Dental Services

13 November 2007

Minister for Health and Social Services, Edwina Hart

I am grateful for the opportunity to make a statement concerning dental services and oral health. The new arrangements for commissioning primary dental care services in the national health service have now been in place for some 18 months. The new contract has helped to stabilise the provision of NHS dental services and improved access for patients. Local health boards have been able to bring in new services if a dentist leaves or reduces their NHS commitment, and have found little shortage of takers for new or expanded contracts, when offered. Access problems are now confined to a very few areas and work goes on to improve the position. We expect further progress over the next few months to reach a consistent position where everyone in Wales who wants access to NHS dental care will be able to get it. However, I also recognise it has been a challenging time for dentists and the national health service. I have listened to the concerns expressed by those in the dental profession, local health boards and patients about certain operational aspects of the contract. Today's statement arises from those concerns.

I have, therefore, decided to undertake a review of the operation of the dental contract following its first full year. I am announcing today the establishment of a task and finish group, involving representatives of the dental profession, local health boards and community health councils, to be serviced by Welsh Assembly Government staff, to look at a range of issues to improve the way in which the dental contract works. I have asked Professor Wayne Richards to chair the group. Uniquely, he combines NHS dental practice with a part-time post as a visiting professor of community general dental practice at the University of Glamorgan. I believe this combination of practical and academic expertise will be invaluable in the role of chair. The group will also lay the ground for fulfilling the Welsh Assembly Government's published goal of consolidating and developing the community dental service in Wales.

The second element of my statement concerns oral health. Wales has a poor record on oral health. Some of our children have some of the worst teeth in Europe. The dental health of five-year-old children in Wales is the worst in Great Britain. That is not acceptable for what is an almost totally preventable disease. Therefore, I am announcing today the development of a national oral health action plan for Wales. That will set out a range of actions designed to improve oral health. It will encourage individuals to take better control of their oral health, guide dental practices to focus more on preventive care and enable us to tackle long-standing oral health inequalities.

A public health strategy for Wales is currently being developed. Set in that context, our priorities will be to ensure that oral health is truly integrated into the wider public health agenda and that commissioners give local oral health action plans a high priority. I wish to see the adoption of a multi-agency approach to oral health in which schools and parents play a vital role. Central to the strategy will be a strengthened public dentistry role for the community dental service. In addition, through the work of the dental contract review group, we will work towards family general dental services, shifting the emphasis to preventive care. It is through a national plan of action that we will best overcome the differences between the oral health of children from the least well-off and most well-off families.

'Eradicating Child Poverty in Wales—Measuring Success' sets out the Welsh Assembly Government's targets and milestones for reducing the levels of dental decay among children. Our first aim is that, by 2020, the dental health of five-year-olds and 12-year-olds in the most

deprived fifth of the population will improve to that presently found in the middle fifth. I believe that those are realistic targets that can be achieved and even bettered. That will tackle the combined efforts of a range of different public agencies and professionals and will encourage a renewed sense of responsibility among some patients and parents. I am glad to have had the opportunity to make this set of announcements on re-energising that process in Plenary today.