

**Request for Report to the North West London Joint Health Overview  
Scrutiny Committee**

**14 March 2024**

<b>Report Title:</b>	North West London Commissioning Arrangements for Community Pharmacy and Dental Services
<b>Report Author:</b>	Javina Sehgal – Director of Primary Care
<b>Committee Date:</b>	<b>14 March 2024</b>
<b>Report Deadline:</b>	<b>04 March 2024</b>

**Purpose**

To receive a report on the current state of North West London Commissioning Arrangements for Community Pharmacy and Dental Services across North West London.

1. The current context for commissioning arrangements for dental services in NW London
2. The impact on these services since the move to more place based, clinically led commissioning
3. Where are the ongoing challenges related to the commissioning of dental services
4. Any work on diversity planning for these services
5. Procurement and performance targets
6. Workforce and staffing issues.

**Detail**

**Background/Context:**

Set out the current context for commissioning arrangements for community pharmacy and dental services in NW London.

- **Community pharmacy services** are commissioned by NHS England - the request has been shared with their leads and an update will be provided as soon as possible.
  
- **Dental services**

According to the National Dental Epidemiology Programme oral health survey in 2022 children in NW London have the poorest teeth of anyone in London.

This survey also identified Brent as the upper-tier local authority with the highest prevalence of experience of dentinal decay (46.0%) for 5 year olds in England.

There are also significant inequalities associated with poor oral health. People living in the most deprived areas are 2.5 times more likely to have experience of tooth decay. While the reasons behind this are complex, there are a number of cost effective interventions backed by the National Institute for Health and Care Excellence, and the Office for Health Improvement and Disparities, which reduce decay and promote good oral health amongst children and young people.

In December 2023 the ICP identified oral health as one of three priority areas which represent complex and cross-cutting issues which require a considered and systemic approach. To make progress, commissioners and providers of dental public health and dental care and treatment will need to work together to make the best use of our available resource.

### **National dental recovery plan**

Recognising the challenging state of children's oral health in NW London and the value of instilling good oral health habits, including regular access to NHS dental care, at an early age, it is proposed that our cross-ICS work will focus on children and young people in the first instance. The learning from focused health promotion and testing of new commissioning approaches for dental services can then inform future action to improve oral health across the wider adult population.

On 7 February 2024 the government published their plan to recover and reform NHS dentistry: Faster, Simpler and Fairer. This includes a commitment to additional investment in 2024/25, to promote access to dentistry and embed oral health awareness programmes for children and young people.

NHS dentists will be given a 'new patient' payment of between £15-£50 (depending on treatment need) to treat patients who have not seen an NHS dentist in two years or more. This will begin from March 2024 and is time limited to end of financial year 2024/2025. No modelling is available to indicate the financial impact of this.

A further increase in the minimum indicative Unit of Dental Activity (UDA) value from the £23 announced in July 2022 to £28 from April 2024, in NW London this would affect 19 practices in total, adding an additional £937,272 to dental spend in 2023/24.

### **Current context for commissioning of dental services**

From 1 April 2023, pharmacy, ophthalmic and dental commissioning responsibilities were delegated to ICBs from NHSE. This mainly included primary care services but also acute and community dental services.

This means the responsibility for commissioning and managing these services passed to ICBs including the associated budgets. The delegation of primary care commissioning functions provides NHS NW London with an opportunity to look at how we are commissioning dental services to prevent poor oral health, protect and expand access, and deliver high quality care.

However, there are limitations in current national contracting frameworks that reduce our flexibility to change contracting arrangements at a local level despite delegation of responsibility.

#### *Current arrangements related to the commissioning of dental services*

General Dental Service providers are high street dental practices who contract with the NHS to deliver an agreed level of activity known as Units of Dental Activity (UDAs) for a fixed contractual sum. The value of a UDA is negotiated locally, against a minimum value which is nationally agreed. There are six bands of treatment which attracted different numbers of UDAs:

Band	No. UDAs	Includes
Band 1	1	Examination, diagnosis and advice
Band 2a	3	Everything in band 1, plus additional treatment such as fillings, root canals and extractions
*Band 2b	5	Everything in bands 2 where there are three or more fillings/extractions in one course of treatment and/or non-molar root canal treatment to permanent teeth
*Band 2c	7	Everything in band 2 plus molar endodontic care to permanent teeth.
Band 3	12	Everything in band 2 plus more complex treatment such as crowns, dentures and bridges
Urgent	1.2	Examination, assessment, advice and urgent treatment

Under the GDS contract each provider agrees to provide a set number of UDAs, paid in monthly instalments. If the provider does not deliver 96% of their agreed contract activity at year end, money for the care that has not been delivered may be recovered.

For NW London community dentistry is commissioned via the Whittington NHS Trust and Central London Community Healthcare Trust. Community dental services are also commissioned to provide oral health promotion across NW London, liaising with local authority public health teams. Community dental contracts in NW London are due to be refreshed in 26/27.

Secondary and tertiary care dentistry is commissioned under the standard NHS contract. Monthly or quarterly contract meetings depending on size of contract, review activity, capacity, referral to treatment and delivery challenges.

#### *Opportunities within delegated commissioning*

Under the delegation of commissioning to ICBs there is some flexibility to join up or re-design key pathways of care, leading to better outcomes and experiences for patients.

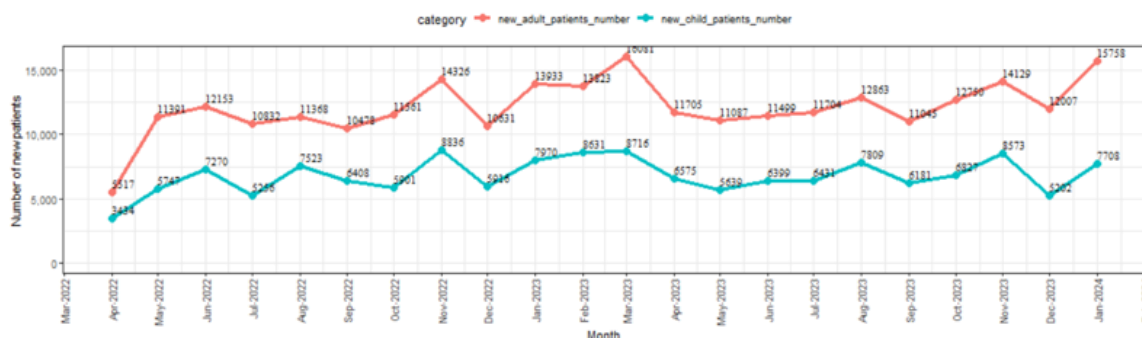
However, this flexibility is limited by the constraints of the national contractual and policy requirements placed on us. For example, the national system of allocating UDAs by course of treatment, rather than length of appointment, number of visits or procedures, means, for example, that a dentist is reimbursed at the same rate regardless of whether a course of treatment includes one, two, or three tooth extractions, or the complexity of follow up. This provides a disincentive for dentists to take on new or complex patients.

It is our intention use what flexibilities there are to support improvement in access and oral health, in partnership and with stakeholders. This will building on learning from innovative use of UDAs in 2023/24 (see below), and working with partners to meet local needs both at ICB and at place.

## Performance and procurement update

Borough	Contract value	Current units of dental activity (UDA) commissioned	Current no. of practices
Brent	£17.6m	482,959	60
Ealing	£20m	551,084	43
H&F	£12.1m	325,883	30
Harrow	£10.1m	315,106	39
Hillingdon	£10.8m	349,688	36
Hounslow	£15.6m	435,453	41
K&C	£7.3m	198,310	18
Westminster	£13.7m	378,765	48
<b>TOTAL</b>	<b>£107.2m</b>	<b>3,037,248</b>	<b>315</b>

The number of new patients seen by NHS dentists (including people who have not been seen for over two years) has increased in NW London since 2022. This has been supported with additional investment in 23/24.



### Additional ICB investment in 23/24 to improve capacity and access to NHS dentistry.

- Increasing access in areas of greatest need:** In Oct 2023 £2.7m was invested in 81 practices in areas of high demand/need to purchase 82,800 additional 'units of dental activity' (UDAs) with a focus on increasing the number of people seeing a dentist for the first time, or after an absence of >2 years.
- Supporting people to see NHS dentists in an emergency:** Urgent dental service was re-procured across NW London in Nov 2023 to ensure continuity of access. These services, which are accessed via 111, triage and book patients into local urgent dental services to ensure people are getting access when they need it.
- Reducing waiting times for children and young people needing dental procedures:** An additional £310,000 was allocated to secure additional capacity to treat children who need dental procedures under general anaesthetic. This investment also helped reduce waiting lists and times for children awaiting treatment and released capacity in community dental services.

## **Workforce and staffing**

Dental practices are experiencing difficulties that are contributing to access difficulties. This includes recruitment and retention of dental staff. Reimbursement rates for UDAs also vary across NW London, and between other areas of London and across England, which impacts their ability to attract new dentists for NHS work.

### **Next steps**

NW London has recently established a working group on oral health, which is co-chaired by the ICB Director of Primary Care and Hounslow's Director of Public Health. The group has worked with dental and oral health leads across the ICS to identify five key areas where we can work together to improve oral health.

These have been tested with a number of internal oversight groups and comprise:

1. building a comprehensive health promotion offer for NW London
2. creating oral health friendly public health service environments
3. improving access to dentistry in areas of higher need
4. developing family friendly dental practices
5. managing complex dental pathways

The group will work with cross-ICS stakeholders to develop recommendations for an approach to delivery. This planning work will ensure the ICS is in a position to take advantage of additional investment in 2024/25 as it arises, and work to ensure that this is sustainable into the longer term.

A detailed workplan is still to be developed, however it is expected that the first year of operation will involve developing, testing and evaluating new ways of working in targeted areas of NW London, building on existing best practice. This will then be rolled out in years two and three.

Given current pressures on NHS dental service, it is important that we appropriately phase increases in demand with increased capacity.

Delivery of this workplan will be dependent on appropriate resource to scope, design, invest in and evaluate collaborative initiatives.

**Member Request:**

**Cllr Ketan Sheth, Committee Chair, January 2024**