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Dear Mr Gray

**MODERNISING NHS DENTAL SERVICES IN SCOTLAND
RESPONSE FROM FIFE ORAL HEALTH STEERING GROUP**

Fife Oral Health Steering Group welcomes the Consultation Document and its recognition of the need for fundamental change in the way that NHS dental services are delivered.

Fife has seen some significant improvements in the dental health of 5 year old children since detailed surveys started in 1987. However, considerable challenges remain, with the latest survey (NDIP 2002/03) demonstrating that many children still have severe and untreated decay.

The issue of untreated disease is compounded by a widespread and longstanding problem with access to NHS dentistry in Fife. Although initially confined to the Dunfermline and West Fife area this access problem now exists throughout Fife – with virtually no dental practices currently able to offer treatment for unregistered patients.

We note the proposal to shift towards more local responsibility and accountability for NHS dental services and the proposed devolution of funding to NHS Boards. NHS Board areas have long needed more flexibility to plan local dental services in response to need. However, we have concerns that wholesale devolution of dental funding and administration to 15 NHS areas would be counter-productive. There should be a considered review to decide what elements should continue to be provided centrally. Any local shift would require significant local planning and administrative capability in addition to strong professional leadership. The co-operation and close involvement of GPs would be key to this process. Working relationships would need to be forged with forthcoming community Health Partnerships, Primary Care Divisions and other health and community care professionals.

Fife Oral Health Steering Group urges the Scottish Executive to consider how to ensure that any new NHS dental system has prevention as a key focus.

The Group suggest that a core treatment system should be provided – with effective preventive interventions given priority over those treatments that are largely cosmetic. The SIGN guideline on caries prevention has highlighted a range of effective, clinically based preventive measures that could be used.

In addition, the concept of an initial oral health assessment prior to a course of treatment or period of registration (whatever the final system) is strongly supported.

Finally, NHS Boards will need to continue to ensure that services are in place to meet the oral health needs of the whole population rather than those who are regular attenders. This should include access to preventive interventions for all sections of the population.

Yours sincerely



Graham Ball
Chair of Fife Oral Health Steering Group