Exploring NHS dental services in Dudley borough.

June 2025

Healthwatch Dudley

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# Introduction

As the cost of living continues to rise, many people across Dudley borough are likely to experience difficulties affording basic dental care.

This impact will not be felt equally, residents who are already disadvantaged are at a higher risk of experiencing oral health poverty [(Bethesda, 2001).](#_References)

Dental services are still recovering from the impacts of the COVID-19 pandemic, shortages of available appointments and a backlog from the time of social distancing have created a challenging environment for dental practices [(Crouch, 2024).](#_References)

Seldom heard communities with additional access needs continue to experience challenges and barriers to accessing dental care. These issues can be made worse during times of financial hardship and post pandemic when services are stretched.

At Healthwatch Dudley, we champion the voices of the community, especially those who are seldom heard. This research was informed by a focus group with representatives from organisations that support people with additional needs. Throughout our work we actively reached out to these and other communities to hear their experience.

Whilst some people told us positive stories of dental practices making adjustments and treating patients based on need, we heard other stories where patients have struggled to access care or who have not had their need met once in a practice.

**We are calling on local leaders to listen to the experiences of the community and commit to addressing their concerns.**

Thank you to all who contributed - community members, volunteers, partner organisations, and dental practices. Together, we can drive change.

Healthwatch Dudley Team

“Thank you for doing this. I hope your findings help the NHS service to improve where needed.” Dudley resident

# Listening to Dudley borough

We recognise the need to listen to the community as a whole and understand the differing needs across the population.

We completed three Enter & View visits to speak to patients in dental practices. We also attended 61 engagement events and community groups from September to December 2024 so we could reach out to those communities who may otherwise find it difficult to provide feedback to services.

Demographic data was collected anonymously from people who completed our survey. We did not collect demographic data from people who provided comments at community events or during an Enter & View visit to a dental practice.

Of the 534 people who completed the survey:

* 97% of people spoke English as their first language.
* The majority of people were White British (76%) with other ethnicities represented including Asian / Asian British Pakistani (7%) and other Asian /Asian British background (6%).
* 28% of people described themselves as having a disability.
* 48% of people had a long term health condition.

These demographics differ slightly from the Dudley population as a whole, generally we heard from an older demographic, mostly female, with a higher rate of illness and disability [(Census, 2021).](#_References)

\*Enter & View: Healthwatch Dudley has the power to enter health and social care settings, speak to people about their experience and make observations.

# Starting with the community voice

Representatives from Public Health, Queens Cross Network, British Stammering Association (STAMMA), Beacon Centre for the Blind and Adult Social Care came together to form a focus group that would align our research with people who have additional needs. Participants shared the challenges experienced by themselves and the people they have worked with. The desire for change in NHS dental services was clear.

“It would change so many people’s lives if they had basic understanding of disabilities.” Focus group attendee

## Representing the seldom heard

The group agreed that having a range of ways to contact dental services is the best way to meet different accessibility needs.

“It should not be up to an individual to pay for an interpreter themselves.” Focus group attendee

## Increasing knowledge of disabilities

There was an expressed need for training frontline staff in how to communicate with and understand people with different disabilities. The group suggested working together to develop a “catch-all” training that can touch on the different needs of people across the borough.

“I’m visually impaired so I can’t use online forms.” Focus group attendee

## Communication

There appears to be a lack of interpreters arranged for people who speak a different language. We heard how some patients had to pay for interpreters themselves or use unqualified friends, family or advocates. One concerning story was of a British Sign Language user who had the wrong tooth removed due to a communication breakdown.

## Treating the advocate not the patient

Focus group members told us staff in dental services have, on some occasions, spoken directly to advocates or interpreters instead of addressing the patient with additional needs directly.

“You shouldn’t have to beg for something that should be your right.” Focus group attendee

## Technology

There were mixed views on technology. While some technology can assist people with disabilities, other people can feel excluded.

# Appointment availability

“Dental practices don't have any available space.” Survey respondent

84% of people were able to book an NHS dental appointment the last time they tried. The majority (85%) of people tried to book with a dental practice they had been to before.

Those that were unable to get an appointment said it was due to no appointments being available, the dentist not taking new patients or other reasons.

There may be reasons for the difference between our mystery shopper and survey results:

* Patients sometimes pre-book routine appointments far in advance.
* Most patients book with practices where they have been before.

This suggests that it may be easier to get an NHS dental appointment if a person has been to that dental practice before.

**Since 2006 people do not have to register with an NHS dentist, like a GP, when a new NHS dental contract was introduced. Find out more in the [About registration section.](#_Registration)**

"We haven't been able to book an appointment for a while.” Focus group attendee

People told us that work or caring responsibilities impacted their ability to make a dental appointment.

Some dental practices only offer NHS appointments at limited times.

“My dentist only offers NHS treatment on a Monday.” Survey respondent

People seeking appointments for their children and people who work in certain industries highlighted how it is hard to find appointments that fit around the school and working day.

“The practice would not offer an appointment outside of school hours, which meant we had to plan to take both our kids out of school.” Survey respondent

We heard positive stories of dental practices making adjustments to help patients reduce time taken off work for appointments.

One person told us that the dentist was able to complete all their treatment in one visit to prevent them having to take more time off work.

Another said they were able to rearrange their pre-booked appointment when unable to make the date or time provided.

People who have inflexible work or caring commitments may face the decision to pay for private dental treatment at a time that works for them.

“As a full time worker it’s very difficult sometimes to get appointments outside of work.” Survey respondent

### Recommendation

The NHS website does not display time restrictions on NHS appointments which means patients may have to contact multiple practices directly to find a practice that can meet their needs. We recommend putting the times of NHS appointments, as well as general opening times, on the NHS website.

# Waiting times

As part of our Mystery Shopper exercise, we found the average wait for an urgent NHS dental appointment in the borough was three days and for a routine NHS dental appointment it was 21 days. However, people told us that their wait for more specialised treatment could be prolonged and cause stress.

## Kacey’s story

Kacey’ shared her experience of waiting over two years for her daughter to have a set of braces fitted.

“I have significant concerns about waiting times for children's dental care.

My daughter who is aged 13 needs a brace for her teeth. She has been on a waiting list for two years already and we have been advised she will need to wait a further three years before she will be seen regarding having a brace fitted.

**Five years total waiting list for a brace for teeth!**

We have been advised that the only alternative option is to pay for a private dentist.

I find this very disappointing as she is a very stressed teenager who is now putting pressure on us to pay for a private dentist as she doesn't want to wait a further three years just to see a consultant!”

Kacy’s experience highlights the impact on people, particularly young people, when they have to wait a long time for dental treatment and the pressure to pay for expensive private treatment when faced with a long wait for NHS treatment.

# Cost of care

35% of people said cost concerns had prevented them from seeking or getting dental care.

The costs of dental care can put people in a position of making difficult decisions.

“It can be very costly, so I took a loan out.” Survey respondent

People told us they were currently going without certain procedures, even when clinically necessary, due to cost. is important for practices to remember the potential impact of paying for treatment may have on some of their patients.

“If a costly procedure was needed in the future, I would have to think twice.” Survey respondent

Providing clear information on costs and allowing patients to make informed decisions on their care can ease unnecessary financial burdens.

“They provided advice on what I needed to do to ensure that my oral health maintained until my next scheduled check-up.” Survey respondent

“It is very difficult to get clear answers regarding cost and the attitude is often ‘take it or leave it!” survey respondent

People who reported that cost concerns have stopped them seeking dental care were more likely to have not seen a dentist in the past two years, or to have never booked a dental appointment.

“It is very unclear what the pricing is and very intimidating to ask for this information at the dental practice.” Survey respondent

“It costs too much money to go to the dentist. I know that I can't afford to go and I need to.” Survey respondent

# Going private

22% of people who were unable to book an NHS dental appointment ended up booking a private appointment instead.

There was a clear divide between those who could afford to pay for private dental treatment and those who could not.

People who could afford to pay for private dental care felt “lucky” that they were able to do so.

“I’m lucky that I have enough money to be able to use a private emergency dentist.” Survey respondent

Some people told us they felt pressured to pay for private treatment.

“My dentist moved from NHS to private only. I had little choice, stay and pay or leave.” Survey respondent

The cost of dental care puts people in a position of making difficult decisions. By providing clear information on pricing and the clinical justifications for treatment, dental practices can help patients to make the right decision for their health and personal circumstances.

“Clearer pricing and information about cost would have helped reduce stress.” Survey respondent

## Bradley’s story

“The cost of getting anything other than a check up is really stressful. If I ever feel that something isn't right (e.g., aches, soreness) I try to leave it as long as possible before going due to the cost. I try to use other options, such as pharmacy or sensitive toothpaste to try to sort the pain. I do also give my dentist a ring for advice, and they don't always recommend that I attend the practice, they do sometimes give me advice over the phone.”

# Registration

We heard from people who thought they could register with an NHS dentist in the same way they can register with an NHS GP practice. This misunderstanding is not unique to Dudley. Healthwatch England found that 68% of people believe they have the right to register with an NHS dentist and be taken on as a permanent patient in the same way as an NHS GP [(Healthwatch England, 2024).](#_References)

“I contacted my GP who sent me to a dentist. The dentist said I couldn’t register without ID. I am an asylum seeker, I shared ID but still could not register.” Survey respondent

There is evidence that an ability to register with a dental practice is what the majority (58%) of people want ([Healthwatch England, 2024](#_References)). However, 27% of people prefer the current system where they have the flexibility to seek an appointment at any NHS dentist each time.

## About registering

* **Since 2006 people do not have to register with an NHS dentist, like a GP,** when a new NHS dental contract was introduced.
* **This means a dentist has no long-term obligation to see patients on the NHS** unless they are undergoing active treatment or dental work already carried out is under guarantee.
* For patients this means they can request an appointment at **any NHS dental practice and do not have to live in a certain area or provide identification to see a dentist.**
* **Patients may be asked to provide evidence of exemption of NHS charges** e.g. if claiming universal credit or seeking asylum etc.

## Recommendation

Actively promote the way NHS Dentistry works. Target members of the public that may have limited access to finding this information themselves.

# Mystery shopper

We worked with the Dudley Council’s Children and Young Peoples Public Health team to call every NHS dental practice across Dudley borough to enquire about emergency and non-emergency appointments.

We called 40 dental practices across the Dudley borough, presenting as a local person looking to make an NHS dental appointment. We called practices with three different scenarios to discover the experience of booking routine and urgent appointments. We also looked to see if there was a difference in provision for adult and child appointments.

**This is what we found:**

* Dental practices prioritise urgent appointments over routine check-ups.
* There was a lack of signposting to appropriate support when dental practices were unable to provide an appointment.
* 38% of dental practices requested that callers register before being offered an appointment.
* 75% of practices offered a private routine appointment when there were no NHS routine appointments available.

**50% of practices were able to offer routine NHS appointments.**

Whilst we were pleased to discover that practices prioritise appointments for those with the greatest need, we were concerned about the lack of signposting if appointments were unavailable.

If unable to book an NHS appointment, callers enquired about the availability of private appointments.

**There was a shorter wait time for private appointments than NHS appointments for routine treatment. There was no difference in appointments offered for urgent scenarios.**

Some practices required patients to register before they could book an appointment.

“[The practice I called said they are] not taking NHS patients who are adults. They will see a child on the NHS though if the adult pays privately. They will not see a child on the NHS without a private adult.” Adult urgent call

## What good looks like

* Practices prioritise appointments based on clinical need.
* Patients are not required to register in order to book a dental appointment.
* If a practice is unable to offer a routine appointment they refer patients to NHS 111 to find other dental practices.
* If a practice is unable to offer an urgent appointment, they refer patients to NHS 111 for appointments and advice.
* Practices enquire about accessibility needs.

To read the full report on the mystery shopping exercise visit <https://www.healthwatchdudley.co.uk/report/2025-03-18/making-dental-appointment-dudley-borough-mystery-shopper-exercise>

# Digital services

**63% of people booked their appointment by phone and 28% booked in person.**

Dental services fall behind GP practices when it comes to the use of digital methods to manage appointments, view dental records and share information with patients. Of the people who spoke to us about digital communication with their dental practice, they appreciated the ease and convenience.

“I got a text reminder.” Patient at Enter & View Visit

SMS text reminders were appreciated by both survey respondents and patients we spoke to within dental practices.

However, if not done correctly, or if used in isolation, technology can present more barriers to accessing treatment. People told us that technology could be "frustrating" and "upsetting" when not usable.

“Staff should be knowledgeable about apps like Be My Eyes and magnifiers.” Focus group attendee

## Black Country Connected

Black Country Connected is a programme to loan residents a Geobook laptop, providing training to get started as well as ongoing support if needed.

The programme aims to address digital exclusion and enable people to access a range of online resources.

Any health and care professional or community group can make a referral to Black Country Connected, for an initial period of three months. [More information about Black Country Connected.](https://cvs3.sharepoint.com/sites/DudleyCVSHealthwatchDudley/Shared%20Documents/Reports%20and%20research/Dentistry%202024/bit.ly/BCGeobook)

## Are you using the NHS App?

The NHS App gives you a simple and secure way to access a range of NHS services including:

* Find an NHS dentist.
* View your GP health record.
* View your NHS number.
* Use NHS 111 online to answer questions and get instant advice or medical help near you.

**61% of people across Dudley are taking advantage of the NHS App.** [**Find out more about the NHS App**](http://www.bit.ly/BCNHSAPP)

# Physical access

**People who encountered physical barriers at their dental practice were less likely to feel they had been treated with dignity and respect.**

8.3% of people in Dudley have a disability that limits their day to day activities (Census, 2021). A higher proportion of people who have disability responded to our survey.

People told us that physical barriers made it difficult to access dental treatment.

Dental practices are often situated in converted buildings which can limit the ability to build accessible spaces.

People told us that the buildings were not able to accommodate their wheelchairs. One person told us they still had to go upstairs, despite being a wheelchair user, in order to receive treatment.

“I still had to go upstairs when in a wheelchair.” Survey respondent

These experiences may lead to patients feeling like they are not being treated with respect and could prevent people from accessing dental treatment in the future.

Settings that are not accessible could impact the treatment a person with a physical disability may be able to receive.

“I have spinal issues but they couldn’t accommodate me. You have to lie on your back for treatment.” Survey respondent

43% of people who encountered physical barriers the last time they visited a dental practice felt they were not treated with dignity and respect.

Accessibility information about dental practices is available on the NHS website. However, you cannot filter NHS dental practices by accessibility needs, this means a patient has to spend time working through a list to find a suitable practice.

Despite this information being available online, it may not always be updated and accurate. Healthwatch Hillingdon found that out of 19 NHS dental practice, none were fully accessible for people with limited mobility (Healthwatch Hillingdon, 2021). What we have heard mirrors the same issues, more exploration is needed to see the true picture of physical access to dental services in Dudley borough.

## Recommendation

### Enquire about patient needs

Accessibility is different for everyone. Practices should routinely ask prospective patients if they have any accessibility needs and if they are unable to make reasonable adjustments to meet these needs, should signpost a patient to a more accessible NHS dental practice.

### Provide up-to-date accessibility information

Ensure accessibility information is available and up-to-date on the NHS website.

Provide accessibility information on the practice website.

## Adapting to needs

People told us about getting mobile NHS dental visits for housebound patients.

“I have a housebound family member, they arranged a mobile visit.” Survey respondent

# English as a second language

**Not communicating effectively with patients can lead to a lack of trust between providers and patients could lead to medical error (Abou-Abdakkah & Lamyman, 2021).**

97% of people we heard from spoke English as their first language.

The experiences of people who either speak English as a second language, or do not speak English, varied depending on the practice.

Some non-English speakers told us that their friends, children or other family members would provide translation at dental appointments.

Two people told us that the dentist or practice staff were bilingual and were able to provide translation services.

### Who provided translation at NHS dental appointments for people who answered our survey:

* 4 children
* 2 friends
* 2 dentists
* 3 other

“They spoke to me in my language.” Survey respondent

### Alternative solutions that may be used when an interpreter has not been booked include:

* Language picture chart
* Longer appointment times
* Face-to-face appointments
* Type-Talk
* Google Translate
* Medical translating applications

(D’Souza et al., 2021)

# Communication support

People who have additional communication needs can face additional barriers when accessing dental care. 45% of people who need communication support said it was provided at their last NHS dental appointment.

“As I am visually impaired, they showed me where to sign forms and the dentist himself completed the medical questionnaire for me.” Survey respondent

However, other people asked for support and it was not provided.

“I asked for help, but I didn’t get it as they were too busy with other people.” Survey respondent

smaller percentage of people said they need communication support but did not inform the dental practice.

“I didn’t communicate with them but it wasn’t offered either.” Survey respondent

People who have additional communication needs were less likely to feel like they were treated with dignity and respect.

However, if people asked for and received support for their communication needs they were just as likely as the rest of the population to feel like they were treated with dignity and respect.

This demonstrates meeting patients needs has a real impact on their experiences of treatment.

“When I did voice my needs, it was ignored. I eventually stopped voicing my need for support.” Survey respondent

# Fear and anxiety

42% of people told us they experience fear or anxiety when visiting the dentist.

“I am terrified of dental work.” Survey respondent

Of the people who answered our survey, younger people (age 21-29) tend to experience more fear or anxiety when visiting the dentist. The experience of fear and anxiety in people we heard from reduced with age.

“I get anxious about the dentist and particularly injections for numbing. My dentist always talks me through each step and books a longer appointment for me.” Survey respondent

“I use the distractions I learnt on the ‘Expert Patient’ course.” Survey respondent

We heard from people who had good experiences of dental practice staff making adjustments to ease their anxiety.

“He explains clearly every step of the way: what is happening, what further work is needed, alternative options and the cost implications of each option.” Survey respondent

Other people felt this care was not provided.

“Considering many people have anxiety when visiting the dentist, I didn't feel that any effort was made to make me feel at ease and the staff were officious at best.” Survey respondent

# Meeting patient needs

People who said they have a disability were more likely to feel like they were not treated with dignity the last time they visited a dentist.

Making reasonable adjustments to meet patient needs can improve outcomes. Whether physical, psychological or communicative, adjustments are key to building trust between dental practitioners and patients.

Some people felt that dental practice staff lacked compassion for varied needs of patients.

“On a recent visit it was a very hot day; I had gone on the bus and arrived about 15 minutes before they opened after lunch. Several of us, all elderly, had to wait standing outside in the full sun at the height of the day’s heat. We all needed to sit and be in the shade, but there was nowhere we could go. I tried to mention that when I went in and all I was told was "we are entitled to a lunch break". I do think they should consider other things besides our mouth care, especially for older people.” Survey respondent

People who experience physical barriers are more likely to need communication support. This could mean some patients require multiple, tailored adjustments to meet their needs.

## Recommendation

Dental practices should enquire about patient needs as a routine part of booking an appointment, to ensure everyone receives the treatment they need.

If the dental practice is unable to make reasonable adjustments to meet patient needs, they should refer the patient to another, named, dental practice, that can meet the needs of that patient.

# Recommendations

## Be clear and flexible with care

* Provide NHS appointments at a variety of times, including evenings or weekends where possible.
* Ensure practice opening hours and services is available and up-to-date both on the practice website and on NHS 111.

## Meet patient needs

* Routinely ask patients if they have any communication or mobility needs.
* Put in place reasonable adjustments to meet patients needs and maintain patient dignity.
* If reasonable adjustments cannot be made, signpost patients to more appropriate dental practices.
* Provide training on additional communication needs.
* Provide disability awareness training for all practice staff.
* Ensure staff are aware of how to arrange interpreters when required. Make this information available both online and in the practice.

## Provide and clearly display information

* Clearly display dental treatment costs:
	+ On practice website
	+ In practice waiting rooms
	+ In a format patients can understand
* Clearly display information on the physical accessibility of the practice (including steps, parking, adjustable treatment rooms):
	+ On the practice website
	+ On the NHS website
	+ In a format patients can understand
* Ensure administrative staff are confident in disseminating this information to patients and their carers.

## Help with costs

* Clearly explain the need for different levels of treatment to allow patients to make an informed decision with their care.
* Provide information on help to pay for dental costs.
* Signpost patients who may struggle to pay for dental treatment to organisations that can provide advice and guidance.

## Consistency of care

* Co-produce a ‘Patient Dental Charter’ with dental services and the community that sets out the treatment and care patients can expect from an NHS dental practice in Dudley borough.
* Encourage all NHS dental practices in Dudley borough to commit to a ‘Patient Dental Charter’.

# Responses to our findings

We shared this report with partners in the NHS, Dudley Metropolitan Borough Council and Integrated Care Boards in the West Midlands. They have responded positively to the issues and compliments raised through patient feedback. There are opportunities for future collaboration to put in place real change that could improve access to NHS dental services for people across Dudley borough.

“We welcome this feedback I can see an opportunity to improve things by feeding back this report to providers and the Local Dental Network.” Tracy Harvey, Senior Commissioning Manager, NHS Birmingham and Solihull ICB

We thank stakeholders for their openness to feedback and their willingness to work with us, community groups and patients to improve services.

# Acknowledgements

Healthwatch Dudley would like to thank the people of Dudley borough who shared their thoughts and experiences with us. The overwhelming response from the community helped shape our research and highlighted barriers to access.

Thank you to the community and patient groups who allowed us to speak to their members to gain a deeper insight into their experiences.

We would also like to thank the two dental practices we visited for Enter & View visits. We are pleased the practices have committed to acting on the feedback they received from their patients (reports from these visits are available on the Healthwatch Dudley website).

Thank you to the Dudley borough Council’s Children and Young Peoples Public Health Team for their contributions to the mystery shopper exercise.

Thank you also to the Healthwatch Dudley volunteers who gave their time to engage with the public, assess GP practice websites and complete data entry to allow us to analyse the responses from people.

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# Note

Comments may have been edited for clarity and conciseness. Names of the general public have been changed to maintain anonymity.

If you would like clarifications on the data collected in our research and the figures presented in this report please contact us.

# Have your say

If you wish to share your experience of NHS dental services or other health and social care services, please contact our team.

[Healthwatch Dudley website](http://www.healthwatchdudley.co.uk/have-your-say)

Phone 03000 111 001

WhatsApp Message 07983728913 (Monday to Friday 9am to 5pm)

Email hello@healthwatchdudley.co.uk

# Committed to quality logo

Healthwatch Dudley is committed to providing a quality service, from how we collect data, to the information we provide. Every three years we perform an in-depth audit, in conjunction with Healthwatch England, to ensure we meet this high standard.

If you would like this report in another language or format please contact us:

Phone 03000 111 001

WhatsApp Message 07983728913 (Monday to Friday 9am to 5pm)

Email hello@healthwatchdudley.co.uk