

## **Review of Dental Out of Hours Services and In-Hours Access arrangements**

### **Background and Introduction**

Following the recent review of commissioning of NHS dental services in ABMU based on the final report from Cardiff University and Public Health Wales “*Exploring current service use and the distribution of services in relation to need*”, the Health Board has had the opportunity to identify areas of high need and low contracted activity to develop a plan for commissioning additional in-hours activity.

With an increase in contracted activity it is timely for the Health Board to review the current uptake of both in-hours access sessions and the dental out of hours services encouraging patients to take a proactive approach to the management of their oral health.

### **In Hours Access**

Currently the three localities have varying methods of contracting additional access sessions as well as rates of remuneration. The Health Board currently commissions 56 hours of access sessions per week across the three localities with varying levels of uptake at a cost of £178k per annum.

Clearly there needs to be an equitable approach to remuneration and commissioning on services as well as the need to ensure that it is those patients who do not have regular access to a NHS dentist that are able to book into access sessions.

The Health Board therefore recommends that a standard rate of remuneration is implemented across the three localities as well as a standard contracting mechanism; Neath Port Talbot currently has its access sessions built into the GDS contracts, which has been considered unfavourable by Welsh Government, whilst Bridgend and Swansea have an alternative mechanism for remuneration.

Currently all patients wishing to book appointments at an access session are triaged by NHS Direct Wales. As this is not part of the agreement with NHS Direct Wales there is the potential for the Health Board to reconsider the provision of this element of the service along with a central booking system, which could be via Primecare or an employee of ABMU.

### **Proposed actions:**

- Safeguard the current level of investment into access sessions but move to a common rate of remuneration which will increase the number of sessions available
- Negotiate the removal of access sessions from GDS contracts on the understanding that the same level of access will be commissioned through an alternative mechanism
- Have a central point of contact for patients wishing to book an access session

## **Dental Out of Hours Services**

The current dental out of hours model provides three hour sessions which equates on average to twelve patients from 7 – 10pm Monday to Friday and 4 – 7pm on Saturdays, Sundays and Bank Holidays. The current mechanism for patients wishing to access the service is via contact with NHS Direct Wales for triage before contacting the dentist providing the service on a standard mobile number.

Whilst it is appreciated that there are a number of pro's to the current service model (including 7 day coverage) there have been a number of patient complaints about the current service as well as complaints from colleagues at A&E on the basis of an increase in the number of referrals from NHS Direct Wales.

In reviewing the statistics from April – September 2011, based on number of patients attending in relation to the overall cost of running the sessions, the cost per patient is £44.12 for those seen during a weekend session (Friday – Sunday and inclusive of Bank Holidays) in comparison to £90.97 per patient seen during a weekday session (Monday to Thursday).

It is therefore proposed that with an increase in in-hours access due to the new contracts there should be a decrease in the weekday dental out of hours service, with the focus being on the “extended” weekend and Bank Holidays. Whilst there is the potential to consider the longer term centralisation of the service, there is the potential for two sessions to be considered at the weekends which could be rotated across the three localities in an attempt to decrease the distance travelled by patients needing to access the service.

The mobile phone currently being used by the service is couriered to the dentist who is on call which is an additional cost to the service. There is therefore the potential to scope the potential for an alternative call handling service to triage and book the patients into the out of hours service.

### **Proposed actions:**

- Further develop costings for a new dental out of hours service model
- Consider the move to a central booking and triage system
- Consider the centralisation of the service

## **Conclusion**

Members are asked to:

- support the proposed actions as a means of scoping a new service model to enhance patient access to in-hours dental services thus limiting the need for an extensive out of hours service model
- agree the proposed changes to the dental out of hours service to take effect from 1 April 2012
- support the consideration of a centralised dental out of hours service as a future service model