



**NHS England, North
(Cumbria & North East)**

**Orthodontics Procurement
Stakeholder Briefing**

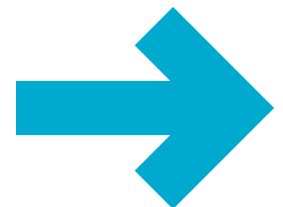
Tuesday 15th May 2018

**Northumberland
Health & Wellbeing
Overview & Scrutiny Committee**

Setting the Scene

Why has NHS England taken the decision to re-procure Orthodontic services?

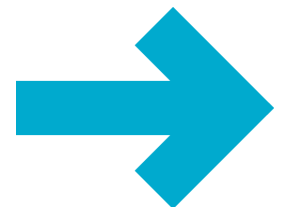
- There is a legal requirement set out in the 2015 European Procurement Directives which requires NHS England to carry out a competitive tender process.
- In Cumbria and North East: 21 orthodontic contracts due to expire in 2019/2020 (includes 1 contract in Northumberland).
- NHS England is keen to adopt consistent principles for this procurement



Setting the Scene Cont'd

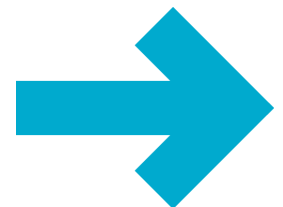
How have we (NHS England) arrived at our current position

- National Commissioning Guide for Orthodontics published 2015 – agreed national pathway and service standards
- Orthodontic Health Needs Assessment
- Proposed Commissioning Intentions
- Draft Specification developed
- Stakeholder Engagement

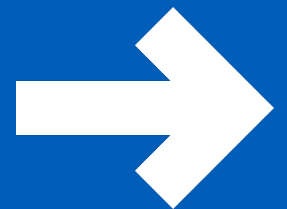


Setting the Scene cont'd

- Overarching principles:
 - Reduce inequalities in access across Cumbria & North East.
 - Ensure each of the Local Authorities across Cumbria & North East has local provision of orthodontic services.
 - No reduction in commissioned activity overall.



Needs Assessment





Methodology

33% of 12 year olds used for estimating need.

Rationale for using 33%

- It is a figure which is widely accepted based on survey data
- Not all children with 'need' will want orthodontic treatment.
- Some children with 'need' will want private orthodontic treatment
- Not all children with 'need' will maintain oral health suitable for orthodontic treatment

Reference populations of 12 year old children in Cumbria & North East - 2014 base projections from ONS for years 2014 to 2027.

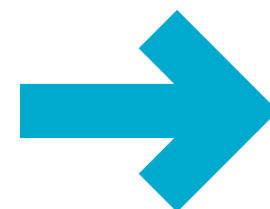
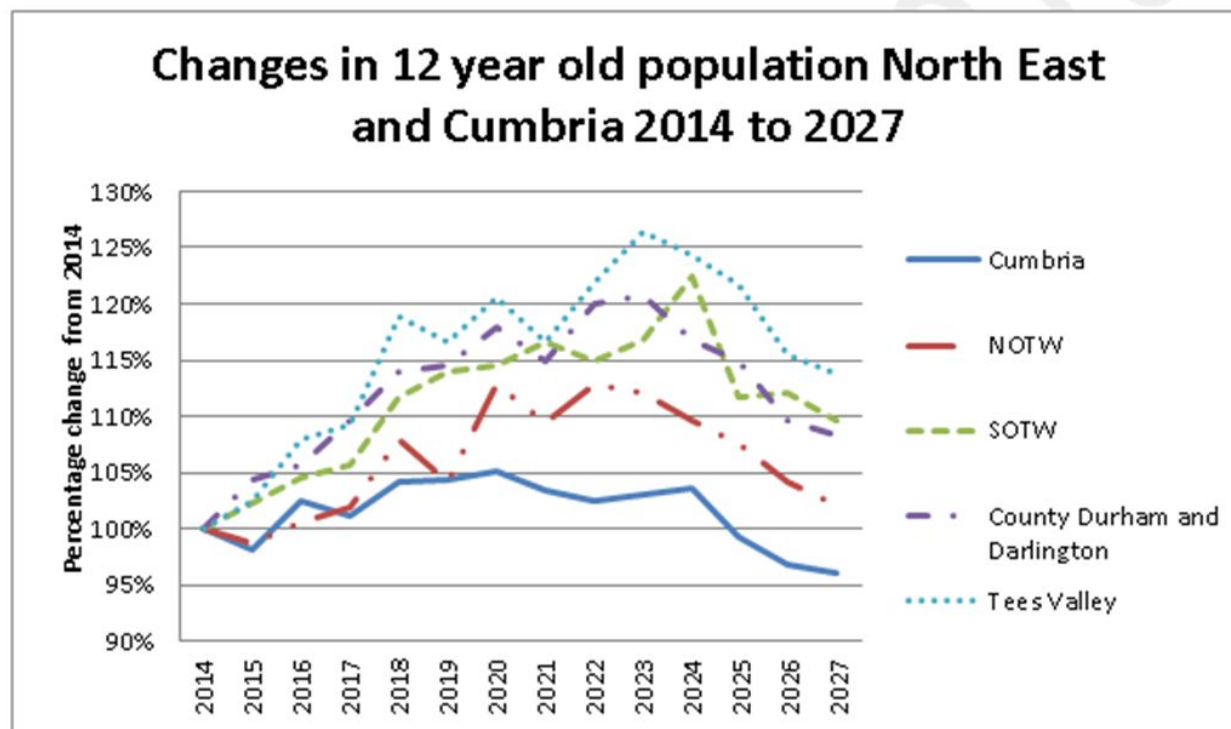




Population estimates

Average population over 14 year period (2014 – 2027) used to determine need.

Chart 2

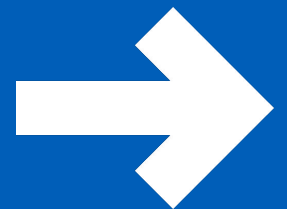




Estimated Need/Demand

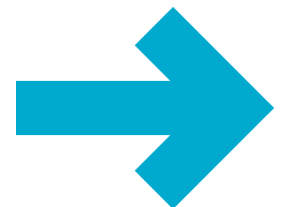
Locality	Estimated Need (Patients)	Current Patient Capacity commissioned	Indicative 5% of patients seen in Secondary Care	Variance (No. of Patients)
County Durham	1,830	773	92	-966
Darlington	418	864	21	467
Hartlepool	362	310	18	-34
Middlesbrough	600	1145	30	575
Redcar and Cleveland	497	356	25	-116
Stockton-on-Tees	789	535	39	-215
Gateshead	737	468	37	-231
South Tyneside	532	713	27	208
Sunderland	993	1409	50	466
Northumberland	1,060	865	53	-142
Newcastle upon Tyne	1,055	1002	53	0
North Tyneside	746	597	37	-112
Carlisle & Eden	1,118	740	56	-322
Allerdale & Copeland				
Totals	10,736	9,777	537	-422

Proposed Commissioning Intentions



Principles (1)

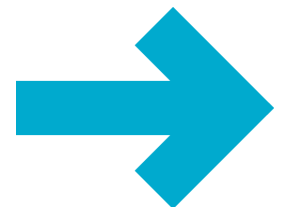
- Improve access based on need rather than historical provision.
- Implement national commissioning guide and service standards.
- Aim to address identified gaps in provision.



Principles (2)

In establishing the proposed contract location and size a number of issues are taken into consideration:

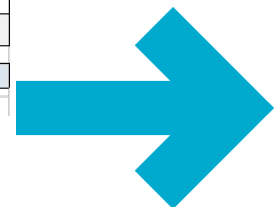
- The contract must be of sufficient size to be attractive to the market.
- People living in both urban and rural areas should be able to access an Orthodontic service.
- Levels of deprivation, natural patient flows and feedback from engagement considered.
- Small amount of General Dental Services (GDS) orthodontic provision and indicative secondary care provision subtracted from the required capacity to be re-commissioned.



Proposed Contract Lots (as at May 2018)

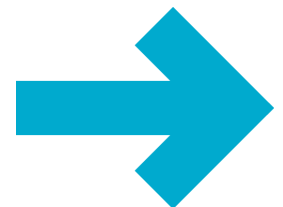
Locality	Required Patient Capacity to be Commissioned*	Proposed Contract size	Comments
County Durham	1,738	627	1 x Contract Central Durham (ie Neville's Cross/Elvet/Gilesgate)
		356	1 x Contract North West Durham (ie Stanley/Tanfield/Consett North)
		444	1 x Contract Bishop Auckland (Patients previously accessed contract in Darlington - proposal provides more local access)
Darlington	397	400	1 x Contract Darlington
Total	2,134	1,827	NB: Variance reflects patient flow from North East Durham into Sunderland and Hartlepool
Hartlepool	268	378	1 x Contract (capacity increased to account for patients accessing from North East Durham e.g. Peterlee)
Middlesbrough	474	476	1 x Contract
Redcar and Cleveland	425	427	1 x Contract
Stockton-on-Tees	720	724	1 x Contract
Total	1,887	2,004	NB: Variance reflects patient flow into Hartlepool from NE Durham
Gateshead	652	476	1 x Contract (variance to reflect patient flow from Gateshead into Newcastle)
South Tyneside	350	351	1 x Contract
Sunderland	927	400	1 x Contract North of River Wear (two locations - Washington and 1 other, ie Castle/Redhill or Southwick Wards)
		711	1 x Contract South of River Wear, ie City Centre (increase in capacity above needs assessment to reflect patient flows into Sunderland from North East Durham, ie Seham/Murton/Easington)
Total	1,929	1,938	NB: Variance reflects patient into Sunderland from North East Durham and from Gateshead into Newcastle
Northumberland	798	400	1 x Contract Central Northumberland (Ashington)
		400	1 x Contract East Northumberland e.g. Alnwick & North Northumberland Outreach e.g. Berwick
Newcastle upon Tyne	991	467	1 x Contract covering Newcastle East (Ouseburn/South Jesmond/North Jesmond/East Gosforth/Dene/North Heaton/South Heaton/Byker/Walker/Walkergate) (increase in capacity above needs assessment to reflect patient flows into Newcastle from Gateshead)
		707	1 x Contract covering Newcastle West (Hub in Newcastle City Centre ie Westgate ward, with a minimum of 1 outreach location in West Newcastle) (increase in capacity above needs assessment to reflect patient flows into Newcastle from Gateshead)
North Tyneside	593	596	1 x North Tyneside
Total	2,382	2,570	NB: Variance reflects patient flow into Newcastle from Gateshead
Carlisle & Eden	1,000	502	1 x Contract covering Carlisle and Eden with 2 locations e.g. Split Site
Allerdale & Copeland		502	1 x Contract covering Copeland and Allerdale with 2 locations e.g. Split Site
Total	1,000	1,004	
Totals	9,332	9,343	

*Excludes provision in general dental services contracts & Nominal 5% to Account for Secondary Care Commissioned Capacity



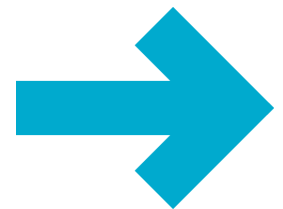
Northumberland – key points

- Proposing overall increase in commissioned capacity by approx 14%.
- Increase from one to two specialist orthodontic contracts – approx increase in capacity from 478 to 800 patients.
- No change to existing ortho provision in GDS contracts (Morpeth, Amble, Blyth, Alnwick, Ashington, Hexham).



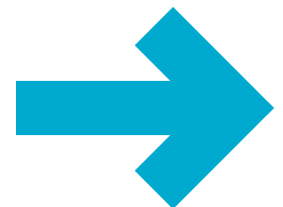
Proposed Service Specification

- Developed using the Commissioning Guide for Orthodontics and in liaison with colleagues nationally to ensure consistency where possible but taking account of local factors.
- Key changes over current provision:
 - Defined patient pathway
 - Availability of after school appointments
 - Standard key performance indicators

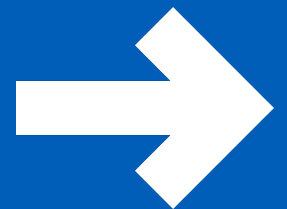


Stakeholder Engagement

- National Engagement:
 - Negotiation with British Dental Association and British Orthodontic Society, ie commissioning guide, pricing, patient transition.
- Local Engagement:
 - Market engagement events – April 2017 which incorporated guidance good bid writing, and March 2018.
 - Survey to orthodontic patients across Cumbria and North East (Feb/March 2018 - 5607 surveys sent out with an 18% response rate). (Northumberland 18% response rate – 483 surveys sent out with 87 returned).
 - Commissioned ‘Investing in Children’ - Young people’s review of provision of orthodontic services in Cumbria and North East (2015).
 - Engagement with Health Scutiny Committees, CCGs, MPs, Local Authorities and Healthwatch (May/June 2018).

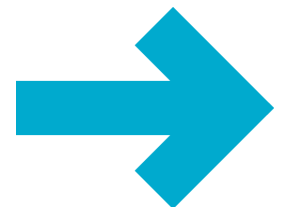


Next Steps



Next Steps

- Launch of first stage of process – allows potential providers to register and gain accreditation by answering a few general eligibility questions.
- Complete engagement by end of June 2018.
- Finalise commissioning intentions, and timescales for Stage 2 of the process (inviting tender submissions)
- Procure and mobilise new contracts - contract length 7 years with the option to extend for up to 3 years by mutual agreement.



Questions/ Feedback on proposals?

