CABINET STATEMENT

Written Statement: Reforming Dental Services

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I issued a written statement on 11 July outlining the contribution that oral health and dental services can make to achieving the vision of whole system change set out in A Healthier Wales. This statement is to provide members with an update on the reform of dental services and the expansion in the number of practices taking part in the programme.

Opportunities exist in dentistry to realise national transformation and we have evidence of what is effective in improving oral health. The impact and efficiency gains made using a needs-led approach to care delivery and the skills of the whole team is clear. Further progress in contract reform is required for this to become a reality. There is a need to increase understanding and oral health literacy at all levels to accelerate change.

Progress has been made in improving and maintaining oral health for some groups and communities. However, challenges remain and, despite being largely preventable, the burden of dental disease impacts adversely on too many lives in Wales, particularly in vulnerable and disadvantaged groups. It is costly for the NHS, can be unpleasant to treat and, for some young adults severely affected, it can result in the permanent loss of teeth. Access to dental care still remains variable across Wales.

We need to raise awareness of the importance of good of oral health and the contribution it can make to wider health and well-being. We must inform and empower patients and the public to value, maintain and protect their own oral health, and that of their dependents. We want patients to understand how their choices affect their likelihood of developing dental disease and make different ones. We want dental teams to personalise key messages, to deliver consistent advice to assist patients to lower their risk of oral disease.

In addition to addressing key determinants of health to achieve oral health improvement, we will progress contract reform and implement change. The contract reform programme has embedded a 'test and modify' approach to learn from the experience of what works.

The majority of access to dental services in Wales is delivered in a primary care setting by independent contractors -'high street' dental practitioners holding NHS contracts. The NHS dental contractual system has been built around providing later-stage treatment. It is not needs led or outcome measured. This means there is currently no significant financial incentive for dentists to focus on prevention - to shift to preventive care, make use of the skills of the whole team and open 'access' within the current system.

Outmoded performance measures linked to treatment bands are overly relied on within the NHS. Working in new ways could impact negatively on income and therefore, viability of a practice without active contract reform support. Measures are being developed in contract reform that can assess clinicians' adoption of, and adherence to, evidence led practice and expanding the use of staff skill mix to deliver that practice.

If we want to secure better value and health outcomes for the investment being made, the most pressing need and greatest impact will be achieved by dental contract reform.

Twenty two dental practices across all seven health boards have been participating in the first stages of dental contract reform. Electronic data capture commenced in June this year. Supporting, patient facing information, is also being used to communicate the findings following assessment. These personalised plans outline what patients are expected to do for themselves to maintain and improve oral health.

Early evaluation of the 22 practices has allowed risk and need to be understood. It has demonstrated increased access, improved quality and preventive intervention is possible. It has confirmed the evidence to support the direction we are taking and to increase the number of practices taking part.

In my statement in July, I asked health boards and the dental profession to support expansion of the reform programme at pace and for a minimum of 10% of dental practices to be taking part from October. I am pleased to say that ambition has been achieved and indeed exceeded, with a total of 53 practices – 1 in 8 of all practices in Wales – now actively participating. To support delivery, recurrent funding of £350,000 has been made available to health boards.

I am asking health boards and the dental profession to continue to work collaboratively with Welsh Government and to step up the pace of contract reform. For practices already part of the programme, and where data supports such a move, I want to see health boards work with individual practices to go further in testing need, quality and outcome measures and in adopting prudent healthcare principles.

An innovation fund has been established to stimulate improvement and the recruitment of dental care professionals in practices. This will support the adoption and testing of new ways of working that will be independent of current monitoring and allow practices to experience the impact of a different payment mechanism. This will incentivise prevention, increase the use of the skills of the whole team, and encourage leadership in dentists by giving them approval to innovate. Seventy three applications to the innovation fund have been received and these are currently being assessed. Up to £1.5 million is available to support successful applications.

But there is also a need to accelerate further the move away from the current treatment target driven contracting process and to expand contract reform further. To do so will require that primary dental care contract reform receives sufficient priority and executive led encouragement within health boards. I now expect a minimum of 20% of dental practices to be taking part in each area from April 2019. I appreciate this is challenging but achievable. My officials will be discussing with individual health boards the future reform work programme and will consider any particular concerns they might have in meeting this goal.

I will continue to provide information on the development and progress of the dental reform programme as it progresses.