

**P-05-977 Re-open full general dental services in Wales as has happened in England, Correspondence – Petitioner to Committee, 07.07.20**

Fortunately, we do appear now FINALLY to moving in a positive direction.

I do have a comment to Mr Gethings view that practices have been "open and able to see face to face patients".

This is in my opinion a little disingenuous.

Technically yes, they/we could physically open.

However, we were only able to offer extractions as an interventional treatment.

This is akin to allowing Tesco to "open" but only permitting the sale of bottled water. They may well be open but you cannot buy much of value.

Treatment options to actually prevent conditions worsening and conservative pain relief options were not permissible

The UDCs were only able to offer (in the main barring some exceptions) dressings to inflamed nerves for front teeth and latterly premolar teeth.

This again denied access to conservative pain relief measures to back teeth.

I appreciate the political answer is all dental practices were open but the reality of the situation was rather different to that promoted by Mr Gething. I have been a dentist for quite some time now and as such I can safely say most of my patients are NOT happy to only be offered an extraction.

Regards lagging behind England. Well we were and indeed are lagging.

England were offered a complete return to NHS and private practices alike (and mixed who in reality equate to a majority) a couple of weeks before Wales. This was extended to all practices who were able to meet SOPs.

In Wales we were delayed in offering this return to a wider range of treatment options; causing our patients to have to wait longer and meaning we were further behind England in accessing essential PPE and RPE to allow safe opening. So, we were disadvantaged.

We now are able to offer more to our patients thankfully.

However, with regards to NHS dentistry we in Wales still have a phased return as we are in "Amber". This means we cannot return to routine dentistry even if safely able to do so. This is not the case in England where they are only restricted by the ability of the practice to conform with guidance.

There ARE differences with England.

As we gradually emerge from this and help our patients more. I would urge the committee to avoid this situation happening in the future.

Wales appears to have some of the most stringent restrictions applied to dentistry. Although like England we also have a 1-hour fallow time for our surgeries in place which has limited evidence to support its use.

We CAN and ARE able to operate safely. To my knowledge there have been no documented cases of transmission between patients and dental staff or vice versa.

During the height of the pandemic in Wales the UDCs operated safely and again with no transmission. Their protocols of operation are the same as those recommended for general practice.

NHS services must indeed support the practices as the funding mechanism is not able to manage such reduced throughput of patients and loss of charge revenue.

But NHS and private alike, If we are able to source and implement the appropriate protocols we must be able to continue to help our patients free of the threat of closure and referral to governing bodies.

Thank you for your time and consideration.