

Orthodontic Vital Signs Report Guidance

Introduction

This guidance introduces a set of reports that provide “Vital Signs” metrics to help Primary Care Organisations (PCOs) monitor the orthodontic activity they have commissioned. It is hoped that these reports will further enable PCOs to monitor and plan their commissioned services efficiently and effectively.

The original Vital Signs Reports provided measures (metrics) across four key areas; access, activity, quality and value for money through two types of report. The main Vital Signs Report provides a table of metrics with RAG status indicators. The Vital Signs At a Glance Report provides a summary of that information using charts and tables.

The Vital Signs Reports, were extremely well received and have fast become a key reference point for commissioners and managers of NHS dental contracts. Following on from their success we are now introducing the new Orthodontic Vital Signs Reports, which extends this approach to orthodontic activity and presents key metrics for access, activity and quality.

Together this suite of Vital Signs Reports provides PCOs with key metrics to help them monitor the performance of all NHS dentistry contracts that they hold.

Vital Signs at a Glance (PCOs/Contract) Report

The Orthodontic Vital Signs At a Glance Report presents the access, activity and quality information in one report, allowing trends to be monitored and comparisons made quickly and easily. The report is produced for PCOs at contract and at PCO level.

The following sections describe the metrics used in the PCO and contract level reports and explain how the information can be interpreted and used.

Vital Signs at a Glance Metric Descriptions

Contract Summary

The first section in the report provides an overview of the contract position. For contract level reports this will describe the position at contract level while the PCO level report will provide a summary at PCO level. This information is already reported regularly in existing reports but is provided here as a useful reference for aiding interpretation of the access, activity and quality measures.

Contract and commissioned UOA activity information is produced from data held on the Payments Online system (POL). The usefulness and accuracy of this measure is, therefore, dependent on the corresponding details being updated on POL when any change is made to the contract.

Access

We have presented a measure to describe access to orthodontic dentistry. We provide figures to describe the measure at PCO and national level (and at contract level for the contract reports). There are plans to provide additional measures of access in subsequent reports.

24 month Ratio of Assessments to Patient IDs

This describes the average number of assessments received by each patient where one or more assessments have been reported. High proportions might suggest that patients are being repeatedly assessed either under the same or across different contracts.

Activity

Activity is reported using measures of GDS and PDS UOA commissioned and delivered across all contracts. The commissioned activity is produced from information held on POL. The usefulness and accuracy of this measure is, therefore, dependent on the corresponding details being updated on POL when any change is made to the contract. The delivered activity is taken from the information submitted on scheduled FP17s.

There are two elements to this section.

The first is a chart comparing delivery of GDS and PDS UOA (as a percentage of commissioned activity) for the current financial year against the same measure for the previous financial year using monthly cumulative counts.

The second section presents a monthly breakdown of the cumulative counts of the UOAs delivered (scheduled) in a table layout.

Note: Progress against activity may alter on successive reports as a result of changes to POL e.g. in respect of the carry forward UOAs required.

The DH guidance on managing year end issues also provides useful information about how to monitor and deal with issues around over or under delivery

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_084448

Quality

This section allows for comparisons to be made across nine indices.

We have developed nine indicators of quality that build on the data currently provided to PCOs at contract level. Eight of the indicators draw on information captured from scheduled FP17s and the last is based on responses to the random patient questionnaires.

The indicators are listed below in bold with descriptions beneath.

% of all assessments that are assess and fit appliances (rolling 12 month period)

% of all assessments that were assess and refuse (rolling 12 month period)

% of all assessments that were assess and review (rolling 12 month period)

There are three options available to report on completion of an orthodontic assessment (refuse treatment, review, fit appliances).

The first three quality measures (above) allow an evaluation of the relative distribution of these three orthodontic outcomes across all patients assessed for orthodontic treatment. This distribution should be monitored and where it differs considerably from either the national profile or your expectations (based on your understanding of the patient profile) you should explore the differences with your contract provider.

% of terminated (abandoned or discontinued) courses of treatment appliances (rolling 12 month period)

This measure allows PCOs to make comparisons with the national profile for the proportion of orthodontic courses of treatment that are reported as terminated (for whatever reason). As UOAs are allocated once a course of orthodontic treatment has started, terminated courses of treatment represent a loss of activity to the PCO and any unusually high rates should be explored in detail.

% of completed treatments indicating that PAR score was taken (year to date)

Providers are required to carry out a minimum number (20) of Peer Assessment Reviews (PARs) of their completed courses of treatment, as well as a further proportion (10%) on all additional completed courses of treatment. This information should be used locally as part of the contract monitoring and review purpose to ensure quality standards. The completion of a PAR score is reported on the FP17O that is submitted on completion of the course of treatment and is provided here together with a national comparison as an early indicator of where these assessments may not be being completed.

Caveat: while useful as an indicator this figure may not be an accurate reflection of PAR score rates if completions are not being reported to us on the FP17O.

Rate of removable appliances per 100 fixed appliances – proposed treatment (rolling 12 month period)

Rate of removable appliances per 100 fixed appliances – completed treatment (rolling 12 month period)

% of courses of treatment with removable appliances only - proposed treatment (rolling 12 month period)

% of courses of treatment with removable appliances only - completed treatment (rolling 12 month period)

The next four indices (above) give an indication of how prescribing patterns correspond to actual treatment outcomes in respect of types of appliance. The first identifies the ratio of removable to fixed appliances at the start of treatment and the second provides the same measure at completion. The third identifies the percentage of courses of treatment where only removable appliances were provided at the start of treatment and the fourth provides the same measure at completion. A significant difference between ratios at start and completion may indicate issues with diagnosis, changes to clinical practice or patient compliance.

Caveat: The four measures are independent and do not directly report changes to specific courses of treatment.

Additionally the ratios for each measure should be monitored and where these differ considerably from either the national profile or your expectations (based on your understanding of the patient profile) you should explore the differences with your contract provider.

% Patients satisfied with the treatment they have received.

This measure is derived from the results of the NHS Dental Services' routine random patient questionnaires. The questionnaire provides the patients' view of dental quality. The analysis each quarter is based on responses to questionnaires sent to a random sample of over 4,000 patients who have been reported as recently having had orthodontic treatment started. The national response rate (the proportion of questionnaires completed and returned by patients) is currently around 50%.

The question asked is as follows:

Q10. How satisfied are you with the NHS dentistry you received? (Tick **one** box)

Completely satisfied Fairly satisfied Fairly dissatisfied Very dissatisfied

The figure reported is the percentage of respondents who stated that they were either completely or fairly satisfied.

All measures in this section are reported on either a rolling 12 month or year to date period. This is indicated in brackets, and can be compared across the following levels of analysis:

- Contract
- PCO
- National

In addition the number of patients, FP17s or questionnaires that formed the basis for calculating the percentages is reported under the **Quantity** heading. The number will be presented in italics where it is less than 100. Care should be taken in interpreting the percentages where the quantities are low.

Note: We have experienced a minor historic problem with the processing of a very small proportion of the IOTN data. This is currently being corrected and the quality indicator referring to this measure has, therefore, been removed from the report. Once the correction is complete we will add the IOTN quality indicator back into the report. For more information about this please see the "IOTN Data Issue" letter which appears alongside the 12/2009 monthly reports.

Should you have any further questions about this report or have any other information requirements please contact the Information Services team via the main help desk **0845 126 8000** or by e-mail on dentaldata@dpb.nhs.uk.