

Our vision for **Community Dental Services** in Leeds



Information for
patients

This leaflet includes information about some improvements we would like to make to our Community Dental Service (CDS) across the City.

You may have already been involved in providing feedback to us about the service you currently receive. This leaflet builds on this. It sets out how we would like to shape changes that we believe will lead to improved patient care for the people of Leeds now and in the future.

Why we need to change

Our vision for the CDS is that it will:

- Be held in clinics with the very best facilities
- House all the experts you need in one place
- Provide the most up-to-date equipment
- Have responsive waiting times
- Provide care that is as clinically safe as possible

There has always been a community dental service across Leeds which has provided dental care for children and adults which cannot be met by their regular NHS dentist. Over time, the complexity of need for those accessing the service has increased. The way we deliver the service from our community clinics has therefore needed to change to:

- Respond to the complexity of conditions
- Learn from other organisations
- Reflect changes in the law
- Address feedback and improvement programmes

Increased complexity can mean people wait longer to be seen and that they need separate appointments for different dental experts. It also means a greater reliance on modern facilities, to make sure we meet health and safety requirements, infection control regulations and other legal requirements (for example, safe storage of medical gases).

Our aim is to be more responsive to patient need. We want to reduce waiting times and the number of appointments needed to complete treatment. This is especially important to patients who have extreme dental anxiety, as longer waits can increase anxiety levels. Shorter waiting times also mean patients are more likely to attend appointments (where we have long wait times we can experience non-attendance, as people can forget they had an appointment).

To make sure we continue to offer the best possible service, we have been looking again at the way we provide our service to you.

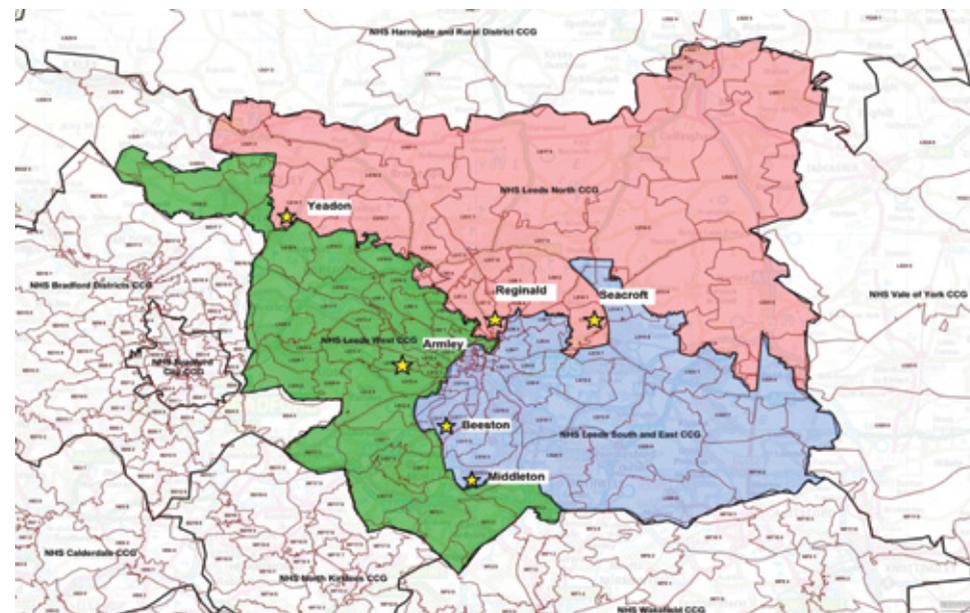
When checking that our clinic areas are right for our patients, we also need to follow the Equality Act to provide:

- Sufficient and suitably located services to meet the needs of the population
- Clinics accessible by a variety of transport, including public transport
- Fair access to services through a sufficient number of premises
- Appropriate accessibility and accommodation
- Appropriate resources and equipment to deliver the full range of commissioned services

How the service works now

The current service is provided from six sites across the city:

Armley Moor Health Centre	95 Town Street, Armley LS12 3HD
Beeston Hill Community Health Centre	123 Cemetery Road, Beeston LS11 8LH
Reginald Centre	263 Chapeltown Road, Leeds LS7 3EX
Middleton Health Centre	Acre Close, Middleton LS10 4HT
Seacroft Clinic	Seacroft Avenue, Leeds LS14 6PF
Yeadon Health Centre	17 South View Road, Yeadon LS19 7PS



Although we have good spread of clinics across the city, we know that by having 6 sites, our care team is spread thinly. It also means that not all clinics are open daily.

Currently our Seacroft and Middleton clinics are used the least, with two surgeries a week. Access for disabled patients is good at our Middleton site. In terms of appropriate resources and equipment to deliver the full range of services, our Seacroft clinic falls short of all our other sites. It has limited car parking and is only part compliant with the Disability Discrimination Act. It has no tracking hoists and no accommodation for moulded wheelchairs.

Clients from the Seacroft area with more complex needs may already travel to a nearby clinic to receive the best treatment. This is also true if they need a full head X-ray or specialist / consultant input.

The structure of the Seacroft building means that necessary improvements are not possible. There is no room to house a full head x-ray machine in the surgery, no separate room within the dental suite that could be adapted, and corridors and doorways are too narrow for moulded wheelchairs. It would not be possible to undertake RA – also known as ‘gas and air’, as the medical gases would need to be stored external to the building in bottles.

Having listened to the feedback and drawing on *best practice elsewhere in the country, our dental experts believe significant improvements are possible. Our intention is to improve both patient experience and individual outcomes. The way we would like to do this is outlined here:

How the service could look in the future

From October 2017, we would like to test a state-of-the-art Assessment Centre across two of our existing sites:

- A children’s centre – based at Beeston Hill Community Health Centre, (1 day a week) for all children under 16, including children with dental anxiety or those with complex or additional needs
- An adult centre – based at Reginald Centre, Chapeltown (1 day a week) for adults with extreme dental anxiety or with complex or additional needs

The centres will provide state-of-the art facilities including:

- Fully operational dental suites that include the full range of sedation facilities
- Tracking hoists for patients with impaired mobility
- Full compliance with Disability Discrimination Act
- Full head x-ray equipment (which allow views of the whole mouth)
- Improved infection prevention controls (for example, enhanced storage facilities for sterile and non-sterile equipment)
- Access to all the experts you need at a one-stop-shop, so no need for additional appointments and long waits between visits

Your appointment can be scheduled so you can see all your care team in one visit:

- Dentist
- Hygienist
- Dental nurse
- Consultant (so referral for General Anaesthetic or RA also known as ‘gas and air’ can be achieved same day)

We asked our patients what they thought

In February 2017 we undertook extensive patient engagement to help us improve our service. We did this through:

- Six focus groups, one at each of the six existing venues
- Written questionnaire (non-clinical team members were available in waiting rooms to help with completion if required)

32 patients attended focus groups (6 attendees were clients at Seacroft)

82 written questionnaires were completed (10 were returned from Seacroft)

We asked current patients what was important to them about the service they received. We wanted to know if patients would be willing to travel for modern facilities, reduced waiting times, and access to a full range of specialists. Here’s a summary of what they told us:

What patients said	What we would like to offer
Most patients were willing to travel for additional specialist treatment.	We have used this information to look at how we deliver specialist treatment from our current clinics. We want to make sure patients see the right person, at the right time, in the right place to meet their needs. The Reginald Centre, the closest alternative venue to Seacroft is fully equipped to offer the best treatment options. We believe an Assessment Centre model will help us achieve this.
Most patients preferred access to treatment locally. On the whole patients would like to see reduced waiting times between appointments. This was more important to patients with extreme dental anxiety, who were willing to travel if this meant quicker access to services.	Wherever possible we aim to achieve care close to home. To meet demand in the best way possible we would like to offer a reduced service at Seacroft Clinic. This will be aimed at those unable to travel and those with less complex needs. A reduced service will allow us to trial Assessment Centres. We think Assessment Centres will reduce waiting times, not least for those with extreme dental anxiety. We also believe they will be less unsettling for patients with a learning disability, or who are on the autistic spectrum. This is because the service can be provided in one place with the full care team available during a single visit.

What patients said	What we would like to offer
Seeing the same dentist and team was important. Local clinics were easier to access if patients needed to be accompanied and often meant patients could attend on their own.	Our dentists and care teams are not based in one place. They work across the city and at all our current clinic venues, so it is likely patients will be familiar with the care team wherever they access the service in the City. Assessment Centres will mean it should become even easier to see the team, and ensure that care is more joined up. We know that access to local care is still important and that is why we would like to offer a limited service from our Seacroft Clinic for those unable to travel or who require less complex treatment.
Quite often patients travel on public transport and this can be difficult if travelling across Leeds. Concerns about the additional cost of travelling for those who travel in a taxi. It may be more difficult for carers who need to take additional time to accompany patients on visits further away.	We know that travel issues can be an important factor in a person's care. That is why we are proposing to keep a limited service at Seacroft for those unable to travel and for those who need less complex treatment. Where complex treatment is required we believe the care at any of our other venues will provide safe and effective care. We also believe that trialling an Assessment Centre will mean care can be co-ordinated in a more streamlined way from the start of a person's treatment plan. It should reduce the number of appointments needed and the overall impact on patient and carer time should be reduced. For current Seacroft patients, where there is a need to travel and difficulties in doing so we are happy to talk to individuals to discuss options.
Why were no Senior Managers present at the meeting to answer questions?	To allow patients the opportunity to answer questions as freely as possible, it is standard practice for Senior Managers to remain outside of a focus group. We need to think about how we communicate this in a better way in the future. Our meeting on the 11th July is designed to provide the opportunity for Senior Managers to meet with Seacroft patients and respond to the issues raised.

What happens next?

We would like to trial the new Assessment Centres from October 2017. To do this we will need to deploy our care team in a more effective way, temporarily moving them across to work in the new Assessment Centres. To do this we think the best solution is to limit the service currently available at Seacroft Clinic. We suggest this will be done over a trial period of 6 months.

We think Seacroft Clinic is the most viable option because it is used the least and it does not have the right resources to provide the full range of services. We are confident that all the needs of clients, as outlined in the Equality Act, can be fully met at our other venues. There are frequent bus services from Seacroft to each of our other clinics. The nearest is the Reginald Centre in Chapeltown. It is most likely patients with more complex needs would be offered this as their nearest alternative, unless there is a preference to attend a venue elsewhere in the City.

Fastest bus routes to each destination

Other bus services travel the same routes several times within the hour and further journeys can be found at www.wymetro.com/howtogetto/

Seacroft bus station to Reginald Centre LS7 3EX – 30 minutes, 1 change		
Approx. frequency – every 30 mins		
Stand C Number 771 Transdev to Vicar Lane stop U7	2 minute walk to New Briggate stop N2	Number 2 First Leeds to Reginald Centre stop

Seacroft bus station to Armley Moor Health Centre LS12 3HD	
50-55 minutes, direct route	
Approx. frequency – every 10 mins	
Stand A1 Number 16 First Leeds to Town Street	2 minute walk to Armley Moor Health Centre

Seacroft bus station to Beeston Hill Health Centre LS11 8LH		
50 minutes, 1 change		
Approx. frequency – every 30 mins		
Stand C Number 4/4G First Leeds to Boar Lane Stop T6	Boar Lane Stop T7 Number 65 First Leeds to Beeston Hill, Cemetary Rd	2 minute walk to Beeston Hill Health Centre

Seacroft bus station to Middleton Health Centre LS10 4HT		
50-55 minutes, 1 change		
Approx. frequency – every 30 mins		
Stand C Number 771 Transdev to Vicar Lane stop U7	Vicar Lane stop U7 Number 13/13A First Leeds to Middleton Park Avenue	1 minute walk to Middleton Health Centre

Seacroft bus station to Yeadon Health Centre LS19 7PS

54 minutes, 1 change

Approx. frequency – every hour

Stand E Number 8 Connexions to Horsforth, Broadway Alexandra Road	Horsforth, Broadway Alexandra Road Number 97 First Leeds to Yeadon Town Hall, South View Road	2 minute walk to Yeadon Health Centre
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Distance to alternative venues by car



Reginald	LS7 3EX	3.6 miles	12 minutes
Beeston	LS11 8LH	7.3 miles	20 minutes
Middleton	LS10 4HT	14.6 miles	24 minutes
Armley	LS12 3HD	9.5 miles	25 minutes
Yeadon	LS19 7PS	12.8 miles	31 minutes

In order for current patients to discuss the proposed temporary movement of services in more detail we are holding a meeting on the 11th July 2017. We will listen to any concerns about the move and seek to address these. Dependent on the outcome of the meeting, we will take our plans, along with any recommendations, to the Executive Board at Leeds Community Healthcare for their agreement. We will also share our plans and invite views from local councillors and Healthwatch Leeds.

If the plan to pilot our Assessment Centre model is taken forward, we would review it after the first three months of delivery and again as the 6 month pilot is due to end. We will then present the outcomes and work together at this stage with patients, carers, our staff, and all those interested in the future delivery of the CDS service, to arrive at a decision as to the long term future of the CDS service at Seacroft Clinic.

Any questions?

If you have any questions about the information in this leaflet please either speak to a member of the service or contact the **Patient Experience Team** at Leeds Community Healthcare on **tel: 0113 220 8585** email **Ich.pet@nhs.net**

*Mid Yorkshire Hospital uses an Assessment Centre model to provide its care. It has successfully reduced its waiting time for General Anaesthetic (Referral to Treatment) to 4 weeks, halving the current target of 8 weeks. We are working closely with Mid Yorkshire colleagues to mirror best practice.