



for health and social care

NHS Dental Statistics for England

Quarter 1: 30 June 2008

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Summary

NHS Dental Statistics for England: Quarter 1, 30 June 2008

This report considers NHS dental activity in England under the new contractual arrangements which started on 1 April 2006. The latest information relates to the first quarter of 2008/09, up to and including 30 June 2008.

Activity

The latest activity information is provisional and will subsequently be revised upwards to account for Courses of Treatment reported too late for inclusion in this report. At this stage, activity data for quarter 1 of 2008/09 is based on provisional data whereas data for earlier quarters is based on final data. Final figures for 2008/09 are expected to be published in August 2009.

For Quarter 1 in 2007/08 the increase between the provisional and final figures was 1.7 per cent for CoTs and 1.8 per cent for UDAs. This suggests that comparisons with the final figures for the first quarter of 2007/08 will produce an underestimate of change. Further details can be found in Annex 1a.

In the first quarter of 2008/09:

Courses of Treatment

- There were provisionally 9.2 million Courses of Treatment (CoTs) carried out in England, an increase of 125,100 (1.4 per cent) on the final figure for the first quarter of 2007/08. Last year the final figure for the same quarter was 1.7 per cent higher than the provisional figure.
- Band 1 accounted for more than half of the CoTs carried out (53.9 per cent). Band 2 was the next most common treatment band accounting for 30.4 per cent, while 4.6 per cent of CoTs were within Band 3. The remaining 11.2 per cent of CoTs were for Urgent and Other (charge exempt) treatments.

Units of Dental Activity

- There were provisionally 19.5 million Units of Dental Activity (UDAs) carried out in England, an increase of 549,300 (2.9 per cent) on the final figure for the first quarter of 2007/08. Last year the final figure for the same quarter was 1.8 per cent higher than the provisional figure.
- UDAs within Band 2 accounted for 42.9 per cent of all UDAs. Band 3 treatments accounted for a further 25.9 per cent of all UDAs, and Band 1 accounted for 25.3 per cent. Of the remainder, Band 1 Urgent UDAs accounted for 4.9 per cent of the total and Other (charge exempt) UDAs accounted for 0.9 per cent. These figures contrast with the figures for CoTs where more than half were within Band 1, and reflect the fact that simpler treatments (such as Band 1) represent fewer UDAs.

Patients Seen

In the 24 month period ending 30 June 2008:

- 26.9 million patients were seen by an NHS dentist, equivalent to 52.7 per cent of the population. This is a decrease of 1.2 million (4.3 per cent) on the 28.1 million patients seen in the 24 month period ending 31 March 2006, equivalent to 55.8 per cent of the population at that time.
- 19.3 million adults (aged 18 and over) were seen by an NHS dentist, equivalent to 48.3 per cent of the adult population. This is a decrease of 1.0 million (4.9 per cent) on the 20.3 million adults seen in the 24 month period ending 31 March 2006, equivalent to 51.6 per cent of the adult population at that time.
- 7.6 million children were seen by an NHS dentist, equivalent to 69.0 per cent of the child population. This is a decrease of 209,800 (2.7 per cent) on the 7.8 million children seen in the 24 month period ending 31 March 2006, equivalent to 70.7 per cent of the child population at the time.
- The percentage of the population that had seen an NHS dentist varied between Strategic Health Authorities (SHAs), with a higher percentage of patients seen in northern SHAs than southern SHAs. The percentage of the population seen varied from 44.3 per cent in South Central SHA to 60.6 per cent in North East SHA.

Sub-national information on patients seen was not published on 21 August 2008 as part of the end of year NHS Dental Statistics for England 2007/08 report, due to concerns over the allocation of patients to PCTs across the various quarters. This issue was considered to have only a minimal impact on national figures which were included but labelled as provisional until the issue could be investigated.

These concerns have been examined by the NHS Information Centre in liaison with the Dental Services Division of the NHS Business Services Authority and have been addressed by the inclusion of additional technical information, available in Annex 1b, to enhance interpretation of the patients seen time series data. As a result, the sub-national patients seen information for the 24 month period ending 30 June 2008 is included as usual. Furthermore, the sub-national data for the 24 month period ending 31 March 2008, originally omitted from the 2007/08 report, are included in the annexes to this report.

The national patients seen numbers for the 24 month period ending 31 March 2008, originally labelled as provisional are now final. The corresponding information presented as a percentage of the population has been revised in line with the usual processes to use updated Office for National Statistics (ONS) population figures. More information is available in Annex 1b.

Introduction

1. The NHS Information Centre publishes regular information on NHS primary care dental services. Detailed reports which cover each financial year are supported by quarterly updates. The data in this report are drawn from reports compiled by the Dental Services Division, part of the NHS Business Services Authority (NHS BSA), using data collected via FP17 forms.
2. This report considers NHS dental activity in England under the new contractual arrangements which started on 1 April 2006. The latest information relates to the first quarter of 2008/09, up to and including 30 June 2008. The data are presented by the Primary Care Trust (PCT) boundaries which came into effect on 1 October 2006.

What information is in the report?

3. The report covers NHS dental treatment much of which is undertaken by 'high street dentists'. This includes work undertaken by dentists and also vocational dental practitioners (VDPs). It does not cover private work carried out by dentists. It looks at:
 - Activity - the number of Courses of Treatment (CoTs) delivered by treatment band and by Strategic Health Authority, and the Units of Dental Activity (UDAs) this represents.
 - Patients seen (the number of patients who received care or treatment).
4. As in 2007/08, a full range of information will be available in the end of year report for 2008/09, which is due to be published in August 2009. Workforce and patient charge information are currently reported on an annual basis.

Why is this information important?

5. Primary Care Trusts (PCTs) have responsibility for commissioning primary care dental services to meet the needs of their local populations and carry this out by contracting with local dental providers for an agreed annual level of dental services. The NHS services are delivered through independent contractors and salaried dentists.

Activity

6. Dental activity is measured through the number of Courses of Treatment (CoTs) delivered and the number of Units of Dental Activity (UDAs) this represents. When a patient first goes to the dentist, the dentist determines the amount of preventative/restorative work required. The patient then starts what is known as a Course of Treatment. Each Course of Treatment is made up of a given number of Units of Dental Activity. PCTs monitor these through the year to ensure that the activity the local NHS has contracted for is delivered.
7. The activity data in the report consists of General Dental Services (GDS), Personal Dental Services (PDS) and Trust-led Dental Services (TDS). Dentists can work under several different GDS/PDS/TDS contracts. Hence, the activity information in this report has not been split between GDS, PDS and TDS. TDS includes salaried dentists. The data includes activity recorded by performing dentists and also vocational dental practitioners (VDPs). The report does not cover Hospital Dental Services or services provided privately, and activity data excludes orthodontic work.
8. Courses of Treatment fall into three main bands (based on the complexity of the most complex aspect of the treatment). Band 1 covers a check up and simple treatment (such as examination, diagnosis (e.g. x-rays), advice on preventative measures, and a scale and polish), Band 2 includes further mid range treatments (such as fillings, extractions, and root canal work) in addition to Band 1 work, and Band 3 includes further complex treatments (such as crowns, dentures, and bridges) in addition to Band 1 and Band 2 work.
9. There is also a separate Urgent Band which includes a specified set of possible treatments provided to a patient in circumstances where:
 - prompt care and treatment is provided because, in the opinion of the dental practitioner, that person's oral health is likely to deteriorate significantly, or the person is in severe pain by reason of their oral condition; and
 - Care and treatment is provided only to the extent that it is necessary to prevent that significant deterioration or address that severe pain.
10. Treatments that occur in Bands 1 - 3 and in the Urgent Band attract a patient charge where appropriate.
11. There are also 'Other' bands which do not attract a patient charge. These consist of arrest of bleeding, bridge repairs, denture repair, removal of sutures, and prescription issues.
12. PCTs and others need to know how many Courses of Treatment fall into each band in order to understand and plan appropriate service provision.

Patients seen

13. It is important for PCTs and others to know how many patients are being treated as the number of courses of treatment delivered is not the same as the number of individual patients treated. This is why the report also includes information on the number of individual patients who receive care or treatment from an NHS dentist at least once in the most recent 24-month period. Unlike the activity data, orthodontic work is captured by the patient seen measure. The National Institute for Health and Clinical Excellence (NICE) recommends that patients are recalled for check ups at intervals of three months to 24 months depending on the individual's oral health status.

Activity

Summary

The latest activity information is provisional and will subsequently be revised upwards to account for Courses of Treatment reported too late for inclusion in this report. At this stage, activity data for quarter 1 of 2008/09 is based on provisional data whereas data for earlier quarters is based on final data. Final figures for 2008/09 are expected to be published in August 2009.

For Quarter 1 in 2007/08 the increase between the provisional and final figures was 1.7 per cent for CoTs and 1.8 per cent for UDAs. This suggests that comparisons with the final figures for the first quarter of 2007/08 will produce an underestimate of change. Further details can be found in Annex 1a.

In the first quarter of 2008/09:

Courses of Treatment

- There were provisionally 9.2 million Courses of Treatment (CoTs) carried out in England, an increase of 125,100 (1.4 per cent) on the final figure for the first quarter of 2007/08. Last year the final figure for the same quarter was 1.7 per cent higher than the provisional figure.
- Band 1 accounted for more than half of the CoTs carried out (53.9 per cent). Band 2 was the next most common treatment band accounting for 30.4 per cent, while 4.6 per cent of CoTs were within Band 3. The remaining 11.2 per cent of CoTs were for Urgent and Other (charge exempt) treatments.

Units of Dental Activity

- There were provisionally 19.5 million Units of Dental Activity (UDAs) carried out in England, an increase of 549,300 (2.9 per cent) on the final figures for the first quarter of 2007/08. Last year the final figure for the same quarter was 1.8 per cent higher than the provisional figure.
- UDAs within Band 2 accounted for 42.9 per cent of all UDAs. Band 3 treatments accounted for a further 25.9 per cent of all UDAs, and Band 1 accounted for 25.3 per cent. Of the remainder, Band 1 Urgent UDAs accounted for 4.9 per cent of the total and Other (charge exempt) UDAs accounted for 0.9 per cent. These figures contrast with the figures for CoTs where more than half were within Band 1, and reflect the fact that simpler treatments (such as Band 1) represent fewer UDAs.

Activity

14. Quarterly activity figures from 2007/08 onwards are based on a revised methodology to that used to produce figures in 2006/07. Activity is now measured as the number of Courses of Treatment which end within any given quarter of the year. Previously, it had been measured as the number of activity report forms processed by the Dental Services Division of the NHS Business Services Authority within that quarter, of which some forms may have related to Courses of Treatment carried out in earlier quarters.
15. Quarterly activity data for 2006/07, based on the old methodology, are not presented as they would not be comparable with the quarterly figures for 2007/08. However, the data for Quarter 1 of 2008/09 are on a comparable methodology with Quarter 1 of 2007/08.
16. The latest activity information is provisional and will subsequently be revised upwards to account for Courses of Treatment reported too late for inclusion in this report. At this stage, activity data for quarter 1 of 2008/09 is based on provisional data whereas data for earlier quarters is based on final data. Final figures for 2008/09 are expected to be published in August 2009.
17. For Quarter 1 in 2007/08 the increase between the provisional and final figures was 1.7 per cent for CoTs and 1.8 per cent for UDAs. This suggests that comparisons with the final figures for the first quarter of 2007/08 will produce an underestimate of change. Further details can be found in Annex 1a.

Courses of Treatment¹ (CoTs)

18. A CoT is defined as²:
 - (a) an examination of a patient, an assessment of their oral health, and the planning of any treatment to be provided to that patient as a result of that examination and assessment; and
 - (b) The provision of any planned treatment (including any treatment planned at a time other than the time of the initial examination) to that patient.
19. There are also Urgent CoTs which include a specified set of possible treatments provided to a patient in circumstances where:
 - prompt care and treatment is provided because, in the opinion of the dental practitioner, that person's oral health is likely to deteriorate significantly, or the person is in severe pain by reason of their oral condition; and
 - Care and treatment is provided only to the extent that it is necessary to prevent that significant deterioration or address that severe pain.

¹ For more detailed definitions of Courses of Treatment (CoTs), please see Annex 1a.

² For further information see Dental Services Regulations http://www.dpb.nhs.uk/other/pubs_regs.shtml

20. Table 1 shows that in the first quarter of 2008/09, there were provisionally 9.2 million Courses of Treatment (CoTs) carried out in England, an increase of 125,100 (1.4 per cent) on the final figure for the first quarter of 2007/08. For Quarter 1 in 2007/08 the increase between the provisional and final figures was 1.7 per cent. The percentage change in the number of CoTs carried out in each band varied from a 0.4 per cent decrease in Band 1 treatments to a 5.6 per cent increase in Band 3 treatments.

Table 1: CoTs by treatment band and quarter, 2007/08 and 2008/09

No. of CoTs		Thousands / Per cent					
		Band 1	Band 2	Band 3	Urgent	Other	Total
2007/08	Q1	4,964	2,704	399	762	222	9,051
	Q2	4,794	2,695	401	779	223	8,892
	Q3	4,698	2,740	442	800	228	8,909
	Q4	4,819	2,853	442	793	229	9,135
	Total	19,275	10,992	1,685	3,133	902	35,987
2008/09	Q1	4,943	2,789	422	796	226	9,176
Change in No. CoTs 07/08 Q1 to 08/09 Q1		-21.8	85.4	22.5	34.5	4.5	125.1
Percentage change 07/08 Q1 to 08/09 Q1		-0.4	3.2	5.6	4.5	2.0	1.4

Notes:

1. Other consists of arrest of bleeding, bridge repairs, denture repairs, removal of sutures and prescription issue.

2. All quarterly activity data for the latest year remains provisional until the end of the year, when it is revised upwards for a final time to account for Courses of Treatment reported too late for inclusion in the latest quarterly report. Final figures for the latest year are expected to be published in the August following the end of the year.

21. Table 2 and Figure 1 show that in the first quarter of 2008/09, Band 1 accounted for more than half of the CoTs carried out (53.9 per cent). Band 2 was the next most common treatment band accounting for 30.4 per cent, while 4.6 per cent of CoTs were within Band 3. The remaining 11.2 per cent of CoTs were for Urgent and Other (charge exempt) treatments. The proportion of CoTs accounted for by Band 1 CoTs dropped by 1.0 percentage point from the 54.9 per cent of CoTs carried out in the first quarter of 2007/08. The proportion of CoTs carried out under Band 2, Band 3, and Urgent treatment bands increased by 0.5, 0.2, and 0.3 percentage points, respectively.

Table 2: Proportion of CoTs by treatment band and quarter, 2007/08 and 2008/09

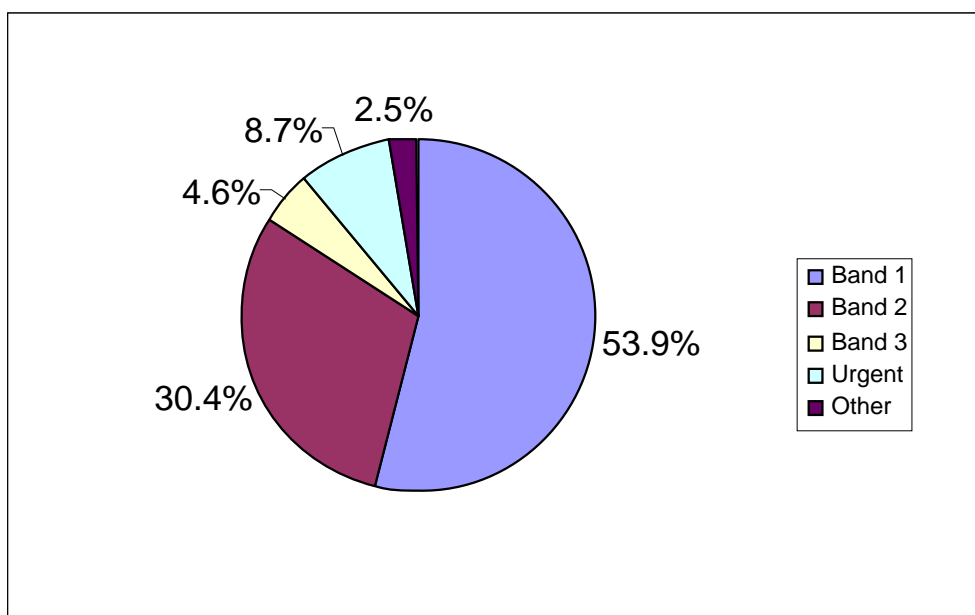
Proportion of CoTs		Per cent					
		Band 1	Band 2	Band 3	Urgent	Other	Total
2007/08	Q1	54.9	29.9	4.4	8.4	2.4	100
	Q2	53.9	30.3	4.5	8.8	2.5	100
	Q3	52.7	30.8	5.0	9.0	2.6	100
	Q4	52.7	31.2	4.8	8.7	2.5	100
	Total	53.6	30.5	4.7	8.7	2.5	100
2008/09	Q1	53.9	30.4	4.6	8.7	2.5	100
Percentage point change 07/08 Q1 to 08/09 Q1		-1.0	0.5	0.2	0.3	0.0	0.0

Notes:

1. Other consists of arrest of bleeding, bridge repairs, denture repairs, removal of sutures and prescription issue.

2. All quarterly activity data for the latest year remains provisional until the end of the year, when it is revised upwards for a final time to account for Courses of Treatment reported too late for inclusion in the latest quarterly report. Final figures for the latest year are expected to be published in the August following the end of the year.

Figure 1: Proportion of CoTs by treatment band, 2008/09 Q1



22. Table 3 shows that the number of CoTs performed in the first quarter of 2008/09 increased from the number of CoTs performed in the same quarter of 2007/08 across nearly all Strategic Health Authorities (SHAs). It would be reasonable to assume that all SHAs are likely to have shown an increase once treatments reported late corresponding to first quarter of 2008/09 are accounted for.

Table 3: CoTs by SHA, 2007/08 Q1 and 2008/09 Q1

No. of CoTs	Thousands / Per cent		
	2007/08 Q1	2008/09 Q1	% Change 07/08 Q1 to 08/09 Q1
England	9,051	9,176	1.4
North East	523	533	2.0
North West	1,355	1,380	1.8
Yorkshire and The Humber	1,029	1,053	2.4
East Midlands	823	839	1.9
West Midlands	996	1,013	1.7
East of England	1,052	1,054	0.2
London	1,047	1,046	-0.1
South East Coast	693	694	0.1
South Central	595	615	3.4
South West	938	950	1.3

Notes:

1. Other consists of arrest of bleeding, bridge repairs, denture repairs, removal of sutures and prescription issue.
2. All quarterly activity data for the latest year remains provisional until the end of the year, when it is revised upwards for a final time to account for Courses of Treatment reported too late for inclusion in the latest quarterly report. Final figures for the latest year are expected to be published in the August following the end of the year.

23. Tables 4 and 5 below show that the number and proportion of CoTs by treatment band varied by SHA. London SHA had the lowest proportion of CoTs carried out in Band 1 (44.2 per cent) but the highest proportion in Bands 2 and 3 (35.6 per cent and 7.7 per cent, respectively). South Central SHA had the highest proportion of Band 1 treatments (58.7 per cent). The proportion of CoTs carried out in the Urgent treatment band was highest in North West SHA (10.1 per cent) and lowest in South Central SHA (1.8 per cent).

Table 4: CoTs by treatment band and SHA, 2008/09 Q1

No. of CoTs	Thousands					
	Band 1	Band 2	Band 3	Urgent	Other	Total
England	4,943	2,789	422	796	226	9,176
North East	272	168	28	48	17	533
North West	722	415	66	140	37	1,380
Yorkshire and The Humber	580	318	43	82	31	1,053
East Midlands	486	243	32	59	19	839
West Midlands	558	299	51	80	25	1,013
East of England	592	310	41	86	25	1,054
London	462	373	80	104	26	1,046
South East Coast	383	206	29	62	13	694
South Central	361	170	20	53	11	615
South West	529	288	31	82	20	950

Notes:

1. Other consists of arrest of bleeding, bridge repairs, denture repairs, removal of sutures and prescription issue.
2. All quarterly activity data for the latest year remains provisional until the end of the year, when it is revised upwards for a final time to account for Courses of Treatment reported too late for inclusion in the latest quarterly report. Final figures for the latest year are expected to be published in the August following the end of the year.

Table 5: Proportion of CoTs by treatment band and SHA, 2008/09 Q1

Proportion of CoTs	Per cent					
	Band 1	Band 2	Band 3	Urgent	Other	Total
England	53.9	30.4	4.6	8.7	2.5	100
North East	50.9	31.6	5.3	8.9	3.3	100
North West	52.3	30.1	4.8	10.1	2.7	100
Yorkshire and The Humber	55.1	30.2	4.0	7.8	3.0	100
East Midlands	57.9	28.9	3.8	7.1	2.3	100
West Midlands	55.1	29.5	5.0	7.9	2.5	100
East of England	56.2	29.4	3.9	8.2	2.4	100
London	44.2	35.6	7.7	10.0	2.5	100
South East Coast	55.2	29.7	4.2	8.9	1.9	100
South Central	58.7	27.7	3.2	8.7	1.8	100
South West	55.6	30.3	3.3	8.6	2.1	100

Notes:

1. Other consists of arrest of bleeding, bridge repairs, denture repairs, removal of sutures and prescription issue.
2. All quarterly activity data for the latest year remains provisional until the end of the year, when it is revised upwards for a final time to account for Courses of Treatment reported too late for inclusion in the latest quarterly report. Final figures for the latest year are expected to be published in the August following the end of the year.

Units of Dental Activity³

24. A Unit of Dental Activity (UDA) is the technical term used in the new NHS dental contract system regulations to describe weighted CoTs. Further details are provided in Annex 1a.
25. Table 6 shows that in the first quarter of 2008/09, there were provisionally 19.5 million Units of Dental Activity (UDAs) carried out in England, an increase of 549,300 (2.9 per cent) on the final figures for the first quarter of 2007/08. Last year the final figure for the same quarter was 1.8 per cent higher than the provisional figure.

Table 6: UDAs by treatment band and quarter, 2007/08 and 2008/09

No. of UDAs		Thousands / Per cent					Total
		Band 1	Band 2	Band 3	Urgent	Other	
2007/08	Q1	4,964	8,111	4,793	914	181	18,963
	Q2	4,794	8,085	4,813	935	182	18,808
	Q3	4,698	8,221	5,309	960	186	19,374
	Q4	4,819	8,560	5,299	951	187	19,816
	Total	19,275	32,976	20,214	3,760	736	76,961
2008/09	Q1	4,943	8,367	5,063	955	184	19,512
Change in No. UDAs 07/08 Q1 to 08/09 Q1		-21.8	256.2	270.5	41.4	3.0	549.3
Percentage change 07/08 Q1 to 08/09 Q1		-0.4	3.2	5.6	4.5	1.7	2.9

Notes:

1. Other consists of arrest of bleeding, bridge repairs, denture repairs, removal of sutures and prescription issue.
2. All quarterly activity data for the latest year remains provisional until the end of the year, when it is revised upwards for a final time to account for Courses of Treatment reported too late for inclusion in the latest quarterly report. Final figures for the latest year are expected to be published in the August following the end of the year.

³ For a detailed definition of UDAs and the weighting structure, please see Annex 1.

26. Table 7 and Figure 2 show that in the first quarter of 2008/09, UDAs within Band 2 accounted for 42.9 per cent of all UDAs. Band 3 UDAs accounted for a further 25.9 per cent of all UDAs, and Band 1 accounted for 25.3 per cent. Of the remainder, Band 1 Urgent UDAs accounted for 4.9 per cent of the total and Other (charge exempt) UDAs accounted for 0.9 per cent.

27. These figures contrast with the figures for CoTs where more than half were within Band 1, and reflect the fact that simpler treatments (such as Band 1) represent fewer UDAs. The proportion of all UDAs accounted for by Band 1 UDAs dropped by 0.8 percentage points on the 26.2 per cent of UDAs carried out in the first quarter of 2007/08. The proportion of all UDAs carried out under Band 2, Band 3 and Urgent treatment bands increased by 0.1, 0.7, and 0.1 percentage points, respectively.

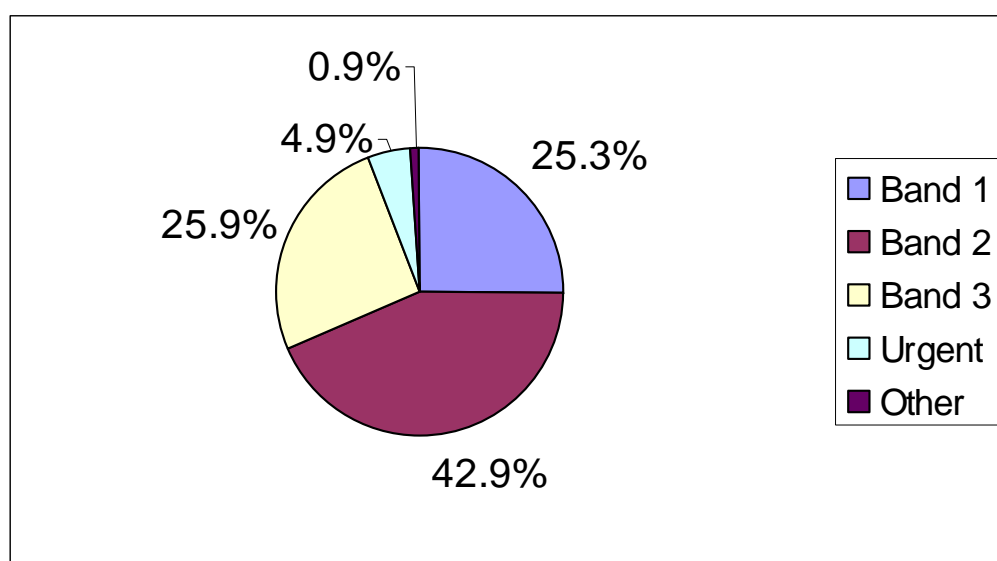
Table 7: Proportion of UDAs by treatment band and quarter, 2007/08 and 2008/09

Proportion of UDAs		Per cent					
		Band 1	Band 2	Band 3	Urgent	Other	Total
2007/08	Q1	26.2	42.8	25.3	4.8	1.0	100
	Q2	25.5	43.0	25.6	5.0	1.0	100
	Q3	24.3	42.4	27.4	5.0	1.0	100
	Q4	24.3	43.2	26.7	4.8	0.9	100
	Total	25.0	42.8	26.3	4.9	1.0	100
2008/09	Q1	25.3	42.9	25.9	4.9	0.9	100
Percentage point change 07/08 Q1 to 08/09 Q1		-0.8	0.1	0.7	0.1	0.0	0

Notes:

1. Other consists of arrest of bleeding, bridge repairs, denture repairs, removal of sutures and prescription issue.
2. All quarterly activity data for the latest year remains provisional until the end of the year, when it is revised upwards for a final time to account for Courses of Treatment reported too late for inclusion in the latest quarterly report. Final figures for the latest year are expected to be published in the August following the end of the year.

Figure 2: Proportion of UDAs by treatment band, 2008/09 Q1



28. Table 8 shows that the number of UDAs carried out in the first quarter of 2008/09 increased across all SHAs from the number of UDAs carried out in the first quarter of 2007/08. The percentage increase ranged from 1.0 per cent in London SHA to 4.2 per cent in Yorkshire and The Humber SHA.

Table 8: UDAs by SHA, 2007/08 Q1 and 2008/09 Q1

No. of UDAs	Thousands / Per cent		
	2007/08 Q1	2008/09 Q1	% Change 07/08 Q1 to 08/09 Q1
England	18,963	19,512	2.9
North East	1,150	1,185	3.0
North West	2,877	2,956	2.8
Yorkshire and The Humber	2,079	2,167	4.2
East Midlands	1,634	1,688	3.3
West Midlands	2,099	2,183	4.0
East of England	2,095	2,139	2.1
London	2,666	2,692	1.0
South East Coast	1,404	1,438	2.4
South Central	1,139	1,180	3.7
South West	1,820	1,883	3.4

Notes:

1. Other consists of arrest of bleeding, bridge repairs, denture repairs, removal of sutures and prescription issue.
2. All quarterly activity data for the latest year remains provisional until the end of the year, when it is revised upwards for a final time to account for Courses of Treatment reported too late for inclusion in the latest quarterly report. Final figures for the latest year are expected to be published in the August following the end of the year.

29. Tables 9 and 10 show that the number and proportion of UDAs by treatment band varied by SHA. South Central SHA had the highest proportion of UDAs in Band 1 at 30.6 per cent while London SHA had the lowest at 17.2 per cent. Band 2 UDAs ranged between 41.1 per cent in West Midlands SHA to 45.9 per cent in South West SHA while Band 3 UDAs ranged from 20.0 per cent in South West SHA to 35.9 per cent in London SHA. East Midlands SHA had the lowest percentage of UDAs from Urgent treatments at 4.2 per cent while North West SHA had the highest at 5.7 per cent.

Table 9: UDAs by treatment band and SHA, 2008/09 Q1

No. of UDAs	Thousands					
	Band 1	Band 2	Band 3	Urgent	Other	Total
England	4,943	8,367	5,063	955	184	19,512
North East	272	505	336	57	14	1,185
North West	722	1,245	792	168	30	2,956
Yorkshire and The Humber	580	953	511	98	25	2,167
East Midlands	486	728	388	71	16	1,688
West Midlands	558	897	613	96	21	2,183
East of England	592	929	495	103	20	2,139
London	462	1,118	966	125	21	2,692
South East Coast	383	619	351	74	11	1,438
South Central	361	510	237	64	9	1,180
South West	529	863	376	98	17	1,883

Notes:

1. Other consists of arrest of bleeding, bridge repairs, denture repairs, removal of sutures and prescription issue.
2. All quarterly activity data for the latest year remains provisional until the end of the year, when it is revised upwards for a final time to account for Courses of Treatment reported too late for inclusion in the latest quarterly report. Final figures for the latest year are expected to be published in the August following the end of the year.

Table 10: Proportion of UDAs by treatment band and SHA, 2008/09 Q1

Proportion of UDAs	Per cent					
	Band 1	Band 2	Band 3	Urgent	Other	Total
England	25.3	42.9	25.9	4.9	0.9	100
North East	22.9	42.7	28.4	4.8	1.2	100
North West	24.4	42.1	26.8	5.7	1.0	100
Yorkshire and The Humber	26.8	44.0	23.6	4.5	1.2	100
East Midlands	28.8	43.1	23.0	4.2	0.9	100
West Midlands	25.6	41.1	28.1	4.4	0.9	100
East of England	27.7	43.4	23.1	4.8	0.9	100
London	17.2	41.5	35.9	4.6	0.8	100
South East Coast	26.6	43.0	24.4	5.2	0.8	100
South Central	30.6	43.2	20.1	5.4	0.8	100
South West	28.1	45.9	20.0	5.2	0.9	100

Notes:

1. Other consists of arrest of bleeding, bridge repairs, denture repairs, removal of sutures and prescription issue.
2. All quarterly activity data for the latest year remains provisional until the end of the year, when it is revised upwards for a final time to account for Courses of Treatment reported too late for inclusion in the latest quarterly report. Final figures for the latest year are expected to be published in the August following the end of the year.

Patients Seen

Summary

In the 24 month period ending 30 June 2008:

- 26.9 million patients were seen by an NHS dentist, equivalent to 52.7 per cent of the population. This is a decrease of 1.2 million (4.3 per cent) on the 28.1 million patients seen in the 24 month period ending 31 March 2006, equivalent to 55.8 per cent of the population at that time.
- 19.3 million adults (aged 18 and over) were seen by an NHS dentist, equivalent to 48.3 per cent of the adult population. This is a decrease of 1.0 million (4.9 per cent) on the 20.3 million adults seen in the 24 month period ending 31 March 2006, equivalent to 51.6 per cent of the adult population at that time.
- 7.6 million children were seen by an NHS dentist, equivalent to 69.0 per cent of the child population. This is a decrease of 209,800 (2.7 per cent) on the 7.8 million children seen in the 24 month period ending 31 March 2006, equivalent to 70.7 per cent of the child population at the time.
- The percentage of the population that had seen an NHS dentist varied between Strategic Health Authorities (SHAs), with a higher percentage of patients seen in northern SHAs than southern SHAs. The percentage of the population seen varied from 44.3 per cent in South Central SHA to 60.6 per cent in North East SHA.

Sub-national information on patients seen was not published on 21 August 2008 as part of the end of year NHS Dental Statistics for England 2007/08 report, due to concerns over the allocation of patients to PCTs across the various quarters. This issue was considered to have only a minimal impact on national figures which were included but labelled as provisional until the issue could be investigated.

These concerns have been examined by the NHS Information Centre in liaison with the Dental Services Division of the NHS Business Services Authority and have been addressed by the inclusion of additional technical information, available in Annex 1b, to enhance interpretation of the patients seen time series data. As a result, the sub-national patients seen information for the 24 month period ending 30 June 2008 is included as usual. Furthermore, the sub-national data for the 24 month period ending 31 March 2008, originally omitted from the 2007/08 report, are included in the annexes to this report.

The national patients seen numbers for the 24 month period ending 31 March 2008, originally labelled as provisional are now final. The corresponding information presented as a percentage of the population has been revised in line with the usual processes to use updated Office for National Statistics (ONS) population figures. More information is available in Annex 1b.

Patients Seen⁴

30. Tables 11 and 12 below show that in the 24 month period ending 30 June 2008, 26.9 million patients were seen by an NHS dentist, equivalent to 52.7 per cent of the population. This is a decrease of 1.2 million (4.3 per cent) on the 28.1 million patients seen in the 24 month period ending 31 March 2006, equivalent to 55.8 per cent of the population at that time.
31. 19.3 million adults (aged 18 and over) were seen by an NHS dentist in the 24 month period ending 30 June 2008, equivalent to 48.3 per cent of the adult population. This is a decrease of 1.0 million (4.9 per cent) on the 20.3 million adults seen in the 24 month period ending 31 March 2006, equivalent to 51.6 per cent of the adult population at that time.
32. 7.6 million children were seen by an NHS dentist in the 24 month period ending 30 June 2008, equivalent to 69.0 per cent of the child population. This is a decrease of 209,800 (2.7 per cent) on the 7.8 million children seen in the 24 month period ending 31 March 2006, equivalent to 70.7 per cent of the child population at the time.

Table 11: Number of patients seen in the previous 24 months as at specified dates, March 2006 to June 2008

No. of Patients Seen	Thousands / Per cent						
	31-Mar-06	31-Mar-08	30-Jun-08	Change March 06 to June 08	Change March 08 to June 08	% Change March 06 to June 08	% Change March 08 to June 08
Total	28,145	27,049	26,935	-1,210	-115	-4.3	-0.4
Adults	20,348	19,435	19,348	-1,000	-87	-4.9	-0.4
Children	7,797	7,615	7,587	-210	-28	-2.7	-0.4

Table 12: Proportion of patients seen in the previous 24 months as at specified dates, March 2006 to June 2008

Proportion of Patients Seen	Per cent				
	31-Mar-06	31-Mar-08	30-Jun-08	% Point Change March 06 to June 08	% Point Change March 08 to June 08
Total	55.8	52.9	52.7	-3.1	-0.2
Adults	51.6	48.5	48.3	-3.4	-0.2
Children	70.7	69.3	69.0	-1.6	-0.3

Note: The population estimates used to calculate patients seen rates are applied annually. This results in a step change between the patients seen rates for 31 December and 31 March. The previously published rates from 31 March 2007 to 31 March 2008 have been revised as a result of revisions to the 2006 ONS population estimates and the availability of 2007 estimates. See Annex 1b for further details.

⁴ A more detailed explanation of the patients seen measure can be found in Annex 1b.

33. Tables 13 and 14 show the number of patients seen and the number of patients seen as a percentage of the population at the time in each 24 month period, by quarter since 31 March 2006.

Table 13: Number of patients seen in the previous 24 months as at quarterly intervals, March 2006 to June 2008

	No. of Patients Seen			Thousands
	30 June (end Q1)	30 Sept (end Q2)	31 Dec (end Q3)	31 March (end Q4)
2005/06	-	-	-	28,145
2006/07	28,068	28,084	28,076	28,098
2007/08	27,879	27,602	27,264	27,049
2008/09	26,935			

Table 14: Proportion of patients seen in the previous 24 months as at quarterly intervals, March 2006 to June 2008

	Proportion of Patients Seen				Per cent
	30 June (end Q1)	30 Sept (end Q2)	31 Dec (end Q3)	31 March (end Q4)	
2005/06	-	-	-	-	55.8
2006/07	55.6	55.6	55.6	55.6	55.4
2007/08	54.9	54.4	53.7	52.9	
2008/09	52.7				

Note: The population estimates used to calculate patients seen rates are applied annually. This results in a step change between the patients seen rates for 31 December and 31 March. The previously published rates from 31 March 2007 to 31 March 2008 have been revised as a result of revisions to the 2006 ONS population estimates and the availability of 2007 estimates. See Annex 1b for further details.

34. Tables 15 and 16 show the number of adults seen and the number of adults seen as a percentage of the adult population at the time in each 24 month period, by quarter since 31 March 2006.

Table 15: Number of adult patients seen in the previous 24 months as at quarterly intervals, March 2006 to June 2008

	No. of Adults Seen			Thousands
	30 June (end Q1)	30 Sept (end Q2)	31 Dec (end Q3)	31 March (end Q4)
2005/06	-	-	-	20,348
2006/07	20,301	20,302	20,290	20,285
2007/08	20,101	19,873	19,608	19,435
2008/09	19,348			

Table 16: Proportion of adult patients seen in the previous 24 months as at quarterly intervals, March 2006 to June 2008

	Proportion of Adults Seen			Per cent
	30 June (end Q1)	30 Sept (end Q2)	31 Dec (end Q3)	31 March (end Q4)
2005/06	-	-	-	51.6
2006/07	51.5	51.5	51.5	51.0
2007/08	50.5	50.0	49.3	48.5
2008/09	48.3			

Note: The population estimates used to calculate patients seen rates are applied annually. This results in a step change between the patients seen rates for 31 December and 31 March. The previously published rates from 31 March 2007 to 31 March 2008 have been revised as a result of revisions to the 2006 ONS population estimates and the availability of 2007 estimates. See Annex 1b for further details.

35. Tables 17 and 18 show the number of children seen and the number of children seen as a percentage of the child population at the time in each 24 month period, by quarter since 31 March 2006.

Table 17: Number of child patients seen in the previous 24 months by quarter, England, March 2006 to June 2008

No. of Children Seen	Thousands			
	30 June (end Q1)	30 Sept (end Q2)	31 Dec (end Q3)	31 March (end Q4)
2005/06	-	-	-	7,797
2006/07	7,767	7,781	7,786	7,813
2007/08	7,778	7,729	7,655	7,615
2008/09	7,587			

Table 18: Proportion of child patients seen in the previous 24 months as at quarterly intervals, March 2006 to June 2008

Proportion of Children Seen	Per cent			
	30 June (end Q1)	30 Sept (end Q2)	31 Dec (end Q3)	31 March (end Q4)
2005/06	-	-	-	70.7
2006/07	70.4	70.5	70.6	71.0
2007/08	70.7	70.3	69.6	69.3
2008/09	69.0			

Note: The population estimates used to calculate patients seen rates are applied annually. This results in a step change between the patients seen rates for 31 December and 31 March. The previously published rates from 31 March 2007 to 31 March 2008 have been revised as a result of revisions to the 2006 ONS population estimates and the availability of 2007 estimates. See Annex 1b for further details.

36. Table 19 shows number of patients seen decreased in all SHAs in the 24 month period ending 30 June 2008 from the number of patients seen in the 24 month period ending 31 March 2006. The percentage decrease varied by SHA, ranging from a 1.6 per cent decrease in North West SHA to a 7.5 per cent decrease in East Midlands SHA.

Table 19: Number of patients seen in the previous 24 months as at specified dates by SHA, March 2006 to June 2008

No. of Patients Seen	Thousands / Per cent						
	31-Mar-06	31-Mar-08	30-Jun-08	Change March 06 to June 08	Change March 08 to June 08	% Change March 06 to June 08	% Change March 08 to June 08
England	28,145	27,049	26,935	-1,210	-115	-4.3	-0.4
North East	1,625	1,565	1,553	-72	-12	-4.4	-0.8
North West	4,081	4,032	4,015	-66	-17	-1.6	-0.4
Yorkshire and The Humber	2,984	2,942	2,935	-49	-7	-1.7	-0.2
East Midlands	2,515	2,335	2,326	-189	-8	-7.5	-0.3
West Midlands	3,085	2,969	2,957	-128	-12	-4.2	-0.4
East of England	3,214	3,075	3,056	-158	-19	-4.9	-0.6
London	3,890	3,664	3,635	-255	-29	-6.6	-0.8
South East Coast	2,170	2,027	2,019	-151	-8	-7.0	-0.4
South Central	1,868	1,787	1,785	-83	-2	-4.4	-0.1
South West	2,711	2,654	2,653	-59	-1	-2.2	0.0

37. Table 20 below shows that the percentage of the population that had seen an NHS dentist in the 24 month period ending 30 June 2008 varied between Strategic Health Authorities (SHAs), with a higher percentage of patients seen in northern SHAs than southern SHAs. The percentage of the population seen varied from 44.3 per cent in South Central SHA to 60.6 per cent in North East SHA.

Table 20: Proportion of patients seen in the previous 24 months as at specified dates by SHA, March 2006 to June 2008

Proportion of Patients Seen				Per cent	
				% Point change	% Point change
	31-Mar-06	31-Mar-08	30-Jun-08	March 06 to June 08	March 08 to June 08
England	55.8	52.9	52.7	-3.1	-0.2
North East	63.7	61.0	60.6	-3.2	-0.5
North West	59.7	58.7	58.5	-1.2	-0.2
Yorkshire and The Humber	58.4	56.8	56.7	-1.7	-0.1
East Midlands	58.1	53.1	52.9	-5.2	-0.2
West Midlands	57.7	55.2	54.9	-2.7	-0.2
East of England	57.8	54.3	54.0	-3.8	-0.3
London	52.2	48.5	48.1	-4.1	-0.4
South East Coast	51.4	47.3	47.1	-4.3	-0.2
South Central	47.1	44.4	44.3	-2.8	0.0
South West	53.3	51.3	51.2	-2.1	0.0

Note: The population estimates used to calculate patients seen rates are applied annually. This results in a step change between the patients seen rates for 31 December and 31 March. The previously published rates from 31 March 2007 to 31 March 2008 have been revised as a result of revisions to the 2006 ONS population estimates and the availability of 2007 estimates. See Annex 1b for further details.

38. Table 21 below shows the number of adults seen decreased in all SHAs in the 24 month period ending 30 June 2008 from the number of adults seen in the 24 month period ending 31 March 2006. The percentage decrease varied by SHA, ranging from a 1.1 per cent decrease in South West SHA to 9.3 per cent decrease in East Midlands SHA.

Table 21: Number of adults seen in the previous 24 months as at specified dates by SHA, March 2006 to June 2008

No. of Adults Seen				Thousands / Per cent			
				Change	Change	% Change	% Change
	31-Mar-06	31-Mar-08	30-Jun-08	March 06 to June 08	March 08 to June 08	March 06 to June 08	March 08 to June 08
England	20,348	19,435	19,348	-1,000	-87	-4.9	-0.4
North East	1,225	1,172	1,162	-63	-10	-5.1	-0.9
North West	2,999	2,935	2,922	-78	-14	-2.6	-0.5
Yorkshire and The Humber	2,193	2,151	2,144	-48	-6	-2.2	-0.3
East Midlands	1,854	1,689	1,682	-172	-7	-9.3	-0.4
West Midlands	2,229	2,143	2,134	-95	-9	-4.3	-0.4
East of England	2,340	2,218	2,203	-137	-14	-5.8	-0.6
London	2,828	2,619	2,594	-234	-25	-8.3	-1.0
South East Coast	1,497	1,396	1,392	-105	-4	-7.0	-0.3
South Central	1,251	1,204	1,204	-47	0	-3.7	0.0
South West	1,931	1,907	1,909	-22	2	-1.1	0.1

39. Table 22 below shows that the percentage of the adult population that had seen an NHS dentist in the 24 month period ending 30 June 2008 varied between SHAs. The percentage of the adult population that had seen an NHS dentist varied from 38.2 per cent in South Central SHA to 57.2 per cent in North East SHA.

Table 22: Proportion of adults seen in the previous 24 months as at specified dates by SHA, March 2006 to June 2008

Proportion of Adults Seen	Per cent				
	31-Mar-06	31-Mar-08	30-Jun-08 to June 08	% Point change	% Point change
				March 06	March 08
England	51.6	48.5	48.3	-3.4	-0.2
North East	61.0	57.7	57.2	-3.8	-0.5
North West	56.4	54.7	54.5	-2.0	-0.3
Yorkshire and The Humber	55.0	52.9	52.8	-2.3	-0.2
East Midlands	54.7	48.7	48.6	-6.2	-0.2
West Midlands	53.9	51.2	51.0	-2.8	-0.2
East of England	53.9	50.0	49.7	-4.2	-0.3
London	48.4	44.2	43.8	-4.7	-0.4
South East Coast	45.4	41.6	41.4	-3.9	-0.1
South Central	40.5	38.3	38.3	-2.3	0.0
South West	48.0	46.3	46.3	-1.6	0.1

Note: The population estimates used to calculate patients seen rates are applied annually. This results in a step change between the patients seen rates for 31 December and 31 March. The previously published rates from 31 March 2007 to 31 March 2008 have been revised as a result of revisions to the 2006 ONS population estimates and the availability of 2007 estimates. See Annex 1b for further details.

40. Table 23 below shows that the number of children seen decreased in all SHAs, with the exception of North West SHA, in the 24 month period ending 30 June 2008 from the number of children seen in the 24 month period ending 31 March 2006. The percentage changes varied by SHA, ranging from a 6.9 per cent decrease in South East Coast SHA to a 1.1 per cent increase in North West SHA.

Table 23: Number of children seen in the previous 24 months as at specified dates by SHA, March 2006 to June 2008

No. of Children Seen	Per cent						
	31-Mar-06	31-Mar-08	30-Jun-08	Change	Change	% Change	% Change
				March 06 to June 08	March 08 to June 08	March 06 to June 08	March 08 to June 08
England	7,797	7,615	7,587	-210	-28	-2.7	-0.4
North East	400	393	391	-9	-2	-2.3	-0.5
North West	1,082	1,097	1,094	12	-3	1.1	-0.3
Yorkshire and The Humber	791	791	790	-1	-1	-0.1	-0.1
East Midlands	661	646	644	-17	-1	-2.6	-0.2
West Midlands	856	826	823	-33	-3	-3.9	-0.4
East of England	874	857	853	-21	-4	-2.4	-0.5
London	1,062	1,045	1,041	-21	-4	-2.0	-0.4
South East Coast	673	631	627	-46	-4	-6.9	-0.6
South Central	617	583	581	-36	-2	-5.8	-0.3
South West	780	747	743	-37	-3	-4.7	-0.5

41. Table 24 below shows that the percentage of the child population that had seen an NHS dentist in the 24 month period ending 30 June 2008 varied between SHAs. The percentage of the child population that had seen an NHS dentist varied from 63.9 per cent in London SHA to 73.5 per cent in North East SHA.

Table 24: Proportion of children seen in the previous 24 months as at specified dates by SHA, March 2006 to June 2008

Proportion of Children Seen				Per cent	
	31-Mar-06	31-Mar-08	30-Jun-08	% Point change March 06 to June 08	% Point change March 08 to June 08
England	70.7	69.3	69.0	-1.6	-0.3
North East	74.0	73.8	73.5	-0.5	-0.4
North West	71.0	73.2	73.0	2.0	-0.2
Yorkshire and The Humber	70.4	71.1	71.0	0.6	-0.1
East Midlands	70.4	69.0	68.9	-1.5	-0.1
West Midlands	70.7	68.8	68.6	-2.1	-0.3
East of England	71.5	69.9	69.5	-2.0	-0.3
London	65.7	64.2	63.9	-1.8	-0.3
South East Coast	73.1	68.2	67.8	-5.3	-0.4
South Central	70.3	66.2	66.0	-4.3	-0.2
South West	73.5	70.6	70.3	-3.2	-0.3

Note: The population estimates used to calculate patients seen rates are applied annually. This results in a step change between the patients seen rates for 31 December and 31 March. The previously published rates from 31 March 2007 to 31 March 2008 have been revised as a result of revisions to the 2006 ONS population estimates and the availability of 2007 estimates. See Annex 1b for further details.

Annex 1 – Technical Information

Annex 1a - Activity

Courses of Treatment (CoT)

1. Information on CoTs completed by an NHS dentist is submitted to the DSD on an FP17 form, the majority of which are submitted electronically. It is the information on these forms that is used to report the NHS activity of NHS dentists.
2. All FP17 forms show a date of acceptance (for when the CoT began) and a date of completion (for when the CoT ended), although there are circumstances where a completion date can not be entered, as is discussed shortly.
3. As an improvement to the previous methodology used, all reports from the 2006/07 year end publication onwards contain a revision to the methodology for measuring dental activity. Activity is now measured as the number of Courses of Treatment which end within any given quarter of the year. Previously, for quarterly reports in 2006/07, it had been measured as the number of activity report forms processed by the DSD within that quarter, of which some forms may have related to Courses of Treatment carried out in earlier quarters. Information on the number of patients seen is unaffected by the changes in measuring activity.
4. This change in methodology means that quarterly activity data in this report cannot be compared to the quarterly reports published during 2006/07. However, this 2008/09 quarterly report, and futures ones, allow for comparisons between 2008/09 and 2007/08.
5. The number of CoTs and UDAs carried out in the quarter, and comparisons with other quarters, are affected by a range of possible behavioural issues around the submission of FP17 claim forms, and also some technical issues, such as the number of working days in the quarter and the timing of Easter and other bank holidays, etc. The first quarter of 2008/09 didn't include Easter whilst the first quarter of 2007/08 did include Easter.
6. A CoT is defined as⁵:
 - (a) an examination of a patient, an assessment of their oral health, and the planning of any treatment to be provided to that patient as a result of that examination and assessment; and
 - (b) the provision of any planned treatment (including any treatment planned at a time other than the time of the initial examination) to that patient.
7. There are also Urgent CoTs which include a specified set of possible treatments provided to a patient in certain circumstances.

⁵ For further information see Dental Services Regulations http://www.dpb.nhs.uk/other/pubs_regs.shtml

8. Each CoT is associated with a single form (the FP17 form) which is submitted by dental providers to the DSD to perform its monitoring and payment functions. Under the old contractual arrangements each treatment activity was recorded. As from 1 April 2006, a Course of Treatment is banded according to the most complex treatment within the course. This restricts the comparisons that can be made between contracts.

9. The treatment bands range from Band 1, containing only simple treatments, to Band 3 containing the most complex treatment. There is also a separate Urgent band, and 'Other' bands. Treatments in Band 1 – 3 and Urgent attract a patient charge where appropriate.
 - Band 1 - covers a check up and simple treatment (such as examination, diagnosis (e.g. x-rays), advice on preventative measures, and a scale and polish)
 - Band 2 - includes further mid range treatments (such as fillings, extractions, and root canal work) in addition to Band 1 work
 - Band 3 - includes further complex treatments (such as crowns, dentures, and bridges) in addition to Band 1 and Band 2 work
 - Urgent - a specified set of possible treatments provided to a patient in circumstances where:
 - a) prompt care and treatment is provided because, in the opinion of the dental practitioner, that person's oral health is likely to deteriorate significantly, or the person is in severe pain by reason of their oral condition; and
 - b) care and treatment is provided only to the extent that is necessary to prevent that significant deterioration or address that severe pain.
 - Other CoTs are categorised into the following bands which do not attract a patient charge: Arrest of bleeding, bridge repairs, denture repair, removal of sutures, and prescription issues.

10. Banding reflects some of the differences between courses but there can still be significant differences between courses within bands in the amount of dental treatment. For example, a CoT with a few large fillings would have the same treatment band as one with a single small filling.

11. Full details of the treatments within each of the chargeable bandings can be found via the DH website on the following web link: <http://www.dh.gov.uk>

Units of Dental Activity (UDA)

12. A Unit of Dental Activity (UDA) is the technical term used in the new NHS dental contract system regulations to describe weighted CoTs.
13. Table A shows the weightings which are used to convert the CoT data to UDAs by band. Band 3 receives the highest weighting as it is where the most complex CoTs are classified.

Table A: UDAs for each treatment band

Treatment category	UDA
Band 1	1
Band 2	3
Band 3	12
Band 1 urgent	1.2
Arrest of bleeding	1.2
Bridge repair	1.2
Denture repair	1
Prescription issue	0.75
Removal of sutures	1

Impact of courses of treatment reported late on quarterly activity figures

14. The provisional number of CoTs (Courses of Treatment) and UDAs (Units of Dental Activity) for the first quarter of 2008/09 will increase over the year to include courses of treatment reported late. Final figures will appear in the end of year report, which is expected to be published in August 2009.
15. While we do not know what the increase will be, we have been able to consider the way in which quarterly figures for 2007/08 changed each time the figures were updated. It is not possible to make comparisons with the information for 2006/7 as the quarterly information was collected differently that year. It is reasonable to assume that local level increases, and increases for different treatment bands, may differ from these national averages.
16. Last year, the final figures were higher than the initial Q1 figures by 1.7 per cent for CoTs and 1.8 per cent for UDAs. This is the only year of data on which to make an assessment of late reporting and Table B suggests that as yet it is too early to be sure of the extent of late reporting in 2008/09. This means we cannot be certain of the extent to which the figures reported as provisional in this report will increase in the final report.

Table B: Provisional and final number of Courses of Treatment (CoTs)/Units of Dental Activity (UDAs) by quarter, 2007/08

		Thousands / Per Cent								
		2007/08 Q1								
	First Provisional	Second Provisional	Third Provisional	Final	% increase first to second provisional	% increase second to third provisional	% increase third provisional to final	% increase second provisional to final	% increase first provisional to final	
CoTs	8,902	8,999	9,034	9,051	1.1%	0.4%	0.2%	0.6%	1.7%	
UDAs	18,623	18,847	18,927	18,963	1.2%	0.4%	0.2%	0.6%	1.8%	
		2007/08 Q2								
CoTs	8,753	8,861	-	8,892	1.2%	-	-	0.4%	1.6%	
UDAs	18,485	18,736	-	18,808	1.4%	-	-	0.4%	1.7%	
		2007/08 Q3								
CoTs	8,834	-	-	8,909	-	-	-	-	0.9%	
UDAs	19,194	-	-	19,374	-	-	-	-	0.9%	

Annex 1b - Patients Seen

Methodology

17. The patients seen measure is not directly comparable with the patient registrations data collected under the old contract as it was measured over a 15 month period rather than 24 months using a different system and rule set.
18. Patients have been identified by using surname, first initial, gender and date of birth. Each unique patient ID is normally assigned to the dental contract (and therefore PCT) against which the most recent FP17 for routine treatment was recorded in the 24 month period. The age of the patient as at the last day of the 24 month period is used to allocate between adult and child.
19. This information is taken from the FP17 and the 24 month period is based on the date of validation processing at DSD. It is defined in terms of all CoTs (including GDS registration only courses prior to 1 April 2006). Each identified patient is counted only once even if he or she has received several episodes of care or treatment over the measured period. The measure is broken down separately for adults and children.
20. The count of patient IDs is a robust statistical indicator of the overall level of patient involvement with NHS primary dental care. As with the previous registration system there will be some duplications and omissions. Patients will be omitted if two or more share the same surname, initial, sex and date of birth. Patients may be counted twice if they have two or more episodes of care and their name is misspelled or changed (for example on marriage) between those episodes of care. The risk of duplication increases if the episodes of care are at different practices.
21. None of the above factors is likely to affect the overall count by more than one or two percent, but at a PCT level there may be local demographic factors which make the local total more susceptible, e.g. a high proportion of women changing names after marriage, a local concentration of surnames prone to be misspelled or a transient patient base.
22. The patients seen measure is produced using a filter which also requires that the patient must have started their last course of treatment within the past 24 months. This results in a slight downwards bias in the patients seen measure, although it is thought the effect on comparisons over time is negligible as it is an effect present in each quarter of the time series.
23. The patients seen data for the new contractual arrangements includes patients who were only seen by a TDS dentist who was not previously on a GDS or PDS contract in 2005/06. Patients who fall into this category would not be included in the patients seen data for 2005/06 as TDS only dentists were not included in the 2005/06 workforce figures (unless they were working elsewhere on a GDS or PDS contract).

24. DSD estimated that, in the 24 months leading up to 31 March 2007, around 86,000 patients (0.17 per cent of the population) were seen by a dentist who falls into this category, which is minimal in relation to the 28.1 million patients seen in the previous 24 months up to 31 March 2007 (55.7 per cent). However, some of these patients may have also seen a different GDS or PDS dentist and are therefore not uniquely identified via their treatment from the TDS dentist (who was not included in the 2005/06 figures).

Population data

25. Some patient seen tables present the number of patients seen as a proportion of the population in the 24 months leading up to selected dates. These calculations have been carried out using Office for National Statistics (ONS) mid-year population estimates which are the most closely aligned with the mid-point of the 24 month period leading up to the selected date. Proportions from 31 March 2006 to 31 December 2006 are calculated using the final ONS mid-2005 population estimates. Proportions from 31 March 2007 to 31 December 2007 are calculated using the final ONS mid-2006 population estimates. Proportions corresponding to 31 March 2008 and 30 June 2008 are calculated using the provisional ONS mid-2007 population estimates. These will be subject to recalculation in future reports once final ONS mid-2007 population estimates are released. All proportions are based on population estimates which use the ONS' revised 2007 methodology.
26. The numbers of patients seen as a proportion of the population in the 24 months leading up to quarters from 31 March 2007 to 31 December 2007, published in previous reports, have been revised following the release of the final ONS mid-2006 population estimates, rather than provisional mid-2006 estimates. The proportions corresponding to the 24 months to 31 March 2008 have also been revised following the release of the provisional ONS mid-2007 population estimates, rather than provisional mid-2006 estimates (the latest figures available at the time of publication).
27. Provisional ONS mid-2007 population estimates were higher than the ONS mid-2006 estimates, and this led to a decrease in the estimate of the proportion of patients who were seen in the 24 months to 31 March 2008 from 53.3 per cent to 52.9 per cent.

Allocation of patients to PCTs/SHAs

28. Sub-national information on patients seen was not published on 21 August 2008 as part of the end of year NHS Dental Statistics for England 2007/08 report, due to concerns over the allocation of patients to PCTs across the various quarters. This issue was considered to have only a minimal impact on national figures which were included but labelled as provisional until the issue could be investigated.
29. These concerns have been examined by the NHS Information Centre in consultation with the Dental Services Division of the NHS Business Services Authority and have been addressed by the inclusion of additional technical information (in this section of the report) to enhance interpretation of the patients seen time series data. As a result, the sub-national patients seen information for the 24 month period ending 30 June 2008 is included as usual. Furthermore, the sub-national data for the 24 month period ending 31 March 2008, originally omitted from the 2007/08 report, are included in the annexes to this report. Also, the national patients seen figures for the 24 month period ending 31 March 2008, originally labelled as provisional, are now final. The corresponding information presented as a percentage of the population has been revised in line with the usual processes to use updated ONS population figures.
30. The current PCTs came into existence on 1 October 2006. For activity prior to 1 April 2006, patients attending dental surgeries were allocated to a PCT on the basis of the geographical postcode of the surgery at which they were treated. From 1 April 2006 the allocation of patients to PCTs reflects the PCT within which the dental contract was held, or with which it was anticipated that it would be held on 1 October 2006. A contract can include more than one surgery location.
31. As a result, some PCTs/SHAs will have patients allocated to their baseline at 31 March 2006 who, under the methodology used from 1 April 2006, would be reported under a different PCT/SHA or vice versa.
32. To a lesser extent, there will also have been changes in contracts between 31 March 2006 when the baseline figures were calculated and 1 October 2006 when the new PCTs were formed which would also result in a re-allocation of patients to a PCT/SHA.
33. Analysis provided by the DSD reported that, in total, the patient seen figures in 40 out of 152 PCTs were affected by the change in the way in which patients were allocated to a PCT. The allocation before and after 31 March 2006 is different in cases where, from 1 April 2006, the surgery is located in a different PCT from the one that manages the contract.
34. The DSD analysis reported that in most cases the numbers involved at a PCT level are less than six thousand patients in the 24 month period ending 31 March 2006. The three pairs of PCTs that were affected the most by this issue were: Heart of Birmingham PCT (5MX) and Birmingham East and North PCT (5PG); Stoke on Trent PCT (5PJ) and North Staffordshire PCT (5PH); and Lambeth PCT (5LD) and Southwark PCT (5LE). Table C below shows all the PCTs/SHAs that were affected in some way by this issue.

35. In almost all cases the effect was contained within PCTs in the same SHA area. The two pairs of exceptions to this were: East Midlands SHA (Q33) and Yorkshire and the Humber SHA (Q32); and South Central SHA (Q38) and South East Coast SHA (Q37).

Table C: List of PCTs that were affected by the way in which patients seen were allocated to them before and after April 2006

PCT Code	PCT Name	SHA Code	SHA Name
5C3	City and Hackney PCT	Q36	London SHA
5C4	Tower Hamlets PCT	Q36	London SHA
5CC	Blackburn with Darwen PCT	Q31	North West SHA
5EF	North Lincolnshire PCT	Q32	Yorkshire and The Humber SHA
5EM	Nottingham City PCT	Q33	East Midlands SHA
5F7	Stockport PCT	Q31	North West SHA
5FE	Portsmouth City PCT	Q38	South Central SHA
5FL	Bath and North East Somerset PCT	Q39	South West SHA
5GC	Luton PCT	Q35	East of England SHA
5K3	Swindon PCT	Q39	South West SHA
5K9	Croydon PCT	Q36	London SHA
5KF	Gateshead PCT	Q30	North East SHA
5KG	South Tyneside PCT	Q30	North East SHA
5KL	Sunderland Teaching PCT	Q30	North East SHA
5L1	Southampton City PCT	Q38	South Central SHA
5LD	Lambeth PCT	Q36	London SHA
5LE	Southwark PCT	Q36	London SHA
5LG	Wandsworth PCT	Q36	London SHA
5LH	Tameside with Glossop PCT	Q31	North West SHA
5M1	South Birmingham PCT	Q34	West Midlands SHA
5M2	Shropshire County PCT	Q34	West Midlands SHA
5M7	Sutton and Merton PCT	Q36	London SHA
5MX	Heart of Birmingham PCT	Q34	West Midlands SHA
5N6	Derbyshire County PCT	Q33	East Midlands SHA
5N7	Derby City PCT	Q33	East Midlands SHA
5N8	Nottinghamshire County Teaching PCT	Q33	East Midlands SHA
5N9	Lincolnshire PCT	Q33	East Midlands SHA
5NH	East Lancashire PCT	Q31	North West SHA
5NR	Trafford PCT	Q31	North West SHA
5NV	North Yorkshire & York PCT	Q32	Yorkshire and The Humber SHA
5NY	Bradford & Airedale PCT	Q32	Yorkshire and The Humber SHA
5P2	Bedfordshire PCT	Q35	East of England SHA
5P5	Surrey PCT	Q37	South East Coast SHA
5PG	Birmingham East & North PCT	Q34	West Midlands SHA
5PH	North Staffordshire PCT	Q34	West Midlands SHA
5PJ	Stoke on Trent PCT	Q34	West Midlands SHA
5PL	Worcestershire PCT	Q34	West Midlands SHA
5QC	Hampshire PCT	Q38	South Central SHA
5QJ	Bristol Teaching PCT	Q39	South West SHA
5QK	Wiltshire PCT	Q39	South West SHA

Annex 2

Primary Care Trust (PCT) and Strategic Health Authority (SHA) Factsheet (Excel Workbook)

Annex 3

PCT and SHA Level Data (Excel Workbook)

(Note that orthodontic activity is excluded unless specifically stated).

- A1 Courses of Treatment (CoTs) performed by treatment band in England, April 2008 to June 2008
- A2 Proportion of CoTs performed by treatment band in England, April 2008 to June 2008
- A3 CoTs performed by treatment band in England, quarter one of 2007/08 and quarter one of 2008/09
- B1 Units of Dental Activity (UDAs) performed in England, April 2008 to June 2008
- B2 Proportion of UDAs performed by treatment band in England, April 2008 to June 2008
- B3 UDAs performed by treatment band in England, quarter one of 2007/08 and quarter one of 2008/09
- C1 Band 1 CoTs and UDAs performed in 2006/07, by quarters in 2007/08 and quarter one of 2008/09
- C2 Band 2 CoTs and UDAs performed in 2006/07, by quarters in 2007/08 and quarter one of 2008/09
- C3 Band 3 CoTs and UDAs performed in 2006/07, by quarters in 2007/08 and quarter one of 2008/09
- C4 Urgent CoTs and UDAs performed in 2006/07, by quarters in 2007/08 and quarter one of 2008/09
- C5 Other CoTs and UDAs performed in 2006/07, by quarters in 2007/08 and quarter one of 2008/09
- C6 Total CoTs and UDAs performed in 2006/07, by quarters in 2007/08 and quarter one of 2008/09
- D1 Number of patients seen in the previous 24 months, by adult/child, by quarter from 31 March 2006 to 30 June 2008 (including orthodontic patients)
- D2 Patients seen in the previous 24 months as a percentage of the population, by adult/child, by quarter from 31 March 2006 to 30 June 2008 (including orthodontic patients)
- D3 Total number of patients seen in the previous 24 months, by quarter from 31 March 2006 to 30 June 2008 (including orthodontic patients)
- D4 Total patients seen in the previous 24 months as a percentage of the population, by quarter from 31 March 2006 to 30 June 2008 (including orthodontic patients)
- D5 Number of adult patients seen in the previous 24 months, by quarter from 31 March 2006 to 30 June 2008 (including orthodontic patients)
- D6 Adult patients seen in the previous 24 months as a percentage of the population, by adult/child, by quarter from 31 March 2006 to 30 June 2008 (including orthodontic patients)
- D7 Number of child patients seen in the previous 24 months, by quarter from 31 March 2006 to 30 June 2008 (including orthodontic patients)
- D8 Child patients seen in the previous 24 months as a percentage of the population, by adult/child, by quarter from 31 March 2006 to 30 June 2008 (including orthodontic patients)

Other Publications

NHS Dental Statistics 2007/08

<http://www.ic.nhs.uk/pubs/dental0708>

This report considers NHS dental activity, patients seen, workforce and patient charge revenue in the second year of the new dental contract. Detailed data at PCT and SHA level are included as annexes to this report. The boundaries used are as at 1 October 2006.

Dental Treatment Band Analysis, England and Wales, 2007/08

<http://www.ic.nhs.uk/pubs/dentaltba0708>

This report provides information on NHS dental activity within a sample of adult courses of treatment (CoTs). Information was taken from a sample of 9,822 CoTs in England and 1,446 CoTs in Wales processed by the Dental Services Division (DSD) between April 2007 and March 2008, covering dental contracts across all Primary Care Trusts in England and Local Health Boards in Wales. This information was compared to equivalent information for 2003/04. This information is sourced from the Dental Services Division (DSD) of the NHS Business Services Authority (BSA).

Dental Working Hours, England and Wales 2006/07 and 2007/08

<http://www.ic.nhs.uk/pubs/dentalworkinghours0708>

This report provides information on average weekly hours, weeks of annual leave, the division of time between NHS and private dentistry, and the division between clinical and administrative work.

Dental Earnings and Expenses 2006/07

<http://www.ic.nhs.uk/pubs/dentalearnexp0607>

This report provides a detailed study of the earnings and expenses of General Dental Service (GDS) and Personal Dental Services (PDS) dentists in Great Britain and is based on tax data for dentists with an accounting year ending in 2005/06. All averages in the report relate to both full- and part-time dentists with varying levels of earnings from the NHS. The earnings and expenses relate to NHS and private work.

NHS Expenditure for General Dental Services and Personal Dental Services: England 1997/98-2005/06

<http://www.ic.nhs.uk/pubs/dentalexpend1997to2006>

This report gives local-level information on expenditure in England on NHS primary dental care provided within the General Dental Service (GDS) and Personal Dental Service pilots (PDS) for the financial years 1997/98 to 2005/06.

NHS Dental Activity and Workforce Report England: 31 March 2006

<http://www.ic.nhs.uk/pubs/dwfactivity>

This report covers treatment provided under the General Dental Service (GDS) and the Personal Dental Service (PDS), often referred to as “high street dentists”, in England up to 31 March 2006, the day before the new NHS dental contract was introduced. Most of the data are presented over a ten-year period. Detailed data at PCT, SHA and parliamentary constituency level are included as annexes to this report. The boundaries used are as at 31 March 2006.

A full list of reports produced on dentistry can be found at:

<http://www.ic.nhs.uk/statistics-and-data-collections/primary-care/dentistry>

Dental Contracts Statistics

The Department of Health publishes regular information on dental commissioning and progress in resolving contracts signed in dispute.

Available on the Department of Health website via this link:

http://www.performance.doh.gov.uk/dental_contracts/index.htm

Note that this data collection is not directly comparable with the activity statistics presented earlier in this report as the Department of Health collection asks for UDAs commissioned for a forward looking 12 months so cannot be compared to actual activity in the previous 12 months.

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The NHS Information Centre website: <http://www.ic.nhs.uk>

Dental Statistics
Price: Free

Published by the NHS Information Centre
Part of the Government Statistical Service

ISBN: 978-1-84636-259-0

This publication may be requested in large print or other formats.

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