

What we've heard about dentistry

Throughout the pandemic, enquiries about dentistry have increased significantly, and remain one of the most common services we hear about. The overall theme is one of confusion; people have felt unable to access clear information about the changes to dentistry services over the course of the pandemic. Now that many dentists are beginning to offer more treatment, we are still hearing from people who aren't able to access care.

We know that dentists have been trying to treat patients as much as possible, and have to operate with limited capacity and strict safety procedures; we also acknowledge that local action is constrained by complex national challenges around the commissioning and contracting of dentistry services. However, the impact on people trying to access dental care during Covid has been significant, and we know that many people have been left distressed and confused by the situation.

The early stages of the pandemic – a summary:

April 2020

Dentistry is treating critical emergencies face-to-face – eg uncontrolled bleeding. Other urgent cases are being handled via telephone, with advice on self-care, or prescriptions for pain medication or antibiotics.

Many people didn't know how to access urgent care, and didn't know how to find out about changes to services. Many enquiries focussed on what people should do when they were in pain, and what to do if they didn't have a regular dentist – advice to phone NHS 111 wasn't clear to them.

May 2020

Urgent Dental Care centres open, and are treating patients by referral. Most care needs are still being managed via telephone, but there is slightly wider scope for in-person treatment.

People began to worry about deterioration as ongoing treatment plans were paused. It was difficult for members of the public and for us as Local Healthwatch to find clear information about the development of the treatment hubs and the scope of what might be offered.

June & July 2020

Local dentists begin to re-open to deliver urgent care. They can still offer limited appointments and treatment but this has expanded. Non-urgent care continues to be managed by telephone.

We worked with Healthwatch across Yorkshire & Humber [to highlight joint issues](#), including concerns for groups who were being impacted more severely, such as people with Autism or hearing loss. Communication from dentists to their regular patients has been mixed – with some still unclear about whether treatment is resuming.

August & September 2020

Some dentists resume routine work, while others are still treating only urgent cases.

We begin to hear a more mixed picture across the city; some practices resume check ups, while other people tell us they're still unable to access even

What is happening now?

Some themes have continued into the Autumn and Winter, and some new themes are emerging. Below is a summary of the concerns we're currently hearing.

Impact of delayed treatment

We are beginning to hear from people about the longer term impacts of delayed or paused treatment. People who needed fillings or root canal work told us that they had been left in pain for a significant amount of time, and the pain medication prescribed over the phone isn't always enough to help them.

"I am aghast how he can be left in such a terrible state, in so much pain"

Lack of clarity about what is 'urgent' care

We know that dental pain can be very distressing – so when people are told their issue isn't urgent or they can't access care, it can be confusing. Local Dental Network guidance advises that dentists should triage people who contact them for treatment, but we've heard this doesn't always happen, and some people do not get chance to explain their issue. One person told us her dentures had broken and she could not eat properly, but after phoning several dentists without being triaged and being able to explain her issue, she didn't know what else to do.

"Called NHS 111, but [...] issues regarding dentures do not count as an emergency"

Others feel it's unclear what is considered urgent – for example a person with gum disease who's been unable to get this checked for over a year, as he was told it wasn't urgent.

We know that dentists have limited capacity while trying to care for patients and maintain proper safety procedures; however for patients who are told their issue isn't urgent enough, it can be difficult to accept. For these individuals, who are often in a significant amount of pain, it would be helpful to have clearer public communication about what their options are, and what they can expect when phoning a dentist for triage.



"Been trying to get an appointment for over a year, but can't get one"

Accessing a new dentist

Patients who aren't already connected with a dentist appear to be having more problems accessing treatment than those who do have a regular dentist. This includes people who are new to Sheffield, or families trying to make an appointment for a child.



NHS England guidance states that patients can phone a local dentist for urgent care even if they have not been treated there before.

However, we have heard confusion about this – whilst dental practices don't have a patient list in the same way that GP practices do, people tell us that their local dental practice has cited 'not being registered' as a reason they cannot access an appointment. It is unclear where this miscommunication is coming from, but clearer information both publicly and internally may help to alleviate this confusion.

"Contacted several dentists who have all said that she must be registered with them as an NHS patient to be seen."

NHS vs private dental care

Some people have told us there is a long waiting list – sometimes 18-24 months long – to see an NHS dentist. Others have told us that their local dental practice were unable to see them as an NHS patient at all, but said they could pay for private care and be seen more quickly. The number of people telling us about this has increased significantly since November – and people who cannot afford to pay for private care tell us they're very concerned about this disparity. Access to NHS vs private dental care could have an ongoing impact on existing health inequalities.

"Cannot afford the private prices"

"Dentists were prioritising people who had more money"

Access to clear information

Services had to change how they operate very quickly at the start of the pandemic, and this rapid change had an impact on how easily people could find out what was going on. Many of the people who phone us say they are struggling to find information online, or that they hear an out of date answerphone message when they phone their dentist.

As a local Healthwatch, we also struggled to access clear information in order to support people with their enquiries. This is partly because prior to Covid-19, access to dentistry in Sheffield and South Yorkshire was good compared to some other areas of the country. This meant we weren't previously hearing from as many people with complex access issues, and we had not developed strong routes to seek information. It took some time to find the right routes to raise issues and gather information to help the public.

We also used public communications and information; however this wasn't always detailed enough to answer the specific questions people had about their circumstances. Advice that we gave people based on this public information didn't always match their experience when they phoned their local dentist.

