Access to Care: A Perspective from England

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Overviews of:

- NHS System Reform in England
- Dental Education Developments
- Oral Health in England
Public Health Policy Implementation

Government Ministers

Department of Health

National Health Service

Strategic Health Authorities (28)

NHS Acute & Primary Care Trusts

400 +
Need for System Reform

- NHS started in 1948
- High levels of oral health need
- ‘Fee per item’ encouraged dentists to treat
- Fluoride toothpastes introduced in 1970s
- Oral health improves
- Need to move to system more for 21\textsuperscript{st} century.
What makes a medical professional?

- Principle of primacy of patient welfare
- Principle of patient autonomy
- Principle of social justice

Charter on Medical Professionalism
Annals of Internal Medicine, 2002; vol 136; 243-246.
Average gross fees per adult course of treatment

Exempt or remitted

Paying full charges

£5 £10 £15 £20 £25 £30 £35 £40 £45 £50 £55

0 1997 2002
Percentage of Courses of Treatment which involve any intervention

Exempt or remitted

Paying full charges

Need for System Reform

Dentists say system is .....  
• Payment, time and treatment driven 
• Bureaucratic 
• Difficult to deliver high quality dentistry

This is leading to.......  
• An increase in private treatment 
• Problems in accessing NHS dentistry in some areas
Oral Health in England
Average D(d)mft per child in England

UK Figure 2003 15 year olds

D(d)mft


5 Years 12 Years 15 Years
Dental Caries Experience (DMFT) of 12 Year old – Europe

Slovakia, Hungary, Poland, Portugal, Czech Republic, Estonia, Greece, France, Cyprus, Slovenia, Malta, Norway, Ireland, Finland, Germany, Belgium, Spain, Austria, Sweden, Denmark, Netherlands, UK, England.
Changing social class inequalities in children's dental health in Britain 1937-1993: the prevalence of caries-free 5 year olds

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<td>1937-39</td>
<td>23</td>
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<td>1973*</td>
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<td>1983*</td>
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<td>1993*</td>
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Oral Health Inequalities

• Adults in the north of England are twice as likely to have no natural teeth as those in the South

• Wide differences in the oral health of young children between regions

• Oral health related to social, economic and cultural variations
Improving Oral Health

• Tackle the causes of ill-health
• Reduce inequalities
• Personal responsibility for health
• Provide high quality information
NHS Dentistry
New Ways of Working

• Improving oral health
• Improving access to NHS Dentistry
• Reforming and improving NHS Dental services
Benefits for the dental team

• More time to spend with patients

• Less bureaucracy, less pressure

• Ability to work more closely with wider NHS
Personal Dental Services

Already 25% of dental practices in England are working in new ways:

- Contracting with the NHS to provide care based on need and not just demand
- Dentists paid by agreed courses of treatment completed rather than what they do in a course
- Preventive focus
Improving access to NHS Dentistry

- Increasing workforce
- Flexible workforce
- Location
- Education
NHS dentistry - access

- Dentists not happy with existing NHS contract
- Undertaking more private work
- Less capacity for NHS dentistry
- Skill mix not fully developed
- Increase in female graduates
Increasing Capacity of NHS Dentistry – short term

• International recruitment
  650 whole time equivalent dentists to be recruited by October 2005

Current recruitment areas:
  Poland, Portugal, Spain, India

• Returners to NHS dentistry, circa 100 by October 2005
Increasing Capacity of NHS dentistry – longer term

- 25% increase in dental students (2005 intake)
- Increase in numbers of Professionals Complementary to Dentistry
- Increasing role of the dental team
Education

- Process
  - from student application to practising clinician

- Dental teaching establishments

- Current developments
  - outreach teaching and beyond
Vocational Training (VT)

The primary aim of VT is educational - enhancing clinical and administrative competence and promote high standards through:

- 12 month structured placement
- Paid a salary of around $40,000

Dentists must have a VT number before they can have a contract to provide NHS dental services as an independent contractor.
Dental Teaching Establishments in England
Investment

- £250m ($450m) increase in dentistry budget
- Equivalent to 19.3% growth over two years
- Annual spend on NHS dental services will rise from £1.3 billions ($2.3 billions) to £1.6 billions ($2.9 billions)
Dentistry Spending per Head of Population

- US
- Canada
- Denmark
- England
- France
- Finland
- Australia
- Netherlands

Spendings per head (£)

- Total
- Public

Department of Health