

Wales GDS Reform Programme - Quarterly Report Guidance

This report includes all activity completed in the quarter, e.g. for Quarter 1; on or between 1st April and 30th June, where scheduled in or between April and June.

Activity by Foundation Dentists is included.

ACORN data includes only the ACORN assessment with the earliest treatment completion date in the period for each patient identity, i.e. each patient who has received an ACORN assessment will only be counted once, regardless of how many ACORN assessments they received in the period. As such, any reporting on ACORN refers to unique ACORN patients.

Unlike the annual report, whereby each ACORN patient will only be included once per contract, a patient may be included in multiple quarterly reports, should they have received an assessment in each, and as such, quarterly report ACORN totals should not be aggregated.

ACORN assessments will only be included if scores for each of medical history, social history, dental history, tooth decay, periodontal health, and other dental have been indicated.

ACORN Condition scores, both in charts and tables, are split by adult and child patients.

ACORN base figures refer to the count of unique ACORN patients, split by adult and child. The only exception is Periodontal Health, where counts and rates consider patients aged 12 and over only, therefore "Child" figures in this instance refers to patients aged 12-17.

Overview

Page 1 – Summary information including details such as contracted, UDA, UOA, and UDA Value, based on Compass entries. This page also provides objectives of the report.

Page 2 – Charts relating to the count of ACORN patients for the contract, with yellow/green or red/amber/green percentages given for each of the six components of an ACORN assessment.

Page 3 – Tables and charts relating to access and activity and fluoride varnish and fissure sealant treatment. Access and activity data includes 12 and 24 month access; patients treated, FP17W, and UDA counts; new patient counts; and FP17W counts by band. Fluoride varnish and fissure sealant data features data broken down by performers.

Page 4 - This page includes FP17W counts by treatment band, and provides an opportunity to give additional information and feedback.

Benchmarking

Specific benchmark calculations are outlined in the definitions. Local Health Board benchmarks refer to the calculation for GDS Reform contracts in the Health Board. Wales benchmarks refer to the calculation for all GDS Reform contracts in Wales.

General Definitions

Patient Age/Adult/Child: In activity data, this is based on a patient's date of birth at the date of treatment acceptance, as recorded on the FP17W. A patient is considered a child if aged under 18, and an adult if aged 18 or over. In 12 and 24 Month Access data, this refers to the patient's age at 30th June.

Unique Patient Counts: Count of the unique patient identities on scheduled FP17Ws for general treatment. A patient may have attended more than once in the year and received different treatment, so the total figure has been adjusted for duplicate patient IDs. Please note this differs from 12 and 24 Month Access counts, the definitions of which are detailed further in the notes for *Page 3 – Access, Activity, New Patients, Fluoride Varnish, and Fissure Sealants*.

FP17W Counts: This is a count of the number of FP17Ws scheduled including adjustments for amended and deleted FP17Ws. Withdrawn FP17Ws are not included.

Specific Definitions

Page 1 – Summary Information

Contract Address: This is the main address used for correspondence between the NHS BSA and the dental contract; it is not necessarily the address where treatment takes place.

Total Contracted Value (£): Gross value of contracts for each financial year. As recorded on CoMPASS.

Total Contracted UDA: The contracted units of dental activity to be achieved for the year. This figure is taken directly from CoMPASS.

Total Contracted UOA: The contracted units of orthodontic activity to be achieved for the year. This figure is taken directly from CoMPASS.

UDA Value (£): This is calculated by dividing the Total Contracted Value by the contract's UDA equivalent. UDA Equivalent is used to show the cost per unit of activity of all contracts incorporating UDA and UOA into the calculation. This is derived by multiplying contracted UOA by 2.4 and then adding this to any contracted UDA. The multiplier 2.4 stems from the national UDA and UOA costs of around £25 per UDA and £60 per UOA, therefore a UOA is worth 2.4UDAs (60 divided by 25).

Patient Charge Revenue (£): This includes Patient Charge Revenue deducted from a contract. This will not always match the calculated patient charges, as in some cases patient charge revenue will have been carried forward from a previous month, and in other cases there will not be enough baseline payment from which to collect the patient charge revenue.

Page 2 – Risk and Need Profile

ACORN Rates: This is a count of unique patients for each section of the ACORN assessment, expressed as a percentage of the total unique ACORN patient count. These sections are colour coded in accordance with the score. Conditions charts (Tooth Decay, Periodontal Health, and Other Dental) are split into adult and child.

Page 3 – Access, Activity, New Patients, Fluoride Varnish, and Fissure Sealants

12 Month Access: Each unique patient ID is counted against the contract which the most recent claim was recorded in the 12 month period ending on the last day of the quarter, e.g. 30th June for Quarter 1, with the following exceptions. If the most recent claim is for urgent treatment, orthodontic treatment, free treatment or treatment on referral the ID remains with the previous contract, if there is one within the 12 month period. If the claim for the previous contract occurred before the 12 month period the ID is allocated to the most recent contract.

24 Month Access: Each unique patient ID is counted against the contract which the most recent claim was recorded in the 24 month period ending on the last day of the quarter, e.g. 30th June for Quarter 1, with the following exceptions. If the most recent claim is for urgent treatment, orthodontic treatment, free treatment or treatment on referral the ID remains with the previous contract, if there is one within the 24 month period. If the claim for the previous contract occurred before the 24 month period the ID is allocated to the most recent contract.

Total Unique Patients Treated: Count of the unique patient identities on scheduled FP17Ws for general treatment. A patient may have attended more than once in the year and received different treatment, so the total figure has been adjusted for duplicate patient IDs. Please note that if a patient was seen in the period as both an adult and a child, i.e. at age 17 and 18, they will be counted in both the adult and child counts, but only once in the total count.

Total FP17Ws Submitted: This is a count of the number of FP17Ws scheduled including adjustments for amended and deleted FP17Ws. Withdrawn FP17Ws are not included in the total count of FP17Ws.

Total UDA Claimed: This is a count of the number of UDA scheduled including adjustments for amended and deleted FP17Ws. Withdrawn FP17Ws are not included in the total count of UDA.

Patients New to Contract (Adult): An adult patient is considered “new to the contract” if they have no previous visit to the contract, or if their last visit to the contract was greater than 730 days previously. *High counts of new to contract patients may be a result of new contracts, therefore contract start dates should be considered.*

Patients New to Contract (Child): A child patient is considered “new to the contract” if they have no previous visit to the contract, or if their last visit to the contract was greater than 365 days previously. *High counts of new to contract patients may be a result of “new” contracts, therefore contract start dates should be considered.*

Patients New to Contract and NHS (Adult): An adult patient is considered “new” if they have no previous visit to any contract, or if their last visit to any contract was greater than 730 days previously.

Patients New to Contract and NHS (Child): A child patient is considered “new” if they have no previous visit to any contract, or if their last visit to any contract was greater than 365 days previously.

Patients New to Contract with Urgent (Adult): This applies the “Patients New to Contract (Adult)” methodology to patients whose treatment was classed as Band 1 Urgent/Occasional.

Patients New to Contract with Urgent (Child): This applies the “Patients New to Contract (Child)” methodology to patients whose treatment was classed as Band 1 Urgent/Occasional.

Patients New to Contract with ACORN (Adult): This applies the “Patients New to Contract (Adult)” methodology to ACORN FP17Ws, i.e. new patients who received a full ACORN assessment.

Patients New to Contract with ACORN (Child): This applies the “Patients New to Contract (Child)” methodology to ACORN FP17Ws, i.e. new patients who received a full ACORN assessment.

Fluoride Varnish FP17Ws: This is a count of FP17Ws where a fluoride varnish has been indicated in part 5a of the FP17W. Total Adult/Child FP17Ws are used as the base figure to calculate the rates. Totals are shown at both performer and contract level, with benchmarks against the LHB and Wales rates for GDS Reform contracts.

Children Aged 6-17 Fissure Sealants FP17Ws: A count of FP17Ws for patients aged between 6 and 17, where a fissure sealant treatment was indicated in part 5a of the FP17W. Total FP17Ws for patients aged 6-17 are used as the base figure to calculate the rates. Totals are shown at both performer and contract level, with benchmarks against the LHB and Wales rates for GDS Reform contracts.

Page 4 – Additional Information and Banded FP17Ws

Banded FP17Ws: This is a count of total FP17Ws by charge band.