

Scottish Parliament Region: North East Scotland

Case 200602298: Tayside NHS Board

Summary of Investigation

Category

Health: Community Dentist; Dental Care and Treatment

Overview

The complainants, Mr and Mrs C, raised a number of concerns about a sequence of events which occurred when they attended the Medical Centre for an appointment with the Community Dentist (the Dentist), on 22 September 2006, for Mrs C to receive dental treatment. Mr and Mrs C complained that the treatment Mrs C expected to receive on that day was refused.

Specific complaints and conclusions

The complaints which have been investigated are that:

- (a) the Dentist refused to treat Mrs C on 22 September 2006 as she could not lie completely flat on the dentist's chair (*not upheld*);
- (b) the Dentist told Mr C to go to a private dentist (*no finding*); and
- (c) Mrs C did not receive any information that there was a Senior Dental Officer for Special Care Dentistry consulting at the Medical Centre, until after she complained about the events of 22 September 2006 (*not upheld*).

Redress and recommendations

The Ombudsman has no recommendations to make.

Main Investigation Report

Introduction

1. The Ombudsman received a complaint from Mr and Mrs C, who stated that, when they attended the Medical Centre for a pre-arranged appointment for Mrs C with the Community Dentist (the Dentist) of the Community Dental Service (the CDS) on 22 September 2006, the treatment Mrs C expected was refused. Mrs C suffers from a disabling spinal disease and Mr and Mrs C alleged that the Dentist refused to treat Mrs C because she was unable to lie completely flat on the dentist's chair. Mr and Mrs C also complained that the Dentist made no real effort to help Mrs C solve the problems she encountered on the day.

2. The complaints from Mr and Mrs C which I have investigated are that:
- (a) the Dentist refused to treat Mrs C on 22 September 2006 as she could not lie completely flat on the dentist's chair;
 - (b) the Dentist told Mr C to go to a private dentist; and
 - (c) Mrs C did not receive any information that there was a Senior Dental Officer (SDO) for Special Care Dentistry consulting at the Medical Centre until after she had complained about the events of 22 September 2006.

Investigation

3. The investigation of this complaint involved obtaining and reading all the relevant documentation, including correspondence between Mr and Mrs C and Tayside NHS Board (the Board). I have had sight of the Board's complaint file (which included details of their investigation into Mr and Mrs C's complaint) and reviewed Mrs C's dental records. Advice was also obtained from the Ombudsman's dental adviser (the Adviser), who examined all the relevant documentation and dental records from the Board. I corresponded with the Board about Mr and Mrs C's complaint and sought clarification from them about their policies and practices related to the treatment of people with disabilities in need of dental care. I also sought information from the Board about the CDS provision of Special Care Dentistry.

4. I have not included in this report every detail investigated but I am satisfied that no matter of significance has been overlooked. Mr and Mrs C and the Board were given an opportunity to comment on a draft of this report.

(a) The Dentist refused to treat Mrs C on 22 September 2006 as she could not lie completely flat on the dentist's chair

5. Mrs C told me that she is disabled and uses a wheelchair. Mr C (who is also her full time carer) accompanied Mrs C to the Medical Centre on 22 September 2006 for her dental treatment. On that day it was planned to carry out a filling on her upper front tooth. According to Mr and Mrs C, Mrs C was refused dental treatment as she was unable to lie completely flat on the dentist's chair as she was in a great deal of pain. Mrs C explained to me that she has spinal disease, along with other related medical conditions which also cause her a great deal of pain and discomfort. This was the reason Mrs C told me that it was impossible for her to lie down flat on her back and she stated 'This was explained to [the Dentist], but to no avail'.

6. Furthermore, in Mrs C's view, 'all [the Dentist] was concerned about was the fact that unless she could treat me sitting down to avoid [the Dentist] getting a sore back, she told me that I could not be treated'. Mrs C also alleged that the Dentist made no real effort to help her solve the problem on that day (see paragraph 1). In Mr and Mrs C's view, the Dental Team had not tried to assist Mrs C into a comfortable position on the dentist's chair.

7. Within the Board's reply to my enquiries they stated that Mrs C was not refused treatment. They explained that the Dentist had reclined the dentist's chair slightly but, as this position was uncomfortable for Mrs C, it was returned to the upright position. Thereafter, the Dentist explained to Mrs C that, in some cases, it was more comfortable to lie completely flat as this produced less pressure on the spine. According to the Board, Mrs C agreed to try this but, as this position was even more uncomfortable for her, the chair was again returned to the upright position.

8. The Board told me that at this stage, the Dentist discussed with Mr and Mrs C the need to recline the dentist's chair to some degree, to enable an aesthetic filling to be placed safely and stated '[The Dentist] felt that it was unsafe for the patient and the operating team to attempt conservation of the tooth [the filling of the tooth] in a completely upright position'. In the Board's view they stated that a compromise was needed between Mrs C's ability to adopt a position that facilitated quality operative care and the safety of both the Mrs C and the Dental Team, however, 'at this point Mr and Mrs C elected to leave'.

9. The Board advised that the Dentist felt she had not been given the opportunity to resolve the problem, as Mr and Mrs C had left hastily (see paragraph 8). The Board stated that the Dentist would have wished to discuss the difficulties and solutions with Mrs C and also to consult with a more senior dentist who was in the adjacent surgery: 'Had Mr and Mrs C been prepared to stay for a few minutes, there could and would have been an opportunity to resolve this.'

10. In addressing the issue whereby Mr and Mrs C stated that the Dental Team had not assisted Mrs C into a comfortable position within the dentist's chair, the Board told me that, in their view, there appeared to be a mutual misunderstanding about the meaning of the word 'assist'. According to the Dental Team, Mr C assisted Mrs C into the chair. The Dentist, in order to find a comfortable chair position for Mrs C, tried to explain alternative positions that would be helpful. To the Dental Team this constituted 'assisting the patient into a comfortable position'. The Board added that the Dentist did not touch the patient or try to physically move her as, in their view, 'this would have been inappropriate and probably unhelpful'.

11. From my review of the complaint file, it was recorded that Mrs C made her telephone complaint to the Board on 22 September 2006. I noted from the written statement made by the Dentist on 22 September 2006 that, after Mr C settled Mrs C into the dentist's chair, the Dentist checked Mrs C's medical history and, thereafter, explained to her the need to put the chair back 'but I would do it slowly to see how [Mrs C] got on'. The Dentist stated that she reclined the chair slowly but, as Mrs C complained of back pain, she sat her upright. The Dentist stated that Mrs C was willing for her to try again but, as Mrs C remained in pain, the Dentist returned the chair to the upright position (see paragraph 7).

12. I have also seen, from within the Dentist's statement, that she outlined to Mr and Mrs C about the safety concerns of proceeding with the dental work in the upright position which would affect both Mrs C and the Dental Team. The Dentist had also expressed her view that carrying out the dental work to Mrs C's upper front tooth while she was upright would also compromise the likelihood of the dental work being successful. Within the statement given by the Trainee Dental Nurse (the TDN) who was present as part of the Dental Team, she confirmed that the Dentist said that 'the filling would not be as good as it could be' (see paragraphs 8 and 11).

13. I have seen, from the dental records dated 22 September 2006, that it was recorded that Mrs C got into the dentist's chair with help from Mr C and the Dentist attempted to put the chair back slowly, however Mrs C was not happy as she was in pain. Thereafter '[the Dentist] explained the need to go back even slightly to restore [the tooth] aesthetically and [the Dentist] was unwilling to attempt with [Mrs C] upright for [Mrs C]'s safety and aesthetics and [the Dentist] + [the DN] backs. Mrs C wishes to find another dentist' (see paragraph 11).

14. The Adviser considered Mrs C's medical condition and the circumstances whereby she was unable to lie flat to have a filling placed at the front of her upper left central incisor.

15. Thereafter, the Adviser stated that, to place a filling in an upper front tooth, it is usual practice to recline the dentist's chair so that the dentist is able to access appropriately the tooth to be treated.

16. In the Adviser's view, he concluded that it was entirely reasonable that the Dentist felt it was unsafe, for the operating team (the Dentist and her Dental Nurses) and Mrs C, to attempt to fill Mrs C's upper front tooth in the upright position. Furthermore, the Adviser stated that, in his view, it was not possible to carry out the filling of Mrs C's tooth, while she was in an upright position.

(a) Conclusion

17. According to Mr and Mrs C, she was refused treatment by the Dentist on 22 September 2006 as she was unable to lie completely flat on the dentist's chair, due to the pain she suffered. I have considered carefully the evidence outlined above and reviewed all the relevant documentation (see paragraph 3). I share the Adviser's view that, for the reasons outlined at paragraphs 8 and 12, the decision taken by the Dentist that it was unsafe for Mrs C and the operating team to attempt the filling of her upper front tooth in a completely upright position, was entirely reasonable. Furthermore, I consider that the Dentist's decision was not a refusal of treatment, it was a professional judgement taken by the Dentist based on the circumstances that were presented to her on that day (see paragraph 12).

18. Given all the documentation and statements I have reviewed, I have seen no evidence to support Mr and Mrs C's allegation that the Dentist made no effort to find a solution to this problem or that the Dentist did not try to assist Mrs C in

trying to achieve a comfortable position in the dentist's chair (see paragraphs 7, 8, 9, 12 and 13). Accordingly, having taken all these factors into account, I do not uphold this complaint.

(a) Recommendation

19. The Ombudsman has no recommendation to make.

(b) The Dentist told Mr C to go to a private Dentist

20. According to Mrs C, the Dentist told Mr C to 'go to a private dentist as they get paid for it'.

21. Within the Board's reply to me they told me that the Dentist had not told Mr C to seek a private dentist and the statement at paragraph 20 was incorrect.

22. The Board outlined the following statement taken from the Dental Team on 22 September 2006: 'As they were leaving, [Mr C] said that they would find another dentist and [the Dentist] confirmed that they, of course, had the right to do this' (see paragraph 8 and 9). The Board told me that, at this stage, Mr and Mrs C were clearly upset and they were seen in the corridor by a fourth member of staff who offered to help them but Mr and Mrs C declined this offer.

23. Within their reply to me, the Board also responded to my enquiry about their practices related to the treatment of people with disabilities in need of dental care. They told me that the CDS regularly care for patients with disabilities. Furthermore, many of the patients the CDS see are referred from private or independent contractor NHS dentists. The Board stated that 'the provision of care for patients with disabilities is one of their core purposes'. They also commented that they do not have any written procedures or guidance for treating people with disabilities as they aim to treat patients as individuals 'not as manifestations of their disability or disease' (see paragraph 3).

24. As I previously stated at paragraphs 11 and 12, I have reviewed statements made by the Dentist, the DN and the TDN, who were present in the dental surgery on 22 September 2006. The DN stated that Mrs C 'said that she would just leave it and her husband said they would find another dentist'. The TDN stated that Mr C 'says that they would just go and find a private dentist so treatment could be carried out'. According to the Dentist, Mrs C 'said she would find another dentist who would do it with her upright ... I said she was of course free to do this and she left' (see paragraph 22).

25. The Adviser considered the Board's statement about their provision of care for patients with disabilities and, in his view, this was a good reflection of the work carried out by the CDS. The Adviser also considered that it was not unreasonable that the Board have no specific policies in place regarding their provision of care related to the treatment of people with disabilities (see paragraph 23).

(b) Conclusion

26. Mrs C alleged that the Dentist told Mr C to go to a private dentist. The Board have told me that the Dentist did not make this statement. I have carefully considered the evidence outlined above and the documentation at paragraphs 3, 22 and 24. In my view it is clear that the Board have taken this complaint seriously and that they have carefully investigated this allegation. It is also clear, from the documentation and statements I have seen, that there are different perceptions of the events of 22 September 2006, between those held by Mr and Mrs C and those held by the Dentist, the DN and the TDN (see paragraphs 20, 22, and 24). When a complaint involves one person's word against another, such as Mr and Mrs C's allegation against the Dentist, in the absence of independent witnesses, it is impossible to establish the facts which would enable me to draw a firm conclusion. In the circumstances I have described, I am, therefore, unable to make a finding on this complaint.

(b) Recommendation

27. The Ombudsman had no recommendation to make.

(c) Mrs C did not receive any information that there was a SDO for Special Care Dentistry consulting at the Medical Centre, until after she complained about the events of 22 September 2006

28. According to Mrs C, had she been advised in good time that there was a SDO for Special Care Dentistry consulting at the CDS, she would have opted to have her dental work carried out by the SDO. Mrs C told me that she only became aware of the provision of the SDO when she received the final reply to her complaint from the Board dated 13 October 2006.

29. Within the Board's reply to me they told me that Mrs C had been a patient of the CDS since 2005 and had been treated by two of their dentists and two of their hygienists.

30. As a core function of the CDS, the Board stated that treatment of patients with disabilities is carried out by all their dental staff. The SDO co-ordinates the service and provides clinical care in particularly complex cases. Furthermore, the Board explained that they would not normally ask a patient whether she (or he) would prefer to receive care from the SDO, as such a decision would be based on a needs assessment undertaken by the CDS.

31. According to the paperwork I have seen, from the time Mrs C attended the CDS, her dental care and treatments had not given issue to be needs assessed for onward referral to the SDO. The Board told me that the offer of care from the SDO to Mrs C was made 'when it became clear this was required'. I noted this offer was made to Mrs C by the Board on 13 October 2006 following the events of 22 September 2006.

32. Furthermore, the Board have advised me that the SDO operating in Dundee is male and Mrs C had requested that she was not treated by a male. Because of Mrs C's wish to be seen by a female and her recent experience (see paragraph 1), the Board arranged for a female senior specialist from outwith their area to attend a clinic with Mrs C at a mutually convenient time. The Board have advised me that, to date, they have not received a response from Mrs C to this offer.

33. The Adviser has considered all the circumstances regarding the timing when the information about the provision of the SDO was made available for Mrs C to consider. He considers that the explanation the Board has provided to me was appropriate and reasonable regarding the provision of the CDS (see paragraphs 30 and 31).

(c) Conclusion

34. Mr and Mrs C told me that they were unaware that the SDO was consulting within the CDS at the Medical Centre, until after they complained about the events of 22 September 2006. I have carefully reviewed all the relevant documentation and share the Adviser's view that the decision to refer Mrs C to the SDO was correctly based on a needs assessment and, thereafter, the CDS took their decision to refer Mrs C to the SDO appropriately and in good time (see paragraph 31). Accordingly in all these circumstances, I do not uphold this complaint.

(c) *Recommendation*

35. The Ombudsman has no recommendations to make

Explanation of abbreviations used

Mr and Mrs C	The complainants
The Medical Centre	The centre where the CDS is housed
The Dentist	The dentist of the CDS, who attended Mrs C on 22 September 2006
The CDS	The Community Dental Service
The SDO	Senior Dental Officer for Special Care Dentistry based at the CDS
The Board	Tayside NHS Board
The Adviser	The Ombudsman's dental adviser
The Dental Team	The collective name for the dentist and her two dental nurses
The TDN	The trainee dental nurse who assisted the DN
The DN	The dental nurse who assisted the dentist

Glossary of terms

Aesthetic filling	A filling of pleasant appearance, in this case an invisible filling
Conservation of the tooth	Filling the tooth