

STUC response to the Scottish Executive Consultation on Modernising Dental Services in Scotland

Introduction

The STUC is Scotland's Trade Union Centre. Its purpose is to co-ordinate, develop and articulate the views and policies of the Trade Union movement in Scotland and, through the creation of real social partnership, to promote trade unionism, equality and social justice; the creation and maintenance of high quality jobs and the public sector delivery of services.

The STUC represents around 630,000 working people and their families throughout Scotland. It speaks for trade union members in and out of work, in the community and in the workplace. Our representative structures are constructed to take account of the specific views of women members, young members, black/minority ethnic members, LGBT members, and members with a disability, as well as retired and unemployed workers.

Our affiliated organisations have interests in all sectors of the economy. Our affiliates are strongly represented in the NHS and health sector generally and have members working as part of the dental services team. Trade union members also have an interest as users and funders of public sector dental services.

The STUC welcomes the opportunity to respond to the consultation on Modernising Dental Services in Scotland.

Overview

Scotland's dental record is poor and the Scottish Executive's consultation document includes the gloomy statistics of oral health in Scotland. It also rightly identifies that poor dental health is strongly linked to deprivation, and if Scotland's dental health is to improve, measures are required to address this.

There are, however, many failings in dental services that also need to be addressed. There has been a funding shortage in dental services

in Scotland for a long period of time. This has led to a crisis in the provision of dental services and overall dental health in Scotland.

A third of children in Scotland and half of all adults are not registered with a dentist – these figures are translating to increased levels of tooth decay. People in Scotland suffer poorer dental health than many of our European neighbours. Scots have a higher level of tooth decay than people living in England and Wales. By the age of 14 most children already have decay in their adult teeth. In Glasgow, for example, the main reason for admitting under 12s to hospital is to have rotten teeth removed under general anaesthetic.

These facts, unfortunately, are not new.

Supporting NHS Dentistry

There have been increasing reports of dentists deregistering patients and increasing private work, a shortage of dentists to work in rural areas and increasing pressure on hospital dental services to deal with emergency cases normally seen by the general practitioner dentist. Incidents, such as that in Stonehaven, Aberdeenshire, where dentists opening new practices are being besieged by thousands of prospective patients, clearly demonstrates the scale of the shortage of dentists carrying out NHS work.

The STUC welcomes the announcement in January 2004 by the Scottish Executive that £1.5m will be used to ensure that more people have access to quality NHS dental care.

We would wish to see as many as possible dentists who have left the NHS encouraged to come back. Also, the consultation document does not adequately address the need for more salaried NHS dentists, of which there is currently a significant shortage.

The practice of dental patients being forced to book an appointment every 18 months or face having their NHS registration cancelled is unacceptable. There are clearly not enough dentists to meet the current needs of patients. One solution could be to increase the yearly intake of dental students and review the number of training providers and programmes offered to dentists.

STUC supports the Executive's initiatives designed to encourage dentists to remain in Scotland, move to designated areas or stay on in practice longer than planned. However, these initiatives are not enough. Measures should include realistic incentives for dentists to perform NHS work. Dental premises must have adequate accommodation, facilities and equipment to provide the necessary care for patients. Funding for quality improvements to dental services must come from additional funding specifically allocated for dental services, not from the existing health budget.

Patient Access to Services

Dentistry needs to be a core NHS service. Changes need to be made to dental services through quality improvements and quality of care. Everyone should be able to receive dental treatment on a fair and equal basis. Core principles of the NHS must be followed. These are a citizens' guarantee of equity, equality of access, universalism and care based on need rather than the ability to pay.

NHS dental charges at the levels currently set act as a disincentive to access dental services even where these are available. We welcome the Executive's Partnership Agreement commitment to provide free dental checks for all by 2007 and would ask that this be complemented by a review of all dental charges.

It is also important to recognise that the new measure should tackle the causes of ill health as well as treating the causes. Policies in this area should involve a preventative approach that tackles the underlying causes of poor dental health in Scotland. Social inequalities and poverty translate into health outcomes. Dental health, in particular, is linked to deprivation and therefore, we need measures to tackle social and economic inequality and poverty.

The Dental Services Workforce

The consultation does not fully recognise the key role that the dental health team plays on improving oral health. Consideration and recognition should be given to the roles performed by dental health team members in improving dental health care and services in

Scotland and proper training, health and safety protection and appropriate terms and conditions should be available to all members of the team.

Conclusion

We believe a long-term solution is needed to improve dental services in Scotland. Oral health is poor in Scotland. As well as measures to increase the number of NHS dentists available in Scotland, solutions are also need to deal with the causes of poor dental health, that is, deprivation and social and economic inequalities.

STUC

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