

# Gloucestershire Local Involvement Network (LINK)

## Access to NHS dentistry and podiatry services for residents in care homes

### Report

September 2010

*“Gloucestershire LINK will help influence,  
improve or change the way local health and  
social care services are planned and delivered”*

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# 1. Introduction

Local Involvement Networks (LINK) were set up in April 2008 as part of the legislation in the Local Government and Public Involvement in Health Act 2007. One of the main functions of LINKs is to collect views from patients, carers and the public about health and social care services in their local authority area. These views are given to the Commissioners, Providers and Regulators of the services, to help improve and change these services.

In 2008/09 a series of community events were held in venues throughout the county. These events had two main functions. Firstly to give the public information about the LINK and what it was doing. Secondly to obtain views from the public about health and social care services in their area.

At all these events, podiatry services were mentioned as a cause of concern. It was therefore decided by the LINK Stewardship Board (LSB) that access to podiatry services would be investigated in more depth as part of the 2009/10 work plan.

A short term task group was formed and a report on their findings is published on the website [www.gloslink.org.uk](http://www.gloslink.org.uk)

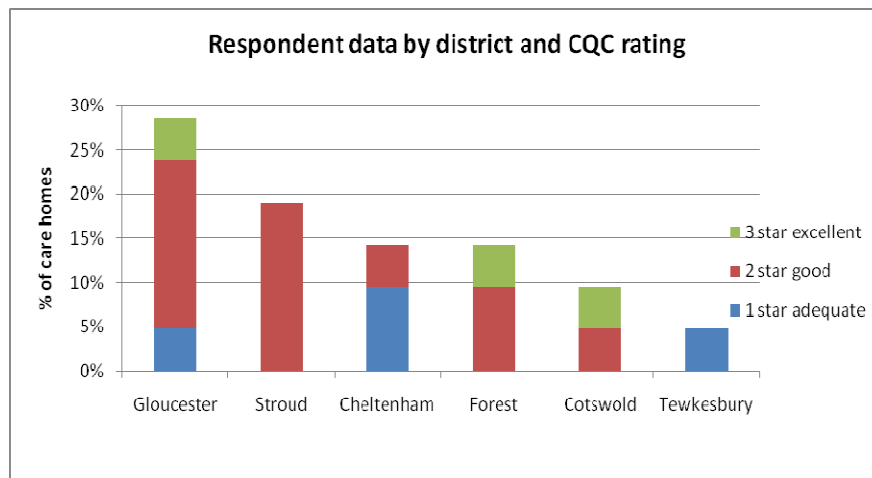
The LSB also agreed that the access to NHS dentistry and podiatry services by residents in care homes should be reviewed

Barbara Marshall, Chair of Gloucestershire LINK and Susie Oakley, LINK member and Nursing Home Representative of the Gloucestershire Care Providers Association (GCPA) and manager of Richmond Painswick Care Homes, worked in partnership to design a questionnaire (Appendix 1) to be circulated to care homes in Gloucestershire in order to gather information on resident access to dental and podiatry services. This questionnaire was distributed at the GCPA Conference held on 29<sup>th</sup> April 2010 and followed up with an email reminder on 25<sup>th</sup> May 2010. Responses to the questionnaires were returned slowly and sometimes a long period after the deadline.

## 2. Responses to the Questionnaire

### 2.1 Respondent Data

180 questionnaires were circulated to care homes in Gloucestershire and 21 responses were received, representing 593 care home residents. Of the 21 care homes, 4 were categorised as supported living whilst the remainder provided care for older people including residents with dementia and physical disabilities. The responses received covered all 6 districts and gave a good representation of the Care Quality Commission (CQC) quality ratings (see graph below)



Responses from the questionnaire are summarised below

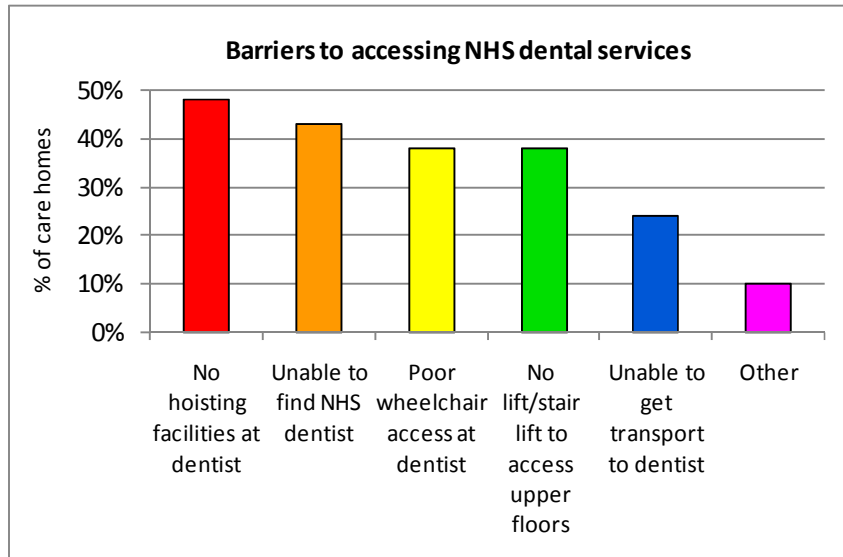
### 2.2 Dental Services

13% of the 593 residents currently receive private dental services and 26% currently receive NHS dental services, while 43% do not currently receive any dental services. Three respondents did not write a number and instead made the following comments: “as necessary”; “as required”; “depends on income”. In addition, one respondent who did write a number also added “appointments booked when requested”.

- **Barriers to receiving NHS dental services**

Respondents were provided with a list of possible barriers to receiving NHS dental services and were asked to tick those which applied to one or more of their residents.

The most commonly ticked reason was lack of hoisting facilities, with almost half the respondents (48%) citing this as a barrier. The full results are shown below.



Two additional reasons were specified by respondents

- *“Residents’ movement is restricted and dentist finds it difficult to look into mouth”*
- *“Bed bound residents cannot access NHS dentistry within the home”*

- **How could access to NHS Dentistry be improved?**

Respondents were asked how access to NHS dental services could be improved for their residents. The most common suggestion was:

- ✓ **provide home visits**

Other suggestions included:

- ✓ **make it easier/quicker to get appointments**
- ✓ **provide a hoist**
- ✓ **more NHS dental practices**

Two respondents also commented that **appointments are often cancelled** at short notice.

The full comments are shown below (the number of asterisks show the CQC rating for the care home ie \* = adequate, \*\*= good, \*\*\* = excellent)

- *NHS to visit the home\**
- *With our young client group dentistry is essential and is proving a real issue. I appreciate that many dentist facilities are not suitable, many are not willing to do home visits either. At the Dean we could not facilitate this option.\**
- *Many residents prefer 'in-house' check ups as they already have many hospital visits to attend. This service for dentistry may be an idea.\**
- *Transport is sometimes difficult. The home has to pay for wheelchair vehicle. Also appointments are booked in advance so spaces are limited.\**
- *To get home visit\*\**
- *Home visits more accessible\*\**
- *More dentists to cover home visits \*\**
- *More available domiciliary service for frail residents \*\**
- *NHS dentist will do domiciliary visits for treatment but residents normally have to wait 8-12 weeks\*\**
- *Mobile dentist service (NHS) needed for those nursed in bed or with high mobility problems\*\**
- *The local service is part-time and appointments are cancelled on a fairly regular basis\*\**
- *Often have difficulty getting immobile residents to the local Churchdown clinic, although once there, wheelchair access is good\*\**
- *A hoist would be a benefit to the service\*\**
- *More NHS dentist places needed\*\**
- *Speedier access to initial assessment otherwise happy as procedures e.g. filling, extractions are successfully undertaken on our site by our provider (Beeches Green)\*\**
- *We use the emergency clinic at Churchdown for broken teeth and usually have home visits, which is necessary for patients with dementia who cannot cope outside their own environment where they feel safe. The dentist and nurse visit the home and build up experience with our client group. We use wheelchair taxi if necessary.\*\**
- *Good service received now \*\*\**
- *Home visit for pmlD resident\*\*\**
- *Unfortunately the service in Cinderford is part time. Often appointments can be cancelled at short notice and appointments can be hard to get hold of.*

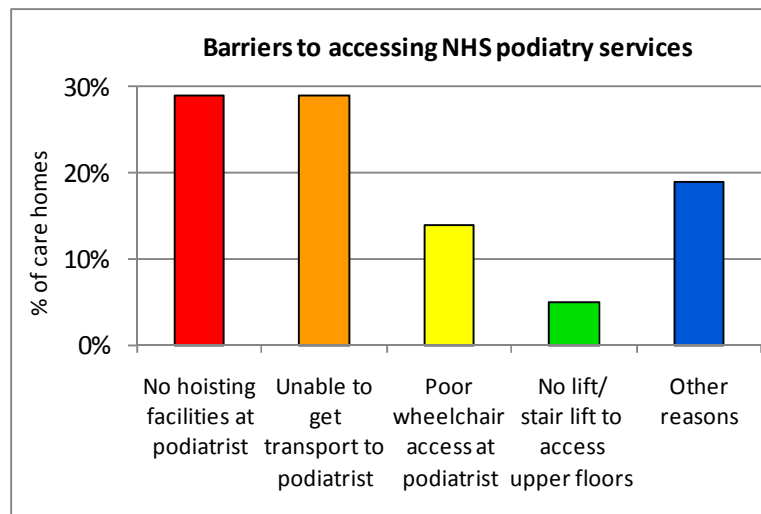
## 2.3 Podiatry services

82% of the 593 residents regularly use private podiatry services and 4% regularly use NHS podiatry services, while 13% do not regularly use podiatry services. One respondent wrote “Home has own contractor”.

- **Barriers to receiving NHS podiatry services**

Respondents were provided with a list of possible barriers to receiving NHS podiatry services and were asked to tick those which applied to one or more of their residents.

The most commonly ticked reasons were lack of hoisting facilities and lack of transport; almost 3 in 10 respondents (29%) cited these as barriers. The full results are shown in the chart below.

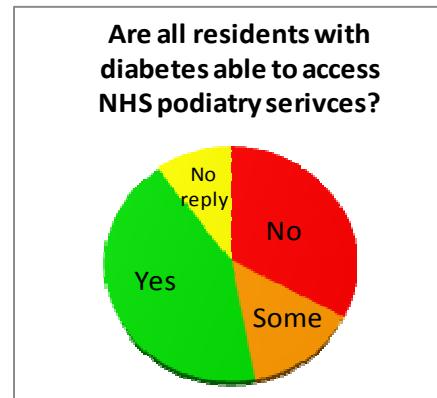


Four additional reasons were specified by respondents in addition to those listed:

- *Lack of information on how to access service*
- *Offered only 2 appointments per year*
- *Unable to meet the demand of providing escorts for all residents*
- *Family members unable to take residents to appointments – staff not always available*

- **Podiatry for residents with diabetes**

When asked if all residents with diabetes were able to access NHS podiatry services, 33% of respondents said 'no', 14% said 'some', 43% said 'yes' and the remainder did not reply.



- **'Best Foot Forward' service**

Best Foot Forward was initially a joint foot care project between West Glos Primary Care Trust's podiatry service and Gloucestershire County Council's home care service and still operates in the Gloucester and Forest of Dean area. Home care assistants are trained by NHS podiatry to provide foot care. 76% of respondents said they were unaware of the "Best Foot Forward" service. Only 14% (three respondents) said they were aware of this service.

- **How could access to NHS podiatry services be improved**

Respondents were asked how access to NHS podiatry services could be improved for their residents. As with dentistry, the most common suggestion was:

- ✓ provide home visits

Other suggestions included:

- ✓ more frequent appointments
- ✓ more information

Two respondents also commented that the **small size of the venues** was problematic due to the size of residents' wheelchairs.

The full comments are shown below (the number of asterisks show the CQC rating for the care home ie \* = adequate, \*\*= good, \*\*\* = excellent.)

- *Re-introduce visits to the home for residents with mobility problems\**
- *Transport\**
- *This is a very important service for this young client group. We have accessed a private service that has proved problematic with service quality.\**
- *To get home visits. They will not come to the home. \*\**
- *Home visits on request\*\**
- *Clinics held in the homes \*\**
- *Most of our residents have their own chiropodists who visit regularly\*\**
- *More information where we can access NHS podiatry. Also information re 'Best Foot Forward' service\*\**
- *Better awareness and publicity for service users. Staff training/awareness\*\**
- *All staff had training from NHS but some do not feel comfortable to cut service users nails*
- *The venue is small which can be problematic due to the size of some of the wheelchairs\*\**
- *Transport to get to the clinics is a problem for immobile residents, this is the reason the majority use the services of a private domiciliary chiropodist\*\**
- *It suits us to have an in-house podiatry service. It is good quality, provided at a time that suits our clients and they see the same person each time. Nurses assess the need beforehand. We have 12 weekly visits planned in advance. The service is included in our fees. No transport issues to deal with. It is important in our Falls Prevention Policy and has an impact on the quality of life the residents enjoy. \*\*\**
- *Home visit for pmld resident\*\*\**
- *Home visits. Unable to meet the demands of providing escorts\*\*\*.*
- *More frequent appointments for those able to go\*\*\**
- *Regular 6 weekly appointments\*\*\**
- *Visit to home*
- *Room used is small, our wheelchairs are rather large*

### **3. Conclusions**

The survey provided a good representation across all 6 districts covering all categories of care and a good spread of quality of care (as represented by CQC quality ratings).

#### **3.1 Access to NHS dentistry**

- NHS Gloucestershire have made considerable efforts over the last two years to improve the access to NHS dentistry for all the population of Gloucestershire. However there is still a shortage of dentists in some areas of the county. This obviously contributes to the difficulties encountered by the residents in care homes

Only 26% of the residents received NHS dental care and 43% of the residents received no dental care at all.

- There is often a long waiting list for appointments, sometimes with limited times available and sometimes cancelled appointments
- Wheelchair access is a problem in a large number of premises and no lifts are available where the consulting rooms are upstairs
- Those premises that have wheelchair access do not have hoisting facilities for patients
- Some of the care homes do not have wheelchair accessible transport which prevents access to dentists
- Staff or family members are not available to accompany the residents to the dentist
- Many residents with dementia cannot cope outside the care home and no home visits by a dentist are available
- Where a resident has restricted movement this makes it difficult for the dentist to carry out any treatment

### 3.2 Access to NHS podiatry services

- NHS podiatry services are available throughout the Gloucestershire area and most of these clinics are held in premises that are wheelchair accessible

Only 4% of the survey participants regularly used NHS podiatry services. 82% of the survey participants regularly used private podiatry.

- 43% of care homes said that all residents with diabetes were able to access NHS podiatry services
- As with access to NHS dentistry, access to NHS podiatry was thought to be restricted by lack of hoisting facilities, lack of staff or family to accompany the resident and lack of wheelchair accessible transport
- There was a lack of information available in care homes about how to access NHS podiatry services
- 75% of the care homes were not aware of the 'Best Foot Forward' service but this may only be a reflection of the limited availability of the service.

## **4. Recommendations**

### **Access for care homes to:-**

#### **NHS Dentistry**

1. Efforts should be made to increase the accessibility of NHS dentistry including home visits to people with disabilities particularly those in wheelchairs.
2. There should be more publicity for care homes on the location and availability of NHS dentists who are willing to treat patients with disabilities.
3. Care homes without wheelchair accessible transport should be encouraged to obtain this type of transport.

#### **NHS Podiatry**

1. Information about the availability of NHS podiatry should be sent to all care homes with details of clinics that have wheelchair access.
2. Although NHS podiatry services are available throughout Gloucestershire, there is a very limited domiciliary service. Consideration should be given to increasing this service for the residents of care homes who are unable to attend a clinic.
3. Care home managers should be encouraged to make sure that all residents with diabetes are able to access NHS podiatry.
4. Care home managers should be encouraged to take up the footcare training available for care home staff offered by the Gloucestershire Podiatry Service.

# ACKNOWLEDGEMENTS

Gloucestershire LINK wishes to thank Susie Oakley of the Gloucestershire Care Providers Association (GCPA) for her help and assistance in the development of the questionnaire and to all those care homes who took part in the survey.

# APPENDIX 1

## Access to dental and podiatry services in care homes survey



### Gloucestershire Local Involvement Network (LINK)

#### Access to NHS Dental and Podiatry Services in Care Homes Task Group Survey for distribution to Care Providers Association Conference 29th April 2010

The Gloucestershire LINK is a network of local people, groups and community organisations who want to help shape health and social care services commissioned and provided in Gloucestershire. The Gloucestershire LINK has statutory duties and powers and will act in accordance with the Local Government and Public Involvement in Health Act 2007.

Reviewing access to NHS dental and podiatry services for people in care homes is a task within the LINK workplan which has been approved by the Gloucestershire Local Involvement Network (LINK) Stewardship Board. As part of the review, we would be grateful if you could complete the survey below.

#### GENERAL

Q1 Please provide the name and address of your care home:

Q2 How many residents are there at your care home?

#### ACCESS TO DENTAL SERVICES

Q3 How many of your residents currently receive private dental services?

Q4 How many of your residents currently receive NHS dental services?

Q5 How many of your residents do not currently receive any dental services?

Q6 There are many reasons why people are not able to receive NHS dental services. Which of the following reasons apply to one or more of your residents? (please only tick ONE box in each row)

	Yes	No	Don't know
Unable to find a dentist who is taking on new NHS patients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unable to get transport to the dentist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Poor wheelchair access at the dentist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No lift or stair lift to access upper floors at the dentist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No hoisting facilities at the dentist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other reasons, please state .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q7 How could access to NHS dentistry be improved for your residents?

**ACCESS TO PODIATRY SERVICES**

Q8 How many of your residents regularly use private podiatry services?

Q9 How many of your residents regularly use NHS podiatry services?

Q10 How many of your residents do not regularly use podiatry services?

Q11 Are all your residents who have diabetes able to access NHS podiatry services? (tick one)  
Yes  No  Some

Q12 Are you aware of the "Best Foot Forward" Service? Yes  No

Q13 There are many reasons why people are not able to access NHS podiatry services. Which of the following reasons apply to one or more of your residents? (please only tick ONE box in each row)

	Yes	No	Don't know
Not able to get transport to the podiatrist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Poor wheelchair access at the podiatrist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No lift or stair lift to access upper floors at the podiatrist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No hoisting facilities at the podiatrist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other reasons, please state .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q14 How could access to NHS podiatry services be improved for your residents?

Thank you for completing this survey. Please return the survey using the enclosed FREEPOST envelope to: Gloucestershire LINK, Gloucestershire Rural Community Council, FREEPOST SWC 0305, Community House, 15 College Green, Gloucester, GL1 2BR