

1. Introduction

This document contains explanatory notes to help you interpret the information within the reports.

The reports cover all contracts, regardless of status, where payments or FP17s have been processed during the reporting period.

More information about the NHS Dental Services's (NHS DS) processes, and how they affect the activity and payment information reported, can be obtained from the AT/LHB home page on the NHS DS's website (www.nhsbsa.nhs.uk/dentalservices.aspx). Copies of previous guides can be obtained by e-mailing nhsbsa.dentalservices@nhsbsa.nhs.uk

1. Introduction

2. Overview of information reported

3. Report overviews

- 3.1. Contract Summary Report – Excel file
- 3.2. 24 month list report for AT/LHB - Excel data file
- 3.3. Payment and Recharge Summary and Contract Payment - Excel data file
- 3.4. PDS plus – PDF file
- 3.5. Reports re-issued

4. Definition of report variables

5. Supplementary information

- 5.1. Payments
- 5.2. Units of activity
 - 5.2.1. Allocation of units of dental activity
 - 5.2.2. Allocation of units of orthodontic activity

2. Overview of information reported

The reports are based on the activity that has been scheduled through the NHS DS's systems for the reported month. The processing cut off dates vary for contracts according to their schedule group; more information about this can be obtained from the AT/LHB home page on the NHS DS's website (www.nhsbsa.nhs.uk/dentalservices.aspx).

Some activity is reported for the year to date, this relates to the scheduling year to date where the last schedule for the year will be in March of the reporting period specified.

Reported activity has been classified as 2017/2018 in line with the technical guidance for the end of year reporting requirements¹.

Scheduled amendments to FP17s may result in a negative number of FP17s or UDA/UOA reported. Particular attention should be paid to negative activity reported as this may indicate a contract is moving activity from one activity year to another.

In England, Vocational Dental Practitioners' (VDPs) activity is excluded from the main tables and reported only as total activity within the VDP performer table. In Wales, VDP activity is included in the main contract report tables.

From 1 June 2014 any FP17 (paper or electronic) received by the NHS Dental Services more than two months from the date of completion will be processed, but no units of dental activity will be allocated to the course of treatment. The patient charge will still be deducted from the FP17.

¹ For full technical guidance see www.nhsbsa.nhs.uk/dentalservices.aspx

3. Report overviews

3.1. Contract Summary Report – Excel file

This report contains an overview of key high-level information for all the contracts in the PCO and highlights possible COMPASS anomalies. The contract information has been grouped according to the contract type (Contracts paid or not paid by NHS BSA).

3.2. 24 month list report for AT/LHB - Excel data file

For each AT, we have counted the number of distinct patient identities which have been processed during the last 24 months. Patients have been identified by using surname, first initial, gender and date of birth. No other identifiers have been used. This is a pragmatic compromise between under-counting patients with common identifiers and over-counting where there are slight differences in recorded details.

Each unique patient ID is counted against the dentist contract against which the most recent claim was recorded in the 24 month period, with the following exceptions. If the most recent claim is for urgent treatment, orthodontic treatment, free treatment or treatment on referral the ID remains with the previous contract, if there is one within the 24 month period. If the claim for the previous contract occurred before the 24 month period the ID is allocated to the most recent contract.

Further information can be found in Vital Signs technical explanations PDF found on www.nhsbsa.nhs.uk/dentalservices.aspx

3.3. Payment and Recharge Summary and Contract Payment - Excel data file

The Payment and Recharge Summary provides payment information on a monthly basis including the cash recharge summary at PCO level.

The Contract Payment report provides payment information on a monthly basis at contract level. It has been split into two sections. Held and negative key information has been added and the separate Held and Negative report has been withdrawn. Previous formats of all payment reporting is available via Ereporting..

Any queries relating to the figures contained in the report should be directed to Dental Services Helpdesk either by phone (0300 330 1348) or by email (nhsbsa.dentalservices@nhsbsa.nhs.uk).

Payment Summary

Baseline Payment - This is the monthly payment made to the contract. It will reflect any adjustments to the Monthly Baseline Allocation.

Maternity/Paternity/Adoptive Leave – Payments made for maternity, paternity or adoptive leave. Example statutory maternity payments.

Sickness – Payments made for sickness. Example Long-term sickness payments

Business Rates – Payments made for business rates re-imbursement.

VDP Service Cost – Payments relating to vocational trainee costs as defined in the statement of financial entitlement. These costs are funded by your region (England only).

Trainers Grant – Payment to dentists who train vocational trainees as defined in the statement of financial entitlement. These costs are funded by your region (England only).

Trainee Salary & ENIC – Payments relating to vocational trainee salary and national insurance contributions costs as defined in the statement of financial entitlement. These costs are funded by your region (England only).

Seniority – Payments made for seniority.

AT/LHB Specific Items – Payments made in addition or deduction to the Baseline Payment that do not fall into the above categories. These will be non-recurrent items, which cannot be included within the Annual Contract Value.

From April 2011 Specific Items does not include Performance Adjustment payments.

Performance Adjustment – Positive or negative payments made to reflect performance of contract.

Patient Charge Revenue - Using the information processed from FP17s, the NHS DS calculates the amount of money that should have been collected from the patient by the dentist for treatments carried out. This calculated patient charge revenue is then deducted from the payments paid to the contract provider. Remitted patient charges are deducted from the patient charge revenue.

For each financial year (12 scheduled months). Based on payment year month April to March for each year.

In some cases patient charge revenue will have been carried forward from a previous year and in other cases there will not be enough baseline payment from which to collect the patient charge revenue, this results in a suspended payment.

The NHS DS does not collect patient charge revenue, if it does not make the payments (eg Trust led contracts).

Net Cost – This is the baseline payment after additions and deductions and net of patient charge revenue received.

Employer Contribution - This is the amount paid by the AT or LHB into the dentists' superannuation scheme.

Net Charge to AT/LHB - This is the total financial commitment of the AT or LHB for the practice and is defined as: Baseline Payment plus Additions, less Deductions, less Patient Charge Revenue, plus Employer Contribution.

Cash Recharge Summary (AT/LHB only)

Net Charge to AT/LHB - This is the total financial commitment of the AT or LHB for the practice and is defined as: Baseline Payment plus Additions, less Deductions, less Patient Charge Revenue, plus Employer Contribution.

Cash Adjustments : these are additional payments or deductions which are made outside of the payment systems.

Patient Refunds - These are refunds to patients who were entitled to exemption or remission from patient charges but paid a charge for their treatment. (NB: The NHS DS does not process patient refunds for Wales and this is relevant to England only.)

Reg 11 Payments - These are refunds to patients who paid a charge for replacement appliances and later successfully appealed against the charge.

Exemption checking income - This relates to patient charges recovered from patients that claimed an exemption or remission, but were subsequently found by NHSBSA checks not to be entitled to help with charges

Collection of money on behalf of AT/LHB - where the NHS DS collects amounts from dentists in respect of Clinical Waste, CHAPS costs or Miscellaneous Deductions at AT request.

PDS plus Additional Patient Questionnaires – Fee for any additional patient questionnaires requested for PDS plus contracts.

Cash Recharge to AT/LHB – Amount Recharged in month by NHS DS to AT or LHB.

Dental Contract Payment Summary

Net Cost – This is the baseline payment after additions and deductions and net of patient charge revenue received.

NHSBSA DAR Adjustment – Deductions made by NHSBSA DAR following challenge, audit or similar exercises carried out on behalf of NHS England.

Collection of money on behalf of AT/LHB – example clinical waste charges

Debt Recovery – The sum of “payment received to offset negative contract payment” and “deduction to offset negative payment on another contract”

Payment received to offset negative contract payment

Payment received to offset negative contract payment details any payments greater than zero received to the contract that has been sourced from another related contract. This process, automatic within COMPASS, offsets any potential negative payment before it is made wherever possible. A related contract could be located anywhere but will share the same Provider ID.

Deduction to offset negative payment on another contract

Deduction to offset negative payment on another contract details deductions (any payments less than zero) from the contract that have been automatically made by COMPASS to offset a potential negative payment on a different but related contract. A related contract could be located anywhere but will share the same Provider ID.

Legal and Compliance deductions – example Fixed Levy charges

NHS DS charges including global crossing example CHAPs costs

Employees Contribution - These deductions are made from the money paid to the practice to cover Dentists' contributions to their superannuation scheme.

Net Payment to the Contract - This is the amount paid to the provider and is defined as: Baseline Payment plus Contract Additions, less Contract Deductions, less Employees Contribution, less Patient Charge Revenue.

3.4. PDS plus – PDF file

It has details of the contract, activity, access and KPI performance measures for the current month and financial year to date. Page 6 of the English version has details of the performance bands as selected for the contract and entered on COMPASS. This can be compared against actual performance from the KPI detail on pages 3 to 5.

Full report guidance is available via www.nhsbsa.nhs.uk/DentalServices/1142.aspx

3.5. Reports re-issued

None

4. Definition of report variables

Contracted general activity (UDA)	The contracted units of general dental activity to be achieved for the 2017/2018 period. This figure is taken directly from the COMPASS system.
Contracted orthodontic activity (UOA)	The contracted units of orthodontic activity to be achieved for the specified reporting period. This figure is taken directly from the COMPASS system.
Baseline Contract Value	Gross value of the contract for the year ending March 2018.
Baseline Payment	This is the monthly payment made to the contract. It will reflect any adjustments to the annual contract value.
Carry forward general activity (UDA)	The number of UDA carried forward from the previous financial year as entered on the COMPASS system by the PCO.
Carry forward orthodontic activity (UOA)	The number of UOA carried forward from the previous financial year as entered on the COMPASS system by the PCO.
Contract Type Name	GDS – General Dental Services PDS – Personal Dental Services
Employees	These deductions are made from the money paid to the practice to cover

Contribution	dentists' contributions to their superannuation scheme.
Employer Contribution	This is the amount paid by the AT or LHB into the dentists' superannuation scheme.
Name or Company Name	Name of the provider or the name of the company that is responsible for the contract.
Net Charge to AT/LHB	This is the total financial commitment of the AT or LHB for the practice and is defined as: Baseline Payment plus Additions, less Deductions, less Patient Charge Revenue, plus Employer Contribution.
Net Payment to Contract	This is the amount paid to the practice and is defined as: Baseline Payment plus Contract Additions, less Contract Deductions, less Employees Contribution, less Patient Charge Revenue.
Patient Charge Revenue	As quoted in payment reports. The amount of money recovered from the contract for Patient Charges. Described more fully in the paragraphs headed "Payment and recharge summary and Contract Payment".
Percentage of contracted activity achieved (year to date).	The units of activity scheduled (year to date) as a percentage of the contracted units of dental activity. This includes VDP activity in Wales and excludes VDP activity in England. $(UDA \text{ Achieved} - \text{Carry Forward UDA}) / \text{Contracted UDA} \times 100$
Purpose of Contract	Either "General", "General and Orthodontic" or "Orthodontic".
Total UDA	Total UDA from all patient categories scheduled for the period specified. This includes VDP activity in Wales and excludes VDP activity in England.
Total UOA	Total UOA from all patient categories scheduled for the period specified. This includes VDP activity in Wales and excludes VDP activity in England.
UDA	UDA accrued from scheduled FP17s. The figures for UDA are net of amendments and therefore can be negative. This includes VDP activity in Wales and excludes VDP activity in England.
UOA	UOA accrued from scheduled FP17s. The figures for UOA are net of amendments and therefore can be negative. This includes VDP activity in Wales and excludes VDP activity in England.

5. Supplementary information

5.1. Payments

There will be certain cases where an FP17 for a non-exempt (paying) adult would not attract the full patient charge or would attract no charge, which are: -

- The FP17 was a continuation of treatment (no charge or charge reflects difference in band charges)
- The FP17 was for treatment on referral (patient charge goes to referring dentist)
- The FP17 was for a treatment that qualifies for free repair/replacement (no charge to replace or fix an item within 12 months of original treatment)
- The FP17 was for a patient who did not complete treatment (patient charge deducted for band of treatment actually provided, but reported as band of treatment started)

Patient charges cannot be collected from closed contracts (or contracts on which payments are not being made). However, the counts of FP17s processed for closed contracts are reported, so patient charges may appear lower than anticipated where FP17s for paying patients have been processed for contracts where payments have stopped.

In cases where the patient charge revenue exceeds the baseline payment, the full patient charge revenue cannot be deducted. The NHS DS's payment system will attempt to recover any remaining patient charges from future payments and this will appear under Debt Recovery.

Patient charge calculated (activity tables) and patient charge scheduled (payments tables) may differ because of factors such as suspended payments.

5.2. Units of activity

5.2.1. Allocation of units of dental activity

Each course of dental treatment is weighted to reflect the complexity of the treatments carried out. These weightings are the units of dental activity (UDA), and they relate directly to the patient charge band. There is also a weighting for the five charge exempt treatments if they are carried out separately from a banded or urgent course of treatment. The weightings are shown in the table below.

Treatment	Units of Dental Activity (UDA)
Patient Charge Band 1	1
Patient Charge Band 2	3
Patient Charge Band 3	12
Urgent Treatment	1.2
Other Treatments not incurring patient charge	
Arrest of Bleeding	1.2
Denture Repairs	1
Bridge Repairs	1.2
Removal of Sutures	1
Issue of Prescription	0

5.2.2. Allocation of units of orthodontic activity

Each course of orthodontic treatment is weighted according to the age of the patient at the date the treatment started. Units of orthodontic activity are allocated to a contract at the start of a course of orthodontic treatment. Orthodontic assessments that do not result in treatment are allocated one unit of orthodontic activity.

Assessment only	Assessment & review	1 UOA
	Assessment & refuse treatment	
Active treatment started	Assessment and start treatment	
	• Patient under 10 years	4 UOA
	• Patient aged 10-17 years	21 UOA
	• Patient aged 18 or over	23 UOA
Repairs	Repairs to an appliance fitted by another dentist	0.8 UOA
Replacement appliances	Replacement appliances (regulation 11)	0 UOA – instead the dentist can retain 30% of the band 3 patient charge.