and would now be charged £400 to have a new one made. Before the pandemic it would have been free.”

“I attend Newcastle Dental Hospital due to having mouth cancer; usually my husband drives me. My last appointment I decided to use patient transport. My experience was very positive. My experiences at the hospital have been fantastic. My treatment and care are excellent.”

# Key observations

Our key observations included:

- Shortage of NHS dental places for new registrations and long waiting times for routine appointments. This is already problematic for children, people moving into the area, unregistered patients and those who do not pay for NHS treatment.
- Rather than early intervention, patients can only be seen when there is a problem and require emergency treatment.
- Emergency appointments are available across the borough when contacting 111. A number of emergency appointments are also held within individual dental surgeries not registered with the 111 service. However, there is not enough to meet demand.
- There are long waiting times, in many cases years, for new registrations and non-emergency treatments such as routine check-ups.
- DNAs (Did Not Attend) are a regular occurrence with appointments being wasted.
- Many patients being advised to pay privately to alleviate waiting times for treatment. See *Appendix 4: Recent Changes to Dental Charges*.

# Recommendations

## Our recommendations to service commissioners and providers:

- Clear upfront explanation of costs should be given if treatment is not funded for NHS patients.
- A family approach to registration might enable whole families to be looked after at one surgery.
- Introduce a robust system for bringing dentists from overseas as the current system is seen to be causing delays in recruitment.
- ICB (Integrated Care Board) to consider additional funding for school programmes, giving children early access to dental education and care to reduce oral health inequalities and improve oral health in children under the age of five.
- NHS England to oversee dental contract reform.
- NHS England to actively encourage all practices to implement appointment reminder services to reduce the level of DNAs.
- NHS England to provide regular updates to the Healthwatch network as and when restrictions change.
- NHS England to encourage a uniform system for de-registration, where the patient is kept informed of the process.

Healthwatch South Tyneside will share our findings with local dental practices. Feedback will continue to be reported to Healthwatch England.

We would like to thank all patients and practitioners, as well as the groups who met with us, for giving us this valuable feedback on dental services in South Tyneside.

# Appendices

## Appendix I

### Dental surgeries contacted by telephone

1.	1A Fowler Street Dental Practice	South Shields
2.	Mydentist Westoe Road	South Shields
3.	St Michael's Dental Practice	South Shields
4.	Mydentist Dene Road	South Shields
5.	Boldon Lane Dental Practice	South Shields
6.	Dev's Dental Practice	South Shields
7.	Mydentist Sunderland Road	South Shields
8.	NDC	South Shields
9.	Mrs J D Black, Mr Cowie & Associates	Boldon
10.	White DJ MR Dental Services	Boldon
11.	Mydentist Albert Road	Jarrow
12.	Grange Road West Dental Practice	Jarrow
13.	Westmount Dental Surgery	Jarrow
14.	MYDentist	Whitburn
15.	Hebburn Dental Clinic	Hebburn
16.	Riverdale Healthcare	Hebburn

## Appendix 2

### Patient De-registration Explanation Sheet

Thank you for your email, I am sorry to hear that you are unhappy about being removed as an NHS patient at the practice.

It may help if I explain.

NHS dentistry contracts changed in England in 2006, any patient 'registration' to a specific dental practice was removed. Dentistry now works differently to General Practice, where patients are registered to a specific GP surgery, in dentistry patients are free to move between dental practices to obtain treatment, so long as the practice they wish to attend has NHS capacity. As a dental practice our NHS contractual obligation is only therefore to a patient during an open course of treatment. When a patient has treatment such as Crowns, Bridges and dentures, the treatment is covered under guarantee for a period of 1 year. Outside of these a dental practice does not have any obligation to continue to offer NHS care to a person.

We have always tried to offer continuity of care, and therefore decided to create an 'active list', on which we keep patients for a 2-year period after their last attendance for a check-up or treatment (this does not include emergency only appointments). At your last check up the dentist will have advised when you should next attend, this is usually either 6 or 12 months, it is then the responsibility of the patient to make sure they book this next check-up. Failure to do so will result in removal from the practice books, to create space for the growing waiting list of patients trying to access NHS dentistry.

Under the NHS contract, as patients do not hold any registration with a dental practice, the practice has no obligation to tell a patient when they can no longer offer them treatment. We also have no obligation to recall patients for appointments, although we do sometimes offer this recall service as a courtesy service.

I would like to reassure you that we value our NHS patients as much as our private patients, however, where we have reached NHS appointment capacity at the practice, it is with regret that we cannot offer NHS appointments to all previous patients that request one.

I do understand that it will be disappointing for you to hear that we cannot accommodate you as an NHS patient if it has been more than 2 years since your last attendance. We also understand that NHS capacity is a challenge in general across dental practices in the UK, hence why we have introduced our own scheme. This allows access to dentistry for people struggling to access NHS care at this time. The practice will be happy to discuss this with you if it's of interest. The website states we are accepting new patients but only on our monthly payment scheme at present.

Whilst I hope this letter clarifies our position and answers the questions you have raised, should you still feel there are issues that have not been addressed having considered this response, then please contact the practice to discuss any outstanding concerns.

If you are not happy with our final response to your complaint and would like to take the matter further, you can contact the Parliamentary and Health Service Ombudsman. The Ombudsman makes final decisions on complaints that have not been resolved by the NHS, government departments and some other public organisations. The service is free for everyone. To make a complaint to the Ombudsman, go to <https://www.ombudsman.org.uk/making/complaint> or call 0345 015 4033. It is important that you make the complaint as soon as you receive our final response as there are time limits for the Ombudsman to look into complaints.

## Appendix 3

### Healthwatch NENC survey report and Mystery Shopper findings (to follow)

## Appendix 4

### Revised NHS Dental Charges

NHS Dental Charges From 01 April 2024 are:

- Band 1: £26.80
- Band 2: £73.50
- Band 3: £319.10
- Emergency dental treatment: £26.80
- Regulation 11 replacement NHS dental appliances: £95.70 for one appliance or £191.40 for 2

Before 01 April 2024, the NHS dental charges were:

- Band 1: £25.80
- Band 2: £70.70
- Band 3: £306.80
- Emergency dental treatment: £25.80
- Regulation 11 replacement NHS dental appliances: £92 for one appliance or £184 for two.






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