

Dentistry

Engagement Summary: Case Study Report

Background

1. Following on from the Fifth Senedd Health, Social Care, and Sport Committee's May 2019 report, [A Fresh Start: Inquiry into dentistry in Wales](#), the Sixth Senedd [Health and Social Care Committee](#) is considering whether the Welsh Government is doing enough to bridge the gap in oral health inequalities and rebuild dentistry in Wales following the COVID-19 pandemic and in the context of rising costs of living.
2. In July 2022 the committee launched this new inquiry into dentistry.
3. To support this inquiry, the Committee asked the Citizen Engagement Team to interview a small number of participants across Wales to capture their lived experiences of accessing dental services.
4. This report summarises the Citizen Engagement Team's findings.

Participants

5. Between 31 August and 16 September 2022, the Citizen Engagement Team facilitated five interviews with relevant participants from across Wales. All five interviews took place virtually with four taking place in English and one in Welsh.
6. The participants interviewed were based in the following health boards:
 - Swansea Bay University Health Board
 - Betsi Cadwaladr University Health Board
 - Powys Teaching Health Board
 - Hywel Dda University Health Board
7. The objective of the engagement was to gather the views and lived experiences of people in Wales who were affected by dentistry issues.



Format

8. The format of engagement was largely comparable between sessions but varied slightly to meet participants' needs.
9. Participants were asked the following questions to help stimulate discussion.
10. What is your experience of securing dental appointments and/or treatment?
11. Are there any dental practices in your area and do you have access to NHS dentistry or are you having to pay privately?
12. What is the length of time you have had to wait for check-ups?
13. (If applicable) What is the length of time you have had to wait for treatment and/or emergency appointments, and the impact this has had on you?
14. Do you have any concerns about future treatment, particularly in the context of the current cost of living crisis?
15. These were the findings from the interviews, individual notes are available on request.

Case Studies

Participant A

Age: 66

Health Board: Swansea University Health Board.

16. Participant A suffers from several health issues (including dementia, diabetes and osteoarthritis), and accesses an NHS dental practice in the Swansea University Health Board. Participant A is unable to work due to health issues and is currently in receipt of welfare benefits. They receive approximately £300 a month.
17. Participant A explained that they had developed a cyst at the top of their mouth which required surgery to remove it. Following surgery, the hospital liaised with his NHS-funded dental practice to arrange a dental appointment.
18. In the interim, the interviewee's parents asked him whether he would like to go on holiday with them. Unfortunately, this clashed with his appointment, so he re-arranged the appointment with his dentist but was not given an alternative appointment. He said he was left without teeth for some time whilst his support

worker complained to his dental practice and the Health Ombudsman, stressing that treatment was needed as a matter of urgency.

I was completely ignored and struck off the list...I was basically left without teeth for a month or two. It just isn't acceptable and caused me lots of stress.

19. Participant A explained that they were without a dentist for approximately 3 – 4 months, They explained that they have since had an appointment to carry out an impression for dentures, but these have been problematic and are therefore awaiting a further appointment.

I managed to get into a dentist again eventually – but it wasn't an easy process. You just feel like they don't want to help you and just see you as a problem

20. Participant A has since been informed by his dentist that if the refit fails, the only other option would be to have an operation to insert dental implants. He believes that he will have to pay for these implants, which cost £1,000 a tooth, but he is unable to afford that. He has not been offered any alternative options at this stage, and with his current income, does not know how he will be able to arrange payment.

Even without everything else going on, I just cannot afford to pay that much. Who could? When you add in the cost of living, energy bill etc it's just not possible

21. Participant A's next appointment is later in the year, which he feels is a long time to wait since his first appointment, as he is limited in what he can eat and experiences pain when swallowing. He described almost choking because he has been unable to chew properly for a few months. He has since lost weight and the process has impacted negatively on his mental health.

"You feel like what's the point of being in this world? I've given 25 years to this country. The NHS needs to improve urgently

22. He explained that he has not personally noticed much difference in the waiting times or quality of treatment pre and post-pandemic, but believes the NHS should *"help people more."* He described NHS staff as being fantastic during

the pandemic but believes that the impact of the pandemic is now being used as an excuse for long waiting times.

"I think it's clear that the NHS needs more staff and we need to pay them properly and give them the right resources to support people. The staff are brilliant but they need more support."

Participant B

Age: 35

Health Board: Betsi Cadwaladr University

23. Participant B has 2 children (ages 4 and 3) and lives in North Wales. They moved back to the area in 2020 from London and were living in rented accommodation for 1 year before moving to a permanent home 9 months ago.

24. Since moving back to north Wales (during Covid), participant B has been unable to find a dentist. They were told that all appointments were on hold and nowhere was taking on new patients in the local area. they haven't seen a dentist for several years (since living in London before Covid) and the children have never seen a dentist.

"The kids have never seen a dentist. I know their teeth are probably fine, and they will probably just tell us to keep brushing, but I'm worried about my own teeth, I've got teeth that hurt that probably need to be checked out."

25. The participant even lived next door to, and was friendly with, a dentistry nurse for some time initially, and wasn't able to get an appointment or register with that practice either.

"I couldn't even pull a favour with our neighbour who worked at a dentist practice."

26. Once they moved to their permanent address 9 months ago, they looked again for a local dentistry practice but are currently still unable to find one taking NHS patients. They also approached her GP surgery for guidance but they were unable to help

“There’s a long list of practices on the NHS website, and I’ve called every single one. Not one of them is currently taking NHS patients and some of them aren’t even taking new private patients.”

27. The participant is concerned that if they or one of her family needed emergency treatment, they would have to go to A&E as they aren’t registered anywhere. They were then worried about putting strain on this service unnecessarily and potentially needing to take young children into that environment.

“I think if anything happened we’d have to go to A&E, which is probably the last thing the staff there want to hear. But if I’m not registered anywhere, I don’t know what else I would do.”

28. The participant is concerned that they haven’t seen a dentist in over 2 years and could need treatment. They are also concerned that their children have never seen a dentist. Further concerns aren’t primarily with the cost of dental care, as they are likely to register with a private dentist now they have exhausted all the NHS options.

29. However, Participant B was concerned about the capacity of the sector and how more dentists can be attracted to work in the area to improve the situation.

“It’s not even about the money, it’s about capacity. What is the pull for dentists to come and work here? How can they address the problem if the dentists just aren’t here?”

Participant C

Age: 60

Health Board: Powys Teaching Health Board

30. Participant C lives in Powys and has two children in secondary school. They have lived in the area for 6 years and note that even before Covid, they had great difficulties in accessing dentists for themselves, their partner and their two children. Participant C had several concerns about their inability to access dentistry services. Key check-ups were missed for their children due to the NHS dentist at the practice leaving. The need for emergency dental treatment meant

that they had to visit A and E, thus causing additional strain on the NHS.

So until recently, the girls hadn't seen the dentist for four to five years. They have had appointments cancelled as the NHS dentist at the practice had left. Staff leaving seems a common occurrence'

My youngest had an accident where she fell on a brick wall and smashed her tooth, we managed to go via 111 and she had emergency dentist treatment. The patch fell off so we had to go through emergency again as there was nowhere else... We kept phoning up asking whether they were doing check-ups all over sort of the COVID period and got told it was emergencies only.

31. As well as Participant C's children having difficulties in getting access to the relevant treatment, they also spoke about issues faced by their partner who after having troubles with their teeth attended an emergency appointment in May 2021. After being referred back to their dental practice to remove the tooth they are still waiting on the next steps.

We've chased a dental practice last week and they said they haven't had the referral, but it might be because it's gone to the dentist who's away on sick and it might be in this paperwork, so it's just a bottleneck.

There's no joined thinking or anything, you know, and we're just sat there. There's nothing. So she's on antibiotics regularly and it's affecting her mental health.

32. After several months of waiting and being on medication for the pain, Participant C has had to look into going private at a time when the cost of living and additional costs including children's university fees means it is not a decision made lightly.

To be fair, we have looked into going private. I know if in six months if nothing's done then we'll just bite the bullet and go private. We'll have no choice, you know? But it's the fact you can't get NHS check-ups that creates a false economy, doesn't it?

It's a false economy because they can give you advice and save money by stopping the problems at the source. It's like when the car isn't

working. If you're servicing it regularly then it's fine and you don't get the big costs down the road.

33. Participant C was frustrated at how accessing key services felt near impossible in rural areas of Wales and felt more needed to be done to tackle this inequality in accessing dental services.

It's become a postcode lottery, isn't it? Just because you live in a rural area, why should you not get the same services and the things that people get in the cities, you know, to a certain extent we've all paid the same level of taxation.

34. Whilst understanding that living in rural areas meant that travelling was inevitable to access certain services, they felt that being able to access dentist services was a basic need that was not being met.

I mean we live in mid-Wales with no major hospital so we regularly go up to Hereford or down to Cardiff or Shrewsbury Hospital. You understand that because you're living slightly out of the way it'll be harder, but dentistry is just the basic, isn't it? Let's be honest.

35. Whilst Participant C was frustrated at the lack of services available they were keen to point out that the issues were more around accessing services and not the treatment they received once an appointment was secured.

The only thing I would say is that when you do get to see the dentist that the treatment is excellent.

There's no problem with the actual treatment and the actual service. It's the provision of the service and accessing the service which is the problem, which I'm sure you already know about,

Participant D

Age: 68

Health Board: Betsi Cadwaladr University Health Board

36. Participant D lives in Gwynedd and notes how they have had great difficulties in accessing dentists in the area for the last 10 years. Her daughter who has recently moved back into the area is also currently experiencing similar difficulties.

I would say that I think if you had an NHS dentist 10 years ago, and you stuck with them and they are still practising that it wasn't too bad. I feel unlucky enough that my dentist left and that has really left me nearly a decade without a dentist and now just in limbo

My husband stayed with his dentist and was fine...until 2018, when they also left and that left both of us without a dentist!

37. Participant D explained how they hit brick walls when attempting to join a new practice. In 2019 they spoke to several practices, where they note that communication was often poor and more often than not they would not hear anything back at all.

We went on a website looking for NHS dentists. We put our names down for four, and were either told nothing or told in passing that it would take at least two years - this was early 2019 - it's only very recently, after constant chasing, that we had any contact back. I have to say that the communication was terrible

38. Whilst Participant D had gone privately in the past, it was not a scenario they wanted to pursue moving forward due to the ongoing cost of living situation and the belief that access to dentists was a service that should be readily available.

I could probably afford to go private if I had to, but I won't on principle. Dentistry feels like a basic need and the fact is I know people here who would not be able to afford it

39. Participant D finally managed to see a dentist very recently and found that problems that could have been rectified a long time ago had gotten worse.

I have problems with my teeth now, I was told I needed a crown, and was given a temporary one which lasted a week, I still have a broken tooth. When I saw the dentist he just had a quick look and told me he wasn't fixing it until it got worse. It just feels like a strange way of doing

things. A check-up every 6 months or even a year feels very much like a thing of the past.

40. Whilst Participant D has had problems with dentists in the area over the last decade she also notes how their daughter, who recently moved into the area has been unable to even get their name on a waiting list. This means that she currently is still registered with a dentist near her old home, roughly 2 hours drive away.

My daughter still has her dentist in Aberystwyth as there is just no way that they can get anything closer right now. Even there they have had their last 3 appointments cancelled last minute, even a cancelled appointment at least feels like you are in the system you know.

It's got to the point where my son lives in Cardiff and I have been tempted to put my name down for practices down there - it's a ridiculous situation.

Participant E:

Age: 45

Health Board: Hywel Dda University Health Board

41. Participant E lives in a rural part of South West Wales. Her problems began when she and her family fell off the NHS dentist register due to their practice closing.

42. Accessing dental services is a problem that now affects her, her partner, her two children and her father. She highlights how services have worsened since COVID and how the closing of her local practice caused big issues.

'We just had a letter that said our practice was closing - gave us options for 3 other practices but they are so far away, one is 40 miles away! It's just not accessible for my father for example - he has had to go private, there is just no other option'

'This issue is far-reaching for my family, it's affecting my children, myself and my dad. Pre-covid was a different environment, I could ring and I would eventually get a response. It might have been 6 weeks / 8 weeks

but you would at least get a response. Post covid is another matter altogether

43. She notes how the difficulties in getting check-ups for both her and her children will eventually lead to further complications down the line

'My child hasn't seen anyone in a long time -he is 15 now and he hasn't seen anyone for 5 years. Because he was not classed as an emergency then no one would look at him. His teeth are wonky, someone needs to check on them or there will just be issues later on'

'With me, I had a crown that fell out three years ago, they won't look at me either. Now it will become an emergency because it hasn't been treated. It always feels like in a way it's easier to be an emergency than not as at least then it seems easier to get an appointment somewhere'

44. Participant E noted how it wasn't her preference to go private, but even private dentists locally didn't seem to have much capacity. They were also extremely concerned that there was simply no NHS service available in the local area due to recent closures and she pointed out how the only option when an emergency happened was to contact 111.

'We are a family of four and I don't really want to go private but we are left with no choice. This area is a poor area - there are surely hundreds if not more not registered with a dentist. How many of those can afford to go private...If the NHS closes the dentist where is the service in this area? Where are we?'

'My father had an abscess eventually - he is 78 and had to phone round trying to get an appointment just to be told he couldn't get one due to him not being registered. Eventually, he had to call 111 and get treatment - it's beyond. He was extremely stressed and it wasn't nice to see.'

45. Participant E made comparisons between the service they had received in other situations with her children and her worry that the NHS was unable to cope with demand.

' I find the current NHS scenario scary, we had a similar issue with my son who needed ACL surgery. We eventually had to go private to sort it out due to huge waiting lists and terrible communication. Now it is exactly the same with dentists - it feels like everything is broken'