

Community Dental
Services: Paper for Local
Authority Overview &
Scrutiny Committee



Community Dental Services: Paper for Local Authority Overview and Scrutiny Committee

Cheshire, Warrington & Wirral Area Team

Merseyside Area Team

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Prepared by Kerry Davis, Dental Lead, Cheshire, Warrington & Wirral Area Team (NHS England) with support from Keith Milsom, Consultant in Dental Public Health, Public Health England

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Introduction

NHS England (Cheshire, Warrington & Wirral Area Team and Merseyside Area Team) is responsible for commissioning dental services from the Community Dental Service (CDS). There are five Community Dental Service contracts in Cheshire and Merseyside and all of these expired on 31st March 2014. All contracts were 'rolled over' for twelve months. There is a legal requirement to re-procure the CDS contracts for 1st April 2015 and NHS England (Cheshire, Warrington & Wirral Area Team and Merseyside Area Team) is currently engaged in the process of re-procurement.

Background

The CDS work in a complementary way to General Dental Services, essentially providing clinical specialist services for routine patients and routine care for patients who have special needs. The service exists primarily to provide services to people who would find difficulty in accessing normal general practice. For example people who need domiciliary care, people with learning disabilities or dementia, people with serious medical conditions or physical disabilities and, increasingly, older people. These services are often used to provide services to other socially excluded and vulnerable groups. Many community dental services also provide specialist dental services on a referral basis, including sedation and general anesthesia for high needs children and adults with special needs. Some services also fulfill a teaching function, a dental public health function (collection of epidemiological data) and participate in (modified) screening programs. Additionally, the CDS has often been the service to take on dental functions that have been difficult to procure e.g. out of hours urgent care.

Whilst undoubtedly the CDS undertakes valuable work, historically there has been a lack of transparency about the nature of that work and the activity levels associated with it. This suboptimal position has made the commissioning of CDS activity problematic. Additionally, this opaque understanding has occasionally led to unnecessary skepticism about the specific role the CDS undertakes.

The recent reforms of the NHS have provided a platform for a 're-think' about the way Community Dental Services are commissioned. The reforms have divided the commissioning responsibilities for the CDS between NHS England and Local Authorities. This splitting of the functions prompted the question "is the time now right to stop considering the CDS as an organisation that should be commissioned as one overarching service and instead, begin thinking of the CDS as being comprised of a suite of services, each of which should be scrutinised and offered, where appropriate, to the wider dental provider market?" The benefits of disaggregating the functions of the CDS and inviting other potential providers to bid for individual services, potentially include increased transparency,

the potential for a clearer focus on high quality service provision and an opportunity to enhance value for money in the delivery of these valuable services. Such an exercise has the potential to augment the reputation of the CDS as a pivotal contributor to the community.

The procurement process, (which has to be completed to a strict timeline) is expected to provide contracts that are 'fit for purpose' and delivered by the most appropriate provider. Most importantly these contracts will provide commissioners with appropriate and timely data on clinical activity, something that is currently unavailable. It is not anticipated that this exercise will lead to any material change in service level. These contracts will last for 3 years.

Once the new contracts are in place and high quality activity data becomes available, it is the intention of NHS England (Cheshire, Warrington & Wirral Area Team and Merseyside Area Team) to undertake an in depth dental health needs assessment. This will involve all key stakeholders and will consider the dental health of the population, dental health inequalities and available service provision. It is anticipated that over a twelve month period a strategic dental service plan will emerge that will have the support of the whole community. This plan will inform the re-commissioning of dental services in 2018.

Programme Aims and Objectives

The purpose of the re-procurement exercise is to:

- Disaggregate the functions of the Community Dental Service (CDS) in Cheshire, Warrington, Wirral and Merseyside into its constituent and discreet service areas.
- Produce a suite of agreed service specifications for the various individual dental services that NHS England (Cheshire, Warrington & Wirral Area Team and Merseyside Area Team) wish to commission in 2015.
- Decide on the geographic footprint that the individual services will be delivered.
- Engage with Local Authorities and the wider public on the proposal.
- Through the procurement process, secure new contracts with providers to start 1st April 2015.
- Using the newly placed dental contracts, begin a comprehensive dental health service review to inform future dental service commissioning.

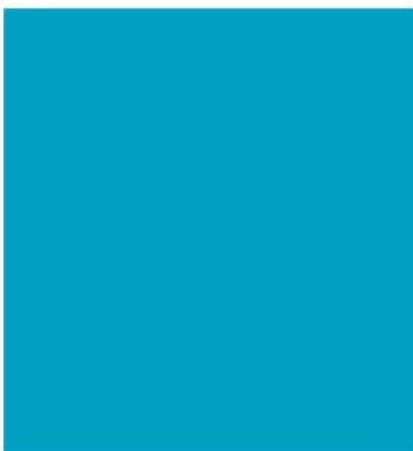
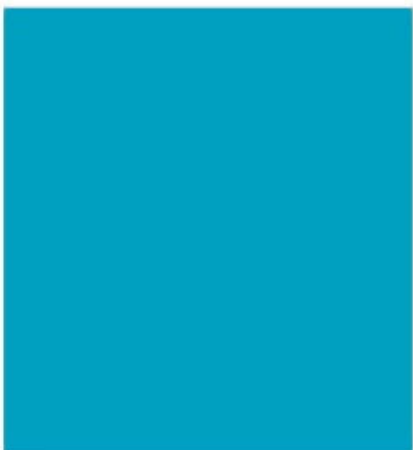
The Role of the Local Authorities

Statutory Instrument 3094 makes it clear that Local Authorities have a legitimate interest in the planning and evaluation of the arrangements for the provision of NHS dental services.

Local Authorities are invited to participate in the evaluation panel whose role is to develop criteria for judging the quality of contract bids and making a decision on which bids are successful.

Most importantly, NHS England (Cheshire, Warrington & Wirral Area Team and Merseyside Area Team) feels that once these new contracts are in place there is a need for a joint NHS England / Local Authority working group to be established to begin the work of the comprehensive dental health needs assessment exercise.

A series of Service Specifications have been prepared and once finalised can be made available for information.



Author:
Dental Project Group

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Community Dental Service Contract Re-procurement – Communications and Engagement Plan June 2014

1. Introduction

This document has been prepared by NHS England Cheshire, Warrington and Wirral Area Team (CWW). It outlines the communications and engagement activity to support the procurement of Community Dental Services across Cheshire, Warrington and Wirral.

The Area Team will seek strategic guidance and advice from North, Midland & East Communication's services (NM&E).

2. Background and context

NHS England (Cheshire, Warrington and Wirral and Merseyside Area Teams) is responsible for commissioning dental services from the Community Dental Services (CDS) on behalf of local communities. There are five Community Dental Service Contracts in Cheshire, Warrington and Wirral and Merseyside Area Teams. All of these contracts cease on 31st March 2015. From April 2015 new contracts to provide CDS will be awarded for a period of three years and procurement has to follow the rules set out by the European Commission and the OJEU (Official Journal of the European Union) process. This is standard operating procedure for the NHS.

Community Dental Services work in a complementary way to General Dental Services (high street dental practices), essentially providing clinical specialist services for routine patients and routine care for patients who have special needs. The service exists primarily to provide services to people who would find difficulty in accessing normal general practice – for example people with serious medical conditions or physical disabilities, people with learning disabilities or dementia, people who need domiciliary care and increasingly older people. These services are often used to provide services to other socially excluded and vulnerable groups. Many community dental services also provide specialist dental services on a referral basis, including sedation and general anaesthesia for high needs children and adults with special needs.

Whilst undoubtedly the community dental service undertakes valuable work, historically there has been a lack of transparency about the nature of that work and the activity levels associated with it. This suboptimal position has made the commissioning of community dental service activity problematic. Additionally, this opaque understanding has occasionally led to unnecessary scepticism about the role that the community dental service undertakes.

The procurement exercise forms the first stage of a whole service dental review of specialist primary dental care services across CWW. In re-procuring the

community dental services it is anticipated that high quality of patient services will be maintained and commissioners will have greater clarity of service activity and patient need. Over the period of the contract a detailed patient need analysis will be conducted with a view to procuring high quality appropriate dental services.

3. Aims and Objectives

This communications and engagement plan has been developed to ensure that those involved in commissioning and providing the services, the wider NHS, the public and local stakeholders are kept regularly informed as discussions progress.

The aim is to ensure a co-ordinated and consistent communications approach that we will make the best use of a wide range of communications channels, provide patients and other stakeholders with the opportunity to feedback and encourage effective two way communication.

Consideration will be taken of how the procurement fits into the overall vision and strategy for primary care dental services across the area. Discussions with stakeholders and overview and scrutiny committees (OSCs) will help clarify the approach that needs to be taken with patients and the public. OSCs in particular will be interested in understanding how any potential changes fit into an overall strategy that will improve the quality of services; and will want assurance that access to services will not be poorer for patients.

Re-procurement of community dental services is very much 'business as usual' for NHS England and therefore unless there is likely to be any substantial change to services, it should be treated as a communication and engagement exercise rather than a formal consultation. Best practice guidance should be adhered to.

A project plan has been developed which sets out communications and engagement actions required.

The objectives of the plan are:

1. To ensure that all stakeholders are kept up to date, fully informed and engage about the scope of the potential changes and how they fit into the context of dental care service provision in the area.
2. To reassure all stakeholders about the nature of the changes and those steps will be taken during the implementation process to mitigate concerns.
3. To provide varied opportunities for all stakeholders to give their views, ask questions, raise concerns and make comments in order to inform implementation.
4. Develop communications that are consistent, clear and tailored to different audience needs.

5. To be honest, open, timely and responsive in all communications and engagement activities.

4. Key deliverables

The key deliverables are summarised below; further detail can be found in the attached programme plan:

Programme Area	Deliverables	Timescales
Overarching	Stakeholder mapping and prioritisation	By end June 2014
Overarching	Communications plan and media handling plan in place	By early July 2014
Ensuring there is a clear program of communication and engagement	Regular bulletins/updates on progress and developments	On-going
	Ensure there are feedback mechanisms	On-going
Evaluation	Evaluation all communications during the implementation process outlining key achievements and areas for improvement	On-going

5. Risk analysis

Risk: Stakeholders are unhappy with the potential changes to the service.

Mitigation: The communication plan will take account of the need to ensure two-way communications and that all views are listened to and taken account of. Our plan identifies the need to ensure communications and engagement is targeted to reach different audiences with the right messages, in the right way at the right time.

Risk: Once final decisions are taken, stakeholders oppose plans.

Mitigation: Ensure there is transparency about the process by which decisions are taken and that stakeholders are aware how potential changes fit into the context of dental health care services in the area.

Risk: Once a decision has been taken stakeholders are unclear about the impact this has on them.

Mitigation: Ensure that there are accurate and up-to-date information accessing services.

As new risks arise, these will be addressed through the project delivery team.

6. Overarching lines to take and key messages

The three core messages below will form the basis of the key messages.

1. Ensuring that local people have access to high quality, convenient services.
2. It is important that as commissioners we constantly review services to make sure that they are up to standard for local people.
3. We will work to ensure that patients, the wider public and other stakeholders are involved in and kept up-to-date about any discussions about the future shape of services.

7. Key audiences

There are several important stakeholders and this is not an exhaustive list.

- Patients
- Patient participation groups
- Community Dental Service staff
- Healthwatch
- Local Professional Network/Local Dental Committees
- Public Health England
- Patients, families, carers
- Media
- Local Councils- Oversight and Scrutiny Committees
- MPs
- Clinical Commissioning Groups
- Health and Wellbeing Boards

8. Costs & Actions

The actions set out in the plan will need to be delivered by the Area Team primary care dental team and other external providers (as required).

Costs & Actions

The actions set out in the plan need to be delivered by the Area Team dental project lead in conjunction with NM&E Communications.

1. Operational Deliver to be led by NHS England CWW Area Team Primary Dental Team

2. Communications support, advice and guidance for the area team will be sought from NM&E Communications.
3. Delivery and Progress against the plan will be monitored and reviewed by the dental project group.

9. Communications and Engagement plan
Proposed summary of alterations to services-

Current Service	Proposed Service	Changes to Service
Paediatric Exodontia	Paediatric Exodontia	No material changes to service delivery Possible change of location Possible change of contract holder
Child & Adult Special Needs	Child & Adult Special Needs	No material changes to service delivery Possible change of location Possible change of contract holder
Out of Hours Urgent Care	Out of Hours Urgent Care	No material changes to service delivery Possible change of location Possible change of contract holder
In hours Urgent Care (Some Dental Access Centre provision 3 sites)	In hours Urgent Care – multiple sites in primary care setting	Future in hours urgent will be an enhanced service delivered from multiple sites across CWW
Dental Helpline- Wirral Dental Helpline- Cheshire (No formal contract)	Triage Service CWW wide	One Dental Helpline for CWW

Communications and Engagement Summary –

The various elements of the current services fit into different points around the 'Engagement Cycle'.

Engagement Activity	Feedback	Outcome	Timescale
Meetings with current services providers to discuss service re-procurement			Completed
Market engagement event outlining proposed services	A number of service delivery items were identified at the event	The service specifications have been updated to reflect the items identified and further ratified by project oversight group.	Completed June 2014
Questionnaire sent to all CCGs, and GPs around OOH dental services	Some communication issues raised around awareness of services and service provision	Communications, sign posting and advertising of Helpline numbers and In hours and OOH services specified in new service specifications	Completed
Media Statement (to be prepared and utilised as required)			On-going
Project paper sent to OSC including cover letter and comms & engagement plan			Completed by early July 2014
Project Paper presented to OSC			Wirral – July 2014 Other OSC – Sept 2014
Copy of Project paper to MPs for information			July 2014
Attempted co-op of Heathwatch member	Heathwatch declined		

onto project Oversight group	invitation, indicating they can only represent their own area		
Consultation meeting to be held near each DAC site to inform local stakeholders of the possibility that services may change in the future (3 sites)	TBA		Work in progress
A summary Information sheet/Notice of current and proposed services along with a feedback/ comments section to be sent out to: CCG patient groups Healthwatch Voluntary groups, Etc	TBA – set date for return feedback, summarise finding and consider and appropriate changes to Service Specs		
4 Information sharing events (CWW) – advertise a number of events to pass on information about present and proposed services	TBA – to be completed in next 2 weeks and feed comments into project group.		
A member of staff to visit each current CDS clinic to conduct a survey with patients/service users (spend 1 hour in each clinic asking patients service users to complete brief questionnaire)	TBA – to be completed in next 3 weeks, collate results and feed into service specs as appropriate.		TBA – to be completed by end July 2014
Questionnaire to local dental providers around dental services	TBA		

NHS Staff affected by changes	AT facilitate liaison with current and future service providers		Ongoing
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A task and finish group to be established to prepare the communications docs and roll out.

10. Current Service Sites – Cheshire, Warrington and Wirral Area

Alsager - Alsager Clinic, Sandbach Road South

Chester - OPD3 Countess of Chester Hospital

Chester - St Martins Clinic

Crewe - Eagle Bridge Health & Wellbeing Centre, Dunwoody Way

Ellesmere Port - Stanney Lane Clinic

Handforth - Handforth Clinic, Wilmslow Rd

Leasowe - Leasowe PC Centre, Hudson Road

Macclesfield - Weston Clinic, Earles Way

Nantwich - Church View PC Centre, Beam Street

Northwich - Victoria Infirmary, Winnington Hill

Sanbach - Ashfields PC Centre, Middlewich Road

Tranmere - Devonshire Park Clinic, Greenway Road

Wallasey - Victoria Central HC, Mill Lane

Warford - David Lewis Centre, Mill Ln

Warrington - The Baths

Winsford - Dene Drive PC Centre

Appendix 2

Community Dental Service (CDS) re-procurement -Briefing Summary paper for OSC Chair

1. Background

- CDS in Cheshire Warrington & Wirral(CWW and Merseyside) has to be re-procured by 1.4.15 (legislation)
- 3 year contracts will be placed starting April 2015.
- Current CDS contracts are providing inconsistent service data and delivery creating inequality.
- New and existing providers encouraged to bid for contracts
- The nature of the dental services re-procured will be essentially unchanged (important point)
- The providers may change
- The new 3 year contracts will be 'fit for purpose'
- The service specifications that underpin the new contracts have been produced locally, but the work of the service specification group has been overseen by an 'oversight group' with national representation and LA representative
- Potential bidders have been given an opportunity to see the service specifications and comment. Those comments have been taken into account
- Representatives of Local Authorities will be invited to participate in the bidder evaluation process
- This re-procurement exercise will form a platform for a comprehensive dental health needs assessment across CWW (and Merseyside). This exercise will begin in 2015/16.All stakeholders will be involved
- The results of this comprehensive needs assessment exercise will be high quality, bespoke dental service contracts that meet the needs of the population and will address the inequalities agenda.
- These contracts will be placed 1.4.18

2. Technical issues associated with the re-procurement exercise

This is essentially a 'tidying up' exercise in preparation for an in depth dental health needs assessment in CWW (and Merseyside). New re-procured contracts have to be in place by 1.4.15.

10 contracts will be offered:

- One triage contract for signposting to dental care services across CWW – a simplified one telephone number 'dental helpline' for patients
- One contract for 'Out of hours urgent dental care' across CWW
- Four contracts for 'In hours urgent dental care' (Cheshire East, Cheshire West and Chester, Warrington, Wirral. These contracts will each contain a number of subcontracts to ensure good distribution of service geographically)
- Two contracts for paediatric exodontia (A. Cheshire West & Chester and Wirral. B. Cheshire East and Warrington)
- Two contracts for special care dentistry (adults and children). One contract covering Cheshire West & Chester and Wirral. The other covering Cheshire East and Warrington.

3. Communication and engagement (C&E)

Because the re-procured dental services will be similar to the existing services, and in keeping with NHS England procurement timelines, there is a need to deliver a communications and engagement exercise. At this stage it is anticipated that full consultation is not required because there will not be significant change to services. However, consultation will be an integral part of the next stage (see page 13, section 9 proposed summary of alterations to services).

- A Communications &Engagement (C&E) plan has been prepared
- C&E will take place throughout and beyond the re-procurement exercise
- C&E will ensure that stakeholders are kept upto date and fully informed about how the new services fit into the context of dental service provision in the area.
- C&E will reassure stakeholders
- C&E will provide an opportunity for stakeholders to give their views, ask questions and raise concerns.
- All views will be taken into consideration.

4. The next steps

- The service specifications and the geographic contract footprints are now being finalised
- Finance/HR issues are being addressed
- The bidding process will get under way autumn 2014
- Communications & Engagement will be ongoing and we expect to develop further
- Contracts will be placed by December/January 2015
- Contracts to go live 1.4.15
- Contract monitoring to ensure successful bedding in of contracts
- Preparation for dental health needs assessment exercise from April 2015.