

Primary Care Commissioning Committee

Date of meeting	10 August 2023
Title of paper	Dental Provision South Cumbria - Additional Sessions Request
Presented by	Amy Lepiorz, Associate Director Primary Care
Author	Amy Lepiorz, Associate Director Primary Care David Armstrong, Senior Delivery Assurance Manager
Agenda item	7a
Confidential	No

Executive summary

The purpose of this report is to propose the extension to the number of sessions commissioned from Miss Julie Forde (the provider) as a result of the dispersed patients arising from the closure of the Grange-over-Sands practice on the 31 March 2023.

The provider is currently commissioned to provide five additional sessions on a weekly basis and has identified that patient demand is greater than the additional capacity commissioned. The provider has put forward a proposal to help alleviate the current pressures and provide additional dental capacity for the benefit of the local population.

Advise, Assure or Alert

Alert the committee:

- to the request of the provider to provide an additional 10 sessions (in addition to the 5 sessions currently commissioned) of dental care for the benefit of patients that previously received NHS dental care from a practice in Grange-over-Sands

Advise the committee:

- of the interim offer made by ICB executives to commission three additional session for a four week time period whilst the proposal progressed through the governance route.

Recommendations

The Primary Care Commissioning Committee is requested to:-

1. Note the contents of the report.
2. Approve recommendation four.

Which Strategic Objective/s does the report contribute to		Tick
1	Improve quality, including safety, clinical outcomes, and patient experience	X
2	To equalise opportunities and clinical outcomes across the area	X
3	Make working in Lancashire and South Cumbria an attractive and desirable option for existing and potential employees	
4	Meet financial targets and deliver improved productivity	
5	Meet national and locally determined performance standards and targets	
6	To develop and implement ambitious, deliverable strategies	

Implications				
	Yes	No	N/A	Comments
Associated risks	X			As described in section 7
Are associated risks detailed on the ICB Risk Register?	X			Dental access is on the ICB corporate risk register
Financial Implications	X			Requested funding is within the dental budget

Where paper has been discussed (list other committees/forums that have discussed this paper)

Meeting	Date	Outcomes
Executive review	24/07/2023	Approval for the interim offer
Primary Care Dental Services Group	27/07/2023	Support for option four

Conflicts of interest associated with this report

Not applicable

Impact assessments				
	Yes	No	N/A	Comments
Quality impact assessment completed			X	
Equality impact assessment completed			X	
Data privacy impact assessment completed			X	

Report authorised by: Craig Harris, Chief of Health and Care Integration

ICB Primary Care Commissioning Committee

10 August 2023

Dental Provision South Cumbria - Additional Sessions Request

1. Introduction

- 1.1 This paper is to seek approval to invest additional dental sessions into the contract held by Miss Julie Forde (the provider) at Mint Dental practice in Windermere and Ambleside.
- 1.2 The paper explains the background to the request, the risks and benefits of the request, before considering the options available to the ICB.

2. Background

- 2.1 In December 2022 the NHS dental practice within the town of Grange-over-Sands notified NHS England, the commissioner at the time, that they wished to terminate their NHS contract. The practice ceased to provide NHS services on 31 March 2023. The contract at Grange-over-Sands was for 15,203 Unit of Dental Activity (UDAs) at a value of £418,155.
- 2.2 NHS England wrote to all NHS dental providers within South Cumbria to seek expressions of interest in providing sessional activity during the 2023/24 financial year. This would ensure that patients that previously accessed NHS dental services from Grange-over-Sands would still be able to access care whilst a longer-term decision was made. Providers were offered a rate of £650 per session and were asked to confirm they were still able to achieve their standard contractual activity as well as the additional sessional activity. £650 is the benchmark rate offered by NHS England in the North West.
- 2.3 Sessional activity is a funding mechanism outside of the standard payment model based on Units of Dental Activity (UDAs). Sessional payments are a block payment, that are paid no matter how many patients are seen. On average one session is sufficient to see at least five patients, though this can vary based on the patient's clinical need. The UDA payment mechanism funds only activity undertaken. The sessional rate is often higher than the standard UDA equivalent and is often used to fund short term initiatives or where the complexity of patient needs mean the UDA rate is not financially viable.
- 2.4 Only one expression of interest was received and this was from the provider (Miss Julie Forde of Mint Dental). A further letter was sent out by the local MP's office to NHS dentists within the South Lakeland area to see if they could gather any further interest. No further expressions of interest were received.
- 2.5 On the 1 April 2023 commissioning responsibilities for NHS dental services were delegated to the ICB. The ICB continued with an agreement made by NHS England to commission the provider to provide five sessions a week to

provide care to the displaced Grange-over-Sands patients, with an agreement to review the number of sessions based on the patient need.

- 2.6 In late June the provider approached the ICB stating that they are able to provide a further ten sessions, 15 in total, between their practices at Windermere and Ambleside.

3. Strategic context

- 3.1 The ICB is funded to provide dental provision for around 50-60% of its population. Nationally and locally NHS dental services are facing a number of challenges to service delivery; this includes workforce shortages, dissatisfaction with the current national contract and a backlog of care following the Covid-19 pandemic.
- 3.2 Dental access is currently on the ICB corporate risk register and has been identified as a priority programme. A detailed overview of the programme will be presented to Primary Care Commissioning Committee in September, a key component of the programme is the development of a dental investment framework which will support the ICB in the allocation of dental funding to those areas of greatest need. It is the outcome of this work that will be the basis for any long-term investment decisions.

4. Received proposal

- 4.1 To support the proposal the provider has presented information on the available staff, their current UDA commitment, alongside data in relation to the demand the practices have seen in relation to dispersed Grange-over-Sand patients.
- 4.2 The primary and integrated neighbourhood care team, alongside the ICB's dental advisor have reviewed the information provided and are satisfied that the provider has sufficient staff in place to initially deliver their UDA based contract plus a further three additional sessions (eight in total).

5. Current patient need

- 5.1 There is no definitive data on the need for dental services for the displaced Grange-over-Sands patients. One measure that is used is to look at the number of calls that have been received by the Dental Call Handling Service. This service takes calls from patients who require a regular dental service as well as those in need of emergency care, the service advised patients on the practices who are taking on patients, or for emergency patients finds them a dentist to treat their urgent need. A review of the data from January – June 2023 shows that patients calling specifically from Grange-over-Sands (based on post code) was very limited, with no calls received from patients seeking routine or ongoing dental care, and 136 patients calling for urgent dental care, an average of 23 patients per month.

- 5.2 The table below is some further information provided by the provider detailing the numbers of patients the additional sessions have seen and how many more patients have requested an appointment but have yet to be seen.:

Number of new patients accepted for treatment through the sessional arrangements	564
Number of patients awaiting their first appointment	364

- 5.3 The provider has confirmed that these additional patients have come from a wider geography in the Cumbria area than just Grange-over-Sands or the South Cumbria area.

6. Financial considerations

- 6.1 When commissioning on a sessional basis the underlying activity expectation is that within each session at least 5 patients receive treatment.
- 6.2 At a sessional rate of £650 per session for five patients the cost per patient is £130. Compared to a patient receiving treatment under the practices standard UDA based contract, a patient costing £130 would equate to 4.2 UDAs per patient, which is not unreasonably high.
- 6.3 The currently commissioned five sessions per week cost the equivalent of £169,000 per annum, The maximum number of sessions per week affordable by reinvesting the resources from the Grange-over-Sands contract is 12 sessions per week, at an annual cost of £405,600. The level of patient numbers being treated would be 60 patient per week, an increase from the current 25 patients per week, 140% increase.

7. Associated risks

- 7.1 *Procurement challenge:* The proposal to provide a total of 15 sessions per week would result in a contractual value increase of 78% or 12 sessions per week being 62%, a eight session would be a 42% increase. This could result in a challenge based on the lack of a procurement process. This risk is mitigated by the fact the offer for sessional payments was offered across all contractors in South Cumbria and the sessions are to be funded on a temporary basis until the end of the current financial year.
- 7.2 *Under delivery of the current NHS contracts:* The additional sessions may cause pressures on the delivery of the currently commissioned contract. As described in section four the provider has provided workforce data to support their ability to provide both their current contractual requirements and eight additional sessions in total. It is difficult to predict end of year contractual performance at this stage in the financial year, the providers Windermere and Ambleside contract are currently under performing their core contracts, based on the current NHS Business Services Authority (BSA) data (12% and 17% at June 2023, compared to a straight line comparison of 25% after the first quarter of the financial year). This risk can be mitigated by regular reviews by the

primary and integrated neighbourhood care team of the delivery of the current NHS contracts.

- 7.3 *Requested funding exceeds that which was released from the Grange-over-Sands contract:* If the 15 sessions are supported this would result in an increased investment of £6,500 per week from the current £3,250 or £338,000 per annum, to a total annual value of £507,000. Although this money is available within the dental budget this investment would be made without considering the oral health needs of the whole ICB. This risk could be mitigated by investing up to a maximum of 12 sessions per week which is within the value of the former Grange-over-Sands contract. Any investment above that value could be considered as part of the dental access programme.
- 7.4 *Displaced Grange-over-Sands patients are not able to access the sessions:* People are able to access NHS dental services from any provider accepting patients within England. There is no patient registration or catchment area. Access to NHS dental services are pressured across Lancashire and South Cumbria and across England. As a result when dental practices advertise that they are accepting new patients it is not unusual for people to travel across the country to access care. The provider has confirmed that some of their new patients are from outside the ICB footprint, including Carlisle, Workington and Whitehaven. Given the locality of the provider's two dental practices there is a risk that the ICB will be funding care for a significant number of people that do not live or are not registered with a Lancashire and South Cumbria GP. This risk could be mitigated by requesting that care provided under the sessions is targeted at the Lancashire and South Cumbria population.
- 7.5 *Paying a session rate may not represent value for money:* Funding at a sessional rate is often in excess of the equivalent UDA payment. However, as mentioned earlier it is used by commissioners where they believe a premium rate is necessary, such as for short term commissioning or specific pathways for patients with more complex needs. This risk could be mitigated by offering to temporarily increasing the number of UDAs commissioned to the provider at the current UDA rate.
- 7.6 *Temporary funding does provide a patient with a recurrent care:* This proposal provides only a short term solution for those patients that previously accessed care from the Grange-over-Sands practice. As mentioned previously further work is taking place on the dental investment framework which will guide longer term commissioning decisions.

8. Options

- 8.1 There are four options for the group to consider:
- 8.1.1 *Option one-* Decline the proposed offer. If this option is supported it is unlikely that any alternative providers will be willing to provide temporary care for the displaced Grange-over-Sands patients.
- 8.1.2 *Option two-* Support the offer as received. There are a number of risks associated with commissioning the full proposal as received as articulated in section seven.

8.1.3 *Option three-* Offer to fund additional UDAs at the provider's current rate. This offer is unlikely to be accepted by the provider.

8.1.4 *Option four-* To recognise that an offer to support three further sessions (eight in total) has been offered has been made on an interim basis for four weeks, pending approval of the paper. To allow the senior delivery assurance manager and the dental clinical advisor to work with the provider to increase sessions up to a maximum of 12 per week based on a safe staffing model.

8.1.5 Option four is designed to ensure access to the displaced patients and with the following clauses included within the contract variation will help mitigate against the described risks:

- Payment will be based on an average of five patients being seen per session.
- Sessions will be paid monthly in advance with adjustments made every two months based on the actual activity delivered
- The contracted UDA activity will be regularly reviewed to ensure that the providers current patients are not adversely affected by the additional activity.
- The sessions are only for people living or registered with a GP in Lancashire and South Cumbria, and that displaced Grange-over-Sands patients are prioritised.
- A monthly clinical audit will take place to understand the activity that is taking place.

8.2 Option four is the recommended option as it secures additional activity whilst mitigating against the potential risks.

9. Conclusion

9.1 The provider has made a welcomed offer to provide additional activity to help support the displaced patients from Grange-over-Sands. There are risks associated with the offer and a mitigated option has been developed.

10. Recommendations

10.1 The committee is requested to:

- a) Note the contents of the report.
- b) Approve option four

Amy Lepiorz, Associate Director Primary Care

David Armstrong, Senior Delivery Assurance Manager

July 2023