



**Comisiynydd  
Pobl Hŷn  
Cymru**  
**Older People's  
Commissioner  
for Wales**

# **Round table on oral health and dentistry in Wales:**

## **Summary report**



# The Older People's Commissioner for Wales

The Older People's Commissioner for Wales is an independent voice and champion for older people throughout Wales.

**The Commissioner wants Wales to lead the way in empowering older people, tackling inequality and enabling everyone to live and age well.**

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**Mae'r ddogfen hon ar gael yn Gymraeg // This document is available in Welsh**

# Background

During her engagement with older people across Wales in her first year in post, the Commissioner heard from older people about the problems they are experiencing accessing dental services. The Commissioner published her [strategy and work programme for 2025-26](#) in May 2025 which includes a commitment to examine older people's access to dentistry and oral health services in Wales.

In June 2025, the Commissioner's office submitted a [response to the Welsh Government's consultation](#) on the reform of general dental services.

In September and October 2025, the Commissioner's office had a series of informative conversations with various stakeholders in the oral health and dentistry field in Wales. In the light of these discussions, the Commissioner convened a round table meeting on 12th November 2025, to bring together stakeholders from oral health and dentistry policy and practice, as well as general health and social care stakeholders, to discuss how older people's oral health and dentistry might benefit from better integration with new community-based models of prevention, treatment and care.

## Round table

The meeting was wide-ranging and informative. Participants discussed:

- Data, including: what data is currently available; the significant gaps in our understanding of the oral health of older people in Wales, particularly people living independently who may be vulnerable but not accessing NHS dental care, for example, people living with dementia; a lack of understanding of the true scale of unmet need for prevention and treatment; the need for better integration of oral health data into existing health and social care assessments and data systems, and the need for better integration of those systems themselves to provide a fuller picture;
- Service Models, Prevention and Skill Mix in Oral Health, including: variations in prevention and treatment service provision across health boards, leading to disparities in access and support; the importance of prevention, self-care and support for those who cannot look after their oral hygiene themselves; the role of oral health educators, dental therapists, dental nurses and others in primary, community and social care; the need for consistent, Wales-wide approaches to oral care for vulnerable people and to improving the oral health of older people; the need to embed oral health promotion and prevention in place-based care models, shifting the focus from intervention to prevention and ensuring oral health is part of holistic assessments for older people;
- Integration of Oral Health into Broader Health and Social Care: the integration of oral health into frailty pathways, social care assessments, and multidisciplinary services, identifying opportunities and challenges and removing barriers to embedding oral health within holistic health and social care for older people; the importance of oral health in preventing deconditioning in hospital and in the community; driving improvements in oral care and oral health standards through inspection and feedback; the potential for oral health to be more explicitly included in care assessments, for increasing ownership of

oral care and oral health within social care teams, and for the development of innovative support tools for domiciliary care teams and service providers;

- The Dental Access Portal (DAP): its design for inclusivity, with alternative routes for older people and those digitally excluded to access dental services, such as telephone support and assistance from family members or dental practices for those unable to use digital services; the importance of designing the portal for future generations while ensuring current users are not left behind; the need to link the DAP to other digital and data developments within health and social care, and the need to socialise new digital concepts to increase awareness and acceptance over time;
- Communication, Messaging, and Community Engagement: the importance of reframing oral health messaging in health and social care, shifting from deficit-based language to focusing on how oral health contributes to well-being, dignity and quality of life; the need to place higher value on oral care as fundamental to self-care and the care provided by unpaid carers, rather than focussing solely on clinical intervention to improve oral health; making best use of Third Sector and community groups to reach older people who are not in contact with existing oral care programmes and dental services, through in-person engagement; ensuring information and support reach older people living independently and in care homes through appropriate channels, and ensuring unpaid carers and care workers are equipped with the knowledge, capacity and capability they need to deliver effective oral care;
- Policy, Transformation, and Strategic Opportunities: alignment of oral health with primary and community care transformation programmes; the need for strategic integration and the importance of influencing policy and resource allocation to support systemic change.

## Next steps

Participants agreed to share further information and opportunities to continue to build networks and widen the dialogue going forward.

The Commissioner stated she would write to the Cabinet Secretary for Health and Social Care following the meeting, and that she would publish a progress report summarising the discussion.

The Commissioner will draw on the discussion to inform her work programme going forward.

The Commissioner values key stakeholders' continuing participation and the perspective they and others who were unable to attend bring to this important discussion and hopes it will continue.



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