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- Narrowing oral healthcare inequalities in Yorkshire and the Humber

## Narrowing oral healthcare inequalities in Yorkshire and the Humber



[\\_ \(https://www.england.nhs.uk/wp-content/uploads/2023/02/Jonathon-Smith.jpg\)](https://www.england.nhs.uk/wp-content/uploads/2023/02/Jonathon-Smith.jpg) people experiencing homelessness, looked after children and vulnerable migrants are among those groups being supported by initiatives to improve access to dental services for underserved communities in Yorkshire and Humber.

Following publication of the paper “[Inclusion Health: applying all our health \(https://www.gov.uk/government/publications/inclusion-health-applying-all-our-health/inclusion-health-applying-all-our-health\)](https://www.gov.uk/government/publications/inclusion-health-applying-all-our-health/inclusion-health-applying-all-our-health)”, which calls on health and care professionals to take action to reduce healthcare inequalities, local stakeholders identified a number of opportunities for targeted interventions to improve access, experience and outcomes for socially excluded and vulnerable groups known to have high dental needs in the area.

Anyone in need of emergency dental treatment is advised to contact a dentist – as some practices are able to offer appointments at short notice. If you do not have a dentist, you can find one using [NHS 111 \(https://www.nhs.uk/using-the-nhs/nhs-services/urgent-and-emergency-care/nhs-111/\)](https://www.nhs.uk/using-the-nhs/nhs-services/urgent-and-emergency-care/nhs-111/).

People who are struggling to access emergency care are advised to call NHS 111 to find an out-of-hours dental service near you

## People experiencing homelessness

In Leeds, a programme supporting people experiencing homelessness to access dental care is helping to narrow healthcare inequalities in the area. In general, people experiencing homelessness have poorer dental health and experience higher levels of tooth decay and gum disease. Poor diet, alcohol and drug consumption and a high smoking prevalence also place this population at a higher risk of oral diseases, including mouth cancer.

However, it is well recognised that people experiencing homelessness face particular challenges in accessing healthcare, particularly dental care services. Barriers include stigma and cost as well as anxiety about dental treatment. The logistics of making and travelling to an appointment can also be prohibitive.

The dental public health and dental commissioning teams in West Yorkshire worked with dental care providers, local homelessness charities and other partners to establish two designated “homeless friendly” dental practices offering dedicated sessions for those experiencing homelessness. As part of this, local charities work with the practices to book patients into appointments and support them to attend.

Stefan Serban, Consultant in Dental Public Health at NHS England, who led on the initiative said “Often when dentists see patients who are experiencing homelessness there is an acute dental need. This, coupled with other healthcare needs, means that care and treatment for these patients can be more complex and time consuming. By working together with local partners, we can ensure that people are seen in a timely manner which is suited to their need; helping to prevent more serious problems.

“The designated practices are also helping to build trust within the homeless community, providing a safe space where people can access the care and treatment they need without fear of judgement.

“During the first four months of the programme nearly 70 people experiencing homelessness have received dental care in Leeds. The impact of this new service goes beyond the numbers and charities are reporting the life changing effects it is having on restoring their client’s dignity, their ability to talk, smile and eat without pain or shame.

“This work is based on a similar model developed in Manchester which has been successfully operating for several years. The model was adapted to the local context and is being piloted for one year. The findings of the evaluation will inform the future design of the service in Leeds as well as other localities within the region.

## **Looked after children**

Dental services for looked after children in Yorkshire and Humber have also been transformed thanks to the development of a simple pathway and standardised assessment forms for use across a growing number of local authorities. The work, led by Lucy Ridsdale, Leadership Fellow, Health Education England, Yorkshire and the Humber, is helping to reduce inequalities in the local area and is supporting local authorities to meet their duty to ensure children in their care receive appropriate dental provision. The newly launched [Core20PLUS5 approach for children and young people](https://www.england.nhs.uk/about/equality/equality-hub/national-healthcare-inequalities-improvement-programme/core20plus5/core20plus5-cyp/) (<https://www.england.nhs.uk/about/equality/equality-hub/national-healthcare-inequalities-improvement-programme/core20plus5/core20plus5-cyp/>) also highlights oral health as one of five clinical areas of focus for narrowing healthcare inequalities.

The pathway was developed together with the Paediatric Dentistry Managed Clinical Network, local dental networks and committees, looked after children teams and local authorities.

At the point a child is taken into care, carers of looked after children are now given advice and guidance on dental assessments, including paperwork for dentists to complete at the child’s first appointment. This is then returned to the carer for them to share with the child’s paediatrician, social worker and local looked after children’s health team. This empowers everyone involved in caring for the child and recognises the vital role they have in ensuring that children’s dental health needs are met.

A simple resource to explain the pathway and how to streamline the process is now in development.

## **Afghan evacuees**

As part of the Government's Afghan Citizens Resettlement Scheme around 400 Afghan evacuees, including children and families, were re-located to hotels across North Yorkshire.

While the NHS put in place wraparound healthcare packages for this extremely vulnerable and traumatised group, many were finding it difficult to access urgent dental care. This was partly due to language barriers and a reliance on NHS 111 services.

Working together with the Refugee Council, Health Education England developed a pathway of care to support this under-served group and ensure those in need of urgent dental care were supported to receive this. This included a simple screening questionnaire, which was developed with the local authority and translated into Pashto and Dari; the two main Afghan languages. The Refugee Council gave the questionnaire to evacuees experiencing dental problems.

People identified as in urgent need of treatment were referred to one of three foundation training practices in the local area where newly qualified dentists could provide urgent treatment as part of their foundation year training. Costs for translating treatment and planning documents, as well as translation services during dental appointments, were modest and were covered as part of foundation training costs.

The new approach removed some of the barriers to access, streamlined care and ensured those receiving treatment were able to give informed consent. It also helped to reduce avoidable presentations to accident and emergency services and general medical practices. Foundation dentists working in the practices also received invaluable experience around collaborative working and caring for vulnerable groups which will support them in their future roles.

In a six-month period, over 50 evacuees, including children and young people, were supported through the pathway; one of the evacuees who was helped is now being assisted to continue undergraduate dental training which they had started in Afghanistan.

Simon Hearnshaw, training programme director at Health Education England and former Local Dental Network Chair for North Yorkshire and Humber said, "The work happening across Yorkshire and Humber is an excellent example of what can be achieved, at pace, to improve access, experience and outcomes for

underserved communities. It reflects the commitment of individuals and systems to narrow the healthcare inequalities experienced by their local populations and is a practical example of the Core20PLUS5 approach (<https://www.england.nhs.uk/about/equality/equality-hub/national-healthcare-inequalities-improvement-programme/core20plus5/>) in action.

“Key to the success has been effective partnership working; listening to those already working with communities and learning from the experience of others engaged in similar work. Engaging with our wider stakeholder group has meant we’ve been able to remove barriers one by one, ensuring that high quality dental care is available to those who are most in need.