

Consultation response

Dentistry in Wales

Welsh Assembly

August 2018

Introduction

Age Cymru is the leading charity working to improve the lives of all older people in Wales. We believe older people should be able to lead healthy and fulfilled lives, have adequate income, access to high quality services and the opportunity to shape their own future. We seek to provide a strong voice for all older people in Wales and to raise awareness of the issues of importance to them.

We welcome the opportunity to respond to the Health, Social Care and Sport Committee's consultation on dentistry in Wales.

Older people and the future work programme

We recognise that the main emphasis of Welsh Government's document, "Taking Oral Health Improvement and Dental Services Forward in Wales: a Framework outlining priorities for dentistry and a future work programme" is on dental services for children and young people. However, we welcome the recognition on page 4 that:

"Wales has an aging population with many older people now retaining natural teeth. Some have complex medical needs with comorbidities and many will become dependent on others for aspects of daily living that others take for granted – such as brushing teeth. There is an opportunity to address disease levels and risks within adult population groups with the focus and effort which has been shown to be effective in young children."

We welcome Welsh Government's recognition of the need to shift the emphasis to a more needs-led preventive-focused approach and better align dental services to patient and population need, and the recognition that improving oral health and effective preventive dental services contributes to hygiene and nutrition for all, including dependent older people. We welcome the intention to horizon scan and discuss plans for population oral health improvement action in other age and vulnerable groups, embed the improvement of oral health as everyone's business in Wales, and for the initiative to evolve to be a national programme integrated with other Public Health Wales and Welsh Government activity and action for, in time, other age groups. We call on Welsh Government to ensure that older people are a priority within this expanding scope.

We welcome the intention that contract reform: should facilitate dentistry to better engage with primary care clusters and the wider patient care agenda, for example care of people with diabetes, smoking cessation, alcohol abuse and mouth cancer; demonstrate more effective and efficient use of available resources so that people who most need active and complex treatment can get it; allow staging of care that promotes prevention, stability and

self-care to improve outcomes particularly in higher needs disease active patients, and free up dentist time that could be directed to new patient access and/or more complex cases. We call on Welsh Government to ensure that dental services for older people are a high priority within this wider agenda.

Access to dental services for older people

Access to dentistry for older people is still a low priority in the NHS. In particular, action is required to ensure that older people in residential care have access to the same standards of healthcare services as the wider community.

The Welsh Government must provide stronger direction to care homes in Wales to improve access to health and care services for residents, such as regular access to dentists, as well as other primary care clinicians.

Preventative health care services play a key role in promoting the health and wellbeing of older people. Access to dentistry, among other services, goes right to the very heart of our ability to lead active and rewarding lives. Work supported by the Social Services Improvement Agency identified that earlier interventions and a reablement approach to supporting people with dementia, incontinence, podiatry, dental needs, strokes and falls can result in maintaining independence at home and delay the need for high-end residential care.¹

We support the use of technology such as the Dental Imaging Exchange (PACS) which enables radiographs, clinical images and 3D scans to be shared between clinicians in different locations and reduces the distances some patients have to travel to appointments.

Engagement of older people in service commissioning and design

We welcome the statements that there is flexibility within the existing contract to accelerate transformational change by describing what good looks like, include need and outcome measures worked up jointly with clinicians and contract managers, and make better use of existing resources to benefit patients.

However, we disagree with the assumption that any of this can be achieved without including the patient perspective. The views and needs of older people must be reflected in the commissioning and provision of preventative services, including dentistry. The third sector and public must be included in the development of local planning and commissioning strategies to improve appropriate preventative service provision across Wales.

Cost implications

Finally, we are concerned that any effect of increased access by a higher proportion of patients from groups exempt from paying for dental care – which would include many older people – on the maintenance of Patient Charge Revenue should not be used as an excuse for inaction or for increasing charges. The cost of dental treatment is already a barrier to treatment for some older people. That barrier must be removed, not extended.

We note that Welsh Government states that the step approach to contract reform, the current position whereby health boards continue to exceed their patient revenue targets, and the flexibility in setting the targets, help offset the risk and that service change will release efficiencies directed to more access for a given total contract value. We would not, therefore, wish or expect to see access to dental services for older people remain static or decrease, and would not wish or expect to see any additional charges for dental care for older people.

We hope these comments are useful and would be happy to provide further information if required.

¹ SSIA/John Bolton (2011) Better Support at Lower Cost, Section 4: Prevention.