An Overview of the General Dental Service **Reform Programme**

September 2019



lechyd Cyhoeddus Public Health

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1. Context

Understanding the context to understand the drivers for change

- Primary Care Plan
- Healthier Wales: Our Plan for Health and Social Care
- Oral Health and Dental Services' Response

GDS specific

Challenges of current UDA based GDS System

Every system is perfectly designed to get the results it gets.

2. Objectives of the Programme

- **Understand the risk and need of people who visit dental services**
- ***** Inverse Care Law
- * Access
- Prevention
- Recall intervals based on risk and need
- * Skill-mix
- Continuous Quality Improvement (QI)
- ***** Partnerships with other primary and social care services



2. Objectives of the Programme

GDS Reform Programme

Develop new Volume/Activity, Quality Indicators, Outcomes Measures

Inform/influence changes in the wider system:

- Information system e.g. need and risks of patients, outcomes data (clinical, patient reported)
- Dental Workforce Planning (including training)
- Policy Direction Legislations, Pump-Prime Funding,
- Research and Development Decision Aid for Shared Decision Making, Mathematical Modelling, PROMs
- Overall dental service planning e.g. CDS, specialist services in primary care and secondary care





Action Learning Approach

GDS Reform Programme



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3. Programme Steering Group





4. Joining the Programme

Stage 1

- UDA rate at least £25/UDA
- 10% reduction in their annual UDA target

Stage 2

Year 1 20% reduction in the UDA target

Year 2 Individualised incentives taking in considerations of multiple factors

Stage 3
? Activity and Quality Indicators

Pump Priming Funds

GDS Reform Programme



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5. Risks and Needs Assessment ACORN Toolkit

- Medical, Social and Dental Histories
- Risk and protective factors
- Clinical findings: Soft tissues, tooth decay, perio, other dental conditions



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- Do it well **once a year** only
- Not a 'tick box' exercise to collect 'risk and need' data : Expected additional utilities (prevention, baseline to monitor progress against, Shared Decision Making)
- Prevention



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GDS data goes to an organisation called NHS Business Services Authority (NHSBSA).

- Further changes has been requested!!

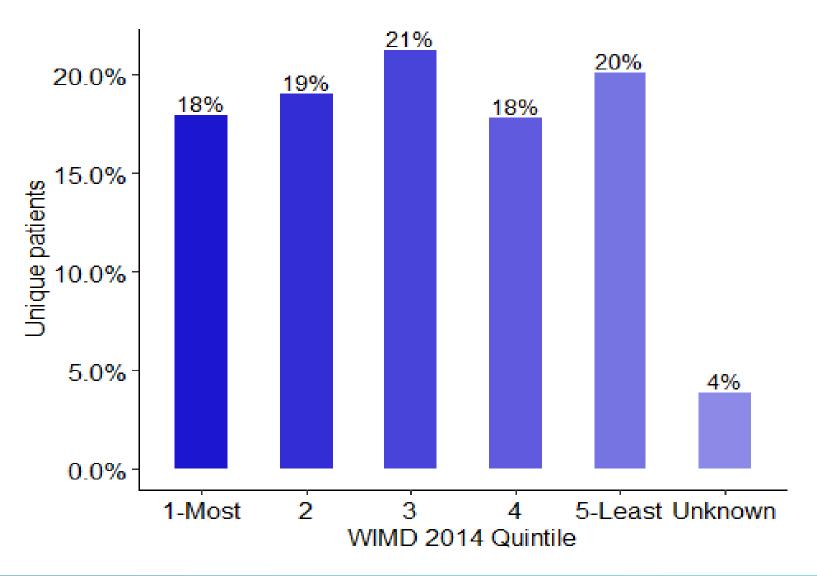


6. Early Findings



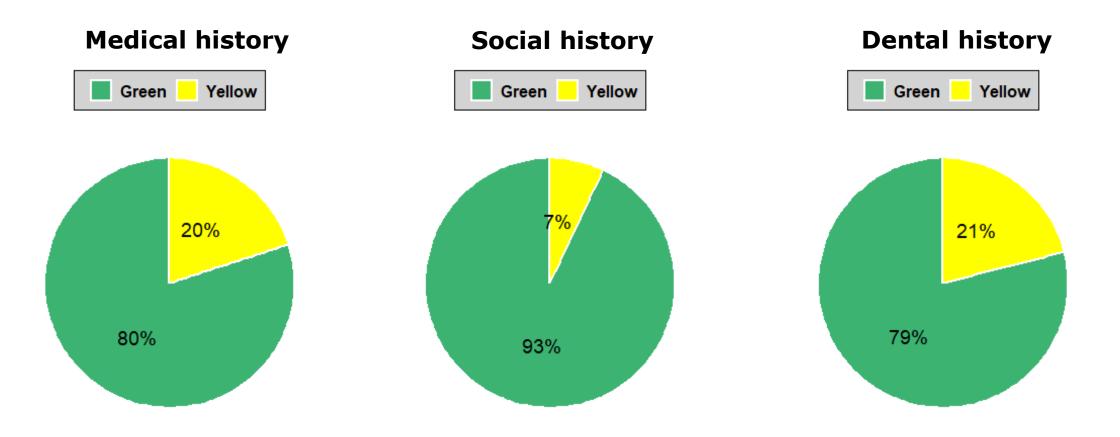
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ACORN – Deprivation quintiles of patients who received ACORN (n = 129,566)



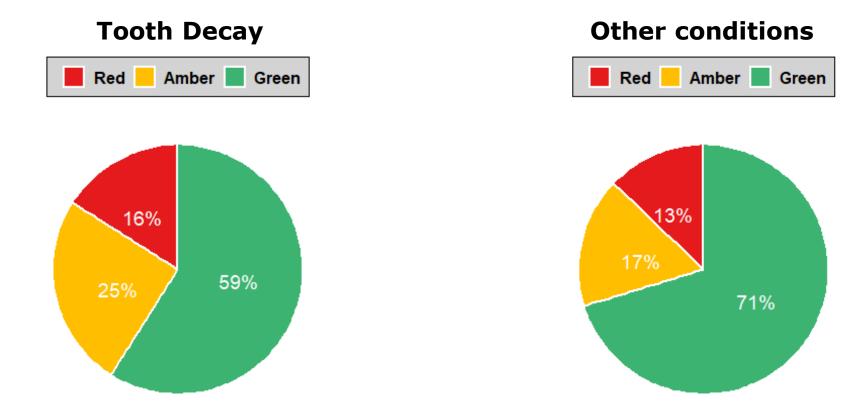


ACORN – Medical, Social & Dental History (All ages, n = 127,137)





ACORN – Tooth decay & Other dental conditions (Adults, n = 92,147)

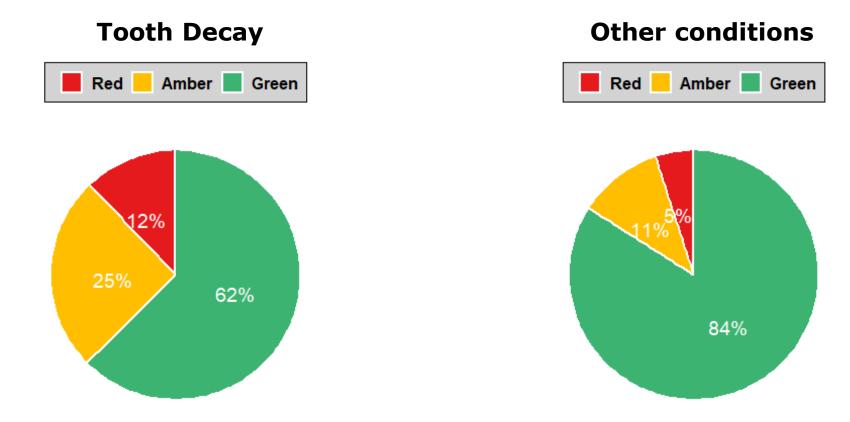


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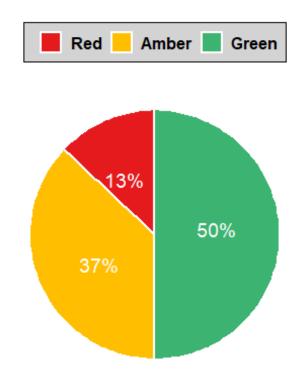
ACORN – Tooth decay & Other dental conditions (Children, n = 34,990)





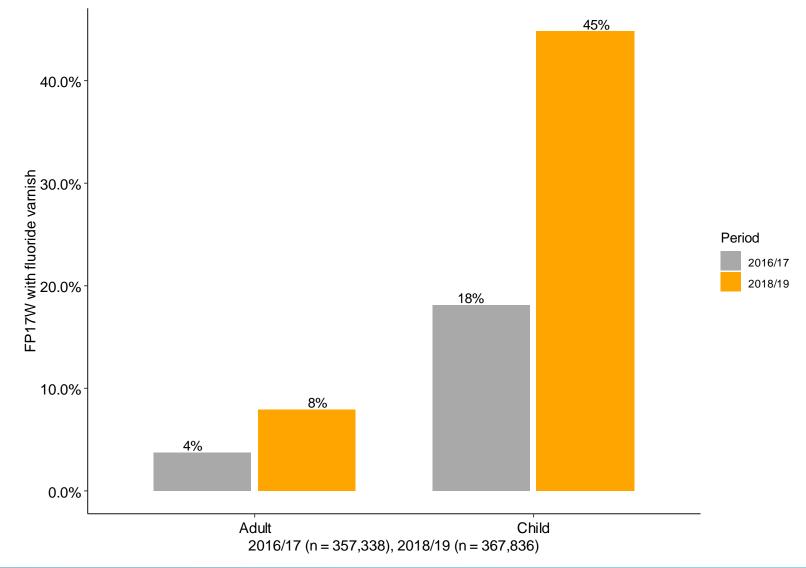
ACORN – Periodontal conditions (Aged 12+, n = 103,823)

Periodontal conditions





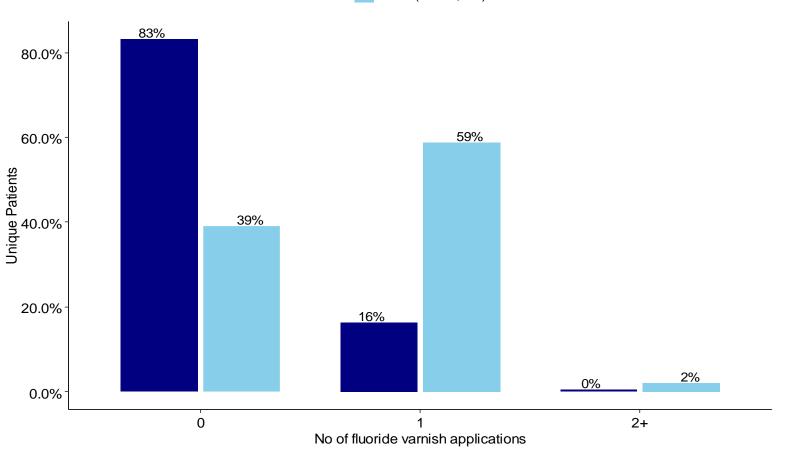
Fluoride varnish – Rates have improved both in children & adults





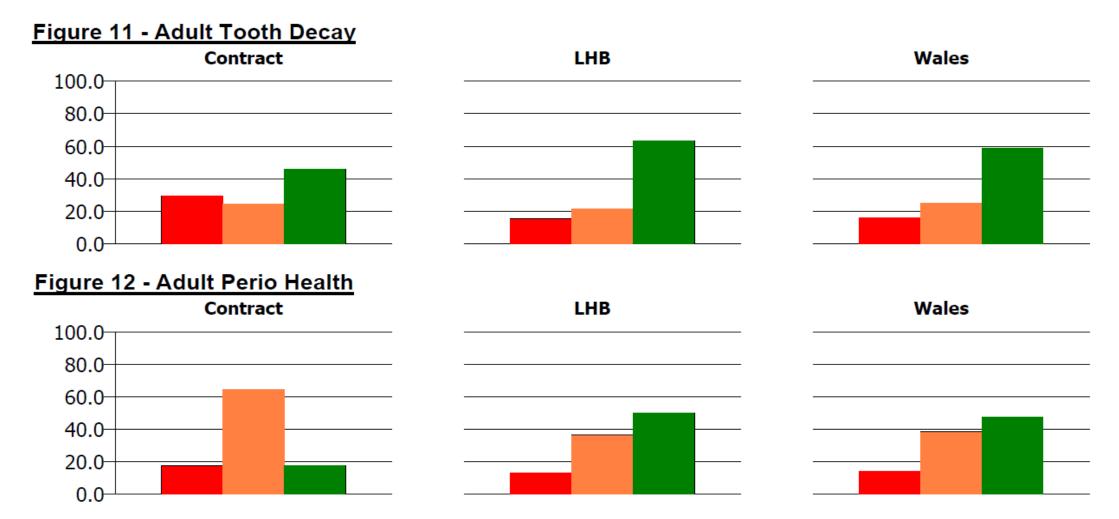
ACORN – % of patients Red or Amber for tooth decay who received F/V

Patient Adult (n = 39,095) Child (n = 14,111)

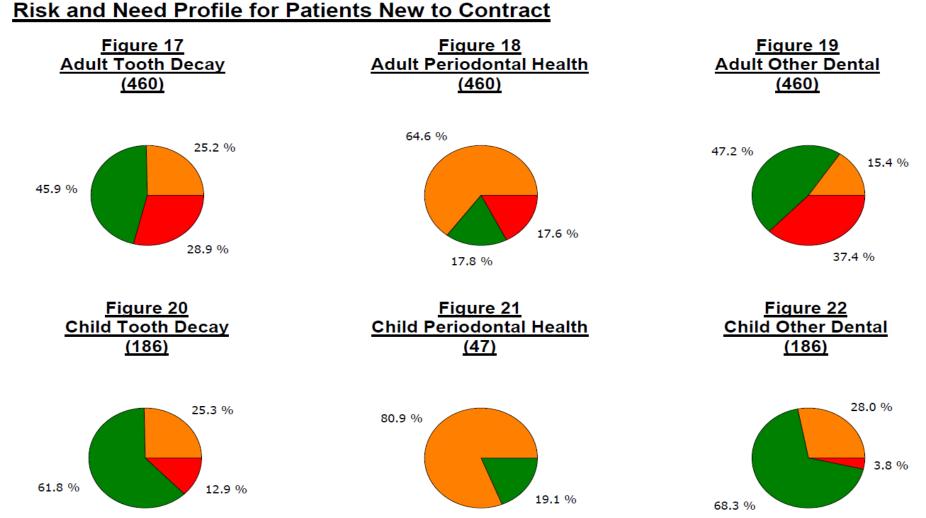




Risk and Need of Contract Compared to Health Board and Wales Average









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Outcomes achieved for the practice population

7. Use of Information/Data

- Monitoring/Feedback Reports
- Quality Improvement
- Big potential for Quality Improvement -> New ways of doing your CPD
- Quality Improvement Groups in all Health Boards

e.g.

Peer Review of completed ACORN toolkits; periodontal diagnosis and treatment, effectiveness of behaviour change conversations with patients etc



Quality Improvement

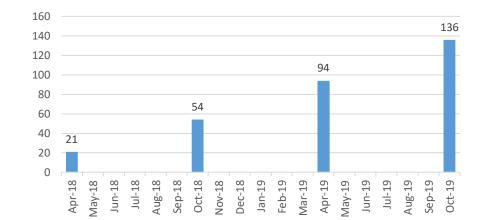
HEIW QI Educators

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| Cwm-Taf | Kathryn Marshall | Kathryn.marshall4@wales.nhs.uk |



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8. Practices in the programme



| Health Boards | Total practices (1st of Oct 2019) |
|----------------|-----------------------------------|
| Cwm Taf | 22 |
| Aneurin Bevan | 29 |
| Cardiff & Vale | 24 |
| Hywel Dda | 14 |
| Swansea Bay | 18 |
| Betsi | 24 |
| Powys | 5 |
| Total | 136 |





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8. Practices in the Programme



Improvement Journey

GDS Reform Programme



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- Heading in the right direction
- Continue with Action Learning Approach
- Learning System



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Objectives

- Understand the risk and need of the 'practice population'
- Inverse Care Law and Access
- Prevention
- Recall intervals based on risk and need
- * Skill-mix

- Continuous Quality Improvement
- Partnerships with other primary and social care services



Objectives

Develop new Volume/Activity, Quality Indicators, Outcomes Measures

Inform/influence changes in the wider system:

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- Policy Direction Legislations, pump-prime funding,
- Research and Development Decision Aid for Shared Decision Making, Skills-mix and Mathematical Modelling, PROMs
- Overall dental service planning e.g. CDS, specialist services in primary care and secondary care



- Action Learning Approach
- Challenges





Any questions ?

Acknowledgements Columbus Ohaeri, Senior Data Analyst, Dental Public Health

