



29 September 2020

**Deputy David Cullinane
Dáil Éireann
Leinster House
Kildare Street
Dublin 2**

Re: PQ 23645/20

Question: To ask the Minister for Health his plans to tackle waiting lists and deliver public dental and orthodontic care; his further plans to expand eligibility; and if he will make a statement on the matter.

Dear Deputy Cullinane,

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

Eligibility for dental and orthodontic services is a statutory entitlement under the Health Acts. Any consideration of an extension to existing eligibility is a matter for the Minister of Health.

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.

HSE Dental Service

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.

Emergency care for the relief of pain (e.g. toothache) and infection is available on a same day/following day basis for all for all children aged up to 15 years, and patients with Special Needs. Approximately 70,000 children attend for emergency treatment each year, with a 4.5% increase seen this year.

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 as resources permits. Children in secondary school in general receive only an emergency service.

Access to dental services was restricted to emergency treatment under the terms of Statutory Instrument 121/2020 (28th March 2020). This measure was revoked under Statutory Instrument 174/2020 (18th May 2020).

Elective Dental Services are gradually resuming having been phased down due to the Covid-19 pandemic. All service locations are implementing social distancing and other organisational measures as well as infection prevention and control guidance that has been updated during the pandemic. Some of these measures mean that the usual throughput of patients is reduced at the start of the resumption, but this is expected to improve over time.

In locations where dental services share waiting areas and other facilities, all services are working together to ensure that services are delivered safely and effectively.

As part of their resumption planning, each dental area will be restarting their screening and treatment service for children. Clinicians are reviewing the records of all patients that were under treatment at the time when services were phased down. Priority for early appointments will be given to patients that need to be seen urgently.

HSE Orthodontic Service

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

Patients and their parents face huge difficulties in accessing orthodontic treatment with the HSE. These difficulties are expressed through the very high numbers waiting for assessment, and in both the numbers waiting for treatment and the length of time waiting for treatment. The predominant causative factor is lack of treatment capacity in the service.

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

Initiatives underway to address Orthodontic waiting lists include:

- Orthodontic Procurement: This was introduced in 2016 and 1702 patients have been transferred for treatment with orthodontic contractors. An additional cohort of patients will be transferred in 2020.
- Recruitment of additional Consultant Orthodontist and Specialist Orthodontists
- Proposed recruitment and deployment of Orthodontic Therapists.
- Prioritisation of care: All orthodontic services prioritise the provision of care for those patients identified as having the greatest needs and the highest risk of developing dental disease.

The provision of services is dependent on the availability of resources in each Community Health Organisation.

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