Impact of the Covid pandemic on health care equity in NHS General Dental Practice.

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Introduction: Oral health inequalities existed before Covid, but the pandemic presented an unprecedented challenge for health services. Our aim was to determine whether patient groups at risk of health care inequality due to the pandemic could be identified from NHS dental claims. Methods: Secondary analysis of routinely collected NHS Business Services Authority data for patients treated by General Dental Practitioners in England and Wales between April 2019 and January 2022 to assess the effect of the Covid pandemic on claims for patients attending general dental practices. Data for treatment items claimed after the start of the first lockdown were compared to the pre-lockdown period. Results: The proportion of claims for child fillings, child extractions and child fluoride varnish application after March 2020 were lower than equivalent proportions for adults, in both England and Wales. Similarly, there were consistently fewer claims for fillings and extractions for patients claiming pension credit guarantee credit than all pensioners in both England and Wales. Conclusion: The Covid pandemic may have caused health care inequality for children and patients claiming pension credit guarantee credit. This may compound the inequality in oral health for these patients.

Keywords: Oral health, dentistry for children, dentistry for aged, dentistry public health

Introduction

The Covid pandemic presented an unprecedented challenge for health services in the United Kingdom. The impact on patients directly and indirectly affected by Covid started to emerge during the first wave and continue as the recovery phase progresses. The pandemic has taken a disproportionate toll on people already facing the worst health outcomes, including some ethnic minority communities who have been at much greater risk of contracting and dving from Covid-19, and people living in the most deprived areas (Public Health England, 2020a; b). In March 2021, almost five million patients were waiting for planned hospital surgery, the highest number since modern records began; more than 436,000 patients had been waiting for more than one year (NHS England, 2021). Children's services have also reported decreased and delayed patient presentation for medical care and immunisations (Isba et al., 2020; Lynn et al., 2020; McDonald et al., 2020). Suggestions for recovery and prioritising health and care include addressing ethnic and deprivation inequalities (The Kings Fund, 2020; 2021). Concerns have been raised about the unintended short- and long-term consequences of restrictions on children, including safeguarding, mental health, and in the long term obesity and mental health stemming from greater early years adversity (Hefferon et al., 2021).

Before the pandemic, good oral health was not enjoyed equally across the population, with poor oral health disproportionally affecting the most vulnerable and socially disadvantaged individuals and groups (Public Health England, 2021). The first Covid lockdown interrupted normal dental services at the end of March 2020, with all non-urgent dental care deferred to minimise

face to face contact. Routine care resumed in June and July 2020 in England and Wales respectively, albeit at much-reduced capacity. The constraints of providing dental services within a pandemic, such as the suitability and availability of personal protective equipment (PPE), introduction of fallow time, staff availability and risks of aerosol generating procedures challenged the profession and reduced their capacity to treat patients. Patients were also concerned about visiting dental practices, which may have resulted in a reluctance to attend, and people who were most vulnerable to Covid were asked to shield.

By April 2021, the volume of care, as indicated by Units of Dental Activity had not returned to pre-lockdown levels and continuing delayed and unequal access to NHS dental care were being reported (Care Quality Commission, 2021; Healthwatch, 2020; Healthwatch, 2021).

Recognising patient groups experiencing health care inequality associated with the pandemic is important if we are to address oral health needs as we emerge and recover from the pandemic.

NHS dental patients treated in general dental practices fall into three categories; children (under 18, no charge), adults that pay NHS charges, and adults exempt from charges. The exempt adults may be adults/spouses claiming certain low-income benefits, in full time education and be women that are pregnant or have had a baby in the last 12 months (NHS, 2021). Pensioners struggling to make ends meet can apply for Pension Credit. Pensioners in receipt of the Guarantee Credit element of Pension Credit have their income topped up to a guaranteed minimum level, and Pension Credit Guarantee Credit (PCGC) is one of the low-income benefits that allows the most deprived