Progress on reforms to NHS dentistry

27th April 2023

Change to dentistry commissioning
The Boards of all Integrated Care Systems (ICS) took on the commissioning of NHS dentistry from NHS England on 1st April 2022. As the NHS Confederation has all 42 ICS in membership, we have been speaking with members to understand their thinking as this change gets underway and to see what lessons can be learned from the seven ‘early adopter’ ICS who have already been given these dentistry commissioning powers.

This change in commissioning arrangements offers the ability to do things differently – with ICS being ideally placed to commission services across whole oral health pathways that meet the particular needs of a local population, meaning there is a real opportunity ahead.

ICS leaders are enthusiastic to apply a system lens to the problems in NHS dentistry and see a focus on prevention and upstream work as a key way for health services to stem the tide of the most severe dental cases which are becoming all too common in the current context.

There is also real opportunity to reduce inequalities in access to services and in oral health outcomes. With reducing health inequalities as one of ICS four founding purposes, we know ICS leaders are committed to this and a number of ICS are already undertaking good work.

From delegation to integration
Earlier this month, the NHS Confederation’s Integrated Care Systems Network published a report, ‘from delegation to integration’, examining the experience of ‘early adopter’ ICS ahead of all systems being given commissioning powers over pharmacy, optometry and dentistry (POD) services.

Of these services, dentistry arguably poses the greatest immediate challenge for systems. Current contracting arrangements are unpopular with primary care dentistry providers, with issues over the level of reimbursement for activity, as well as disincentives related to pension and tax arrangements that have affected other providers using independent contractor models such as GPs. As a result, some dentists have been reducing their NHS activity or ceasing to offer NHS services altogether, hindering the NHS’s capacity to deliver dentistry services.

A 2016-19 pilot of a prototype dental contract carried out under the dental contract reform programme failed to achieve its aims. The pilot had intended to improve oral health through prevention of caries and periodontal disease and increase access to NHS dental care for patients, as well as address concerns from the dental sector about remuneration.
However, although an increased level of activity was delivered in individual courses of treatment at prototype practices, this activity was across a smaller number of patients and fewer courses of treatment.

An underspend in NHS England’s dentistry budget is anticipated in 2022/23 as dentists are delivering significantly lower volumes of activity than they are contracted for, primarily citing that the NHS payment for units of dental activity (UDA) does not cover the costs of the work.

Moreover, the current model of provision is unpopular with service users: 54 per cent of people in a representative sample of 2,026 English adults in 2022, who had used a dentist, reported they had experienced a problem.

With delegation, ICBs will be able to reinvest any underspend in these services within the existing financial year, but as per public spending rules, this cannot be rolled forward into subsequent financial years.

However, this onboarding process has consumed significant time and effort. The next stage of this process is focused on transforming services, to be achieved once POD services are well bedded in.

Recent NHS Confederation research, soon to be published, explored ICS leaders’ views on taking on dentistry commissioning. This reveals that while three quarters (29 of 39) felt ‘very’ or ‘moderately’ well prepared, almost a quarter (9 of 39) of ICS leaders surveyed believed they were ‘not at all well prepared’ to take on dentistry commissioning in April 2023. The right support for systems over the coming months will therefore be crucial if we are to see improvements in dentistry across England.

The seven Integrated Care Boards which had ‘early adopter’ status with regard to dentistry services are:

- Buckinghamshire Oxfordshire and Berkshire West ICB
- Frimley ICB
- Greater Manchester ICB
- Hampshire and Isle of Wight ICB
- Kent and Medway ICB
- Surrey ICB
- Sussex ICB

These Integrated Care Boards reported the following challenges in their new role in taking on commissioning of NHS dentistry:

- Ensuring adequate governance is in place, understanding and meeting commissioner and provider data requirements and developing effective engagement mechanisms with local providers.
- Access to and capacity to use appropriate data to monitor service quality, access and activity – this is most urgent to identify unmet patient need and ensure service quality.
• Need for flexibility within national contracting arrangements, particularly for dentistry, is needed and opportunities for further reform considered, to improve patient access to dentistry services.

• NHS England needs sufficient ICB capacity, particularly in relation to dentistry where there is mounting evidence that some dentists have been reducing their NHS activity or ceasing to offer NHS services.

• ICB have been told to cut running costs by 30%. Whilst ICS leaders understand financial constraints across the public sector, they think 30% will undermine their ability to serve local communities. The NHS Confederation supports the recommendation of the Hewitt Review that ICB should instead only need to cut running costs by 20%.

In order to make the most of this opportunity, there are a number of things ICS leaders want to see from government – these need to happen without delay:

- An improved contract that is fit for purpose.
- The inclusion of dentistry roles in the government’s long-term NHS workforce plan, which must be fully funded by Treasury.
- Flexibility for local NHS leaders to commission services as best meets the needs of the local population.
- ICS to be able to invest dental underspend in new projects across multiple years.

**Suggested interventions**

- ICS leaders have told the NHS Confederation they are anxious that they are inheriting commissioning of dentistry services in crisis with a contract that’s not fit for purpose. Will the Minister assure them today that they will review the contract as soon as possible?

- Integrated Care Systems have this month taken on commissioning powers for NHS dentistry from NHS England. Does the Minister agree that local health leaders know the needs of local populations best and will he confirm government will allow ICS leaders the flexibility commission services as they see fit?

- We know that there are considerable shortages in the dental workforce. Can the Minister confirm to us today that the long-term workforce plan for the NHS pledged by the government at the Autumn Statement will also cover the dental workforce?

- Integrated Care Systems have this month taken on commissioning powers for NHS dentistry from NHS England in April this year. Will the Minister commit to them, or one of his ministerial colleagues, meeting with the NHS Confederation’s ICS Network to discuss the concerns of ICS leaders?

- The NHS Confederation has called for ICS to be able to invest dental underspend in new projects across multiple years to help address the current degree of unmet need. Does the Minister/Honourable Member agree?

- The NHS Confederation’s ICS Network recently published a report ‘from delegation to integration’ – which sought to learn lessons from the experience of the seven early-adopter ICS who took on dentistry commissioning responsibilities before 1st April. Will the Minister meet with the network to discuss the report’s findings and
ensure our constituents enjoy the maximum possible opportunities presented by the
delegation of dentistry commissioning?

• The NHS Confederation has raised concern about what the call for ICB to cut 30% of
their running costs would mean for retaining expertise, including on dentistry. Will the
Minister confirm if the government will pay heed to the recommendation from Patricia
Hewitt in her review of Integrated Care Systems, that ICB should instead only have to
reduce running costs by 20%?

Should you need any more information, or we can provide a further briefing, please don’t
hesitate to be in touch via caitlin.plunkett-reilly@nhsconfed.org.

About the NHS Confederation

The NHS Confederation is the membership organisation that brings together, supports and
speaks for the whole healthcare system in England, Wales and Northern Ireland. The
members we represent employ 1.5 million staff, care for more than 1 million patients a day
and control £150 billion of public expenditure. We promote collaboration and partnership
working as the key to improving population health, delivering high-quality care and reducing
health inequalities.