

Jeremy Williams – Chair NWLDC
Mike Strother – Secretary NWLDC

Ein cyf / Our ref: RP/LDC 250224

Dyddiad / Date: 7th April 2025

Dear Both

Re: LDC concerns around 24/25 uplift and 25/26 contract variation

Thank you for your letter regarding the Local Dental Committee's concerns around the 2024/25 uplift and the 2025/26 contract variation. Since the letter was received there has been further contractual developments and my response is adjusted accordingly.

2024/25 Uplift and Conditions

Your comments regarding the uplift and conditions are noted. You are aware that this is not within the direct control of the Health Board, however, I understand that representations on this issue have been made to the Cabinet Secretary and WG directly by the BDA.

The Health Board recognises the challenging position for dental practices and applied additional mitigation for contracts delivering under contract reform principles in 2023/24, by recognising the activity which was not captured by the standard patient metrics. It should also be noted that 47% of contracts delivering under UDA model were subject to financial recovery in 2023/24.

Whilst the Health Board is committed to providing continued support to dental practices, we are unable to confirm the level of mitigation that may be applied as this will not be known until after the End of Year reconciliation has taken place and the necessary agreement from the Executive Board.

With regards to the transfer of patient waiting lists by the end of June 2025 to the Dental Access Portal (DAP), we recognise that this may represent an administrative burden on practices to validate the information held. We therefore would advise that practices may wish to start reviewing their waiting lists prior to this date and book patients into their practice diaries where they have capacity to do so, as well as directing patients to the DAP where appropriate.

Metrics for 25/26

The metrics may appear challenging for some practices, and I would ask practices that are experiencing difficulties in achieving their patient metrics to enter into dialogue with their contract lead in the first instance.

There may be some misinterpretation in metrics, the total number of patients has been slightly reduced from 24/25, not increased. We appreciate that some practices may not have capacity to accept new patients, however, transferability can be evoked once both the new urgent and minimum historic patient targets have been achieved. The Health Board has set this as 60% for established practices.

For those practices with capacity to accept new patients, once the minimum number of historic patient and new urgent patient metric has been achieved, the historic patient target can be reduced by 2.5 for every new patient seen above the new patient target.

The ratios are detailed below:

1 new patient = a reduction of 2.5 historic patient target

1 new urgent patient = 1 historic patient

Patients should continue to be referred to CDS and / or hospital services if the patient is eligible. The full demand for services will not be known if this work is undertaken within a primary care setting. The Health Board will also continue to apply mitigation for high needs patients (red ACORN with 4+ interventions) which may further reduce the targets.

NUP Access

The dental helpline requested support from practices on three occasions in the last financial year. A correspondence was also sent out in August to remind practices of their obligations to provide urgent treatment for their historic patients. We recognise that demand for urgent care remains higher than pre-covid levels across Wales and data provided by the dental helpline anticipated the demand for this service. Numerous practices have accepted the offer of receiving patients via this route which we anticipate will meet the dental helpline demand, however, we will keep this under review. We further anticipate that the completed tender exercise will allow more patients to be seen routinely thereby, in the medium to long term, reducing the need for urgent care.

Dental Access Portal (DAP)

The DAP is now live with numerous practices electing to receive new patients via this route. The wider dental team is currently managing the DAP, with the intention to recruit designated resource once the extent of the workload has been defined with consideration to the current consultation.

The Health Board has not actively advertised the DAP to date, however, given that access remains low, we are confident that there are sufficient patients to meet practice's new patient metrics

I would like to thank you for the supportive approach from the LDC, it is appreciated.

Yours sincerely

Rachael Page
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