

Following the election we welcome Steve Brine MP, as Parliamentary under Secretary of State with responsibility for dentistry.

The last edition of DCR News covered the plans for evaluating the success of the dental prototypes. This issue covers the main findings from the interim evaluation report. It also covers *Starting Well, a Smile for Life initiative* which is a new NHS England led prevention programme working in thirteen high needs areas aiming to reach families with children under 5 not currently visiting a dentist, in order to improve their oral health.

Dental Prototypes – interim evaluation report

The purpose of the interim evaluation report was to take a first look at the prototype data to ensure that there were no major concerns ahead of moving to the second year of prototyping, as planned.

The interim report focussed on whether the prototypes had, in their first six months:

- maintained the oral health improvements seen during piloting stages;
- whether the prototype arrangement have allowed the same number of patients to be seen; and
- whether the models being tested are scalable.

Main findings

An overview of the main findings from the report are set out below:

- **Oral Health**

The key question was whether changing remuneration to reintroduce some activity payments damaged the oral health gains (for example less time spent on prevention to maximise activity delivery) seen in the previous pilots.

The interim report found some evidence that oral health gains were being maintained and no significant evidence that oral health gain was deteriorating.

- **Access and Accessibility**

After the first six months of prototyping, the majority (63%) of prototype practices were delivering the level of access expected within the parameters of the contract – this means that 63% of practices achieved over 96% of their capitation target. For the practices that joined the programme in Spring 2016, the initial impact on access was less than in the previous pilot phase, which saw a decline in the number of patients being seen. For the previous pilot practices who experienced drops in

patient numbers, there is evidence of improving access towards the expected level, and some evidence that the rate of recovery is better for the Blend B practices.

Patients in the prototype practices were slightly less satisfied with the length of time to get an appointment than those in normal NHS general dental practices, but slightly more satisfied with the NHS dental care received.

- **Sustainability for roll out**

After the first six months, 46% of practices were achieving their overall contract requirements (both capitation and activity). This figure was skewed by the early wave 1 and 2 pilot practices that had moved on to the prototype programme who have been required to recover from earlier declines in patients being seen in order to achieve overall contract requirements. This has been a significant challenge for those practices.

For the new joiners who entered the prototypes in the spring of 2016 from the 2006 contract, their capitation targets were consistent with patients seen in the previous year, and their expected activity levels were to reflect the focus on prevention. Simple linear projections, based on the first six months suggested that 62% were expected to meet their contractual requirements by year-end.

Next Steps

Based on the interim evaluation findings, the contract reform programme agreed that the data was sufficiently encouraging for the prototypes to continue into their second year.

A fuller evaluation will follow later this year and will look at how the prototypes have fared against the following five key criteria:

- Access and accessibility
- Quality and appropriateness of care
- Improving Oral Health
- Value for Money
- Scalability and roll-out

Decisions on whether, and when, a wider roll out could start will be taken following this further evaluation.

Starting Well, a Smile4Life initiative

The Starting Well, a Smile4Life initiative is an NHS England led prevention programme that will work in thirteen high needs areas to reach children under the age of 5, most at risk of dental decay, who are not currently attending a dental practice.

The objectives of the programme include:

- Increasing the proportion of children under the age of 5 accessing dental care, with a focus on high-risk groups and under 1's;
- Increasing the integration of the dental team with the community;
- Developing and delivering the programme in partnership working with: Public Health England; Health Education England; the dental profession through the BDA, Local Dental Networks and Local Dental Committees; and Local Authorities – for increased effectiveness of the programme and to complement existing local initiatives;
- Delivering evidence-based interventions at community level, practice level and individual level to all children under the age of 5, with a focus on high-risk groups;
- Increasing the provision of preventive advice and interventions by the dental team, as per the evidence-base presented in Delivering Better Oral Health; and
- Providing NHS England dental commissioners with a method of commissioning the programme within the existing dental contract.

The thirteen areas will be announced shortly in preparation for schemes going live in the next few months.

Up Next..

The next edition of DCR news will cover more on evaluating the prototypes and we will also hear from Eric Rooney, Deputy Chief Dental Officer, about the preventative clinical pathway at the heart of dental contract reform.

For further information about the prototype scheme please visit www.pcc-cic.org.uk/resources/dental-contract-reform.