

Responses to questions put to Norfolk Health Overview & Scrutiny Committee (NHOSC) by NNDC's representative, Cllr J Boyle:

What preventative work is done to address dental issues?

The ICB see that getting nurses into schools to educate on tooth brushing and to look into children's mouths is key. This is not happening yet. In the whole of Norfolk and Waveney, only 7 practices have preventative care around oral health for children.

There is a roll out of a 111-emergency number for emergency patients that started a few weeks ago where the worst cases should be seen, but this could be a very long distance away.

There is no record of how many people are waiting to see a dentist. The NHS does not keep waiting lists.

What is causing issues with capacity across NHS Dental Services, is there a problem with training and recruiting dentists?

Jason Stokes dentist and Secretary of the Norfolk Local Dentist Committee gave a clear picture of the issues in the Norfolk and Waveney area. The biggest problem is how the dentists are paid by the NHS. The conditions are such that they have led to bankruptcies, reduction of staff and reduced pay for ancillary staff. He explained that it was like a sieve, no matter how many new recruits and trainees came into the NHS system, there was a large leakage. In 1992 there were 22,000 trained dentists in England, there are now 40,000 and yet NHS accessibility is almost impossible.

The ICB took over from NHS England overseeing dentists earlier this year and they have been able to make a few very small changes, but without a national contract change there will be no big fix of the system. The dentistry budget was underspent by 400M last year.

Responses to further questions from the Overview & Scrutiny Committee (13 October) from Kelly Barber, NHS Norfolk & Waveney ICB:

1. Can we request the full related report that was provided to the Primary Care Commission?

All papers considered in the public part of the Primary Care Commissioning Committee Meeting can be found by following this link [Primary Care Commissioning Committee meetings - Norfolk and Waveney ICS \(improvinglivesnw.org.uk\)](https://www.improvinglivesnw.org.uk/primary-care-commissioning-committee-meetings-norfolk-and-waveney-ics). The Short Term Dental Plan was discussed on 12 Sept and starts on page 37 of the pack of papers.

2. How is service demand determined if waiting list information is not collated?

The ICB is using data collated from a number of sources to understand demand, including the recently updated Oral Health Needs Assessment (which was presented to Committee in June 2023 [improvinglivesnw.org.uk/~documents/icb-publications-documents/icb-meeting-papers/2023-06-12-icb-pccc-agenda-pack-part-one/?layout=default](https://www.improvinglivesnw.org.uk/~documents/icb-publications-documents/icb-meeting-papers/2023-06-12-icb-pccc-agenda-pack-part-one/?layout=default) and is being currently updated to reflect inclusion health), Emergency Department data and NHS 111 data relating to dental queries. We will also be engaging with a wide variety of stakeholders to understand the need of different patient groups. Practices will hold waiting list data in different ways and also not every practice has a waiting list for general access so it may be difficult to gather information that is meaningful and excludes patients who may be on more than waiting list.

We are currently collating waiting list information for orthodontic waiting lists to inform commissioning plans.

3. Does the report take into account (in any way) dental health of those that are not able to access dental services?

We refer to NHS 111 and Emergency Department data for those needing urgent care and who attend for dental matters. We can also look at secondary care referral data for those attending for extractions, this is included in our OHNA. Our OHNA is being updated to look at inclusion health following active engagement with the relevant patient communities and representative groups.

4. Does the ICB have any data on the number of patients accessing private dental care?

We don't have information about individuals who choose to access private dental services or practices although private providers do need to be registered with CQC.