

Further supplementary written evidence submitted by the Department for Health and Social Care (DTY0106)

Dear Steve,

Thank you for inviting me to talk to the Health and Social Care Committee earlier this week about our plans to recover and reform NHS dentistry. I found it an extremely useful session and hope you did too.

At the session I agreed to share the modelling underpinning the estimate that our dentistry recovery plan will create an additional 2.5million appointments/1.5million courses of treatment.

Please find attached a more detailed explanation of the methodology used and rationale for how we arrived at these estimates. This modelling was also shared with the BDA as part of a FOI request which was responded to on 7th March and I have deposited a copy of the letter in the libraries of both houses for full transparency and ease of access for all MPs.

In addition, I talked about the stakeholder roundtable which I am holding on 27th March. An invitation to this has been sent to you and I very much hope you will be able to attend.

There were a few other issues that were raised on Tuesday which I have instructed my officials to explore further, namely:

- Whether there is anything more we can do to ensure veterans and their families are able to access NHS dentistry; and
- whether we can do more to improve digital connectivity within NHS dental services.

I will write to you with more detail about these in due course.

I would once again like to thank you and all the members of the committee for your work on this issue. I hope you found my response helpful and reassuring and I look forward to continuing to work with the committee as we continue to implement Our plan to recover and reform NHS Dentistry.



THE RT HON DAME ANDREA LEADSOM DBE MP

Methodology underpinning modelling the impact of *Our Plan to Recover and Reform NHS dentistry*

In the Dentistry Recovery Plan, published 7 February, DHSC and NHSE committed to delivering more than 1.5 million additional NHS dentistry treatments or 2.5 million NHS dentistry appointments for patients across England. The number of additional treatments and appointments have been calculated based on analysis to understand how NHS dentistry might respond to the various interventions that have been announced. As with all modelling, these impact estimates are subject to a high level of uncertainty.

The estimated impacts of each intervention in Units of Dental Activity (UDAs), treatments and appointments are outlined below. Due the uncertainty of the estimates, figures have been rounded to the nearest 10,000.

Intervention	UDAs ('000s)	Treatments ('000s)	Appointments ('000s)	Time frame of impact
New Patient Premium - of which:	5,130	1,130	1,920	March 2024 – March 2025
<i>Band 2/3</i>	<i>4,470</i>	<i>690</i>	<i>1,490</i>	
<i>Band 1</i>	<i>660</i>	<i>440</i>	<i>440</i>	
Golden Hellos	860	280	410	2024-25*
Minimum UDA value £28	620	270	390	2024-25
Dental vans	N/A	30	40	2024-25*
Total	6,610	1,710	2,760	

*Due to the lead in time needed to implement Golden Hellos and Dental Vans, these figures reflect the assumption that only around 60% of expected full-year impact will be delivered in 2024-25

New Patient Premium

Initial modelling

The estimated number of additional UDAs that would be delivered through the New Patient Premium is calculated by assuming that contractors who are currently underdelivering on their commissioned UDAs will respond to the additional payment by seeing new patients. Seeing new patients will increase the amount of care that contractors deliver, and this increase in delivery is assumed to be between 5 and 10% of their contracted activity. Of the new patients who will be treated, it is assumed that approximately 40% of these will require a Band 1 course of treatment.

Conversion to treatments

For band 2/3 treatments, it is assumed that a dentist will receive an average of 6.5 UDAs per course of treatment. This accounts for both the UDAs received to deliver

the course of treatment, and the additional UDAs received in the form of the New Patient Premium.

For band 1 treatments, it is assumed that a dentist will receive an average of 1.5 UDAs per course of treatment. This accounts for both the UDAs received to deliver the course of treatment, and the additional UDAs received in the form of the New Patient Premium.

Conversion to appointments

Data on the number of appointments delivered is not routinely collected or monitored. Therefore, assumptions have been made as to how many appointments are needed to deliver a full course of treatment for each band.

For band 2/3 treatments, it is assumed that the average number of appointments needed to complete a course of treatment is 2.2. This figure is based on the mix of band 2 and 3 appointments seen in 2022-23, and the estimated average number of appointments needed to complete each band of treatment.ⁱ

For band 1 treatments, it is assumed that 1 appointment is needed to complete the treatment.

Golden Hellos

Initial modelling

The estimated number of additional UDAs that would be delivered by introducing 'Golden Hello' payments has been calculated by multiplying the number of 'Golden Hello' payments being made available, 240, by the average number of UDAs that a dentist would deliver in 2024-25. In a full year, it is assumed that a full-time dentist would deliver 6,000 UDAs. Due to the lead in time to hire dentists into these posts, it is assumed that dentists would deliver only 60% of their expected full-year activity in 2024-25. The estimated number of UDAs delivered by each dentist in 2024-25 is therefore assumed to be 3,600 UDAs.

Conversion to treatments

It is assumed that a dentist will receive an average of between 2.3 and 4.5 UDAs per course of treatment. The lower figure of 2.3 UDAs reflects the national average number of UDAs received per course of treatment in 2022-23. The upper figure of 4.5 UDAs reflects the increased likelihood that dentists new to a practice are likely to see a higher proportion of new patients which may lead to them seeing an abnormal mix of cases.

Conversion to appointments

Data on the number of appointments delivered is not routinely collected or monitored. Therefore, assumptions have been made as to how many appointments are needed to deliver a full course of treatment for each band.

It is assumed that the average number of appointments needed to complete a course of treatment, across all treatment bands, is 1.4. This figure is based on the mix of band 1, 2 and 3 appointments seen in 2022-23, and the estimated average number of appointments needed to complete each band of treatment.ⁱ

Minimum UDA value of £28

Initial modelling

The estimated number of additional UDAs that would be delivered by raising the minimum UDA value has been calculated by assuming that current contractors who are underdelivering will be incentivised to deliver more of their commissioned activity. It is assumed that contractors who currently have a UDA value below £28, and are underdelivering on their contract, will deliver an additional 10% of their contracted UDAs in 2024-25.

Conversion to treatments

It is assumed that a dentist will receive an average of 2.3 UDAs per additional course of treatment. This assumption reflects the national average number of UDAs received per course of treatment in 2022-23.

Conversion to appointments

Data on the number of appointments delivered is not routinely collected or monitored. Therefore, assumptions have been made as to how many appointments are needed to deliver a full course of treatment for each band.

It is assumed that the average number of appointments needed to complete a course of treatment, across all treatment bands, is 1.4. This figure is based on the mix of band 1, 2 and 3 appointments seen in 2022-23, and the estimated average number of appointments needed to complete each band of treatment.ⁱ

Dental vans

Initial modelling

The impact of dental vans has been calculated as the number of treatments that a dentist in a dental van could deliver in 2024-25. It is assumed that the number of treatments that a dental team could deliver in a dental van on a working day is between 15 and 20. Due to the lead in time to deliver dental vans, it is assumed that dental vans will deliver 60% of their expected full-year activity in 2024-25.

Conversion to appointments

Data on the number of appointments delivered is not routinely collected. Therefore, assumptions have been made as to how many appointments are needed to deliver a full course of treatment for each band.

It is assumed that the average number of appointments needed to complete a course of treatment is 1.3. This figure is based on the mix of band 1 and 2 appointments seen in 2022-23, and the estimated average number of appointments needed to complete each band of treatment.ⁱ It is assumed that more complex courses of treatment will not be completed in a dental van.

ⁱ It is assumed that, on average, a band 1 treatment requires 1 appointment, a band 2a treatment requires 2 appointments, a band 2b treatment requires 2 appointments, a band 2c treatment requires 3 appointments, and a band 3 treatment requires 3 appointments.

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