



18 February 2019

**Deputy Anne Rabbitte
Dáil Éireann
Kildare Street
Dublin 2**

PQ 5967/19 To ask the Minister for Health the number of children under 18 years of age in each LHO area awaiting an oral health appointment in primary care at the end of 2018 or the latest date available; and the number waiting 0 to 12, 12 to 26, 26 to 52 and more than 52 weeks, respectively

Dear Deputy Rabbitte,

I refer to the above Parliamentary Questions which have been referred by the Minister for Health to the Health Service Executive for direct response.

In addressing the above question, it is important to note the following:

- a. Eligibility for dental services is a statutory entitlement under the Health Acts. Almost one million children aged up to and including 15 years are eligible for HSE Dental services. All of the HSE Dental Services are provided free of charge.
- b. The HSE Dental Service has a wider role in dental public health, oral health needs assessment and oral health promotion, including community water fluoridation. This activity, including the management and administration of the Dental Treatment Services Scheme for adult medical card holders, is a significant part of the work undertaken in the HSE Dental Service.
- c. The question requests details of numbers of patients waiting for appointments with the oral health services, by Local Health Area. Since 2012, HSE Dental Services have been organised and delivered through 17 Dental areas that are not contiguous with the LHO boundaries. Orthodontic Services are organised and delivered on a regional basis. Therefore, in many instances, the information requested by the Deputy is not available by LHO.
- d. Routine dental services are targeted at certain age groups, and use school class as part of the targeting of services, therefore the academic year can be a factor in reporting progress of targeted programmes. In many instances, information is not held in a format that facilitates the response to the question.

The public dental service therefore is not merely a school dental service as is a common perception both within and without the health service. Dental services also cater for vulnerable groups such as special needs (including adults) with disability, medically compromised, as well as new cohorts such as refugees, asylum seekers etc., as well as providing care under general anaesthesia and sedation.

These services are resourced from within those providing the so called School Dental Primary Care services. These services also support the DTSS along with the PCRS, and in some areas are the direct providers of that service, while in other areas contracted GDPs provide that service.

Dental services

The clinical services provided by the HSE include:

- Emergency care
- Targeted preventive and treatment services for children
- Planned care for children and adults with special care needs
- Hospital Services, including General Anaesthetic Services

Emergency care for the relief of pain and infection is available for all for all children aged up to 15 years, and patients with Special Needs on a same day/following day basis at HSE Dental Clinics across the country. Approximately 6,000 children attend for emergency treatment each month.

Large numbers of children present every day at HSE Dental Clinics for relief of pain and infection as a consequence of dental decay; this can involve treatment such as fillings and extractions, prescription of antibiotics, and referral to hospital for dental extractions under General Anaesthesia.

The numbers presenting requiring relief of pain and infection indicate that dental decay remains a significant public health problem in Ireland.

Targeted Preventive and Treatment Services for Children

The HSE Routine Dental Services are provided on the basis of need, with a strong emphasis on prevention. This is delivered through targeted screening and prevention for school children at certain dental developmental milestones and for special needs groups. This approach involves identifying children with the greatest needs, and the highest risks of dental disease.

Children in the targeted age groups are typically in 1st/2nd Class and 6th Class, with some 4th Class children being seen in some parts of the country. The emphasis within the routine service is on preventing dental disease through patient and parent oral health education, dietary advice and tooth-brushing instruction, along with preventive interventions such as the placement of fissure sealants on vulnerable tooth surfaces. Restorative treatment such as fillings is also available.

The uptake of these services is very high, often in excess of 95% of children are screened and offered follow up treatment where indicated. There are approximately 70,000 children in each of the targeted classes.

The dental service also monitors the development of the dentition during childhood and makes referrals for eligible patients for orthodontic assessment. Orthodontic assessments are carried out by the Regional Orthodontic Departments.

Planned care for children and adults with special care needs

These are provided by the same group of HSE dentists, dental hygienists and dental nurses. The Services are for child and adult patients whose needs cannot be met through mainstream care pathways. These groups require long term planning and continuity of care. Services are provided to individuals with Intellectual Disability; Physical Disability; Learning challenges and High Risk Medical conditions.

Conventional approaches to treatment such as behavioural management are of limited benefit, so many patients in these groups require treatment under sedation (inhalational, oral, IV) or general anaesthesia.

Hospital Services, including General Anaesthetic Services

Each year, approximately 7,000 children are referred for dental extractions in acute hospitals. This service is provided by the HSE Dental service in conjunction with the acute hospital sector.

Orthodontic Services

Orthodontic treatment with the HSE Orthodontic Service is limited to those children with the most severe and complex orthodontic treatment needs. These individuals would include those with complex orthodontic treatment needs including children with a cleft lip and palate. A Modified Index of Treatment Needs (Modified IOTN) system is used to determine if a child can be accepted for treatment.

Access to HSE Orthodontics is through a referral process that starts in the HSE Dental Service, usually when the child is in 6th Class. If a child is identified as having a treatment need that may qualify through the Modified IOTN system, then s/he will be referred for an Orthodontic Assessment with the HSE's Regional Orthodontic Department. If the treatment need meets the criteria under the Modified IOTN, the child will then be placed on a waiting list for treatment. There are a number of categories within the system, and these are used to prioritise care. These waiting lists (orthodontic assessment list, orthodontic treatment list) are managed by the HSE's Regional Orthodontic Departments.

Dental Treatment Services Scheme

Local management and administration of the Dental Treatment Services Scheme (DTSS) is carried out by Principal Dental Surgeons working in the HSE Dental Services. Treatment under the scheme is provided by general dental practitioners that hold contracts with the HSE.

SoEL Health

There are a number of references in the reply to SoEL Health. 'Software of Excellence Health' (SoEL Health) is the national dental management system which will be deployed nationwide from Q2 2019.

1. Dental Service

CHO 1

Sligo/Leitrim/West Cavan	Estimated Waiting Time				Comments
	0-12 weeks	12 -26 weeks	26 - 52 weeks	52+ weeks	
Target Class children waiting for examination	2260	2060	200	0	Number of schools still to be screened but work plan should have these completed by end of June
Children examined but waiting for treatment	250	60	0	0	
Patients waiting for general anaesthetic appointment	32	0	6	0	
Patients waiting for a dental hygienist appointment	140	225	0	0	
Patients waiting for an oral surgery appointment	20	286	20	0	

Donegal Dental Services	Estimated waiting time				
	0-12 weeks	12-16 weeks	26-52 weeks	52 weeks +	Totals
Target classes waiting for treatment	1734	1315	1904	0	4953
GA waiting list	82	1	0	0	83
Hygienist Waiting list	497	165	0	0	662
Oral surgery waiting list	16	27	27	393	

Cavan Monaghan	Estimated waiting time					
	Waiting List Type	0 – 12 weeks	12 - 26 weeks	26 – 52 weeks	52 weeks +	Comment
Target Class children waiting for examination	394	2415				The service in 5 of 7 of its main centres is aiming to have all 3 target classes examined by end of summer. Continuing care may likely therefore run onto the new school year.
Children Examined but waiting for treatment	47					Generally at their class examination children are appointed for their treatment. This figure stems from a pilot being conducted in one location with a “mass” screening of all target groups and creating treatment priority lists.
Children waiting for dental extractions under general anaesthesia	9					Hospital based service with one weekly morning slot on alternate Tuesday and Friday. This and two other competing dental lists have to be accommodated within this available slot. Extraction cases throughput is limited by Paediatric Ward bed capacity to 4 cases.
Children awaiting appointment for minor oral surgery under general anaesthesia	4					As above. These cases are very simple minor oral surgeries. The more complex cases would be referred to special oral surgeons in private practice.
Special needs patients (children and adults)awaiting appointment for treatment under general anaesthesia			26			As above. These cases are often complex, of long duration requiring comprehensive care which limits throughput to a maximum of 3 cases per session. Adult special needs day cases are via the day ward available only on the Tuesday slot.
Patients awaiting appointment for treatment under relative analgesia	2					
Patients awaiting appointment for Dental Hygienist	485					

Additional Note from Head of Service, Primary Care, Cavan, Monaghan, Sligo, Leitrim & Donegal.

In supplying the attached data, CHO 1 would be concerned that the PDSs, in trying to respond in an earnest fashion, could be contributing to a narrative based on, in the main, personal, subjective, assumptions and interpretations of the question itself and variable data sets. CHO 1 has concerns and difficulties in not only standing over the type of data being sought but also about feeding a narrative without regard to significant service considerations, which will not improve the understanding of what the HSE's Dental Services actually do but are also required to do being statutory based.

At present the focus is on treatment provision and the public dental health function remit of the service such as epidemiology has been largely abandoned. It is rarely commented on or referred to and yet it is a function that is essential to inform the service of the incidence of dental disease and treatment needs in the population.

CHO 1 would be concerned that in its present construct, this PQ underlines the perspective that Primary Care Dental is not clearly understood. The PQ does not specifically reference school examinations at all, or for that matter, children. It makes reference to persons, which could range from eligible children to adolescents to adults, it also refers to an oral health appointment which could be construed as one for examination, treatment or recall etc. The PQ also does not reference a timescale, year, month or whatever.

CHO 1 welcomes the opportunity to highlight the fact that Primary Care Dental Services are statutorily based. For example the original Health Act, and subsequent regulations in 2000 extending eligibility to 15 years of age, means that all those aged 0 to the eve of their 16th birthday are all eligible for dental services. Section 66 of the Health Act relates to the child health service, which includes a health examination and treatment service for children **under** the age of 6, and for children attending a national school. Section 67 relates to dental, aural and ophthalmic services. Under this legislation Health Service's are required to make dental treatment and appliances available for persons with full eligibility and limited eligibility. The legislation also provides for other eligible categories.

Based on the legislation, in Cavan Monaghan area alone, the total eligible child/adolescent population for dental services is 33,536 from Census 2016. There is an additional eligible population of 38,750 aged 16 years and over who can access care under the DTSS. So overall there almost 72,300 "persons" eligible for primary care dental services in the Cavan Monaghan area. CHO 1 therefore have additional significant tranches of other "waiters" comprising children and adolescents who would not be attended to by the dental services by virtue of not attending national school (yet), or will simply be not attended to, since additional resources to extend services have never materialised. The latter would typically involve adolescents who would be provided with emergency care only.

At present CHO1 believe that there is no legislative basis for the providing the service for the designated priority target groups, nor is there is evidential basis for the current model of targeting specific cohorts approach, particularly that for Priority Group 1 (6th class equivalent). This model of delivery stems from the previous Dental Action Plan of 1994 stated within the strategy policy Shaping a Healthier Future, and from the "Leyden Report" on dental services of the mid 1980s.

On the basis of equity and peer equivalence alone the numbers of preschool children, of all classes in national school and of the first three years in post primary schools, could be deemed as waiting for an oral health appointment. So for all these categories of patients that the service does not provide for, does one include them and assign a waiting period of 52 weeks +? Or do Dental Services create waiting lists for the latter in the absolute knowledge that our existing resources do not allow for their screening thereby creating unreasonable expectations that are completely unachievable?

In many areas the service still has to deal with legacy of lost vacancies or unfilled posts with staff having left and not being replaced, but they have left behind not only schools to be screened but also patients whose treatment needs to be completed, and patients who are on recall who also need to be seen.

The service continues to be provided on a geographic basis rather than on a true needs basis and has no modern up to date epidemiological data. The last meaningful data is over 19 years old and regrettably the service as part its public dental health function remit has lost its skill set to conduct epidemiological surveys as it formerly did in the 1980s and 1990s. SOELHEALTH, the dental patient record system has, CHO 1 is informed, the potential to do this but as this has not been universally attained.

As per the afore mentioned, In respect of waiting times, caution is advised on these as there are significant variable factors that must be considered such as:

- It is not possible to discern between the number who could be called in one week from now as opposed to one month or more.
- **The dental service's operational year and school year do not coincide.** There are seasonal variations in service delivery (peak leaving periods such as Easter, summer) which invariably means screening and treatment continues beyond the end of the school year into late summer or into the following school year.
- The need to provide emergency care, which is demand led and by nature unpredictable, to cohorts outside target classes, pre-school children and adolescents, impacts on dental screening of target groups.
- In some localities such as East Co. Monaghan there is a significant non - national population with often high dental treatment needs. As an increasing number of parents/legal guardians do not speak English as their first language, there are situations where dental teams may experience communication difficulties which necessitate use of interpreter services (often over the course multiple care visits) impacting on throughput in terms of additional time having to be allocated for appointments (and additional cost to the service).
- The need to provide dental extractions for orthodontic cases referred to the HSE's Regional Orthodontic Services
- Rate of non attendances.
- The need to provide other care services referenced earlier.

Again CHO 1 would like to highlight concerns in what is furnished here in providing a narrow interpretation / perspective of the service's remit without reference to other considerations outlined above.

CHO 2

Roscommon/Mayo

The dental service aims to target children in 2nd 4th and 6th classes each year where resources allow. The school programme starts each year end of September /start of October when final school figures are in and 6th class are usually called first followed by 2nd then 4th class. (Where we can be confident in the year that we will see both 2nd and 6th classes some locations like to call a selection of 6th and 2nd and accommodate family members too who have children in each target class)

Allowing 4 months for each target group to be assessed and treated;

Class	Timeframe
6 th class	October - January
2 nd class	February - May
4 th class	June - September

Therefore all 6 class assessments in 2018/2019 should be completed by end of January if resources allow. This year due to several different reasons (back logs, sick leave, staff shortages, SOEL health, Minamata) the 6th class assessments only commenced in some locations in December / January.

Roscommon 2018/2019

Total for children waiting dental assessment of 52 weeks + in Roscommon is 566, made up as follows;

Area	Classes not targeted	Numbers waiting 52 weeks+
Monkstown	2 nd and 4 th class not targeted	440
Castlerea	4 th class not targeted	126
Total waiting for dental assessment 52 weeks +		566

Total 6th class for assessment in Roscommon	935
Total 6th class assessments waiting 0-12 weeks	293 (Majority will be seen within 8 weeks)
2nd and 4th class	Late commencing the second target group (2 nd class) and hope to be in a position to start in May. Situation regarding 4 th class will be reviewed in June

Mayo 2018/2019

Total waiting for dental assessment 52 weeks +	
4 th Class	644
2 nd Class	124
Total	768

Total waiting for dental assessment 0-12 weeks	
6 th Class	632
2 nd Class	170 (15 waiting 0-3 weeks)
Total	802

Galway:

The information is not held in the manner requested. For the purposes of this reply, an oral health assessment is defined it as “dental assessment”. The aim each year is to target 2, 4 and 6 class primary school children for assessment and treatment. Due to staffing shortages in Galway, and a number of closed clinics, the targeted routine assessment can only be provided for children in 6th class.

Children in 6th Class for whom consent was received and who attended for their appointments have been assessed in the current school year: A small minority awaits care. Those waiting 0-12, 12-26 and 26-52 are relatively small: calculating these figures was not possible in the time available to reply to this PQ.

It is estimated that there are a total of 11,200 children in 2nd and 4th Class each year for whom it is not possible to offer a routine dental assessment while they are in those classes. Therefore those children can be considered waiting in excess of 52 weeks.

The recent appointment of a dental hygienist has had a positive impact on the level of service available.

.

CHO 3

Number of persons in each LHO area waiting for an oral health appointment in primary care

North Tipperary/East Limerick = 3,289

Limerick city & West Limerick = 4,385*

Co Clare = 3,289*

*estimate as figures are not readily available

Note; The Dental Service in the Mid West CHO issues letters of invitation for examination and consent forms to two primary school target classes per year across the region. The service does not hold a waiting list, the service sends out the letters of invitation and consent forms well in advance to ensure that the services will be able to maximise their clinic slots. The numbers provided reflect the number of children to be invited for assessment between the end of January 2019 and the end of August 2019. Forms are completed in respect of all children at the beginning of the academic year and the children are called throughout the year.

Number waiting by time periods 0 to 12 weeks; the numbers waiting 12 to 26 weeks; the numbers waiting 26 to 52 weeks; and the numbers waiting more than 52 weeks.

If a dental patient is examined and they require dental treatment they are given an appointment before they leave the surgery. The length of time to that appointment will be the next available appointment. In 2018 11,953 patients commenced treatment within 12 weeks of the scheduled oral health assessment, which accounts for 95.8% of children treated (Source, December 2018 Preliminary Primary Care Metric Data).

CHO 4

Cork Kerry Community Healthcare Dental Service operates a school screening program in Primary Schools in Cork and Kerry and endeavours to provide every child with a full course of dental treatment in 2nd and 6th class in primary school and emergency care up until 16 years of age. In Cork the Service does not hold a waiting list for the school dental screening programme and are currently screening 6th classes. In Kerry the waiting times for children **awaiting screening** in 2nd and 6th class are outlined in the table below. In order to ensure that each child in Kerry has a fair and equitable access to the service, eligible children who are not screened in 2nd and 6th class will be seen in the next academic year and/or throughout their school holidays.

Waiting Lists	Area	0-12 Weeks	12-26 Weeks	26-52 Weeks	>52 Weeks
2nd Class Screening - waiting assessment	Kerry	0	1536	0	0
6th Class Screening - waiting assessment	Kerry	0	1396	0	0

The table below outlines those waiting appointments for treatment and the category of same across Cork Kerry Community Healthcare.

Waiting Lists	Area	0-12 Weeks	12-26 Weeks	26-52 Weeks	>52 Weeks
Children's GA Extraction Service,	Cork – CUH	37	140	120	0
	Kerry - UHK	32	22	31	48
Children's RA Sedation Service	Cork – SFH & Mallow	9	14	12	0
	Kerry – UHK	11	0	0	0
Special Needs Restorative Service (Children)	Cork – CUH	16	24	0	0
Special Needs Restorative Service (Children & Adults)	Kerry – Bon Secours Tralee	3	3	6	0
Adult Special Needs Restorative Service – Mallow Hospital	Cork	3	7	1	0
	Kerry	19	24	0	0

CHO 5

Waiting times:

Patients may be counted in more than one category i.e. patients that have been seen for assessment may be referred to Hygienist while remaining on Dental treatment waiting list.

All children become eligible for assessment in September when they enter the school target class. The target classes are 1st or 2nd Class, 4th and 6th classes. (Ref: Table 1).

In the Southeast Community Healthcare area, children who are due for assessment in 4th class are not examined until they are in 6th class due to staff shortages.

Due to a fire in the St. Dymphna's Hospital Carlow in November 2016, dental services were ceased resulting in the cancellation of 4 surgeries for 4 months. The Dental Service are still dealing with the consequences of this.

There is currently difficulty in the recruitment and retention of dentists in the Southeast Community Healthcare area.

Numbers waiting for treatment that have been assessed:

It is normal process that patients are given appointments for follow on treatment at the end of their assessment appointment.

Where the ratio of Dental hygienists to Dental Surgeons is in favour of hygienists, patients may be examined and referred to a Dental Hygienist immediately for preventive care but then may have to wait for the remainder of their dental care with a Dental Surgeon. (Ref: Table 2).

Table 1

Awaiting Dental Assessment

	0-12 weeks	12-26 weeks	26-52 weeks	>52 weeks	Total
Carlow	0	2661	0	1748	4409
Kilkenny	0	3684	0	2181	5865
South Tipperary	0	4755	0	610	5365
Waterford	0	5893	0	3348	9241
Wexford	0	6368	0	4218	10586
TOTAL SECH	0	23361	0	12105	35466

Table 2

Awaiting Dental Treatment

	0-12 weeks	12-26 weeks	26-52 weeks	>52 weeks	Total
Carlow	0	75	21	78	174
Kilkenny	0	106	35	0	141
South Tipperary	149	0	1	0	150
Waterford	0	990	15	45	1050
Wexford	0	672	10	1	683
TOTAL SECH	149	1843	82	53	2198

CHO 6

Adult General Anaesthetic

Adult patients awaiting appointments under General Anaesthetic for minor oral surgical procedures are managed at St Columcille’s Hospital. These numbers also include adults with complex medical/ special needs. Adult patients (Intellectual Disability) awaiting restorative and surgical treatment are managed at Connolly Hospital.

Table 3: Adult General Anaesthetic Waiting Times and Numbers

Location	Waiting Time Period	Waiting for Initial Examination	Examined & Waiting for Treatment
St. Columcilles’ Hosp	0-12 weeks	22	0
	12-26 weeks	2	1
	26-52 weeks	4	2
	>52 weeks	1	1
Adult special Needs			
Connolly Hospital	0-16 weeks	0	7

Pediatric General Anesthetic

There are 2 Waiting lists for Paediatric patients requiring extractions under General Anaesthetic:

- a) Priority 1 patients are referred to the Beacon Hospital for treatment.
- b) Priority 2 are patients who are not yet eligible for referral for treatment. These children are reviewed quarterly and progressed to Category 1 if appropriate.

Table 4: Priority 1: Paediatric General Anaesthetic Waiting Times and Numbers

Waiting Time Priority 1 at the Beacon Hospital	Waiting for Initial Examination	Examined & Waiting for Treatment
0-12 weeks		28
12-26 weeks		11
26-52 weeks		12
>52 weeks		18

Indications are that some children waiting >52 weeks at the Beacon Hospital have failed to attend for treatment or declined the appointments when contacted. CHO 6 are awaiting further information from the Beacon Hospital in relation to this. This would also apply to some of the numbers waiting > 26 weeks.

Table 5: Priority 2: Waiting List for Paediatric Extractions under General Anaesthetic

Waiting Time Priority 2	Waiting for Initial Examination	Examined & Waiting for Treatment
0-12 weeks		13
12-26 weeks		2
26-52 weeks		10
>52 weeks		13

Primary School Waiting List Figures

At present in Community Healthcare East children attending primary school are screened in 2nd and 6th Class. Once a child receives his/her initial examination they are immediately provided with an appointment for treatment at their local dental clinic therefore there are almost no waiting lists for treatment. It is only in exceptional cases that a child will have to wait for treatment or to see the hygienist (Hygienist wait list is provided separately).

CHE School service waiting lists by class 01.02.2019

Table 6: 2nd Class

Waiting Time Period	Waiting for Initial Examination	Examined & Waiting for Treatment
0-12 weeks		
12-26 weeks	5130	
26-52 weeks		
>52 weeks	52	

Table 7: 6th Class *Total of 6th class in 2018-2019 school year = 4223.

Waiting Time Period	*Waiting for Initial Examination	Examined & Waiting for Treatment
0-12 weeks		
12-26 weeks	2899	1324 (have been provided with appointments for treatment if required)
26-52 weeks		
>52 weeks		

Table 8: Special Needs Classes – Mainstream Schools

Waiting Time Period	Waiting for Initial Examination	Examined & Waiting for Treatment
0-12 weeks		
12-26 weeks	339	
26-52 weeks		
>52 weeks		

Table 9: Hygienist Waiting Times and Numbers for Children’s Service including Special Needs

Waiting Time Period	Waiting for Initial Examination	Examined & Waiting for Treatment
0-12 weeks		79
12-26 weeks		404
26-52 weeks		
>52 weeks		

Special Needs Service*

Table 10: Oral Health Appointment Waiting Times and Numbers for Special Needs Service

Waiting Time Period	Waiting for Initial Examination	Examined & Waiting for Treatment
0-12 weeks	240	
12-26 weeks	8	
26-52 weeks	58	

Table 11: Referrals to Our Lady’s Children’s Hospital Crumlin - Paediatric Special Needs

Waiting Time Period	Waiting for Initial Examination	Examined & Waiting for Treatment
>52 weeks		18

*The details for the Special needs service assessments do not reflect an exact picture as CHO 6 has not previously collated data for this service in this manner. CHO 6 is in the process of designing a system similar to that in use for the school service against which figures can be benchmarked in future.

CHO 7

The information for the dental service DSW KWW is as follows:

Data provided relates to children in national schools in current school year only i.e. Sept 18- June 2019 as of the 30.1.19.

DSW KWW	0-12 weeks	12-26 weeks	26-52 weeks	Over 52 weeks
*No. waiting assessment			16,603	

**Not all children due to be targeted in 2nd, 4th and 6th classes in previous years were targeted but these are not put on a waiting list and therefore not reported in the data above,
Children post primary up to 16 years of age are not included,
Children in private national schools are not included,
Children that are home schooled are not included,
Adults and children with special needs (other than those in 2,4,6th classes in national schools in the current school year) are not included*

DSW KWW	0-12 weeks	12-26 weeks	26-52 weeks	Over 52 weeks
No. waiting treatment following assessment			1500	

Data provided relates to children in national schools in current school year only ie Sept 18- June 2019 as of the 1.2.19.

The information for the dental service DSC DW is as follows:

Dublin South City	Estimated Waiting Time			
	0-12 weeks	12 -26 weeks	26 - 52 weeks	52+ weeks
Target Class children waiting for examination		2 nd classes 887	4 th classes 1106	
Children examined but waiting for treatment				
Patients waiting for general anaesthetic appointment	15			
Patients waiting for a dental hygienist appointment				
Patients waiting for an oral surgery appointment				

All patients are booked for treatment following assessment so are not considered waiting for treatment.

Dublin West	Estimated Waiting Time			
	0-12 weeks	12 -26 weeks	26 - 52 weeks	52+ weeks
Target Class children waiting for examination	6 th Classes 210	2 nd classes 1000	2 nd Classes 742	4 th classes 2534
Children examined but waiting for treatment				
Patients waiting for general anaesthetic appointment	25			
Patients waiting for a dental hygienist appointment				
Patients waiting for an oral surgery appointment				

All patients are booked for treatment following assessment so are not considered waiting for treatment.

Children in 4th classes in Dublin West have not been offered appointments for many years.

Not all children due to be targeted in 2nd, 4th and 6th classes in previous years were targeted but these are not put on a waiting list and therefore not reported in the data above,

Children post primary up to 16 years of age are not included,

Children in private national schools are not included,

Children that are home schooled are not included,

Adults and children with special needs (other than those in 2,4,6th classes in national schools in the current school year) are not included

CHO 8**Laois/Offaly**

Dental Area: LHO - Laois/Offaly	Estimated Waiting Time			
	0-30 weeks (Feb – Aug)			30+ weeks
*Target Class children waiting for examination	6435			N/A
Children examined but waiting for treatment	N/A	N/A	N/A	N/A
	0-12 weeks	12 -26 weeks	26 - 52 weeks	52+ weeks
Patients waiting for general anaesthetic appointment	40	42	45	194
Patients waiting for a dental hygienist appointment	315	0	0	0
Patients waiting for an oral surgery appointment	117	63	0	0

Longford/Westmeath

Dental Area: CHO 8 - LHO – Longford/Westmeath	Estimated Waiting Time			
	0-30 weeks (Feb – Aug)			30+ weeks
*Target Class children waiting for examination	4492			N/A
Children examined but waiting for treatment	N/A	N/A	N/A	N/A
	0-12 weeks	12 -26 weeks	26 - 52 weeks	52+ weeks
Patients waiting for general anaesthetic appointment	21	21	49	5
Patients waiting for a dental hygienist appointment	434	0	0	0
Patients waiting for an oral surgery appointment	23	32	0	0

Louth/Meath

Dental Area: Louth and Meath	Estimated Waiting Time			
	0-12 weeks	12 -26 weeks	26 - 52 weeks	52+ weeks
Target Class children waiting for examination*	13,485		108	
Children examined but waiting for treatment	0	0	0	0
Paediatric Patients waiting for general anaesthetic appointment	9	40	89	38
Special Care Patients waiting for general anaesthetic appointment	18	8	5	6
Patients waiting for a dental hygienist appointment	690	13	0	0
Patients waiting for an oral surgery appointment	0	0	0	0

* The target class children waiting for an oral health examination include those children in 1st, 4th, 6th & 1st year secondary school (Laois only) in the academic year 2018/2019. Children in 6th/1st year are prioritised and should resources allow children in 1st class also receive an oral health assessment. All children up to the eve of their 16th birthday are eligible for dental treatment but practice nationally has been to target resources at three classes/ groups.

The data for those in the target classes is compiled from the current month February to the end of the academic year August. On the 1st September 2019 the children from the new academic year are targeted and therefore after 31st August the current cohort of children are no longer waiting as they are no longer eligible for an assessment.

CHO 9

Response from CHO Dublin North City & County to the Parliamentary Question detailed above.

	Estimated Waiting Time			
	0-12 weeks	12 -26 weeks	26 - 52 weeks	52+ weeks
Target Class waiting for examination*		13894		*4550
Children examined but waiting for treatment				
Patients waiting for general anaesthetic appointment	62	263	29	
Patients waiting for a dental hygienist appointment	37			
Patients waiting for an oral surgery appointment	16			

*The number of 4th class children for this academic year. There is no guarantee that these children will be offered a screening appointment.

Children in CHO Dublin North City & County awaiting an appointment are classified into targets of 2nd, 4th and 6th class in primary/national school and go onto a waiting list for assessment at the start of the academic year. Once the target classes are assessed they are treated right away according to their needs, therefore there is no routine waiting list from 0 – 12 weeks. The Dental service will work through the lists prioritising 6th, then 2nd and finally 4th class. There are some staff shortages in certain areas of the Dental service across CHO Dublin North City & County, eg. Balbriggan. The Balbriggan Dental service is particularly behind and playing catch up. One of the reasons is because Balbriggan is a rapidly growing area and up to recently has only had one part-time surgery providing a service. We now have a new PCC with more capacity but it could take years to recover. Some of these eligible patients awaiting a screening appointment cannot be offered one which is particularly true for the 4th class age group. Once such patients are waiting over 52 weeks they are no longer considered waiting, as the new school year commences and they cannot be offered appointments.

2. Orthodontic Service

Orthodontic data is collated as per the Orthodontic areas, which do not correspond with CHO boundaries, and requested waiting time bands. The National Orthodontic waiting lists for treatment, as at Q3 2018, are detailed in Table 1 below.

	No. of Orthodontic patients In Active Treatment	Orthodontic Patients Waiting for Treatment			
		Waiting < 2 years	Waiting 2-4 years	Waiting > 4 years	Total Waiting
Former East Coast (Loughlinstown)	1,124	454	390	10	854
Former South West (St. James's)	2,479	1,345	977	0	2,322
Midlands	870	1,116	572	377	2,065
DNE	4,116	1,868	895	350	3,113
South	2,814	1,753	525	113	2,391
South East	1,172	1,494	1,331	198	3,023
Mid-Western	1,569	828	826	57	1,711
North West	1,350	422	77	0	499
Western	2,512	1,133	939	0	2,072
TOTALS	18,006	10,413	6,532	1,105	18,050

Table 1: Orthodontic – Numbers In Active Treatment at Q3, 2018 and Numbers Waiting for Treatment at Q3, 2018

I trust this information is of assistance to you, but if you require further clarification please do not hesitate to contact me.

Yours Sincerely,



Joseph Green
AND, National Oral Health Lead - Operations