

NHS Sussex paper to East Sussex Health Overview Scrutiny Committee (HOSC) on Dentistry

1. Introduction

- 1.1 An NHS Sussex report on Dentistry was shared with the East Sussex Health Overview Scrutiny Committee (HOSC) in December 2022. The report set out the position of the delegated commissioning responsibility for Dentistry and the next steps to identify and prioritise commissioning principles.
- 1.2 This update now provides an overview of how dental services are being delivered and describes how the NHS Sussex Dental Recovery and Transformation Plan (DRTP) is supporting the development of NHS dental services across Sussex.
- 1.3 On 1 July 2022 NHS Sussex was one of the first Integrated Care Boards (ICBs) to take on commissioning responsibility for community pharmacy, optometry and primary, secondary and community dental (POD) services from NHS England (NHSE). Local Authorities (LA) are responsible for commissioning oral health promotion services.
- 1.4 Delegated commissioning allows us to move away from transactional models towards a more collaborative approach to planning and improving services. This means that instead of us focusing on procurement and contract management, commissioners can work closely with key partners across the system (including dental providers) to understand population needs, determine key priorities and design, plan and resource services to meet those needs.
- 1.5 Enhancing access to dental services is a national and local priority. The [NHS Planning and Operating Guidance 2024/25](#)¹ includes a national objective to increase dental activity by implementing the national plan to recover and reform NHS dentistry², improving units of dental activity (UDA) towards pre-pandemic levels. Ensuring adequate primary care dentistry provision both universally as well as for the groups with the highest level of oral health need is one of the greatest immediate challenges for Sussex. Patient demand for NHS dental services currently exceeds the available capacity dental service providers are willing or able to provide.
- 1.6 Since POD delegation NHS Sussex has worked in collaboration with Public Health dental consultants, the dental profession, our LA system partners and our local communities to fully understand the barriers to accessing NHS dental services.

¹ <https://www.england.nhs.uk/wp-content/uploads/2024/03/PRN00715-2024-25-priorities-and-operational-planning-guidance-27.03.2024.pdf>

² <https://www.gov.uk/government/publications/our-plan-to-recover-and-reform-nhs-dentistry/faster-simpler-and-fairer-our-plan-to-recover-and-reform-nhs-dentistry>

1.7 This report sets out the actions we have taken to make full use of available resources to enhance routine and urgent care dental access for people across Sussex, and the resultant additional capacity created in East Sussex. It also outlines how we intend to progress activity within 2024/25.

2. How are NHS dental services delivered?

2.1 NHS dental services are delivered through:

- General dental practices (high-street practices) for most of the population.
- Specialist dental services (may be delivered as part of the General Dental Practices or standalone) for more advanced care such as oral surgery and complex restorative treatment
- Community dental services which deliver dental care for children and adults who have additional needs which means they need special skills and facilities to be treated safely
- Hospital dental services which act as referral centres for those patients who require access to secondary care skills and facilities, including for procedures which need to be carried out in an operating theatre

2.2 Dental practices that provide NHS services are paid and contracted to deliver an agreed number of UDA. The various treatments people receive from dentists attract different charges based on bands and are also assessed as representing different number of UDA. There are four bands of charges for all dental treatment. Each band of NHS dental treatment (Band 1, 2, 3 and Urgent Band) equates to a number of UDA, which are based on the complexity of treatment. NHS general dental service providers are commissioned to deliver a set number of UDA, as a rough guide – 7,000 UDA equates to 1 full time dentist.

2.3 Following the General Election this year, the new government committed to delivering their manifesto pledges published on 24 June 2024, which included their Dentistry Rescue Plan, [Labour's plan to rescue NHS dentistry and provide 700,000 new appointments – The Labour Party](#), with four areas of focus, to:

- Reform the dental contract, to rebuild NHS dentistry and make sure everyone who needs a dentist can get one
- Roll out supervised toothbrushing for 3 to 5-year-olds, to prevent children forced to hospital to have their rotting teeth pulled out
- Fill the gap of appointments with an extra 700,000 urgent and emergency dental appointments a year
- Flood dental deserts with new dentistry graduates, with 'golden hellos' of £20,000 for those who spend at least three years working in underserved areas

2.4 These actions build upon the previous government's national Dental Recovery Plan, [Faster, simpler and fairer: our plan to recover and reform NHS dentistry^{\[1\]}](#) jointly

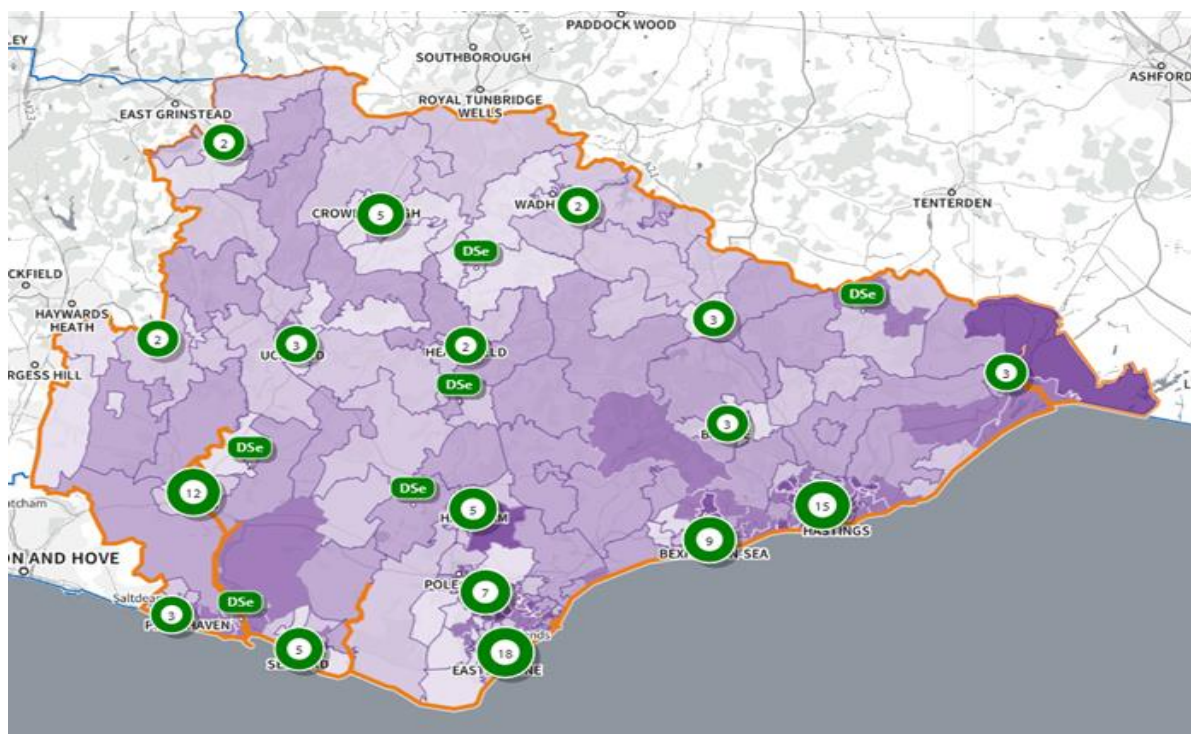
published by the Department for Health and Social Care (DHSC) and NHS England (NHSE) on 7 February 2024. The plan was intended to be jointly delivered between NHSE and DHSC with twenty-one actions identified for both organisations, and associated requirements for ICBs.

3. What do we know about access to NHS dental services in East Sussex?

How are dental services commissioned in Sussex?

3.1 Dental providers in East Sussex are identified on the map below (Figure 1) by green boxes labelled “DSe” (Dental Service) to indicate one provider, or a green circle with a number in the centre that shows how many providers are within that location. The purple shading reflects deprivation levels for the area with the deeper shades indicating higher levels of deprivation.

Figure 1 - Map of East Sussex Dental Service providers



Note that the map above includes all NHS Dental service contracts (not just general ‘high street’ dentistry and specialist services).

3.2 As of 27 August 2024, there were seventy-nine contracts for NHS Mandatory Dental Service (MDS) across East Sussex. These providers offer general ‘high street’ dental services, totalling 855,309 contracted annual UDA. In addition to MDS some East Sussex practices offer a range of specialist services (outlined below).

- 3.3 NHSE reported in Quarter 1 (Q1) this year, that 27% of dental practice in East Sussex had updated their NHS profile on www.nhs.net, of those practices 62% were accepting new NHS patients. Further information about NHS dental profiles is included in section 4.
- 3.4 Three practices are contracted to deliver domiciliary dental services for housebound patients alongside general services:
- Mydentist, 1 Cantelupe Road, Bexhill-on-Sea TN40 1JG
 - Seahaven Dental Practice, 2d Meeching Road, Newhaven BN9 9QX
 - Beech House, 16 College Road, Eastbourne BN21 4HZ
- 3.5 Three practices offer MDS services under sedation (referral only service):
- Station Plaza Dental Practice, Station Approach, Hastings TN34 1BA
 - Seahaven Dental Practice, 2d Meeching Road, Newhaven BN9 9QX
 - Battle Road Dental Practice, 84 Battle Road, St Leonards-on-Sea TN37 7AG
- 3.6 Oral Surgery (referral only service) is offered at the following locations:
- Croft Road, Crowborough TN1 1DR
 - 17 High Street, Lewes BN7 2LN
 - 37 Sackville Road, Bexhill-on-Sea TN39 3JD
 - 70 Broad Road, Eastbourne BN20 9QX
 - 84 Battle Road, St Leonards-on-Sea TN37 7XL
 - Sackville House, Lewes BN7 2FZ
 - 22 Strood Road, St Leonards-on-Sea TN37 6PN
 - 7 College Road, Eastbourne BN21 4JA
- 3.7 Orthodontic care for children (by referral only) is provided at six practices:
- Neo Orthodontics, The Queens Apartments, Hastings TN34 1JN
 - Neo Orthodontics, Sackville House, Brooks Close, Lewes BN7 2FZ
 - Neo Orthodontics, The Strand, Rye TN31 7DB
 - Portman Healthcare, 21 High Street, Hailsham BN27 1AN
 - Total Orthodontics, 3 Terminus Buildings, Eastbourne BN21 1BA
 - Total Orthodontics, 127a High Street, Uckfield TN22 1EH
- 3.8 Three practices in East Sussex have identified their capability to deliver additional sessional capacity under the Additional Hours Scheme (AHS) and the Urgent Dental Care and Stabilisation (UDCS) pilot scheme:
- Flint House Dental Practice, 22 Strood Road, St Leonards-on-Sea TN37 6PN
 - Prioxy Road Dental Surgery, 371 Prioxy Road, Hastings TN34 3NW
 - Springfield Road Dental Surgery, 6 Springfield Road, St Leonards-on-Sea TN38 0TU
- 3.9 Both schemes are intended for patients who do not have access to a regular dentist and have not been seen by a dentist in the last twenty-four months (adult) or twelve

months (child), and have an urgent dental need or have only received temporary care and require further treatment to stabilise their oral health. In addition, the following categories of patients can be seen, even if they are not 'new patients':

- People who are clinically vulnerable and need a dental assessment or treatment to enable them to receive medical or surgical care, such as cardiac patients, cancer patients and people who are immunosuppressed.
- Looked after children/children in care
- Patients referred for Orthodontic treatment by a practice that has since ended its NHS contract and requiring extraction before orthodontic treatment can commence
- Care home residents who are able to travel to a dental practice, for a check-up or assessment and subsequent course of treatment if they need it
- Asylum seekers and refugees (UDCS only)
- Homeless people (UDCS only)

Eligible patients can contact the practice directly to access these urgent appointments, or may be directed by NHS 111, the Sussex Dental Helpline (0300 123 1663 kcht.dentalhelpdesk@nhs.net 8am-4pm), out-of-hours Emergency Dental Services, A&E/paramedic services, GP and pharmacy teams, specialist medical teams, social workers and Voluntary Community and Social Enterprise (VCSE) organisations.

- 3.10 The UDCS scheme includes capacity to provide follow up courses of treatment to stabilise oral health, by addressing underlying dental issues, in addition to resolving the urgent complaint.

How are dental providers delivering contracted NHS activity?

- 3.11 Under-performance by NHS dental providers against their contracted activity reduces dental access. Sussex dental performance data shows a steady decline in delivery of UDA since 2016, decreasing from 94% in 2018/19 to 65% in 2021/22. This trend was mirrored at a regional and national level.
- 3.12 Our latest dental performance figures for 2024/25 indicate steady improvement across Sussex. As of June 2024, our local target delivery UDA count was 387,959 for Q1 2024/25. Actual UDA delivered was 406,501. This equates to 2.6% above plan. We have seen significant improvement in 2023/24, with an increased number of UDA delivered from 65% in 2021/22 to 84% (+19%) across Sussex (Table 1). This is particularly positive in East Sussex where delivery was only 1% below 2019/20 performance.

Table 1 - UDA delivery against contracted performance for 2019/20 and 2023/24 by Sussex Local Authority and the Sussex total*

Locality	Delivery	
	19/20	23/24
Brighton and Hove	94%	83%
East Sussex	87%	86%
West Sussex	89%	84%
Sussex	89%	84%

**Please note caveats to the data due to changes that took place during this period, including commissioning geographical changes and changes in payment types.*

How have NHS dental contract hand backs affected East Sussex and the wider system?

3.13 Since the onset of the COVID-19 pandemic, we have seen an increase in NHS dental contract hand backs. Since 2019/20 there have been 27 contract hand backs across Sussex, resulting in 186,946 less commissioned UDA. During this period, in East Sussex there were five contract hand backs in total, equating to an activity loss of 30,049 UDA annually (16% of the Sussex total hand backs). These were seen as follows:

- In 2023/24 three contract hand backs in the Lewes locality, totalling 26,562 UDA
- In 2022/23 two contract hand backs in the Hastings area, equating 3,487 UDA.

What is the impact on Urgent and Emergency Care (UEC) services from dental-related issues?

3.14 Recent analysis of NHS111 data has shown that most of the Sussex patients contacting the service with dental-related queries are signposted to general dental services. From June 2023 to May 2024 of the 17,168 NHS111 service dental-related enquiries, 28% were from East Sussex callers. Total call results show that 42% of patients were signposted to a 'high street' dentist within twenty-four hours. 33% of patients were advised to be seen within twelve hours, and 12% signposted for dental care within five working days. Only 1% of patients were advised to go to emergency departments. A&E services in Sussex report high volumes of attendees with dental-related issues who have already been in contact with NHS111 about their dental condition. This suggests that patients may be choosing to attend emergency walk-in services if they are unable to access an appointment with a 'high street' dentist. To help manage unmet urgent dental care demand, NHS Sussex mobilised the UDCS pilot scheme in March 2024 (see paragraph 3.9). This involved the participation of three East Sussex practices.

What do we know about patient experience NHS dentistry in Sussex?

3.15 We have reviewed patient feedback collected in April 2023 from a Sussex

Healthwatch survey, Experiences of Dentistry in Sussex³ [PowerPoint Presentation \(healthwatchwestsussex.co.uk\)](https://www.healthwatchwestsussex.co.uk/sites/healthwatchwestsussex.co.uk/files/HWiS-Experiences-of-Dentistry-in-Sussex-Poll-April-2023-FINAL.pdf) as well as data and insight gained through our own review of the current position of NHS dentistry in Sussex to inform and develop our Dental Recovery and Transformation Plan. The Healthwatch report highlighted that 25.5% of respondents had accessed NHS dental treatment without any issues, but 40.9% of respondents were unable to receive NHS dental treatment as they had been unable to find dentists able to offer it.

- 3.16 The most recent GP Patient Survey (2024) results show that 67% of Sussex patients described their experience of NHS dental services as “Good” and 21% described it as “Poor”, slightly lower than in the national response of 69% saying “Good” and 20% “Poor”. This indicates that there is further work needed to improve patients’ experience of NHS Dental Services in Sussex.

What do we know about NHS dental workforce?

- 3.17 Dental workforce recruitment and retention is challenging nationally and across the South East (SE) region. Dental professionals in Sussex tell us that recruiting and retaining a dental workforce willing to deliver NHS dental services is one of the greatest challenges they currently face and is one of the main reasons dental providers hand back their NHS contracts. Data⁴ shows that Sussex has consistently had more dentists undertaking NHS activity per 100,000 population than the national and regional average between 2018/19 and 2022/23. Between 2021/22 and 2023/24 the number of dentists delivering NHS care in Sussex experienced a net increase of 2% (from 918 to 939 dentists).
- 3.18 In 2023/24 East Sussex had 274 dentists delivering NHS activity. This equates to fifty dentists per 100,000 population. This is higher than the England average of forty-three dentists per 100,000 population. Note these figures are provisional based on latest available mid-year population figures.
- 3.19 The NHS Long Term Workforce Plan published in June 2023 [NHS Long Term Workforce Plan \(england.nhs.uk\)](https://www.england.nhs.uk/longterm/workforce-plan/) sets out the national vision for dental workforce supply to meet expected demand across England. The national LTWP ambition is to support expansion in dental workforce supply, by:
- Increasing training places for dental therapy and dental hygienists by 28% by 2028/29, to support expansion to more than 500 (40%) by 2031/32
 - Increasing training places for dentists by 24% for dentists to 1,000 places by 2028/29, to support expansion to more than 1,100 (40%) by 2031/32
 - Exploring the creation of new dental schools in underserved parts of the

³ <https://www.healthwatchwestsussex.co.uk/sites/healthwatchwestsussex.co.uk/files/HWiS-Experiences-of-Dentistry-in-Sussex-Poll-April-2023-FINAL.pdf>

⁴ https://nhsbsa-odata.s3.eu-west-2.amazonaws.com/dental/dental_workforce_23_24_v001.xlsx

country

- Promoting apprenticeship and other vocational routes to train across the whole dental workforce

3.20 NHSE acknowledges that the SE region does not currently have sufficient dental schools to support the desired expansion. There is no dental school within the SE or East of England region – both regions have been historically underserved.

What actions has NHS Sussex taken to enhance dental access in East Sussex?

3.21 We have consistently applied all incoming national guidance aimed at enabling increased access. This includes:

- Introducing the New Patient Premium payment scheme from 1 March 2024 (for thirteen months) to help incentivise practices to take on new NHS patients - we continue to monitor the impact
- Applying an uplift to UDA rates from 1 April 2024 to all relevant providers to implement the new national minimum UDA value of £28 - this was achieved without any loss to commissioned activity
- Approving twelve dental providers in East Sussex (30 in total across the Sussex system) to deliver up to 10% additional activity (in excess of their contract value) in 2023/24 - this represented a potential of 14,091 additional UDA and 91 sedation courses of treatment across providers in East Sussex

3.22 This year, nineteen dental contracts in East Sussex have been approved to 'overperform' by up to 10% in 2024/25. This includes seventeen general dentistry contracts, two offering sedation services, representing delivery of up to 24,481 additional UDA in East Sussex and up to 81 additional sedation courses of treatment. All but one of these services operates in an area of medium to high relative deprivation.

3.23 To help us develop data-driven approaches to mitigate losses of commissioned activity across Sussex, we have determined the number of UDA per head of population (PHP) at LA district level and compared areas that have similar levels of relative deprivation, to help us address any inequity in service provision. We know that areas of high relative deprivation are associated with some of the greatest levels of dental clinical need.

3.24 Lewes in East Sussex has been identified as a locality that has experienced a loss in activity falling below the average Sussex UDA PHP rate for an area with similar levels of deprivation according to Index of Multiple Deprivation (IMD) rankings. We have taken immediate steps to address the identified shortfall in dental access by offering temporary UDA increases to all existing NHS dental providers in the Lewes area (and wider system).

- 3.25 To help us to better understand current challenges around delivering NHS dental services and co-design solutions with dental professionals, we are hosting a dental provider listening event in Lewes on 7 November 2024. This will help us to work together to identify opportunities to increase commissioned activity and improve contractual performance in Lewes.
- 3.26 Lewes and Hastings have been identified as target areas to offer ‘golden hellos’ under the Dentist Recruitment Incentive Scheme (DRIS) in 2024/25. Three ‘golden hello’ posts have been agreed in total for practices in these areas. This is intended to help practices experiencing challenges with longstanding vacancies.
- 3.27 As outlined in paragraphs 3.8 to 3.10 we are continuing to fund the AHS to offer additional capacity for new patients and support access for vulnerable patient cohorts. We are also continuing to offer the UDCS scheme, following a successful 12-week pilot earlier this year. The pilot scheme was subject to robust evaluation and generated comprehensive learning for us to take forward in our commissioning of urgent dental care services (and other sessional arrangements of dental activity).
- 3.28 Our work with the national NHS Business Services Authority (BSA) has provided analysis on the quality and impact of the pilot and informs how we can iterate the model of care to scale up and target in areas of highest clinical need. Data capture from 21 March to 1 May 2024 demonstrated the pilot has:
- Delivered 106 sessions
 - Seen an average of 4.9 patients per session
 - Delivered 514 appointments and seen 351 patients (319 adults and 32 children)
 - Delivered 911 UDA
 - Most care delivered was urgent care, with a high volume of stabilisation provided
 - Most care involved extractions and restorations – but some endodontic care was provided
 - The pilot patient cohort showed high levels of disease risk – the programme is targeting health inequality.
- 3.29 Our evaluation is available to read on our website, with a summary article being published within the British Dentistry Journal. This follows the publication of an article⁵ co-authored with the NHS BSA dental team which outlined our approach to data collection and monitoring.
- 3.30 We continue to assess NHS dental services, targeting activity to areas of greatest need wherever possible. Testing new ways of working and service delivery will

⁵ [Sessional Urgent Dental Care Flexible Commissioning Data Tool: describing health outcomes through intelligent data | BDJ In Practice \(nature.com\)](#)

bring benefits to the whole Sussex population. There is no national registration system in dentistry like there is in general practice and people do not need to be registered with a dentist to receive NHS care. Patients are therefore able to go to any dental practice that holds an NHS contract for treatment, without any geographical or boundary restrictions.

3.31 Since our last progress update to East Sussex HOSC members, we have continued to make significant progress delivering key priorities for our patients, as summarised below in Table 2.

Table 2 – Summary of activity undertaken to enhance access to NHS dental services across Sussex

Action	Rationale	Impact
Procured new contracts (Brighton & Hove and Worthing)	Mitigate activity losses	79,500 additional permanent UDA
Implemented a new initiative to rapidly procure more permanent activity in targeted areas of West Sussex with lower rates of activity per head of population compared with similar IMD areas in Sussex	Attempts to re-procure new contracts and increase temporary UDA were unable to attract market interest	38,327 additional permanent UDA
Commissioned temporary activity In June 2024 expressions of interest were sought from providers in Lewes for 17,776 temporary UDA to help mitigate immediate losses due to recent contract hand backs while market engagement is undertaken to inform future commissioning arrangements	Address immediate activity losses due to contract hand backs whilst more longer-term provision is implemented.	30,700 temporary UDA (2023/24) To date 4500 temporary UDA have been commissioned in Lewes in 2024/25
Agreed contractual over-performance of up to 10% for those with capacity in 2023/24 (30 providers agreed, 12 in East Sussex)	Address under-performance across Sussex	Up to 34,433 additional UDA across Sussex. For East Sussex this means an additional 14,091 UDA and 91 sedation courses of treatment in 2023/24
Agreed contractual over-performance of up to 10% for those with capacity in 2024/25 (54 providers agreed, 19 in East Sussex – 17 MDS and 2 Sedation)	Address under-performance across Sussex	Up to 67,636.9 additional UDA across Sussex. For East Sussex this means an additional 24,481.2 UDA and 81 sedation courses of treatment in 2024/25
The continuation of the South East Additional Hours scheme (AHS) which increases access for new and clinically vulnerable patients with 2 providers in East Sussex	Continuation of South East scheme to improve access to urgent dental care	6 providers across Sussex offering max of 1,118 contracted sessions per year. 3 providers based in East Sussex (Hastings and St Leonards-on-Sea)

Tested an alternative approach to provide UDCCS. 10 providers (3 in East Sussex) in areas of highest need. Offer appointments to patients who do not have access to a regular dentist as well as vulnerable patient groups who require urgent dental treatment or need an urgent dental assessment	Utilise flexible commissioning to offer an enhanced urgent care service which includes urgent assessment and oral stabilisation as part of an initial pilot	During pilot: 10 providers 106 clinic sessions and 514 patients This pilot delivered 922 additional UDA during the 12-week pilot, with approximately 30% of this in East Sussex.
Extending a scheme in Brighton and Hove which provides remote clinical assessment at weekends and bank holidays for those patients who have oral pain/ swelling as part of an Advice, Analgesia and Antimicrobials (AAA) scheme	Enhance access to out-of-hours urgent dental treatment	71 sessions and 664 patient assessments
Approved two-year contract extensions to Personal Dental Service contracts for five non-MDS dental specialties (special care & paediatrics, unscheduled care, oral surgery, restorative and sedation)	To enable sufficient time to undertake service reviews and co-design new care models	Securing the continuation of specialist dental services across Sussex
Introducing a new patient premium across Sussex with participating NHS dental practices benefitting from payments of either £50 or £15, depending on care, for each new patient treated (221 eligible practices and 10 opted-out)	Implementation of national Dental Recovery Plan to boost patient access to NHS dentistry by increasing activity	Number of new patients will be monitored and reported by the NHS BSA
Uplifting the national minimum UDA values from £23 to £28 (33 providers)		Increasing contract values by £159,645
Implementing a 'golden hello' incentive in target areas. as part of the national Dentist Recruitment Incentive Scheme (DRIS), for practices who have experienced challenges with long-standing vacancies. East Sussex, Hastings and Lewes are target areas		Incentivise the recruitment of 10 dentists across Sussex. We have approved three golden hellos to practices in Lewes and Hastings

4. How can patients in East Sussex access routine, urgent and emergency NHS dentistry?

- 4.1 Dental practices are required to regularly review and update their practice profile on www.nhs.uk which includes information about whether they are accepting new NHS patients. Dental practice capacity fluctuates and therefore, all practices are encouraged to update the NHS website with any changes to their NHS patient acceptance status at the earliest opportunity. The NHS 'Find a dentist' webpage is the most up-to-date source of dental practice acceptance status information. The website uses a single location point (i.e. postcode) to list dental practices profiles in order of distance from that point. Dental practices may also include this information on their practice website.
- 4.2 If a patient needs urgent dental help and advice during normal surgery hours, they should contact their regular dentist if they have one. If a patient is unable to contact

a dentist or if they do not have a regular dentist, they can call Sussex Dental Helpline on 0300 123 1663 or email: kcht.dentalhelpdesk@nhs.net for more information (8am-4pm). NHS 111 also offers advice about the most appropriate service to help patients.

- 4.3 East Sussex Healthcare NHS Trust is commissioned to deliver Community Dental Services (CDS) and out-of-hours emergency and urgent dental treatment services. The East Sussex CDS offers a Special Care Dentistry Service across four sites (Arthur Blackman Clinic in St Leonards-on-Sea, Ian Gow Memorial Centre in Eastbourne, Seaford Health Centre and Uckfield Community Hospital).
- 4.4 Emergency and urgent dental treatment is provided out of hours at three sites across East Sussex. These services are by appointment only and will not accept walk-in patients.
- Brighton & Hove, Lewes and surrounding area telephone: 03000 242548.
 - Eastbourne area telephone: 01323 449170.
 - Hastings and St Leonards area telephone: 01424 850792.

5. How is the Sussex Dental Recovery & Transformation Plan supporting the development of NHS dental services?

- 5.1 Following the recent General Election, the new government will be pursuing its manifesto commitments in relation to their Dentistry Rescue Plan with the four immediate actions detailed in Section 2.
- 5.2 In response to this, we have refreshed our approach and updated the NHS Sussex Dental Transformation and Recovery Plan (DTRP) for 2024/25. This builds upon our learning to date, is based on best available evidence, considers the needs of people and sets out new ways of organising and delivering care within the current national contract.
- 5.3 NHS Sussex has undertaken both qualitative and quantitative assessment of the current issues facing service providers and patients to test the assumptions in our plan. We want to ensure our plans maximise dental capacity and prioritise capacity where it can be used most effectively to meet the highest clinical needs and secure the greatest improvements in oral health outcomes.

Preparing to implement new government initiatives

- 5.4 The government's Dentistry Rescue Plan has committed to provide an extra 700,000 urgent and emergency dental appointments a year. Although currently there is no further guidance from NHSE on the timeframe or process for implementation, ICBs will likely be asked to identify whether they wish to be included as 'early adopter' vanguard sites via an expression of interest process.

- 5.5 NHS Sussex is well placed to act as a system lead on this, building on our own insight and intelligence, following the roll out of a UDCS pilot in 2023/24. We have applied a rigorous project management approach empowering dental professionals to co-design the urgent care model, pathways and service specification and produced an evaluation report to assess efficiency, effectiveness, impact, and sustainability of the model.
- 5.6 The ICB has undertaken scenario modelling to test the feasibility for scaling up urgent care capacity and is developing an implementation plan that will be ready for mobilisation once there is confirmation nationally on the ask and associated funding. Our current plan would yield annual delivery of up to 96 sessions, 480 appointments, at a cost of £62,784 and would be in two sites in different Integrated Community Team areas in Sussex.
- 5.7 In terms of next steps we will:
- Engage providers to ‘test the appetite’ to scale up the UDCS model
 - Work with Public Health consultants to undertake a gaps analysis of urgent care need
 - Undertake a diagnostic review of service capacity.

Approach for developing our dental recovery and transformation plan

- 5.8 The development and delivery of our dental recovery and transformation plan is reliant upon a multi-disciplinary team approach. The plan was clinically co-designed with the Local Dental Committees (LDC) in East and West Sussex, Kent, Surrey and Sussex (KSS) Local Dental Network (LDN) and Managed Clinical Networks (MCN), and external dental clinical expertise. As some activities require changes to service delivery and will be implemented by dentists and the wider dental workforce, NHS Sussex has ringfenced dental allocation (£130k for 2024/25) to ensure clinical leadership is at the forefront of driving service transformation and implementation. We will continue to engage with clinical networks to test and pilot innovative approaches to enhance dental access, utilising the new guidance “Opportunities for flexible commissioning in primary care dentistry: A framework for commissioners” and learning from the UDCS pilot, which acted as local proof of concept for this approach to commissioning ‘Additional and Further Services’ sessions under existing national contractual arrangements.
- 5.9 Since the ICB took on delegated commissioning responsibility in July 2022, we have worked collaboratively with Directors of Public Health to inform our dental priorities, most recently this has included a review of the Looked After Children dental pathway to identify how access to services can be better tailored to their specific needs.

- 5.10 The work plan builds on and encompasses projects mobilised in 2023/24 aligned to the wider South East dental programme. This includes four clinical dental service reviews relating to Special Care and Paediatric Dental Services, Unscheduled Care, Sedation Services and Oral Surgery.

Continued focus on access

- 5.11 As of June 2024, our local target delivery UDA count was 387,959 for Q1 2024/25 with actual UDA delivered of 406,501. This equates to 2.6% above plan. We have seen significant improvement in 2023/24, with an increased number of UDA delivered from 65% in 2021/22 to 84% (+19%) across Sussex.
- 5.12 We have mitigated losses in dental activity in Lewes and Hastings by commissioning temporary UDA, approving over-performance, offering 'golden hellos' and engaging with providers to co-design new ways of working. Our DRTP for 2024/25 sets-out how we will continue to support practices and develop long-term strategies to help prevent further contract losses, improve performance and address oral health inequalities.

Continuous improvement priorities

- 5.13 To deliver improvements and inform future commission decisions we need to ensure that we fully understand:
- The capacity and capability of our dental services, including workforce at a local level
 - The oral health needs of our population and health inequalities
- 5.14 We will take the following actions to support continuous improvement:
- Continue to monitor levels of contracted dental activity, performance and population health management data on a quarterly basis to inform commissioning decisions to help address variation and health inequalities
 - Use the South East framework for supporting practice resilience to assess individual applications from dental practices experiencing challenges due to exceptional circumstances
 - Support local authority activities promoting oral health to the youngest children in our population and looked after children by:
 - Ensuring public health team are engaged with the Sussex task and finish group to develop options for enhancing services to support children and vulnerable groups as part of the pathway development for improving the oral health of children
 - Promoting a system-wide approach to enhancing dental access for children
 - Consider the inclusion of children who are identified by a qualified professional as requiring a full dental assessment into the UDCS scheme.
 - Undertake a clinical service review for four dental specialty areas as part of a

two-year programme. Progressing work started in 2023/24 focusing on Special Care and Paediatrics, Unscheduled Care and Sedation Services

- Work to enhance the oral health of care home residents by mobilising a domiciliary dental care pilot for elderly care home residents in a care service in Crawley to test a new delivery model (due to mobilise in December 2024)
- Undertake a survey to better understand the local dental workforce in line with the forthcoming data from the national dental workforce data collection and inform the Sussex Primary Care Workforce Development Plan. This data will inform our collaborative workforce initiatives aimed at improving access, enhancing service delivery, support for children and vulnerable groups and cultivating a positive experience for dental professionals of NHS service delivery
- Implement a dental clinical leadership initiative starting with the recruitment of dental experts to lead and support projects in local programmes, alongside a roadmap to promote the integration of dental clinical expertise within existing primary care clinical leadership framework

Long-term improvement – Sussex Centre for Dental Development

5.15 Scoping activity has commenced with the Dental Deanery within NHSE Workforce, Training and Education and local higher and further educational stakeholders, to test the feasibility of a long-term collaborative project to train future dental health professionals to support workforce supply, optimise the use of the skill mix of the whole dental team (to deliver new models of care) through education and training with the aim of enhancing access for identified patient groups through a new delivery model (by providing NHS-only dental appointments).

5.16 The aims of the project are to:

- Improve equity of access and outcomes for those most at risk of poor oral health
- Develop care pathways that deliver early intervention with timely treatment, and prevention through oral health advice, treatment, supported by clear referral pathways
- Develop a flexible community based multi-disciplinary dental team focused on prevention aligned with the Sussex Integrated Community Teams (ICTs)
- Offer mandatory services with a focus on prevention as well as intervention, continuing care with access and treatment aligned with and interfacing with Sussex ICT care pathways, in particular for Core 20 Plus 5 priority areas
- Develop skills within the wider dental workforce utilising full scope of practice of dental care professionals
- Grow and upskill the local dental workforce through education and training
- Capture and evaluate oral health as an outcome of the commissioned NHS dental service, as well as through the activity metric of fillings, dentures, extractions or crowns

5.17 This concept builds upon national best practice which includes the University of Suffolk, Centre for Dental Development and recommendations set out in Health Education England's, Advancing Health Review – blueprint for future dental education and training to develop a multi-professional oral health workforce.

6. Conclusion

6.1 This paper highlights the work NHS Sussex is doing as part of our Sussex Dental Recovery and Transformation Plan to support the development of NHS dental services activities and sets-out key delivery priorities to enhance access to NHS dental services. Through our diagnostic analysis and engagement with the profession we have identified several opportunities for improvement.

6.2 Our plan, made up of a range of transactional and transformational activities, focuses on the activities to enhance dental access and respond to the government's immediate priorities to recover and reform NHS dentistry. It sets out how we will improve patient access to NHS dentistry, support and develop the whole dental workforce, and take action to prevent poor oral health.

6.3 The actions we have taken include improving dental performance via the contractual review process to determine areas of potential support and agree actions to enhance performance. We have developed three new initiatives with the aim of enhancing access to routine and urgent dental care via the rapid commissioning of permanent UDA, a UDCS pilot and an oral health improvement pilot supporting patients in care home settings. In East Sussex, we currently have three dental practices offering the UDCS service and two practices who participate in the additional hours scheme.

6.4 The NHS have applied a ringfence to NHS dentistry budgets for 2024/25 and collect monthly returns from all ICBs to establish current and planned spend against the ringfenced dental priorities and operational planning guidance allocations budget. The dental allocation for 2024/25 is £109,697,000, for all primary, community and secondary care NHS dentistry. A fully costed dental transformation plan was submitted to the NHS Sussex Board on 25 September 2024.