

**NHS England North – Orthodontic Procurement**

**Responses to key themes from Stakeholder Engagement process**

**Thank you to all who took the opportunity to feedback comments**

| Cheshire & Merseyside  | Cumbria & North East   | Lancashire & South Cumbria  | Yorkshire & Humber  |
|--|--|---|---|
| <b>PRICING STRATEGY</b>  |  |   |   |
| Price range increased following consideration of feedback received ie £54.89 – 58.89 per unit of orthodontic activity (UOA)  |  |   |   |
| <b>SERVICE SPECIFICATION</b>   |  |   |   |
| All feedback has been considered by the Regional Orthodontic Group. These have resulted in some changes being made to the final service specification.   |  |   |   |
| <b>COMMISSIONING INTENTIONS (LOT SIZES &amp; LOCATIONS)</b>  |  |   |   |
| <ul style="list-style-type: none"> <li>• Transposition of activity between North and South Warrington has been noted and transposed.</li> <li>• The location of the lots is to help stabilise patient flow for referring dentists, ease of transport routes and population density.</li> <li>• The lot sizes vary so that they are equitable for potential bidders to bid independently or as part of a group.</li> <li>• The maximum and minimum lot size is based on NHS England’s national direction in terms of contract viability and governance.</li> <li>• The number of proposed contracts has reduced to 14 from 24 in Cheshire &amp; Merseyside in order to ensure equity of service provision.</li> <li>• There has been a redistribution of Primary Care UOA activity based on the evidence produced from the needs assessment. Overall, there has been an increase in Primary Care service provision against total population need (which by definition should include activity attributable to secondary care services).</li> <li>• The contract and lot sizes take into account patient flows, clinical need and are within national guidance and financial constraints.</li> </ul> | <ul style="list-style-type: none"> <li>• CNE are commissioning an increased level of PDS provision which, when coupled with existing GDS and Secondary Care provision, delivers an overall increase in orthodontic capacity across the CNE area. Details of the GDS and indicative Secondary Care capacity were included in the information shared with the Market in March 2018 and has been provided to other key stakeholders on request.</li> <li>• Lot sizes are based on the needs assessments with some amendment to reflect natural patient flows.</li> <li>• The location of the lots is to ensure greater geographical spread of services to minimise as far as is reasonably practicable travel distances for patients.</li> <li>• Successful bidders in primary care will be expected to deliver care to all eligible patients including those with special needs. Current providers who do not bid or are not awarded a new contract will be offered the opportunity to complete open courses of treatment subject to their being no performance concerns.</li> <li>• No changes proposed over and above those made previously based on feedback received from the Market Engagement undertaken in March 2018.</li> </ul> | <ul style="list-style-type: none"> <li>• The postcode boundaries relate to where practices should be sited, not to where the patients can be referred from.</li> <li>• Lot sizes are based on the needs assessments and are within financial constraints.</li> <li>• Successful bidders in primary care will be expected to deliver care to all eligible patients including those with special needs. Current providers who do not bid or are not awarded a new contract will be offered the opportunity to complete open courses of treatment subject to their being no performance concerns.</li> </ul> | <ul style="list-style-type: none"> <li>• The contract and lot sizes have been specified by commissioners take into account patient flows, clinical need and are within national guidance and financial constraints.</li> <li>• Lot sizes are based on the needs assessments with some amendment to reflect natural patient flows.</li> <li>• The location of the lots is to ensure greater geographical spread of services to minimise as far as is reasonably practicable travel distances for patients.</li> <li>• Successful bidders in primary care will be expected to deliver care to all eligible patients including those with special needs. Current providers who do not bid or are not awarded a new contract will be offered the opportunity to complete open courses of treatment subject to their being no performance concerns.</li> </ul> |

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|--|--|--|---|
| <b>NEEDS ASSESSMENT</b>  |  |  |   |
| <ul style="list-style-type: none"> <li>The knowledge gaps in Section 21 have been acknowledged and patient engagement information has now been included. Collation of Secondary Care data is however still ongoing and in various formats. It will be reviewed in the future.</li> <li>Cheshire &amp; Merseyside localities have been broken into local authority areas as more detailed population/demographic data is available and a model has been used for prediction of population over the next 10 years, e.g. proposed increase in housing.</li> <li>The e-referral waiting lists have been validated and taken into account in the needs assessment. The MCN have provided un-validated practice wait times regarding patients who have been assessed and this data was also included.</li> </ul>   | <ul style="list-style-type: none"> <li>No specific concerns received on the published orthodontic needs assessment.</li> <li>Information on the GDS and indicative secondary care capacity was published as part of the market engagement undertaken in March 2018 and has been provided to other key stakeholder on request.</li> </ul> | <ul style="list-style-type: none"> <li>No specific concerns received on the published orthodontic needs assessment.</li> </ul> | <ul style="list-style-type: none"> <li>The Orthodontic Needs Assessment for Yorkshire and the Humber 2017/18 indicated the UOA's for the Normative Need for every area in Yorkshire and the Humber. This data was used as a basis to calculate the Lots for Orthodontic Procurement.</li> </ul> |
| <b>STAKEHOLDER ENGAGEMENT</b>  |  |  |   |
| <ul style="list-style-type: none"> <li>Local stakeholders (e.g. MPs, Overview and Scrutiny Committees, Healthwatch, etc.) were made aware of NHS England's intention to procure these services and invited to provide input into it. They have also been periodically updated on progress.</li> <li>An extensive patient engagement process has been undertaken to determine patient priorities for these services.</li> <li>Prior to being made available for comments on the NHS England website, the service specification, needs assessment and commissioning intentions have not been socialised in their entirety with local professions at any representative level, but the documents are written in line with patient feedback from the stakeholder listed above and NHS England's Guide for Commissioning Dental Specialities – Orthodontics, which involved representation from both the BOS and BDA.</li> <li>A public consultation is not required in regards to the orthodontic procurement as in accordance with section 13Q of the Health and Social Care Act 2012 commissioners are only required to engage with stakeholders.</li> </ul> | <ul style="list-style-type: none"> <li>No specific concerns raised other than in relation to the pricing strategy.</li> </ul>  | <ul style="list-style-type: none"> <li>No specific concerns raised other than in relation to the pricing strategy.</li> </ul>  | <ul style="list-style-type: none"> <li>No specific concerns raised other than in relation to the pricing strategy.</li> </ul>   |