

# **DENTAL CARE GUIDANCE FOR ARMED FORCES FAMILIES:**

## **ACCESS, CONTINUITY AND SUPPORT**

**The Families Federations continue to engage NHS England and Defence Dental teams to ensure we can share the latest initiatives that may make a difference to you and your family.**

**We continue to raise the issue of challenges around access and continuity of dental care and to clarify support for families.**

**For England, this latest guidance may be new to you:**

### **1. I've been told I am unable to register at a dental practice, why is that?**

Under the current dental contract, there is technically no patient registration and NHS dental practices only see patients for a course of treatment. For example, if patient A attended an initial check-up, and it was found that they needed a filling, this would be one course of treatment even if multiple visits are required. After this time, the dental practice has no future obligations to the individual although it is likely that they would wish to retain the patient and would recall them at the appropriate interval to fulfil their dental contract and provide continuity of care.

### **2. We are both serving but the dental practice insists that one of us must register as a private patient before they will consider taking our children on as NHS patients - we can't do that as we must be seen on base, so how does this work?**

Some NHS Dental practices agree to provide care to children only under an NHS contract to treat children. Therefore, they do not provide NHS dental care for adults. This can mean that the adult (parent) receives private care while the child is looked after as an NHS patient. This is due to legacy arrangements which pre-date the existing dental contract and these contracts should be phased out over time as it is viewed preferable for dental practices to treat all patient groups. However, there may still be a small number of 'child only' contracts in existence.

In this scenario, the NHS suggest that the family explain they are a military family and ask for their child to be looked after under the NHS to ensure there is no disadvantage to the military family as stipulated by the Armed Forces Covenant. Local NHS Integrated Care Board colleagues should be able to assist if any barriers are present.

### **3. When I was serving overseas, both me and my family were seen by the Dental Teams on the base, why is that not the case on returning to the UK?**

Anyone serving within the Armed Forces is entitled to dental care through the military and this may include families when assigned overseas. Defence Primary Healthcare Clinics (DPHC) overseas are

largely scaled to treat families so as not to disadvantage them in an overseas assignments. Some Isolated Detachments (ISODETS) do not have cover, and local treatment can be obtained and a refund of fees arranged. Prior approval is always required through Unit Admin Office.

Within the UK, family members (who are not serving) and children would need to access dentistry through the NHS or privately. This is because DPHC only have staff to service the military population. Additionally, dentistry is more readily available and is commissioned by NHS Integrated Care Boards (ICBs) for those residents in England. Please be aware that Integrated care boards (ICBs) replaced Clinical Commissioning Groups (CCGs) in the NHS in England from 1 July 2022. Find your ICB at this [link](#)

#### **4. Do I need 2 dental check-ups and 2 hygienist appointments for me and my children every year; how can the MOD help me with this?**

For dental care within the military, the military will determine how often serving personnel need to be seen. If a family need to access NHS dental services, patients can use nhs.uk to determine which practices are accepting new patients. Patients can put their postcode into the following link, Find a dentist - NHS and it will confirm which practices are accepting new patients.

Within the NHS, patients are recalled as clinically appropriate. This could mean they are recalled every 3, 6, 9 or 12 months. Under the dental contract reforms, adults with healthy teeth and gums will be recalled every 12 to 24 months.

A scale and polish are included within Band 1 charges under the NHS. Hygienist appointments are charged privately, and it would be up to the individual to decide if they wish to have additional hygienist appointments.

Within the NHS, fluoride varnish should be applied to children's teeth to prevent decay. Under the new dental contract reforms, fluoride varnish will be provided every 6 months for children with good oral health and every 3 months for children with higher oral health risk.

#### **5. How can I access emergency dental treatment?**

If you regularly attend a dental practice, you can contact your usual dental practice who will provide information on what to do if you need to access emergency dental treatment. If within practice hours, they may be able to offer you an urgent dental appointment. If outside of practice hours, the dentist's answer machine will be able to provide information on what you should do.

If a patient does not have a regular dental practice, patients should contact 111 for advice or get help from 111 online [Check your symptoms - NHS 111](#).

Because no-one registers with a dentist anymore, the process has changed to finding an NHS practice that is accepting patients.

## **6. Why can't we go back to the NHS dentist who used to treat my family before we were posted overseas, it's not their fault they had to leave. Surely that's what the Covenant is supposed to sort out**

If a family is assigned back to the same area, it may be possible to go back to the same NHS dentist. However, this will depend on whether the dental practice has capacity to take on new patients. Dental practices will have a finite number of places depending on the size of their NHS contract and will need to allocate resources accordingly. Dental practices do sometimes offer waiting lists so patients can ask to be made aware when spaces become available.

If a family is assigned to a different area in England, the family should liaise with their dental practices to see whether they can continue to be seen.

The covenant ensures there is no disadvantage for the Armed Forces population but access to dentistry can be problematic for the whole population not just armed forces families.

## **7. Could dentists reserve a number of NHS spaces for Armed Forces families, especially in the areas close to military units?**

It would be unlikely that dental practices would wish to hold a few NHS spaces for Armed Forces families as they need to fulfil their NHS contract. A dental practice could hold spaces but then families may not choose to register with them resulting in the dental practice not meeting its obligations and spaces being wasted.

In areas where there is a high concentration of military families, ICBS may have or are planning to review dental provision and consider whether any specific arrangements could be put in place.

## **8. How do I know which Dentists are accepting new Patients?**

Patients can use nhs.uk to determine which practices are accepting new patients. Patients can put their postcode into the following link, [Find a dentist - NHS](#) and it will confirm which practices are accepting new patients.

## **9. How do I know which Dentists are accepting children?**

Patients can use nhs.uk to determine which practices are accepting children. Patients can put their postcode into the following link, [Find a dentist - NHS](#) and it will confirm which practices are accepting children.

## **10. Where is the guidance for families in Wales and Scotland?**

Although England, Wales and Scotland all have publicly funded health systems, devolution means each nation makes its own decisions about funding, priorities and service design, therefore support can look and feel quite different.

We have included guidance for families living in Wales and Scotland too.

### **ORTHODONTICS**

Orthodontist treatment plans can go on for years; will the NHS pick up treatment started by another specialist when my family moves to another area?

Orthodontists with NHS contracts can accept a patient who has moved from another part of the country (or from overseas) who is already waiting for or undergoing NHS orthodontic treatment.

Most orthodontists operate two waiting lists: one for assessment and one for treatment. The assessment appointment will determine NHS eligibility e.g. whether a patient can be treated under the NHS and prioritise clinical need.

### **TRANSFERS WITHIN THE UK**

If a patient is on a waiting list for orthodontic treatment and moves within the UK, the treating orthodontist should discuss alternative orthodontic providers with the patient and arrange a direct referral to the preferred provider. To ensure Armed Forces families retain their relative position on the waiting list, the referring orthodontist should provide the date of the patient's acceptance on their list to the new provider to ensure their relative position is retained.

What do I do if my child is part way through orthodontic treatment and the family is assigned to another part of the country?

If patients are in active treatment, the treating orthodontist should discuss alternative orthodontic providers with the patient and arrange a direct referral to the preferred provider to continue treatment.

### **ORTHODONTIC TRANSFERS FROM ABROAD**

Where a patient begins treatment abroad (not just EEA) and returns to the UK and is entitled to NHS care, NHS criteria is applicable (i.e. that they were under 18, an Index of Treatment Need (IOTN) of at least 3.6 and have good oral health) and not the criteria from the country where they began treatment.

Orthodontic treatment which has been undertaken in another country may not be compatible with UK standards and may need to be removed and a new course of treatment provided if the patient is eligible for NHS orthodontic treatment.

The MOD has a process to check treatment undertaken overseas meets the NHS IOTN threshold before treatment is approved and ideally treatment should only commence overseas if it can be completed at the same location.

Patients can find information on who currently provides dental and orthodontic treatment on the NHS Choices website ([www.nhs.uk](http://www.nhs.uk)). Patients should contact their preferred dental practice to arrange an initial appointment and discuss a referral to an orthodontist if appropriate.

Alternatively, a GP may refer the patient to an orthodontist for their clinical opinion.

If a patient is on a waiting list for orthodontic treatment and transfers from abroad, if the orthodontist deems that the patient meets NHS criteria, the orthodontist will agree the appropriate waiting time based on clinical need and the need to retain the patient's relative position on the waiting list. In order for the patient's relative position to be retained, it would be useful for the patient to provide feedback on how long they have been waiting for treatment (e.g. date of patient acceptance on overseas waiting list).

If a patient has been receiving orthodontic treatment overseas, patients should arrange for their original patient records including study models, x-rays, photographs and notes to be provided so that an NHS orthodontic specialist can confirm whether they would have met NHS criteria on their original assessment date (i.e. that they were under 18, an Index of Treatment Need (IOTN) of at least 3.6 and have good oral health). If the orthodontist feels that the NHS criteria would have been met, a course of treatment can continue to be provided. If the orthodontist does not feel that the NHS criteria would have been met or original patient records are not provided, a course of treatment will not be provided.

## **A SINGLE POINT OF CONTACT (SPOC)**

If Armed Forces personnel and their families have queries and/or concerns around the coordination of their health care pathway within England or due to relocate from another country within the UK or are returning from overseas, the SPOC can be contacted for signposting, advice and support. Contact can be made by email to [england.armyforceshealth@nhs.net](mailto:england.armyforceshealth@nhs.net). Emails will be responded to Monday- Friday 09.00hrs- 16.30hrs.

## **NEW NAMES FOR NEW ROLES IN NHS DENTAL**

The NHS dental team is evolving to meet the demands of modern healthcare. Here are some of the new roles and responsibilities within the NHS dental team:

**Dental therapists:** provide check-ups, treatment, and referrals while Dental Nurses can offer oral health education.

**Direct access arrangements:** you can see a dental hygienist or therapist for treatment without first consulting a Dentist.

Please ask what your options are...it may be that instead of an appointment with a Dentist, you could see a Dental Therapist, Dental Nurse or a Dental Hygienist...

**We continue to raise the issue of challenges around access and continuity of dental care and to clarify support for families.**

**For families in Wales, this latest guidance may be new to you:**

Dental Access Portal (DAP): [Dental Access Portal - Digital Health and Care Wales](#) – this is for patients wishing to join a local practice but without prior access. It is no longer possible to walk into a practice and be accepted as an NHS patient, as the DAP will ensure equitable access for those wishing to access NHS care. The link is available to anyone with a Welsh postcode, which is a selection criterion to join the portal.

Urgent care: There are variations around accessing urgent (non-emergency) dental care, which varies by Health Board. They are not easy to locate, as some are not fully using NHS111 at present, this list should help:

**Aneurin Bevan Dental Helpline**

Covers Blaenau Gwent, Caerphilly, Monmouthshire, Newport and Torfaen.

Dental Helpline: 01633 744387 (Mon-Fri 9:00am-12:15pm and 1:15pm-4:00pm)

Advice only weekdays 6:30pm – 8:00am and weekends/bank holidays 8:00am – 10:00pm. Website:

**Dentist - Aneurin Bevan University Health Board (nhs.wales)**

**Betsi Cadwaladr**

Covers Anglesey, Gwynedd, Conwy, Denbighshire, Flintshire and Wrexham.

Call NHS 111 Wales (24 hours/7days a week).

Website: **Dental - Betsi Cadwaladr University Health Board (nhs.wales)**

**Cardiff and Vale Dental Helpline**

Covers Cardiff and the Vale of Glamorgan.

Dental Helpline: 0300 10 20 247

Website: **Dental Services - Cardiff and Vale University Health Board**

### Cwm Taf Morgannwg Dental Helpline

Covers Rhondda Cynon Taff, Merthyr Tydfil and Bridgend  
Call NHS 111 (24 hours/7 days a week).

Website: Community Dental Service - Cwm Taf Morgannwg University Health Board (nhs.wales)

### Hywel Dda

Covers Carmarthenshire, Pembrokeshire and Ceredigion.

Call NHS 111 (24 hours/7 days a week).

Website: Dental - Hywel Dda University Health Board (nhs.wales)

### Swansea Bay

Covers Swansea and Neath Port Talbot.

Call NHS 111 (24 hours/7 days a week).

Website: Dentists - Swansea Bay University Health Board (nhs.wales)

### Powys

Call NHS 111 (24 hours/7 days a week).

Website: Dental Services - Powys Teaching Health Board (nhs.wales)

**We continue to raise the issue of challenges around access and continuity of dental care and to clarify support for families.**

**For families in Scotland, this latest guidance may be new to you:**

Find a dentist near you using the online search tool [nhsinform.scot/scotlands-service-directory/dental-services](https://nhsinform.scot/scotlands-service-directory/dental-services)

The Scottish Dental Access Initiative (SDAI) aims to support NHS dental provision in designated geographic areas where access to General Dental Services is low and there is evidence of unmet patient demand and/or high oral health needs. Find out more at this [scottishdental.nhs.scot/dental-team/workforce-education-and-training/scottish-dental-access-initiative](http://scottishdental.nhs.scot/dental-team/workforce-education-and-training/scottish-dental-access-initiative)

See how Childsmile is improving the oral health of children in Scotland [childsmile.nhs.scot](http://childsmile.nhs.scot)

## **A PLEA FROM THE FAMILIES FEDERATIONS!**

**We all have both Health and Covenant specialists in our teams, please continue to share your experiences (good and bad!) of access, continuity of care and dental support for you and your family. We have regular meetings with the MOD and NHS on this matter and provide your feedback in a bid to shape change:**

[\*\*Naval Families Federation\*\*](#)

[\*\*Army Families Federation\*\*](#)

[\*\*RAF Families Federation\*\*](#)