



# Health Scrutiny Panel 19 September 2013

Report Title	Update Report: Dental Services for People with Special Needs	
Classification	Public	
Cabinet Member with Lead Responsibility	Councillor Sandra Samuels Health and Well Being	
Wards Affected	All	
Accountable Strategic Director	Sarah Norman, Community	
Originating service	Primary Care NHS England	
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# **Recommendations for action:**

The Panel is asked to comment on the progress made to date and to agree to receive a more detailed report on health service outcomes after April 2014:

The contents of the report.

# **1.0** Purpose of the Report

This report is provided as agreed last year with the scrutiny panel to advise it of the service changes following the public consultation on changes to dental services for people with special needs.

# 2.0 Background

Wolverhampton City Primary Care Trust undertook a service review of its special needs community dental services; the outcomes resulted in service redesign to refocus the service to people with special needs, following a full three month public consultation. Historically an excellent service was provided to a wide range of people including those with an urgent need.

The prior specification diluted the services ability to seek out and market itself to those with special needs. A full three month public consultation was undertaken and a process to reconfigure the service was undertaken. The consultation was effective in cataloguing patient and carer as well as staff comments and views. These views have been incorporated in the new service specification.

Essentially the urgent access and routine dental services to people without special needs were removed and re provided elsewhere and a service directed specifically to those with special needs commenced on 1<sup>st</sup> April 2013. It is important to note that the definition of special needs in use is quite specific to those with significant problems and is determined by to a dentist's assessment of a patient using a national scoring system.

#### 3.0 Progress/Outcomes to date

The service has been running since 1<sup>st</sup> April 2013 and underwent significant changes. Therefore it is relatively early on to give much information regarding health and service outcomes. However from the monitoring of the data and feedback directly from the service the following is known:

#### **Case Finding Strategy**

As part of the new service reconfiguration the service developed a case finding strategy which describes the case finding approach and methodology undertaken for patients who meet the criteria for the new service.

Work is underway with organisations, institutions and other special groups to identify individuals who are eligible to attend the Special Care Dental Service who do not currently access dental care. Historically around 200 patients were identified as meeting the high case mix level. Public health data indicates that several times this number of people would be eligible for this service. Individuals who meet the service criteria will be offered an appointment at one of the clinics, on the mobile dental unit or if necessary on a domiciliary basis for an assessment of their dental needs and treatment if appropriate.

# **Scoring Special Care Patients**

The service case mix score all patients using the tool developed by the British Dental Association. Patients scoring a case mix score of 15 and above will be eligible for the service. From data reviewed early on the service is demonstrating a higher number of patient's contacts that fall into that category of a person with complex and or multiple needs. The re-provision of routine access clinics has allowed the service to develop a different approach to case finding special needs patients and early indication identifies that this level of clientele will only improve.

# **Referral policy**

A new referral policy has been launched for General Dental Practitioners (GDPs) and will be taken to other referrers as part of the case finding action strategy. GDPs are required to case mix score their referrals and only patients with a case mix of 15 and above will be accepted into the service for treatment.

Early indication from the service is that the referral process is greatly improved and the service and patient group is better understood by GDPs and other referrers.

This has been the result of the service launch, the communication and case finding strategy and improved information on RWT website. The service now has a low number of inappropriate referrals and these are mainly on the grounds that the patients referred are out of area rather than on clinical grounds.

# **Discharge Criteria**

Patients who score less than 15 on the case mix score at the end of treatment will be discharged to General Dental Practice for their regular dental care.

# **Mobile Dental Unit**

The use of the mobile unit has strengthened following service reconfiguration. The mobile unit now services to the harder to reach groups targeted groups/locations will include:

-Vulnerable group's e.g. homeless/addiction/mental health resource centres

- -Shared care clinics doctors surgeries or health centre locations
- -Special schools
- -Day centres for learning disability adults

-Residential or nursing homes providing complex fillings and extractions where patients are unable to travel to a clinic

-Complex individuals for example agoraphobic patients who find it impossible to leave their homes

# Staff Feedback

The service is only 5 months into its new configuration, and although the early signs are positive it is important to note that the service is still in a settling in period after the enormous changes in staffing and a reduced number of locations.

The service is receiving appropriate referrals, is treating special care dental patients and is identifying new patients through the case finding strategy. The provider has received comments about travelling to the new locations but the three locations were used previously and are not entirely new to patients.

The public consultation outcomes supported a reduction in the number of locations. The service has advised it does receive a number of enquiries about access to urgent dental care. This was to be expected given the historic basis of the service.

To date no complaints have been received by the commissioning team.

# 4.0 Equalities Implications

The service now seeks out those with special needs via its case finding strategy those, whereas before this group was underrepresented in the special needs service.

# 5.0 Schedule of background papers

- February 2012, Specialised Dental Service for People with Particular Needs Consultation Document, Wolverhampton City Primary Care Trust
- April 2012, Conclusions of Public Consultation Dental Service for Patients with Special Needs, NHS Black Country