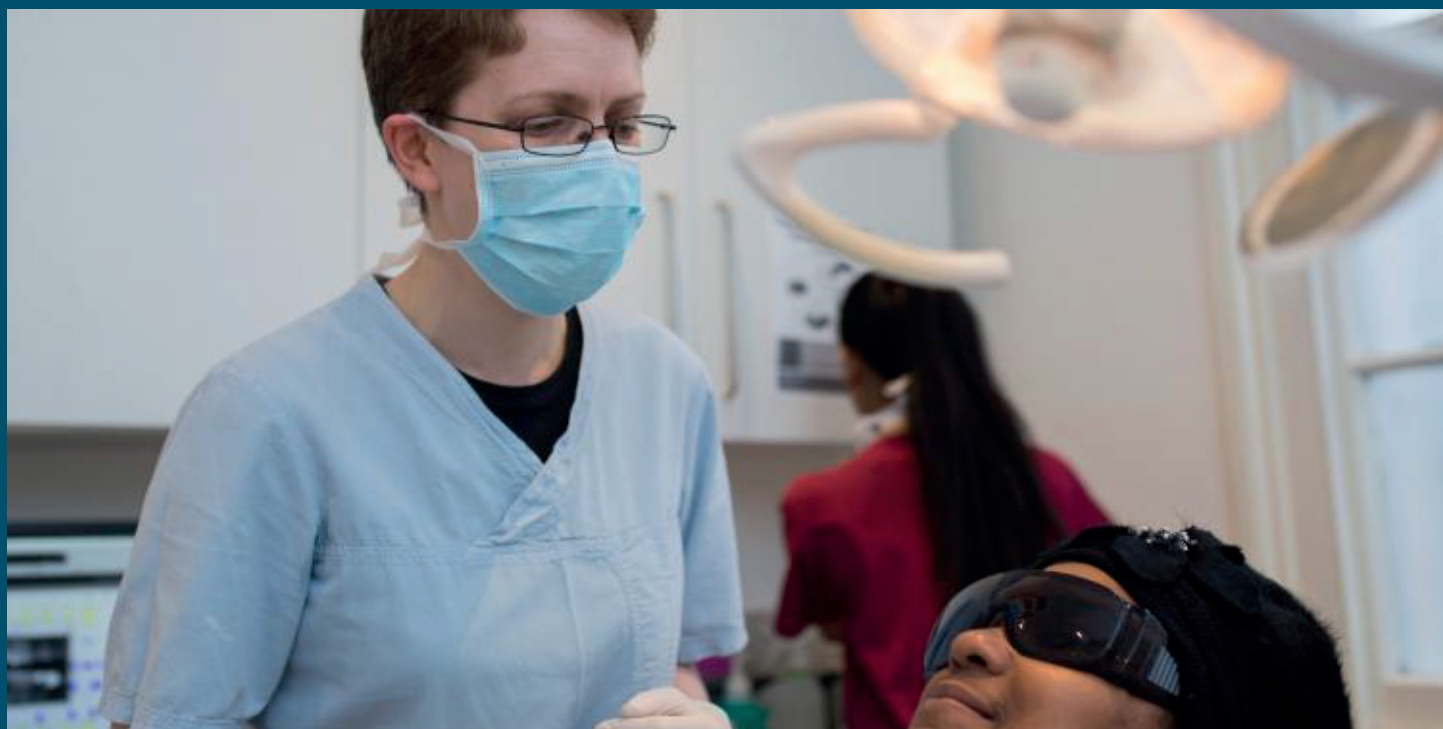


Dentistry Myth Busting

Dispelling the most common rumours
relating to NHS dentistry



**A collaborative document from Healthwatch
teams across North East England**

Healthwatch teams across the North East have seen a significant increase in concerns around getting to see their local dentist. This is also a big problem across the rest of the country.

These concerns have been made worse by some common myths and mis-understandings around how dentist practices work.

Here, we take a look at some of those myths...

1. 'Registering' at a practice

'I saw my dentist a few years ago and now they say they can't see me on the NHS. Aren't I registered?'

Dental practices are set up within the NHS in a completely different way to GP practices so there is no formal patient registration within Dentistry.

A patient is only 'registered' with practice while undergoing treatment. So, you are free to approach any NHS dentist for treatment at any time.



2. They only want to work with private patients

‘My dentist said they could not see me on the NHS but offered me a Private consultation.’

There is no formal patient registration within Dentistry - NHS Dental Practices are commissioned to deliver a number of Units of Dental Activity (UDA) which they spread out over the year.

The number of UDAs used per day will depend on the treatment needs of the patients who contact the practice, for example, simple treatments like fillings and extractions equate to 3 UDAs, more complex treatment like crowns and bridges: 12 UDAs.

Whilst NHS provision must be available across the practice’s contracted opening hours, demand for NHS treatment maybe so great that on any given day, depending on demand and the treatment needs of the patients who contact them, they could have used up all their NHS appointments when a patient rings.

They may, therefore, offer a private option to patients as an alternative, as they will have separate NHS and private appointment books, with separate clinical staff time allocated accordingly.

In line with national guidance all dental practices are required to prioritise patients based on clinical need and urgency into their available NHS appointments - this is called Triage. It is therefore important when you contact the practice that you fully explain the nature of your dental problem so that a clinical assessment can be undertaken to determine how quickly you need to be seen.

3. They are not doing routine work such as check-ups or scale and polish on the NHS

‘It’s impossible to get a routine check-up despite the fact I’ve not had one for over a year.’

All practices are currently working to a national standard operating procedures which means that they have to prioritise patients based on clinical need and urgency.

Therefore, their ability to take on patients for routine treatment such as check-ups is likely to be limited with the reduced capacity they are able to deliver, because of infection prevention control guidance.

However, if you have healthy teeth and gums, a routine check-up may not be needed for up to two years between appointments.



4. They are not doing emergency appointments.

‘I broke my tooth, but my dentist wouldn’t take me as an emergency appointment to fix it.’

Lost fillings, crowns or bridges, broken teeth or braces are not usually deemed to be clinically urgent, which means you may need to wait a little longer for an appointment.

Access to NHS urgent dental appointments is based on an individual clinical assessment of need. It is therefore important that you fully explain the nature of your dental problem to the practice or NHS 111 when you call, so they can correctly triage you.



Thank you for taking the time to read this document. We hope it has helped dispel some of the rumours you have heard recently. If you have any further concerns about a dental service in your area, please visit the dental section of the NHS website.

You can find further advice, an official complaints procedure, and lots more.

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