

healthwatch

Tower Hamlets

Pediatric Dental Health in
Tower Hamlets

Aug 2019

Project Overview

In Tower Hamlets the proportion of 5-year old children experiencing tooth decay was 35.5% with the need for tooth extraction being the largest single cause of hospital admissions for children. The percentage of children accessing dental services was at 50.4%. This compares to 62.8% for London and 69.4% for England.

As a large number of children were presenting themselves in hospital for tooth extraction, we wanted to engage with the community and find out what barriers, if any, they were facing to accessing dental services in Tower Hamlets.

Between January and March 2019 we spoke to 86 local residents and service users about their experiences of using Pediatric Dentistry services in Tower Hamlets.

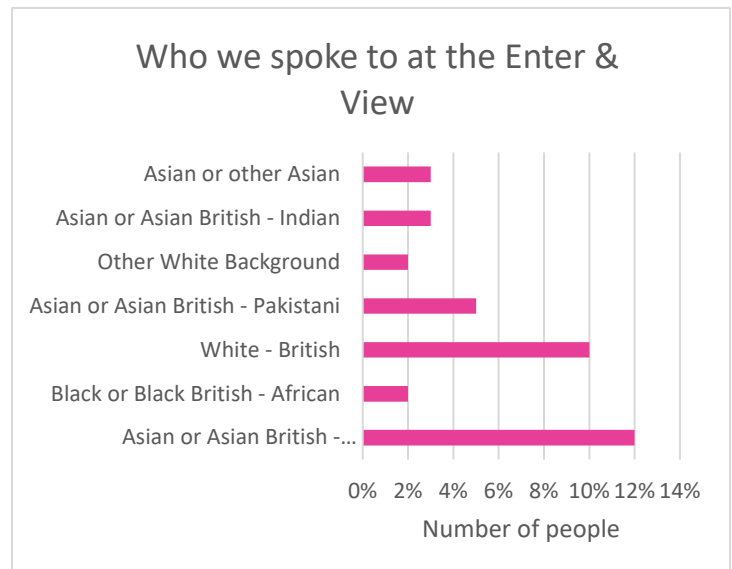
We wanted to understand

- How people access their dentist;
- Whether they have had issues accessing them in the past;
- How educated they feel they are in Oral health;
- Whether they feel any dental issues could have been avoided by earlier intervention

To achieve this, we conducted 5 Enter and Views at local Dentist practices and spoke to 21 parents who were attending appointments with their children. We spoke to the parents whilst they were waiting to be seen. The Dental Practices we visited were:

1. Puresmile - Roman Road
2. William Place Dental - William Place, Bow
3. E14 Dental Centre - 815 Commercial Road
4. Whitechapel Dental - Whitechapel Road
5. Smile Dental Practice - 115 Harford Street

We also conducted 2 Enter and Views at the Royal London Dental Hospital where we spoke to 16 service users in the waiting area.



We also attended 6 coffee mornings in local schools in Tower Hamlets and we spoke to 65 parents, both mothers and fathers. Parents were predominantly Bangladeshi with some Somali parents.

The schools we attended were:

- Blue Gate Fields Junior School
- Mayflower Primary School
- St Paul's Way Trust Primary School
- Wellington Way Primary school
- Old Palace Primary School
- Woolmore Primary School

This was an open discussion where parents were asked questions and were also free to share their experiences. Each discussion lasted for a duration of an hour.

Parents were very happy to engage with us and share their views and any issues they were facing regarding their children's Oral health.

The questions that were asked are;

- whether or not their children visited the dentist;
- if they had any issues with their teeth;
- if they were having any form of treatment,
- if they felt it was important to visit the dentist,
- whether or not they faced issues registering with a dentist
- if their children have had tooth extractions,
- if they had tooth decay, what was the primary cause of this,
- what advice they had been given about Oral Health
- if their school had run workshops on oral health and if parents had attended
- if they able to get appointments to see the dentist,
- were after school appointments available and if they were able to access them
- whether or not their dentist is open during the weekends
- what they thought about the service they receive from their dentist
- if they felt they received sufficient advice on Oral Health

Key Findings

- Registering with a dental service was an **easy process** for many parents, however many stated that **booking appointment** is where the issue lies.
- The relationship between the dentist, parents and children played a **crucial part in their child dental health**.
- There is a **lack of education from school** about oral care when children reach secondary schools
- There is a confusion surrounding the **choices made to improve children dental health** and feel it should **be explained** and made clear to parents as to why those choices are made.

Recommendations

4. Dentist should explain their decisions in their procedure that have been chosen to patients in terms they can understand.
5. There needs to be more advertisement and education of the different service they have access to and increase signposting to the 111 service.
6. Educational workshop and sessions are needed to stress why regular check-ups are important, also highlight that these are free for children.
7. Continue to roll out oral health education in schools across the borough, make them engaging for children and parents alike.
1. As a part of the dental workshops in schools, there should be friendly interaction between children, parents and the dentists so that they are all prepped about what appointments and procedures entail helping to negate fear.
2. Dentists should aim to create a therapeutic relationship with both children and their parents and engage with them positively.
3. Make sure there is training for dentists to help people with additional needs, or refer patients with additional needs to a practice/ hospital that can help them better as a part of their care plan.

Coffee Morning Findings

We attended 6 different coffee mornings in primary schools around the borough, and spoke to groups ranging from 3-17 parents. Half of the groups were made up entirely of mothers and the other half were a mixed group.

Dental appointments

There was an inconsistency around being able to book appointments easily - it seemed dependent on the practice people were registered with. Some had no trouble booking appointments in advance for their children during holidays. Others were constantly told to call back in a couple of weeks to book appointments, leading to parents changing dentists regularly due to the difficulty of arranging appointments.

Some parents found that due to opening hours, there is only a limited after-school slot for appointments that is hard to book - this was especially a problem for those with children in secondary school as they finish later.

One father said his daughter who is 9 had four crowns fitted. He felt this was dated and there had to be better treatment. He was removing the crowns to clean them as there was a lot of blackness and it was smelling badly. He was also still waiting to receive an appointment from the dental hospital, it has been more than 16 months.

Patients were waiting a long time for referrals to the dental hospital and the orthodontics - the wait time was at least 6 months for most and in some cases if they had complicated procedures or any cancellations, they could be waiting for a year or more for an issue to be fixed.

One child went to hospital for an extraction but got scared and was eventually discharged without undertaking the procedure. They went back to the dentist who refer them back to the hospital but have not yet heard back from the hospital. This process started back in June 2018 and the child still needs an extraction.

Coffee Morning Findings

Between Routine Check up and Emergency Dental Care

Across the parents there was an inconsistent attitude to taking children for dental appointments. Some parents stated that they make routine check-ups for their children every 6 months, as this is the oral health advice they are given, whilst other said they would only come to the dentist if there was a problem or a toothache.

In this case, the problems tend to escalate as it can be hard to make emergency appointments on the day and they have to wait at least a couple of weeks to be seen. This seems to be how people end up presenting for extractions - they wait until the last minute to be seen and this time-frame is extended by lack of immediate appointments. However, even if parents were aware they had to go every 6 months, the difficulty of getting appointments and additional anxieties would hinder them.

A few of the parents that we spoke to said that their children had already had extractions and these seemed to occur around the ages of 6-8 years old.

Registering

On the whole, parents were able to register with their local dentist easily, however there was an odd case of one mother being unable to register her child even after trying multiple times.

Dental service

Most parents felt as if the dental service they were receiving was good. Good practice was highlighted i.e. practices that sent text message reminders regarding appointments, and good communication so that language was not a barrier.

Additionally, parents do not seem to be aware of the emergency 111 service. Instead parents said they would present at A&E or at the dental emergency hospital if they could not get an appointment with their own dentist.

Factors affecting Dental Health

During the Enter and Views conducted at local Dentist practices, many factors that influence oral health were mentioned.

Oral Health Education

The majority of parents spoken to were aware of initiatives within the schools to teach children and themselves about oral health, many had attended workshops themselves, and some of children had received fluoride coatings during nursery. Parents seemed happy with this, but one pointed out that this teaching often happens in primary schools and below, and that there is not enough oral health education in secondary schools.



“My children’s school doesn’t provide any oral dental care information - they are currently in secondary school - whilst in comparison, primary schools provide more information about dental care than secondary



schools.”

Some parent stated that their children had not receive any oral care education and taught their children from when they were toddlers. Many parents that local government should focus on oral care at an older age as that is when issues arise.

There was a concern education and communication for children with additional needs from their local dentist.

A mother with an autistic child said that going to the dentist was difficult and the dentist was ill-equipped to deal with the situation and therefore does not take them often. However, taking her daughter to the dental hospital was a good experience as they were specialised to deal with children and had more time and expertise to take care of her daughter.

Relationship with Dentists

The relationship between the dentists and the children played a major role in the child response to their dental health. Many parents expressed the good care they receive from their dentist which led to a good relationship between the children, parents and dentist.



“The original dentist is good, really calming, re-assuring and took his time with my daughter.”

“They are happy to receive stickers when they come to the dentist. My children are not

scared to come to the dentist.”



While other children feared their dentists delaying their dental care.



“My youngest child didn’t want to open her mouth but will try again in 6 months.”



Expenses

Schemes such as the travel cost reimbursement made it easier for parents as they are able to travel to their child dental appointment without thinking about travel expenses. Some parent were not able to afford the cost of dental treatment they would receive. Despite taking their children to their regular check-up that they themselves could not afford their own regular dental check-ups.

One parent mentioned the difficulty in providing healthy food during the holiday period.





“I struggle during the school holidays to keep enough food in the fridge. They seem to have a holiday stomach that is hard to keep full. During term time it’s ok - he has free school lunches but I struggle to be able afford enough food and healthy food.”



Information

Most patients felt that their dentist gave them enough information, advice, and explained procedures. However, they felt they were lacking information about what mouthwash does and how it should be used, and what exactly they had to pay for under the NHS and when this changed across children and adult services.


 *"I have received good advice here and would feel comfortable to ask questions."* 


Many of the parents and children have expressed the good care they receive from their dentist, and the good relationship they build with the children and parents.

 *"The consultant has provided good care throughout my son's treatment and if he has problems with his braces he has to come to the dental hospital by 8am for an emergency appointment."* 

Reminders

Parent believed it would be helpful to receive reminders through their children's schools, and are pleased with receiving reminders through text messages.

 *"I think reminders to make appointments for parents, sent home from school, would be really helpful."*

"The receptionists were good and we got a text prior to coming which was helpful," 

Conclusion

There is evidence to suggest that oral health is linked with the relationship residents of Tower Hamlets have with their dental services.

Residents are unaware how the dentist operates, and the different services that are available to them. More information and advertising would help resident navigate the dental services for their needs.

The relationship between the dentists, parents and children which can lead to an improved oral health. As children and parent build good connection with their dentist their response in taking greater care of their teeth increase.

Similarly, children that fear dentist miss out on their routine check-up which could have prevented them dental issue. Further research is needed into the way to improve parents access to dental service, with many raising issues of travel cost and dental cost.