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**Deputy Michael Healy-Rae.
Dáil Eireann
Leinster House
Kildare Street
Dublin 2**

PQ 19158/21 To ask the Minister for Health if he will address a matter in relation to dental care for children attending primary school and if he will make a statement on the matter

Details supplied; Minister a very important issue has been raised with me about young people attending national schools and with regard to their dental services. Last year due to the lock down these children received no dental care and also none this year. My question is if parents have had to go privately with their child surely they would be entitled to be compensated for the money that they would have spent, because if the private dentists were able to continue with their services surely there was no good reason for the HSE dental care not to continue.

Dear Deputy Healy Rae,

The Health Service Executive (HSE) has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted to the Minister for response.

Access to dental services was restricted to urgent /emergency treatment under the terms of Statutory Instrument 121/2020 (28th March 2020 -18th May 2020). An emergency dental service was maintained in all HSE service areas throughout this time, which included remote consultation through telephone triage as well as clinical attendance for treatment.

During that time, and since, many HSE dental staff have been redeployed to testing and tracing as part of the HSE's response to the pandemic.

Elective Dental Services have been gradually resuming. All service locations are implementing social distancing and other organisational measures as well as infection prevention and control guidance from the Health Protection Surveillance Centre 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. HSE dental staff members have been provided with appropriate Personal Protective Equipment (PPE) during the pandemic.

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 plan, each dental area has restarted their screening and treatment service for children. Clinicians have reviewed the records of patients that were under treatment at the time when services were phased down. Priority for early appointments has been given to patients that need to be seen urgently, and following up where necessary on cases that had emergency treatment during the restricted access period.

The period of restricted access to elective activity has had an adverse effect on waiting lists and times. This is reflected in a 63.5% reduction in scheduled dental assessments in 2020 when compared to 2019.

If there had been no pandemic, based on the 2019 data, it is estimated that 29,110 children would have been seen for dental examinations during the restricted period (28th March until 18th May). This figure does not include possible additional attendances for treatment after examination.

Full assessment of the impact on waiting lists of the restricted access period, reduced throughput on resumption, and the on-going commitment to testing on the backlog in service provision is being undertaken. Reducing waiting times is a key priority for the HSE, while at all times ensuring that services implement the organisational and preventive measures required to reduce the risk of Covid-19 transmission.

There is currently no provision for the HSE to reimburse patients who decide to access private dental treatment.

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