NHS: PCA(D)(2017)2

Population Health Directorate
Chief Dental Officer & Dentistry Division



Dear Colleague

# SCOTLAND'S ORAL HEALTH PLAN – ANALYSIS OF RESPONSES

# **Summary**

- 1. This letter advises of the publication of the analysis of responses received in relation to the public consultation Scotland's Oral Health Plan.
- 2. The analysis document can be found at:

http://www.gov.scot/scotoralhealthplananalysis

#### Action

- 3. NHS Boards are asked to:
  - 3.1 note the information in the Memorandum to this letter; and
  - 3.2 issue the attached Memorandum to this letter to all dentists and dental bodies corporate on their dental lists.

Yours sincerely,

MARGIE TAYLOR
Chief Dental Officer

21 June 2017

#### Addresses

For action Chief Executives, NHS Boards

<u>For information</u> Chief Executive, NHS National Services Scotland

Consultants in Dental Public Health

Director, Practitioner Services

Chief Executive, NHS Education for Scotland

#### **Enquiries to:**

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# DENTISTS/DENTAL BODIES CORPORATE NATIONAL HEALTH SERVICE GENERAL DENTAL SERVICES

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## Summary

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## Background

- 3. Despite recent improvements we still face a complex set of challenges around oral health inequalities, an ageing population, and how we shift the emphasis from restorative dentistry to a more preventive-focused approach. In order to consider how we address these challenges and take NHS dental services forward for the next decade a consultation document, Scotland's Oral Health Plan, was published on 15<sup>th</sup> September 2016.
- 4. To reach as many people as possible the consultation questionnaire was available online for three months, from 15<sup>th</sup> September until 8<sup>th</sup> December 2016 and posters and leaflets were sent to all dental practices that provide General Dental Services (GDS) in Scotland to raise awareness of the consultation. A series of roadshow events were held in a variety of towns and cities across Scotland during October and November 2016 to give dental professionals an opportunity to discuss some of the key issues arising from the consultation document. Focus groups were also run by the Scottish Health Council to engage with members of the public and the findings from this have been published separately and are available at: <a href="http://www.scottishhealth.ouncil.org/publications/gathering\_public\_views/oral\_health.aspx">http://www.scottishhealth.ouncil.org/publications/gathering\_public\_views/oral\_health.aspx</a>.

## **Analysis of Responses**

- 5. The consultation process received 427 responses on the consultation platform; 564 participants at roadshow events; and 113 members of the public attending focus group events.
- 6. The consultation questionnaire asked respondents a variety of questions relating to the proposals outlined in Scotland's Oral Health Plan. The majority of questions were closed, inviting respondents to indicate their level of agreement with the proposal. Respondents were also given the opportunity to provide free-text comments to discuss their views.
- 7. At roadshow events participants were able to attend breakout sessions to discuss the main themes in the consultation document around: prevention and risk; organisation and management; payments and charges; and quality improvement and scrutiny.







- 8. There was substantial support across the range of stakeholders for a move towards a more preventive system for NHS dental services. Support was also received for the introduction of oral health risk assessments and the simplification of NHS dental charges. Whilst the introduction of enhanced services for the delivery of a variety of services was supported, the need to consider training requirements, equipment and the funding arrangement for this type of service was highlighted.
- 9. There was some support for a number of the proposals related to the arrangements for GDS, including patients being registered with the dental practice but maintaining their personal dentist, although many considered this to be happening already. There was also support for the listing of Dental Bodies Corporate; the introduction of a Director of Dentistry; an enhanced clinical monitoring service; and the introduction of a national database of key quality indicators. Substantial support was received for Protected Learning Time for dentists and practice staff.
- 10. However, a range of proposals received more mixed support, including the introduction of a national body and formal contracts between NHS Boards and practice owners. Whilst the potential benefits of the requirement for owners to provide a minimum number of hours NHS clinical care were recognised, concerns were raised about the practicalities and the potential impact on patient care.
- 11. The proposals around allowances also received mixed support, with concerns that the changes would affect the overall value of funding available for NHS dentistry. Whilst it was recognised that there needs to be transparency around earnings from public money, the proposal to make the provision of earnings and expenses information a requirement also raised concerns about how this information would be used.
- 12. The time and effort invested by people in providing thoughtful and considered responses to the consultation has been greatly appreciated. However, it must be remembered that while the views expressed are valuable in giving a flavour of opinion, they are not necessarily representative of the whole profession or the wider population, and the conclusions presented in the analysis of responses must be considered in this light.

## **Next Step**

13. It is our intention to publish an Oral Health Improvement Plan, which will shape the future of NHS dentistry for the next decade, by the end of 2017.

Scottish Government Population Health Directorate 21 June 2017





