

PACESETTER SCHEME 2020-2022 APPLICATION FORM	
<b>Health Board</b>	Hywel Dda University Health Board (HDdUHB)
<b>Pacesetter Scheme Title</b>	Dental Fellowship Programme (post-Dental Foundation)
<b>What is the problem the scheme will try to address?</b>	Problems in recruitment and retention of dentists to provide both general and specialist dental services which means there is a need to improve the overall access to NHS dental services within Hywel Dda University Health Board.
<b>Short description of the scheme</b> <i>(no more than half a page - embed 'Plan on a Page' if available or add simple template as annex 2)</i>	<p>Recruitment and retention of NHS dentists, particularly in some of the more rural areas of HDUHB, is proving to be challenging and is impacting on overall access rates, despite best efforts to improve access by commissioning additional activity.</p> <p>There is also a paucity of specialist service provision within general dental services in HDdUHB, with services being commissioned outside of the Health Board's area, necessitating patients to travel for minor oral surgery services, conscious sedation, endodontics etc. HDUHB has identified priority areas of need for specialist skills as Oral Surgery and Paediatrics; 95% of Primary Care MOS (Minor Oral Surgery) is currently provided outside of the Health Board area. We currently have no Tier 2 Paediatric dental services in Primary Care.</p> <p>A Fellowship Programme will encourage dentists to take up posts in General Dental Practices, post-Dental Foundation, but will offer protected time and support to specialise in a jointly agreed area of interest that will provide developmental opportunities for the dentist and enhance the range of service provision within the Health Board geographical area.</p> <p>There are 13 places on the West Wales DFT (Dental Foundation Training) scheme with four of these in HDUHB Dental Practices. This year (2019-2020) only one Practice was successful in recruiting Dental Foundation trainees.</p>

**Final submission 20<sup>th</sup> December 2019**

	<p>Our vision for the HDUHB Dental Fellowship Programme, as part of our dental workforce development and planning, is for a 3-5 year programme, with a rolling recruitment programme, to address our needs. Dependent on the success of this Pacesetter we will seek to continue the commissioning of the programme through the Dental Commissioning Plan.</p> <p>It is our intention to recruit one Academic Fellow in Year 1 of the project, and two in Year 2, subject to the successful progression of the first year of the pilot.</p>
<p><b>Allocation requested (£)</b></p>	<p>Year 1: £174k Year 2: £350k</p> <p>There is the potential that further funding will need to be secured to support training costs however this is subject to discussion and agreement with HEIW</p>
<p><b>Start date of the scheme</b></p>	<p>April 2020</p>
<p><b>Duration of the scheme</b> <i>(maximum 2 years)</i></p>	<p>April 2020 – March 2022</p>
<p><b>Overarching aim of scheme</b> <i>(What are you hoping to achieve?)</i></p>	<ul style="list-style-type: none"> <li>• Improved recruitment and retention of general dental practitioners:</li> <li>• Improved range of specialist dental services that can be commissioned within the Health Board area</li> </ul>
<p><b>Objectives of the scheme</b> <i>(The steps you to achieve the m)</i></p>	<p>Establish Project Implementation Group. Establish Partnership working agreement with HEIW. Develop HDdUHB Dental Fellowship training programme to meet HEIW's education framework.</p>

**Final submission 20<sup>th</sup> December 2019**

	<p>Develop role descriptions and contracts.          Implement Communications Plan.          Recruitment of Fellows, Training Practices, Specialist Training Provider, Educational Supervisors and Training Programme Director.          Organise and hold induction sessions.</p>
<p><b>Describe here how the scheme aligns to the wider strategic agenda and indicate which components of the <i>Primary Care Model for Wales, Strategic Programme for Primary Care, A Healthier Wales</i> the scheme addresses (refer to annex 1)</b></p>	<p><i>Please see Annex 1</i></p>
<p><b>Describe expected outcomes</b>  <i>(How will you know when you have achieved your aim - embed draft logic model if available – annex 2)</i></p>	<ul style="list-style-type: none"> <li>• Improved recruitment and retention of general dental practitioners.</li> <li>• More dental practitioners are upskilled in priority areas identified in HDUHB – Oral Surgery, Paediatrics.</li> <li>• Improved access to general dental services, in particular in rural areas.</li> <li>• More specialist services that can be commissioned within the Health Board.</li> <li>• Increased access to specialist services for service users <u>within</u> HDUHB.</li> <li>• Supporting a culture of learning and development that other contractors want to be part of</li> <li>• Increased pathways into Primary Care to avoid unnecessary referrals into hospital settings for Oral Surgery and Paediatrics Services.</li> </ul>
<p><b>Has this idea been tested previously, locally, nationally or elsewhere in UK, and if so</b></p>	<p>We are aware that Swansea Bay University Health Board is running a Dental Fellowship Programme with one participant.</p>

<p><b>how does this proposed scheme offer new learning?</b></p>	<p>We know that the concept of Primary Care activity, with release for specialist Primary Care training days, was used in the Port Talbot Dental Training Unit (DTU) and the longitudinal DFT training scheme for four years with very good feedback from participants.</p>
<p><b>Describe how this scheme is different to what is already in place locally or what has been tested elsewhere</b></p>	<p>There is nothing comparable locally.</p> <p>Working closely with HEIW (Health Education and Improvement Wales), the HDUHB Dental Fellowship Programme will address HEIW's educational framework and will include support from a Training Programme Director and Educational Supervisors and the requirement that Fellows maintain suitable Portfolios.</p> <p>The HDUHB Dental Fellowship Programme will attempt to increase pathways into Primary Care to avoid unnecessary referrals into hospital settings for Oral Surgery and Paediatrics Services.</p>
<p><b>DETAILS OF THE SCHEME</b></p>	
<p><b>Describe the key stages of the scheme and timescales for each stage</b> (<i>quarterly or relevant intervals</i>)</p>	<p>A detailed plan for Year 1 and Year 2 will be developed, but key stages:</p> <p><b><u>January – March 2020</u></b></p> <ul style="list-style-type: none"> <li>• Establish internal project implementation group.</li> <li>• Establish partnership working arrangements with HEIW and agree Memorandum of Understanding (MoU).</li> <li>• Confirm details of Programme, Clinical, Educational and Financial governance arrangements.</li> <li>• Confirm monitoring and evaluation plan and arrangements.</li> <li>• Develop and agree details of the Dental Fellowship Programme, including             <ul style="list-style-type: none"> <li>○ Role descriptions (Fellows, Training Practices, Specialist Training Provider, Educational Supervisors and Training Programme Director)</li> <li>○ Contracts/agreements, and</li> <li>○ Other legal issues such as indemnity insurance and employment responsibilities.</li> </ul> </li> <li>• Develop and agree process for recruiting Fellows, Training Practices, Specialist Training Provider, Educational Supervisors and Training Programme Director.</li> </ul>

- Develop Communications Plan.
- Inform relevant parties of opportunities to take part in the Dental Fellowship Programme as Fellows, as a Training Practice, as Educational Supervisors, as a Training Programme Director or Specialist Training Facility.

**April - June 2020**

- Formal recruitment of Fellows, Training Practices, Educational Supervisors, Training Programme Director and Specialist Training Facility.
- Implement Communications Plan.
- Induction session (if appropriate) - Dental Fellow, Training Programme Director, Training Practice, Specialist Training Facility (confirm arrangements and details – supervision, monitoring, structure and roles, governance (for the Programme and for Pacesetter) etc.
- Quarterly meeting with HEIW.
- Dental Fellowship Programme formally begins.

**July – September 2020**

- Ongoing monitoring, financial monitoring and governance.
- Quarterly meeting with HEIW.

**October – December 2020**

- Ongoing monitoring, financial monitoring and governance.
- Quarterly meeting with HEIW

**January – March 2021**

- Ongoing monitoring, financial monitoring and governance.
- Quarterly meeting with HEIW
- Review and evaluate Year 1 and revisit plan for Year 2 as needed.

	<ul style="list-style-type: none"> <li>Recruit more Fellows for Year 2.</li> </ul> <p><b><u>April 2021 – March 2022</u></b> To include:</p> <ul style="list-style-type: none"> <li>Ongoing monitoring, financial monitoring and governance.</li> <li>Quarterly meetings with HEIW.</li> <li>Further develop exit strategy.</li> <li>Final evaluation.</li> </ul>
<p><b>Describe the governance and project management arrangements for the scheme including lead roles</b> <i>(project support, clinical and non-clinical lead(s))</i></p>	<p><b>Project management arrangements</b> <b>Project implementation group:</b></p> <ul style="list-style-type: none"> <li>Responsible in particular for establishing the project, implementing and monitoring the project plan.</li> <li>Reporting to the established Pacesetter Steering Group which currently meets every other month.</li> <li>Accountable to Assistant Director of Primary Care, HDUHB on a day-to-day basis.</li> <li>Clinical involvement from AMD – Dental and/or Dental Practice Advisor.</li> <li>Ongoing project support – to include responsibility for financial monitoring and monitoring and evaluation.</li> </ul> <p><b>Pacesetter governance:</b></p> <ul style="list-style-type: none"> <li>Bi-monthly reports to established Pacesetter Steering Group, chaired by Assistant Director of Primary Care, HDdUHB, including financial monitoring and reporting on the monitoring and evaluation plan.</li> <li>Contracts/agreements developed and signed to safeguard all parties.</li> </ul>

	<p><b>Dental Fellowship Programme governance:</b></p> <ul style="list-style-type: none"> <li>• Clinical and Educational governance.</li> <li>• Educational governance via HEIW to ensure that the Programme addresses its educational framework.</li> <li>• Clinical governance via AMD Dental.</li> </ul>
<p><b>Describe how stakeholders, including patients and communities, will be involved in the design, delivery and review of the scheme.</b></p>	<p><b>HEIW</b> – key stakeholder with leading role in the education, training and development of the healthcare workforce in Wales. <b>Early discussions with HDUHB’s AMD – Dental indicate that HEIW is supportive of developing this Programme in HDUHB.</b> We will work closely with HEIW to design the detail, implement and review the Programme. Identification of the validation and outcomes achieved from the training component for participants is crucial, and so HEIW is a key partner.</p> <p><b>Local Dental Committee</b> – consultation/early engagement in the design of the Programme; support with promoting opportunities locally to be involved in the Programme.</p> <p><b>Patient Experience</b> will be captured as part of the ongoing evaluation of the Programme</p>
<p><b>Describe the plans and key milestones for monitoring progress and evaluation</b> <i>(attach an outline logic model and evaluation plan, if available- see annex for template)</i></p>	<p>See evaluation plan.</p> <p>Detailed project and monitoring and evaluation plans will identify key milestones for monitoring progress and evaluation on at least a quarterly basis.</p>
<p><b>Describe what resources (expertise and financial) has been allocated for evaluation</b></p>	<p>An evaluation framework will be created and embedded within the project from the outset. Expertise will be drawn from internal teams, including from dental and service improvement.</p>
<p><b>Outline the ways you plan to share the learning locally and nationally.</b></p>	<p>Feedback through the All Wales Dental Group, relevant Managed Clinical Networks, Annual CDO meeting, Local Dental Committee (LDC), through networking events with other Pacesetter projects.</p>

<b>COMPONENTS OF NATIONAL STRATEGIC POLICIES AND WAYS OF WORKING – Tick one or more of the relevant component which the scheme addresses</b>	
<b>Primary Care Model for Wales</b>	<b>TICK</b>
1. An informed public	
2. Empowered communities	
3. Support for well-being, prevention and self-care	
4. Local services (inc more services in the community)	X
5. Seamless working	
6. Effective telephone systems	
7. Quality out of hours care	
8. Directly accessed services	X
9. Integrated care for people with multiple care needs	
10. Estates and facilities support MDT working	
11. IT systems enable cluster communications and data sharing	
12. Ease of access to community diagnostics supporting high-quality care	
13. Finance systems designed to drive whole-system transformative change	
<b>A Healthier Wales - The Ten Design Principles (page 17)</b>	<b>TICK</b>
1. Prevention and early intervention – enabling and encouraging good health and wellbeing	
2. Safety – healthcare does no harm, enabling people to live safely in families and communities	
3. Independence – supporting people to manage their own health and wellbeing and remain in their own homes	
4. Voice – Empowering people to understand, manage and make decisions about their health, wellbeing and care	
5. Personalised – services tailored to individual needs and preferences	
6. Seamless – services and information which is not complex and co-ordinated	X
7. Higher value – better outcomes and patient experiences	X
8. Evidence driven – understand what works, evaluating innovative work and learning from others	X
9. Scalable – Ensuring that good practice scales up	X
10. Transformative – new ways of working are affordable and sustainable and change or replace approaches	X
<b>Aims of the primary care pacesetter fund</b>	<b>TICK</b>
1. Sustainability – contracting general medical services at cluster level	
2. Use of digital technology to improve access	
3. Delivering more care in the community	X
<b>The Strategic Programme for Primary Care</b>	<b>TICK</b>
1. Prevention and wellbeing	
2. 24/7 Model	
3. Data & Digital Technology	
4. Workforce & Organisational Development	X
5. Communication & Engagement	

Example logic model template

**Project title:** Dental Fellowship Programme (post-Dental Foundation)

**Project aim:** Improve recruitment and retention of dentists to provide both general and specialist dental services thus improving the overall access to NHS dental services within HDUHB.

**Project objectives** (the steps necessary to achieve the project aim):  
 Establish Project Implementation Group.  
 Establish Partnership working agreement with HEIW.  
 Develop HDdUHB Dental Fellowship training programme to meet HEIW's education framework.  
 Develop role descriptions and contracts.  
 Implement Communications Plan.  
 Recruitment of Fellows, Training Practices, Specialist Training Provider, Educational Supervisors and Training Programme Director.  
 Organise and hold induction sessions.

Consider inputs, outputs & outcomes for each of your objectives

Inputs	Outputs		Outcomes		
	Intervention/ activity	Participants	Short term	Medium term	Long term
Objective 1: Development of project team	Establish project implementation group.  Develop, implement and monitor project plan.	AMD Dental DPA Head of Dental Assistant Director Primary Care Primary Care Service Improvement Manager	Effective project implementation and management.	Robust mechanism to support development and further roll out of the scheme	

**Final submission 20<sup>th</sup> December 2019**

	<p>Development of project resources and materials.</p> <p>Financial monitoring.</p> <p>Implement and monitor monitoring and evaluation plan.</p>				
<p>Objective 2: Development of the training programme Development of recruitment processes Development of induction sessions</p>	<p>Programme established Recruitment Induction sessions held</p>	<p>Project team members (as above) HEIW staff</p>	<p>Dental Fellowship Participants are trained in specialist Oral Surgery and Paediatrics Services.</p>	<p>Increased access to general and specialist dental services within HDUHB.</p>	
<p>Objective 3: Partners/partnership working</p>	<p>Initial partnership meeting.</p> <p>Agreeing Memorandum of Understanding (MoU).</p> <p>Ongoing quarterly partnership meetings.</p>	<p>Project team members HEIW staff</p>	<p>Effective partnership working, governed by MoU.</p>		
<p>Objective 4: Expert input: Clinical (AMD – Dental); legal; HEIW</p>	<p>Development of training/education resources.</p>	<p>AMD – Dental HEIW staff NWSSP – Legal</p>	<p>Project benefits from robust Clinical and Educational governance.</p>	<p>Successful scheme that can be used to demonstrate HB commitment to</p>	<p>Increase in the number of AFs</p>

**Final submission 20<sup>th</sup> December 2019**

	<p>Development of contracts/agreements.</p> <p>Involvement of AMD - Dental in project implementation group and Pacesetter Steering Group meetings.</p>		<p>Project partners and participants benefit from appropriate contracts/agreements in place.</p> <p>Project partners have access to fit for purpose training/education resources which address HEIW's educational framework.</p> <p>Dental Fellowship Participants are trained in specialist Oral Surgery and Paediatrics Services.</p>	<p>service development and innovation.</p> <p>Increase in the number of AFs recruited to the scheme</p>	<p>recruited to the scheme</p>
<p><b>Key assumptions:</b>                  Involvement of AMD - Dental who is also a HEIW Training Programme Director to ensure necessary Clinical Governance.</p> <p>That HEIW will contribute funding towards training.</p>			<p><b>External factors/ influences:</b>                  Contract Reform</p> <p>Changes to HEIW education framework</p> <p>Changes to Dental budget which may affect dental workforce planning.</p> <p>Cluster IMTPs</p>		

**Final submission 20<sup>th</sup> December 2019**

**Costs & value:**

If successful, pilot will form part of our dental workforce development and planning as a 3-5 year programme.

**Unintended results:**

Improved access to specialist services within HDdUHB leads to a higher demand than we have the capacity through the pilot to address.

<b>EVALUATION PLAN</b>				
<b>What do we want to know?</b> (Evaluation Question)	<b>How will we know it?</b> (Indicator)	<b>How to collect information about the indicator?</b> (Data source/ method)	<b>When and where will info be collected?</b> (Timeframe)	<b>Who will do this?</b> (Responsibility)
Improved recruitment and retention of dental practitioners?	<p>Baseline – current number of unfilled posts</p> <p>Number of Fellows who secure a post in HDdUHB at the end of the Dental Fellowship Programme</p>	<p>Baseline - there are 13 places on the West Wales DFT scheme, four of these are in HDUHB Practices. This year (2019-2020) only one Practice was successful in recruiting Dental Foundation trainees.</p> <p>Baseline – number of unfilled posts</p> <p>Interview with Fellows.</p> <p>Interviews with Training Practices.</p> <p>Interviews with HDUHB and HEIW</p>	<p>Baseline – April 2020</p> <p>March 2021 – for Fellow taking part in Year 1</p> <p>Year 2 Fellows – April 2021 and March 2022</p> <p>Other interviews – end of Year 2, March 2022</p>	Project support team

**Final submission 20<sup>th</sup> December 2019**

Improved access to general dental services, in particular in rural areas within HDdUHB?	Improvement in routine access to NHS dental services particularly in rural areas	Baseline access data		
More specialist services that can be commissioned within the Health Board?	Baseline – at beginning of Programme, current number of services being commissioned and which services.  Increased number and range of specialist services being commissioned within HDUHB.	Baseline - 95% of Primary Care MOS is currently provided outside the HDUHB area. We have no Tier 2 Paediatrics Services in Primary Care  Interviews with HDUHB	Baseline – April 2020.  Year 1 – March 2021  Year 2 – March 2022	Project Support Team
Supporting a culture of learning and development that other contractors want to be part of?	Baseline – current analysis of the culture of learning and development that exists amongst contractors  Feedback from Fellows re: their view of the culture	Baseline interviews  Interview with Fellows  Interviews with Training Practices.  Interviews with HDUHB and HEIW  Feedback from other contractors	Baseline interviews  Once Fellow completes Fellowship Programme  Other interviews – end of Year 2, March 2022	

**Final submission 20<sup>th</sup> December 2019**

	Participants reporting an improved culture of learning and development?			
More dental practitioners are upskilled in priority areas identified in HDUHB?	More dental practitioners from within HDUHB able to offer specialist services in Oral Surgery and Paediatrics.	Baseline - 95% of Primary Care MOS is currently provided outside the HDdUHB area. We have no Tier 2 Paediatrics Services in Primary Care	Baseline – April 2020.  End of year 1 – March 2021.  End of project year 2 – March 2022.	Project support team
Increased access to specialist services for patients within HDUHB?	Number of patients being able to access specialist services from within HDUHB.  Reduction in referrals to neighbouring HBs  Reduction in contracted activity in neighbouring HBs	Baseline - 95% of Primary Care MOS is currently provided outside the HDdUHB area. We have no Tier 2 Paediatrics Services in Primary Care  At end of project - number of service users being able to access specialist services from within HDdUHB.	Baseline – April 2020.  End of year 1 – March 2021.  End of project year 2 – March 2022.	Project support team

**Final submission 20<sup>th</sup> December 2019**

<p>Increased pathways into Primary Care to avoid unnecessary referrals into hospital settings for Oral Surgery and Paediatrics Services?</p>	<p>Increased number of referrals to Primary Care for Oral Surgery and Paediatrics services</p> <p>Reduced number of referrals to hospital for Oral Surgery and Paediatrics services</p>	<p>Baseline – number of referral to Primary Care for Oral Surgery and Paediatrics Services.</p> <p>Baseline – number of referrals to hospital for Oral Surgery and Paediatrics services</p>	<p>Baseline – April 2020</p> <p>End Year 1 – March 2021</p> <p>End of Year 2 – March 2022</p>	<p>Project support team</p>
--	---	---	---	-----------------------------