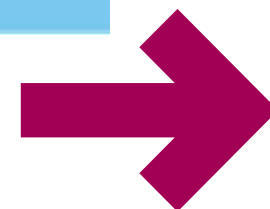


# Wessex Local Dental Network

Verna Easterby-Smith  
Clinical Commissioning Lead (Dental)  
Wessex Area Team

24 June 2014

# Wessex Area Team (CCGs)



# NHS England (Wessex)

- Population 2.8 million
- Third most populous area of England
- 5% of NHS England budget (4.8bn)
- 9 Clinical Commissioning Groups (CCGs).
- 7 Local Authorities
- 17 District Councils
- 9 hospitals (6 Foundation Trusts & 3 NHS Trusts)
- 300+ GP Practices - 2466 GPs
- 380 Dental Contracts - 1584 GDP performers

# Why are there LPNs?

- Ensure that clinical leadership is at the heart of the local commissioning
- Commissioning managers and clinicians delivering NHS England's vision together
- An integral part of NHS England

# LPNs – What are they about?

- Improving quality by using national and local evidence e.g. Epidemiological data, local Oral Health needs assessments and public health data
- Finding the best outcomes for patients that reflect local needs and demands
- Best use of NHS resources
- Supporting the delivery of national care pathways locally
- Engagement with the WHOLE dental community in Wessex
- Support development of local Clinical Leadership
- Learning from Pilot LDN experience

# Local Dental Network will have:

## Small 'core' team:

- Clinical Chair (John Weld)
- Primary Care Clinicians – GPs and Community Dental
- Secondary Care Clinicians
- Patient representative – Health Watch
- Consultant Dental Public Health
- Dental Deanery delegate
- Clinical and non clinical dental commissioning leads from Wessex Area Team.
- MCN delegates –e.g. Orthodontics, MOS, Restorative

# Local Dental Network will have:

## **'Task and finish' groups:**

- Possibly chair/member from the core group
- Other clinicians as needed by the task –GDPs, LDCs, MCNs, Secondary Care, DCPs, Corporates, Specialists in Primary Care, Private practitioners etc
- Area Team - finance, quality, performance, contracting, communications
- Others –Dental Public Health, Dental Deanery etc
- Patient representation

# LDN – Annual Workplan

- Establish the core team and develop the network by engagement/communication with the local clinicians (how best?)
- Use the local joint strategic needs assessments (from Local Authorities) to help develop local priorities
- Engage with H&WBs
- Support the development of Managed Clinical Networks
- Set up T & F groups to support the development of care pathways and other local commissioning priorities



# LDN – The backdrop

- Changing treatments for the management of oral & dental disease – implants?
- Increased focus of prevention – general and oral
- Contract review – Prof Steele review
- Changes in regulations – CQC, GDC, Performers Lists, H & Safety etc
- Fluid workforce – age/gender profile, culture, EU and non EU dentists, corporates
- Extended roles for dental care professionals
- Direct access for hygienists and therapists (private only at present)

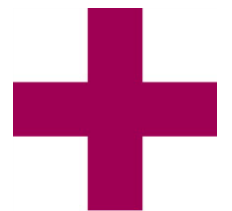
# Dental Contract Reform Engagement

- 4 papers – Quality of care
- Remuneration
- Improving Oral Health and access
- 90 pilots – a preventive pathway approach
- Oral Health Assessment (OHA) and Oral Health Review
- 4 domains - Perio, Caries TSL, soft tissues = RAG ratings
- Activity or Full or Blended (part capitation part activity)
- [www.gov.uk/government/consultations/improving-dental-contracts](http://www.gov.uk/government/consultations/improving-dental-contracts) by 31st July 2014

**Volunteers??**

**Questions??**

**Comments??**





**Thank you  
for  
listening**

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24.06.14