



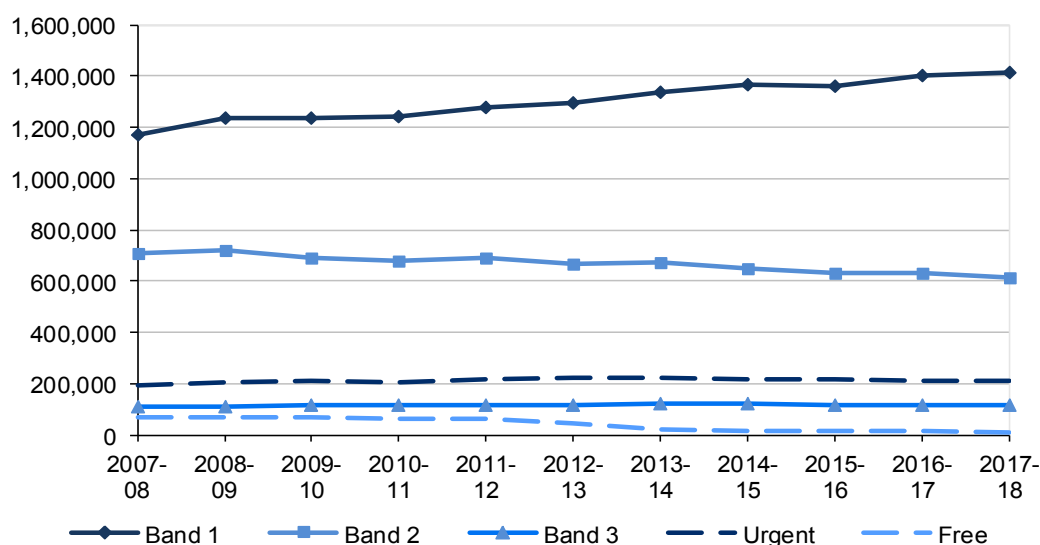
NHS Dental Statistics in Wales, 2017–18

30 August 2018
SFR 76/2018

The series began when the current dental contract was introduced in 2006.

All the data in this release is derived from dental activity forms submitted for payment and processed by NHS Business Services Authority Dental Services.

Chart 1: Annual number of courses of treatment, by treatment band, between 1 April and 31 March



Source: NHS Dental Services

Patients treated in the 24 months before 31 March 2018

- 1.7 million patients were seen in the 24 month period ending March 2018. In Wales, 52.0 per cent of adults and 66.9 per cent of children were treated.

Between 1 April 2017 and 31 March 2018

- There were 2,374,600 courses of treatment (CoTs); 60 per cent of which were Band 1 treatments.
- 45.2 per cent of all CoTs were for paying adults.
- 1,479 dentists had NHS activity recorded.
- The total patient charge was £35.5 million.
- 4.9 million units of dental activity (UDA) were carried out, representing approximately 2.4 million individual NHS dental CoTs.

About this release

The statistics in this release are based on NHS dental work completed by a NHS dentist, which has been submitted for payment. It provides a summary of completed activity during 2016–17 by NHS dentists. It includes data on the quantity of activity completed, treatment undertaken, dental workforce, number of patients treated within the past 24 months, and orthodontic activity. The statistics are based on any NHS dental work completed by a NHS dentist, which has been submitted for payment.

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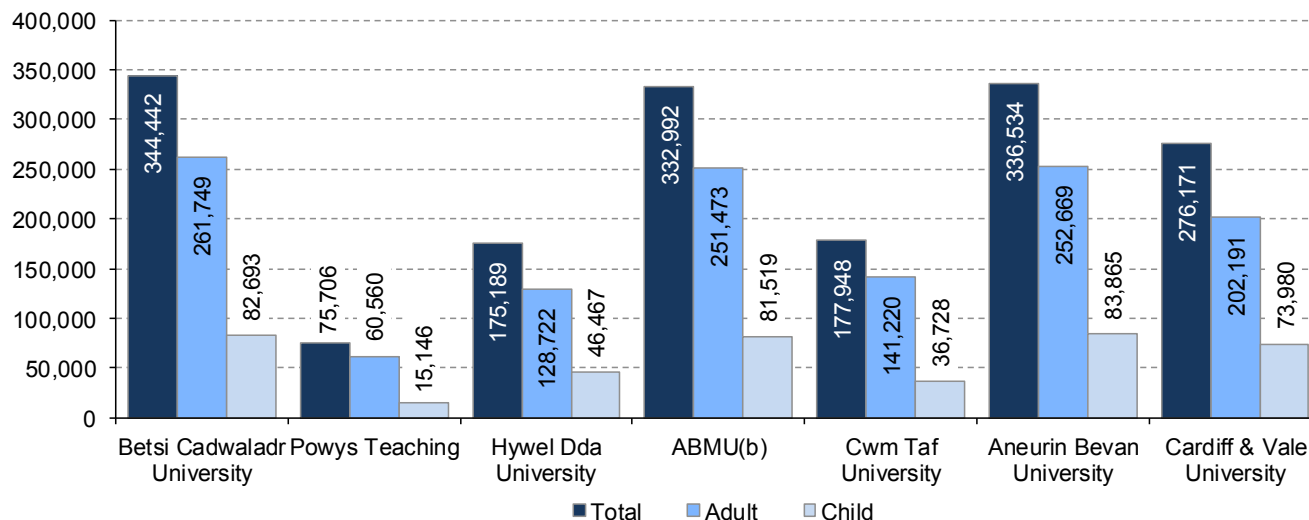
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Patients treated

“Patients treated” is a count of the number of distinct patients that have been processed during the last 24 months. This is a count of unique patients, that is, each patient is counted only once even if they have received several episodes of care over the period. Note that patients may not be treated in their resident health board. Orthodontic patients are included in the patients seen measure.

See the [Quality report](#) and the [Notes](#) pages for more information about patients treated.

Chart 2: Number of patients treated in the 24 month period ending March 2018 (a)



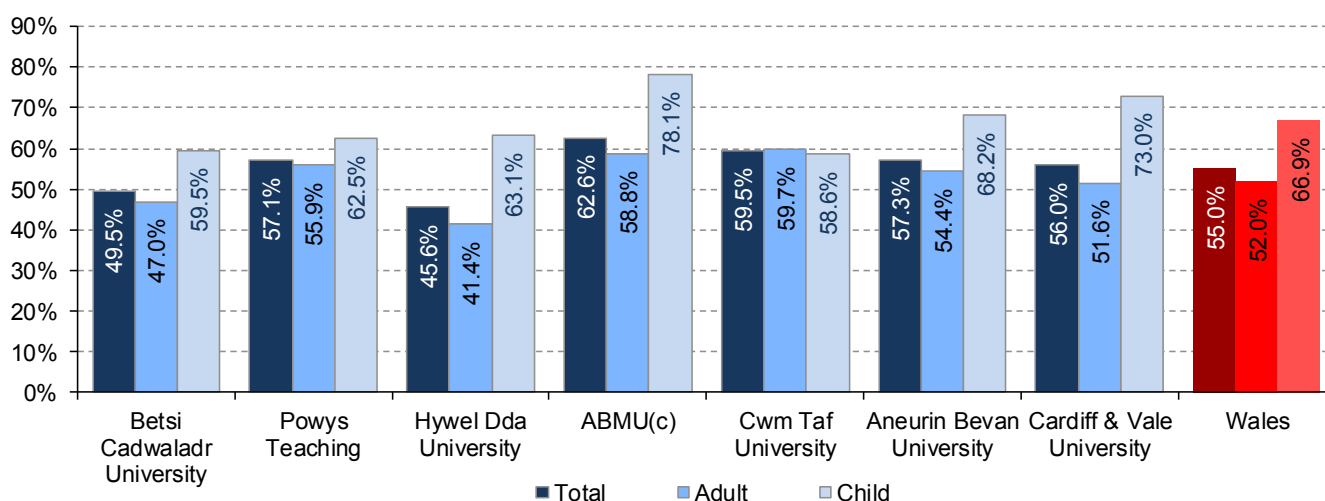
Source: NHS Dental Services

(a) Adults: Number of resident population aged 18 years or over. Children: Number of resident population aged 0-17 years. LHB of last recorded treatment.

(b) Abertawe Bro Morgannwg University

A total of 1.72 million patients (55.0 per cent of the population) were seen in the 24 month period ending March 2018; of which 1,298,600 were adults and 420,400 were children. This is 8,700 more (0.5 per cent) compared to the previous 24 month period ending March 2017. See [StatsWales](#) for further information.

Chart 3: Percentage of the population treated in the 24 month period ending March 2018 (a)(b)



Source: NHS Dental Services, Office for National Statistics

(a) Adults: Number of resident population aged 18 years or over. Children: Percentage of resident population aged 0-17 years. LHB of last recorded treatment.

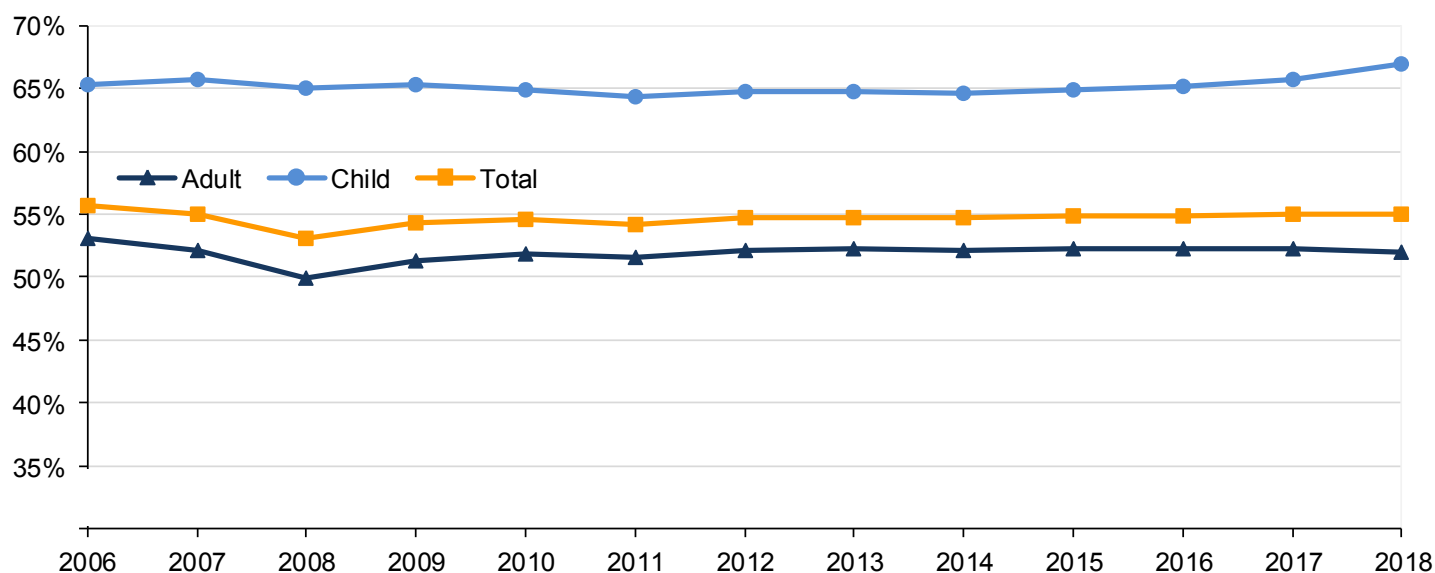
(b) Based on Office for National Statistics 2016 mid-year estimates of the population. More information on population data is available in the [Notes](#) page.

(c) Abertawe Bro Morgannwg University

[Chart 3](#) shows the percentage of adults and children treated in the 24 month period ending 31 March 2018. The lowest percentage of adults treated was recorded in Hywel Dda (41.4 per cent) and the highest was recorded in Cwm Taf University (59.7 per cent).

420,000 child patients (aged 0-17 years) were treated by dentists in the 24 months ending 31 March 2018. The lowest percentage of children treated was recorded in Cwm Taf University (58.6 per cent) and the highest was recorded in Abertawe Bro Morgannwg University (78.1 per cent).

Chart 4: The percentage of the adult and child population treated in the 24 month period ending March (a)



Source: NHS Dental Services

(a) Adults: Number of resident population aged 18 years or over. Children: Number of resident population aged 0-17 years. LHB of last recorded treatment.

Summary: The percentage of adults treated in Wales has remained stable over time, despite a slight drop in 2008. Note that the adult population has risen substantially during this time period and, according to ONS mid year estimates, there were around 154,600 more adults in June 2017 than in June 2006 and around 64,900 more adult patients were treated in 2017-18 than in 2006-07.

Latest Data: In the 24 month period ending March 2018, 52.0 per cent of adults and 66.9 per cent of children were treated, meaning that overall 55.0 per cent of the Welsh population received treatment.

Annual Change: When comparing the 24 month period ending March 2018 and the 24 month period ending March 2017 there was a 0.5 per cent increase in the total number of persons treated. Within this, the number of children treated increased by 7,500 (1.8 per cent) and the number of adults treated increased by 1,300 (0.1 per cent).

Change since first year of data: In the 24 month period ending March 2006 1,654,100 (55.7 per cent) persons received treatment. Of which 422,800 (65.3% per cent) were children and 1,231,300 (53.0% per cent) were adults. Overall, the latest data shows a slight decrease in the proportion of people treated (0.7 percentage points) but, within this, the proportion of the child population that received treatment has increase by 1.7 percentage points.

Patient charges

Patient charges are paid by adult patients who are eligible for charges. The level of the charge is determined by the treatment band. Some patients do not pay for their NHS treatment. The main groups of non charge paying patients are children (aged under 18); 18 year olds in full time education; pregnant women and nursing mothers; adults on low income or in receipt of certain benefits and patients treated in hospital (although treatments for the latter are not included in this release).

Treatments are split into treatment bands which are used to determine the charge paid by patients. These include:

- **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 mid range treatments (such as fillings, extractions, and root canal work) in addition to Band 1 work.
- **Band 3** - includes 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.
- **Free** - 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.

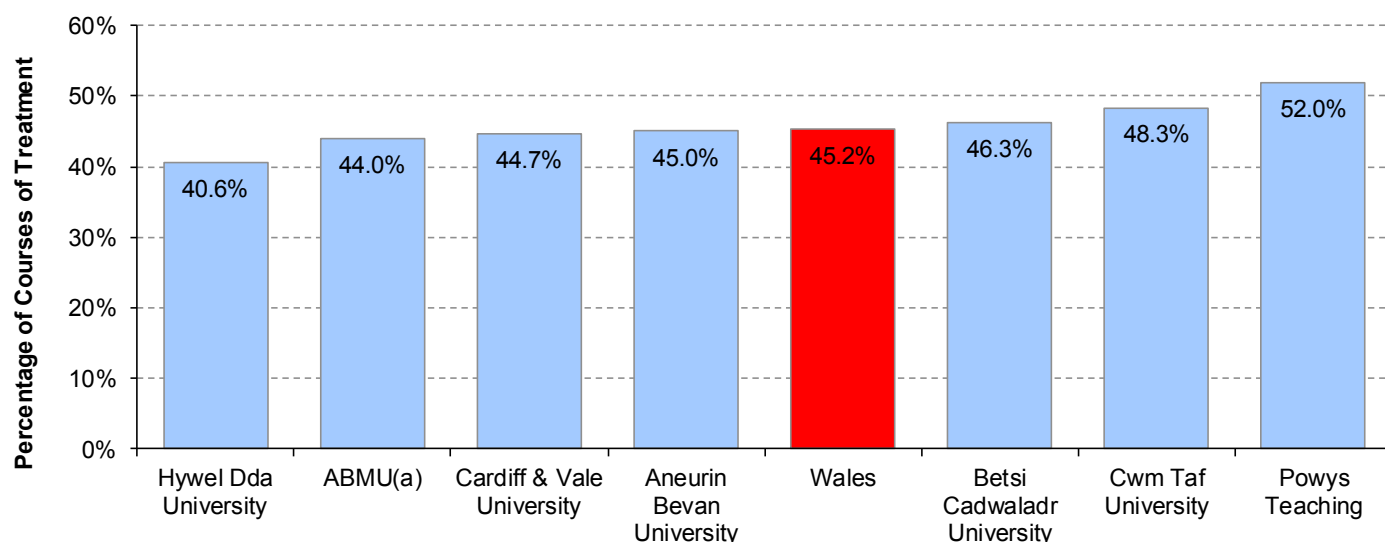
The band is determined by the most complex treatment included in the claim. The patient charge for the urgent band is the same as that for Band 1.

In 2017–18 there were 1,074,100 adult courses of treatment (CoTs) which were chargeable, an increase of 0.3 per cent compared with 2016-17. The total patient charge for these patients amounted to £35.5million, an increase of 2.1 per cent compared with 2016-17. There were 698,500 treatments for adults that were exempt from charge, which is a decrease of 2.8 per cent; and 589,900 treatments for children in 2017–18 that were also exempt from any charges, which is an increase of 1.7 per cent for children from 2016-17.

See [StatsWales](#) for Health Board counts and patient charges by treatment band.

See the [Quality report](#) and the [Notes](#) pages for more information about patient charges.

Chart 5: Percentage of Courses of Treatment which were not exempt from charge by Health Board, between 1 April 2017 and 31 March 2018

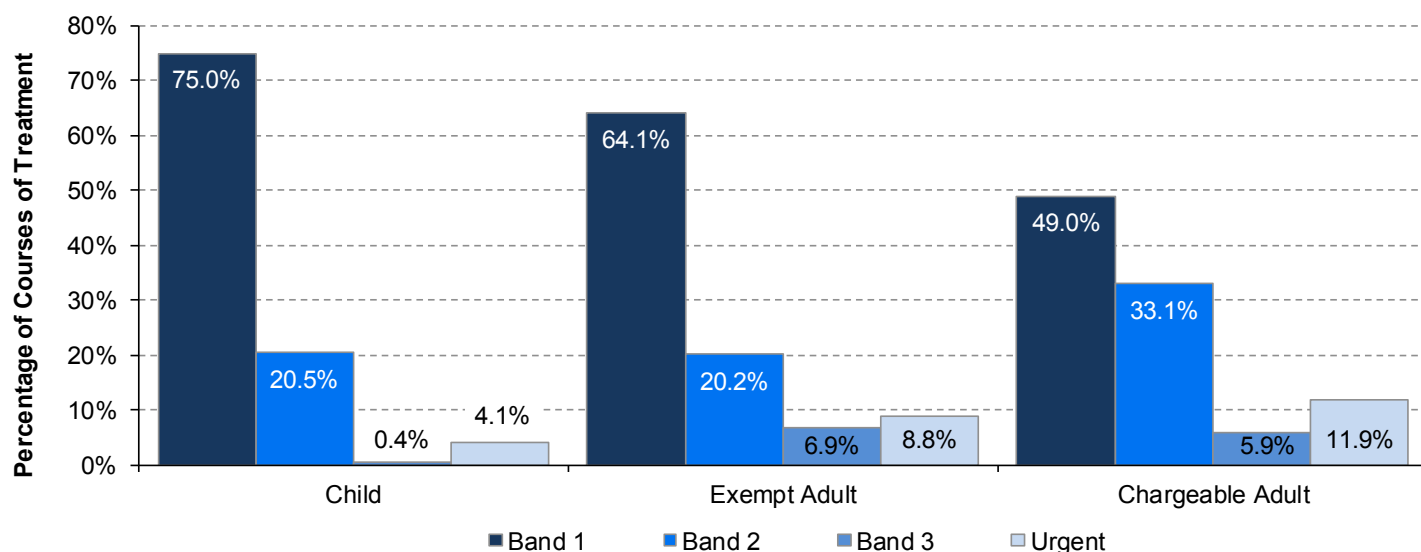


Source: NHS Dental Services

(a) Abertawe Bro Morgannwg University

45.2 per cent of all courses of treatment were for paying adults in 2017–18 compared to 44.9 per cent in 2016–17. This proportion varied across health boards according to the profile of the local patient population. [Chart 5](#) shows that the lowest percentage of treatments that were for paying adults was recorded in Hywel Dda at 40.6 per cent and the highest was in Powys recorded at 52.0 per cent.

Chart 6: Percentage of courses of treatment by type of patient and treatment band, between 31 April 2017 and 31 March 2018 (a)

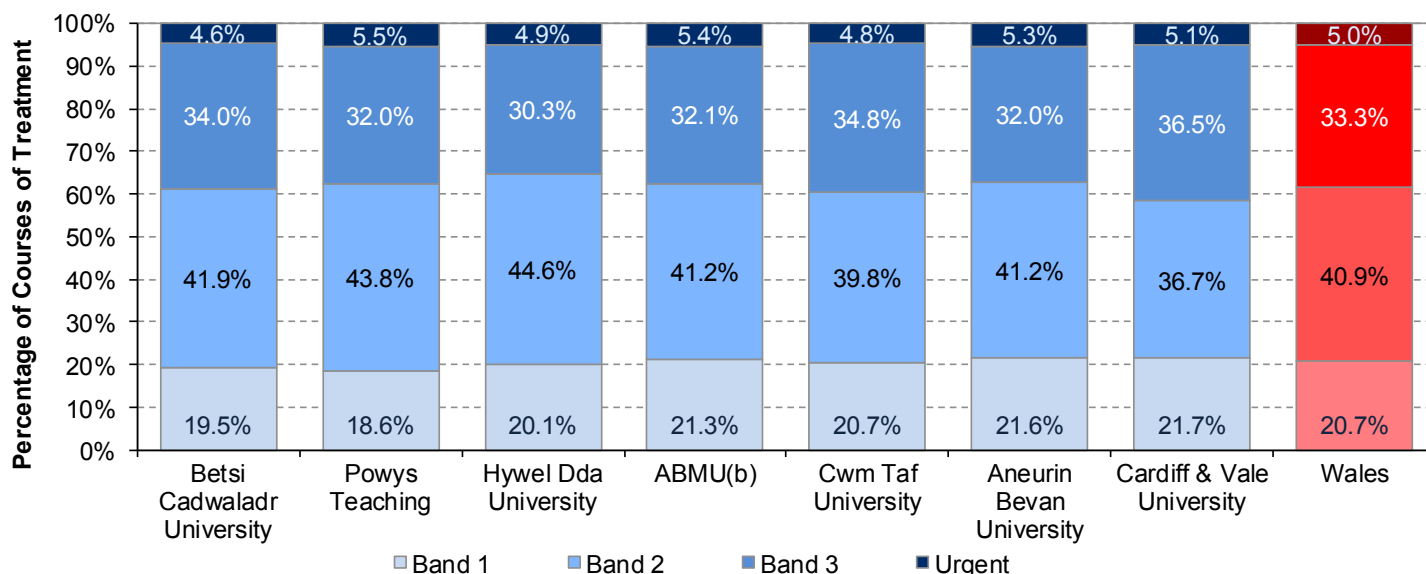


Source: NHS Dental Services

(a) Note that this chart excludes treatments for which there was no charge, treatments in non-chargeable bands and a small number of treatments in non banded categories.

[Chart 6](#) shows the proportion of CoTs in each treatment band for each patient type. In 2017–18, Band 1 courses of treatment accounted for 49.0 per cent of treatments for chargeable adults, 64.1 per cent of treatments for exempt adults and 75.0 per cent of treatments for children. Band 2 treatments for each patient type ranged from 20.5 per cent (children) to 33.1 per cent (Chargeable Adult). Chargeable adults had the highest proportion of urgent courses of treatment at 11.9 per cent.

Chart 7: Proportion of patient charges by health board and band, between 1 April 2017 and 31 March 2018 (a)



Source: NHS Dental Services

(a) Note that this chart excludes treatments for which there was no charge, treatments in non-chargeable bands and a small number of treatments in non banded categories.

(b) Abertawe Bro Morgannwg University

Although Band 1 treatments made up nearly half of chargeable treatments they attracted only 20.7 per cent of the patient charge, as illustrated in [Chart 7](#). The more complex and expensive Band 3 payments, accounting for only 5.9 per cent of chargeable treatments, attracted a third of the total patient charge. Band 2 patient treatments attracted the most charge overall and accounted for between 36.7 per cent and 44.6 per cent of total patient charges for each health board.

Band 1 charges for Wales in the year 2017-18 amounted to £7,341,300 which was 20.7 per cent of the total charges. Band 2 charges were 40.9 per cent of the Wales total at £14,484,800 and Band 3 charges accounted for 33.3 per cent of the Wales total with £11,811,100.

Urgent treatments accounted for 5.0 per cent of the Wales total with £1,785,100 charged.

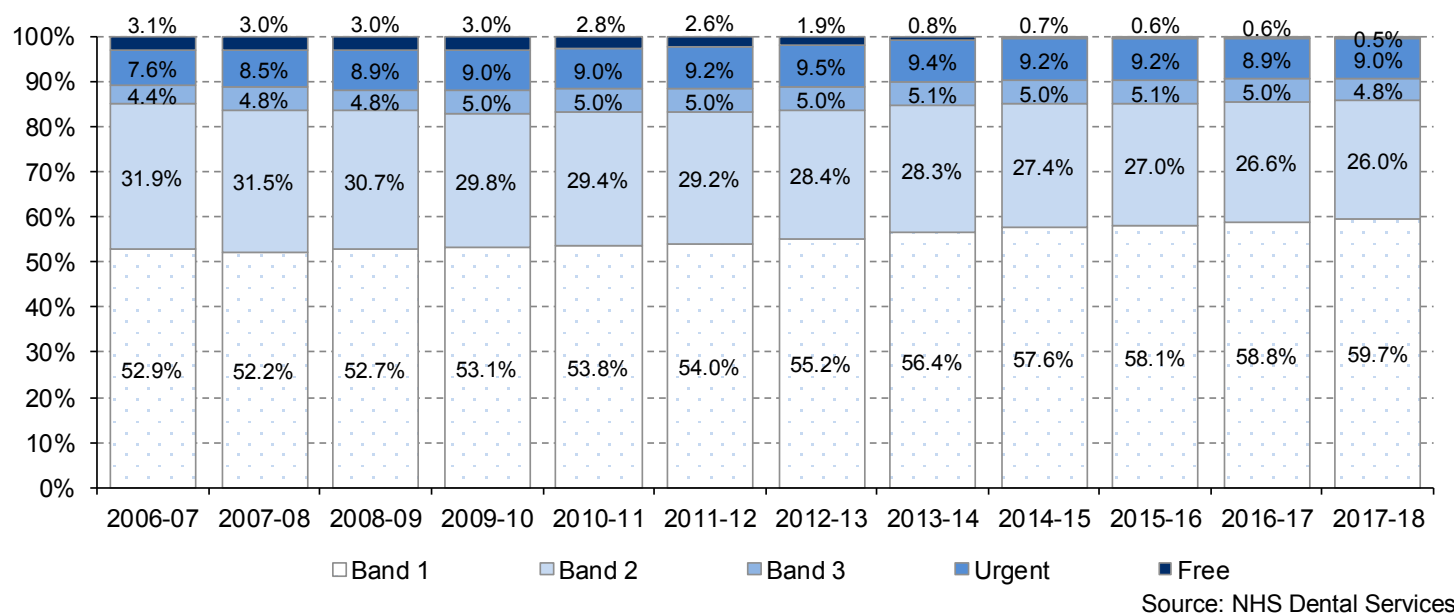
Activity: Courses of treatment

Activity data presented here is the total activity completed. Treatments are split into treatment bands, see [patient charges](#) for further information, such as Band 1, Band 2, Band 3, and Urgent treatments, which are used to determine the charge paid by patients.

See the [Quality report](#) and the [Notes](#) pages for more information about courses of treatment activity.

In 2017-18 there were 2,374,600 COTs, 0.4 per cent less than in 2016-17 but this was 5.6 per cent more than in 2007-08. Since 2007-08, the largest increase has been seen in the number of Band 1 COTs, rising from 1,173,600 to 1,416,600 in 2017-18. Further data can be found on [StatsWales](#).

Chart 8: Percentages of Courses of Treatment, by treatment band, between 1 April and 31 March



Summary: [Chart 8](#) shows the proportion of each treatment band CoT from the introduction of the current contract in 2006-07 to 2017-18. There has been an increasing proportion of Band 1 courses of treatments (CoTs) being performed since 2006-07. With 59.7 per cent of courses of treatment being Band 1 in the year ending March 2018, a rise of 6.7 percentage points from 52.9 per cent in 2006-07 (328,681 CoTs).

Latest Data: The percentage of Band 1 CoTs is at an all time high (59.7 per cent). Free and Band 2 CoTs are the lowest on record (26.0 and 0.5 per cent respectively). Band 3 accounted for 4.8 per cent and urgent courses accounted for 9.0 per cent in 2017-18

Annual Change: There has been a fall of 0.4 per cent in the number of courses of treatments performed between 2016-17 and 2017-18.

Change since first year of data: The overall number of CoTs has increased by 319,600 (15.6 per cent) since 2006-07.

Activity: Units of dental activity

Unit of Dental Activity (UDA) is the technical term used in the NHS Dental Contract regulations to describe weighted courses of treatment. They refer to the whole claim, not just individual items. Table 1 shows the weighting for each of the treatment category bands and is used to calculate the treatment courses by band figures. These figures reflect the completed picture for the whole year 2017-18.

Table 1: UDA for each Treatment Category

<u>Treatment category</u>	<u>UDA per treatment claim</u>
Band 1	1.00
Band 2	3.00
Band 3	12.00
Band 1 urgent	1.20
Arrest of bleeding	1.20
Bridge repair	1.20
Denture repair	1.00
Prescription issue	0.00
Removal of sutures	1.00

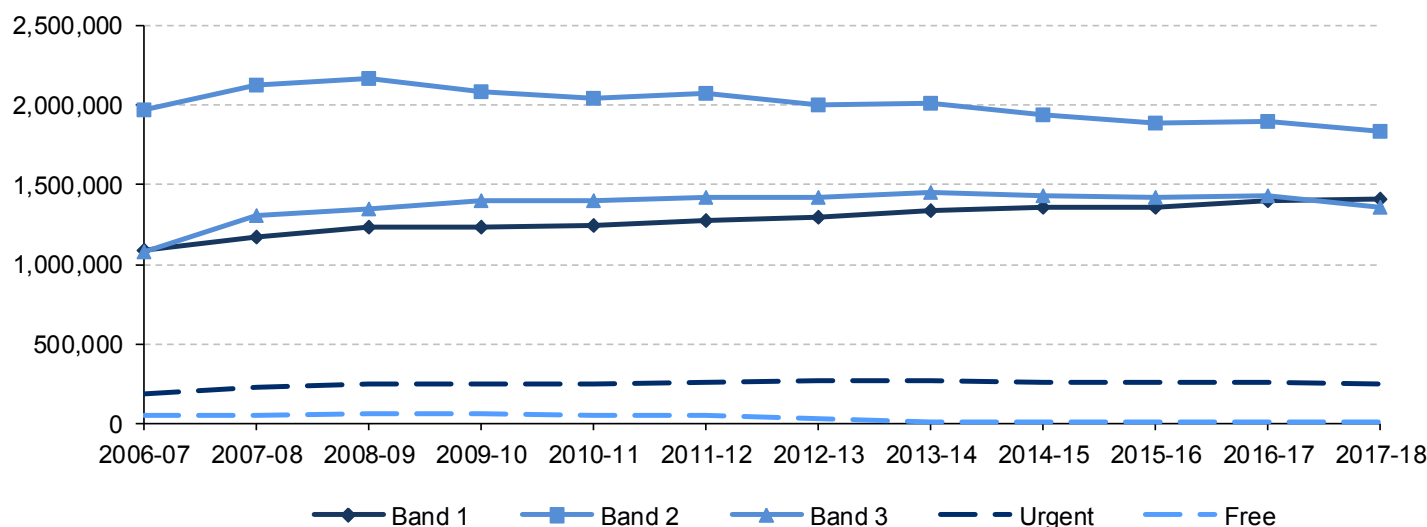
Source: Welsh Government

An activity treatment does not always equate to one unit of dental activity due to the complexity of some of the procedures. A more complex procedure will be given a larger weight. For example an examination which is mostly in Band 1 is a relatively simple procedure and receives an UDA of one; however a denture being fitted will be in Band 3 and receives the highest weighting because it is usually a much more complex procedure.

From 2014 to April 2016, no Units of Dental Activity were allocated to the contract if dentists submitted their activity data more than two months from the date of completion of a course of treatment. The courses of treatments were still recorded. Between April 2016 and August 2016 this rule was extended to 4 months from the date of completion and, from September 2016, it was suspended.

See the [Quality report](#) and the [Notes](#) pages for more information about courses of Units of dental activity.

Chart 9: Number of Units of Dental Activity, by treatment band, between 1 April and 31 March (a)(b)



Source: NHS Dental Services

(a) From June 2014 to April 2016, no Units of Dental Activity were allocated to the contract if dentists submit their activity data more than two months from the date of completion of a course of treatment. The courses of treatments were still recorded. See [note](#).

(b) A UDA of 0.75 for prescription issue was removed from 1 November 2012 (See [notes](#)).

Summary: [Chart 9](#) shows the total number of Units of Dental Activity (UDA) of treatment for Wales from the introduction of the new contract in 2007-08 to 2017-18, by treatment band.

Latest Data: In total in 2017-18, there were 4,883,000 UDAs. Band 2 accounted for the largest proportion of the total UDAs (37.7 per cent of the total number of UDAs). Band 1 has overtaken Band 3 as the second largest proportion, with 28.8% of all UDAs.

Annual Change: There was a 2.7 per cent annual decrease in the total number of UDA in 2017-18, driven by a 72,200 fall in the number of Band 3 UDAs and a 62,800 fall in Band 2 UDAs performed.

Change since first year of data: Since 2006-07 the total number of UDAs performed has increased by 11.5 per cent. The number of Band 1, Band 3 and Urgent UDAs have increased by 29.5, 25.8 and 33.6 per cent respectively. However, the number of Band 2 and Free UDAs have decreased by 6.5 and 81.0 per cent respectively.

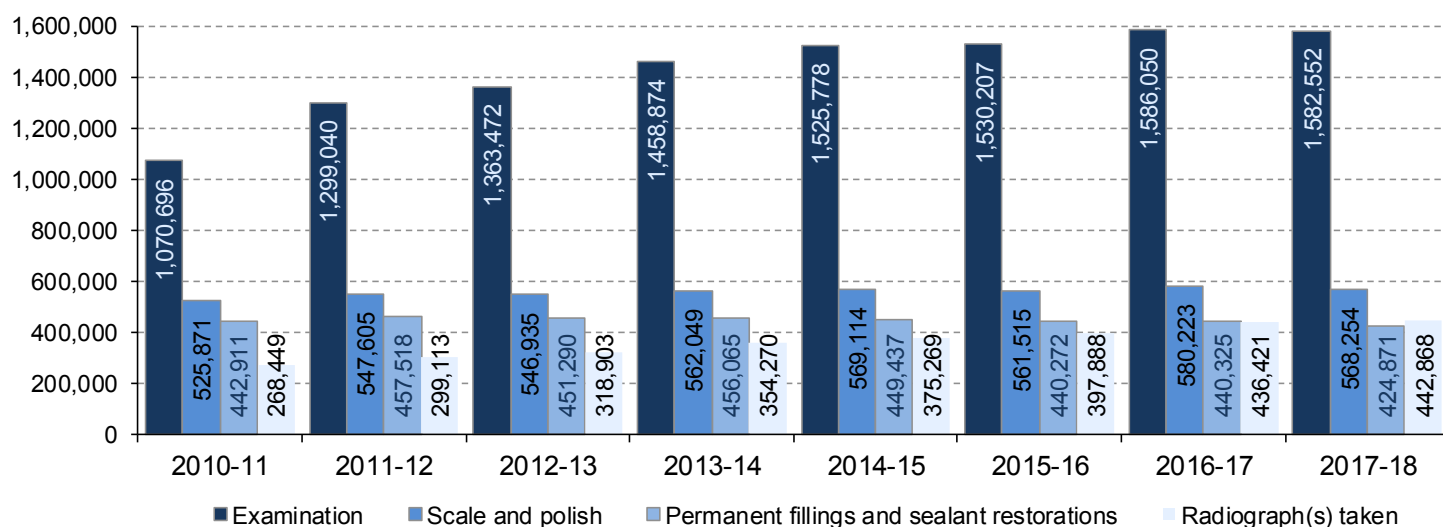
Activity: Clinical dental activity

Figures are estimates based on a full year of clinical data. In the early years of data collection, figures were grossed up to match activity data. More information is available in the [Notes](#) section.

The clinical treatments are presented as they are recorded in the [FP17W form](#). Where complex treatments are displayed in the lower bands, such as inlays in Band 2, it is likely that the treatment has been recorded in error.

See the [Quality report](#) and the [Notes](#) pages for more information about clinical activity data.

Chart 10: Selected number of clinical treatment for adults by year (at 31 March) (a)



Source: NHS Dental Services

(a) A patient can receive more than one clinical treatment within a single CoT.

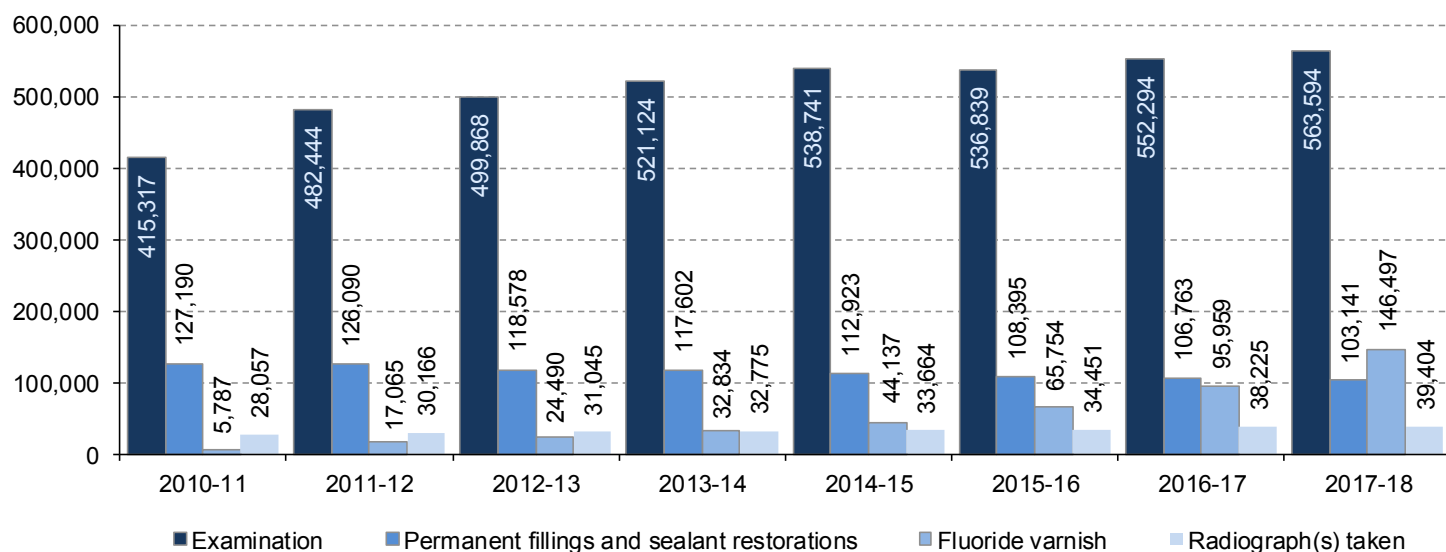
Summary: For adult treatments, the proportion of CoTs including an examination has increased over time. Over time the number of clinical treatments including radiographs has increased, reaching an all time high in 2017-18. Scale and polish and permanent fillings and sealant restorations have remained at a consistent level. Refer to [Table A3](#) for the total number of adult CoTs that contain each clinical treatment for 2017-18 and 2016-17. See [Table A5](#) for proportions of adult clinical treatment activity, by treatment band, for the previous 2 years.

Latest Data: 89.3 per cent of adult courses of treatments (CoTs) included an examination in 2017-18, equating to 1,582,600 CoTs.

Annual Change: Despite the number of examinations being performed in 2017-18 being slightly lower than in 2016-17 the proportion of CoTs including an examination increased, up from 88.7 per cent to 89.3 per cent in 2017-18.

Change since first year of data: The proportion of CoTs including an examination has increased over time, up from 63.6 per cent in 2010-11 to 89.3 per cent in 2017-18 (a rise of 513,100 examinations).

Chart 11: The number of child Courses of Treatment for selected clinical treatment by year as at 31 March (a)



Source: NHS Dental Services

(a) A patient can receive more than one clinical treatment within a single CoT.

Summary: An all time high number of examinations were carried out on children in 2017-18 and there are an increasing proportion of children receiving fluoride varnish and radiographs as part of their course of treatment.

See [TableA6](#) for the total number of child CoTs that contain each clinical treatment for 2016-17 and 2015-16. This growth is consistent with guidelines from the Welsh Government's funded NHS Dental Programme, 'Designed to Smile', which advocates the routine use of fluoride to improve children's dental health. Children are screened at least once in nursery or in Primary School, by qualified Dental teams working in the Community Dental Service (CDS). Therefore the number of children receiving fluoride varnish treatments via this programme is not included in [Chart 11](#), so there are in fact more than 146,500 children who receive the treatment in Wales.

Further information can be found on the [Designed to Smile](#) website. The Designed to Smile monitoring and evaluation reports can be found on the [Welsh Government](#) website.

Latest Data: 563,600 examinations were carried out and 6.7 per cent of the total courses of treatment involved a radiograph being taken as part of the treatment.

Annual Change: In 2017-18, fluoride varnish treatment replaced permanent fillings and sealant restorations as the second biggest clinical treatment. Whilst there was a relatively small decrease (3,600) in the number of permanent fillings and sealant restorations carried out, the change was due to a large increase (50,500) in the number of fluoride varnish treatments.

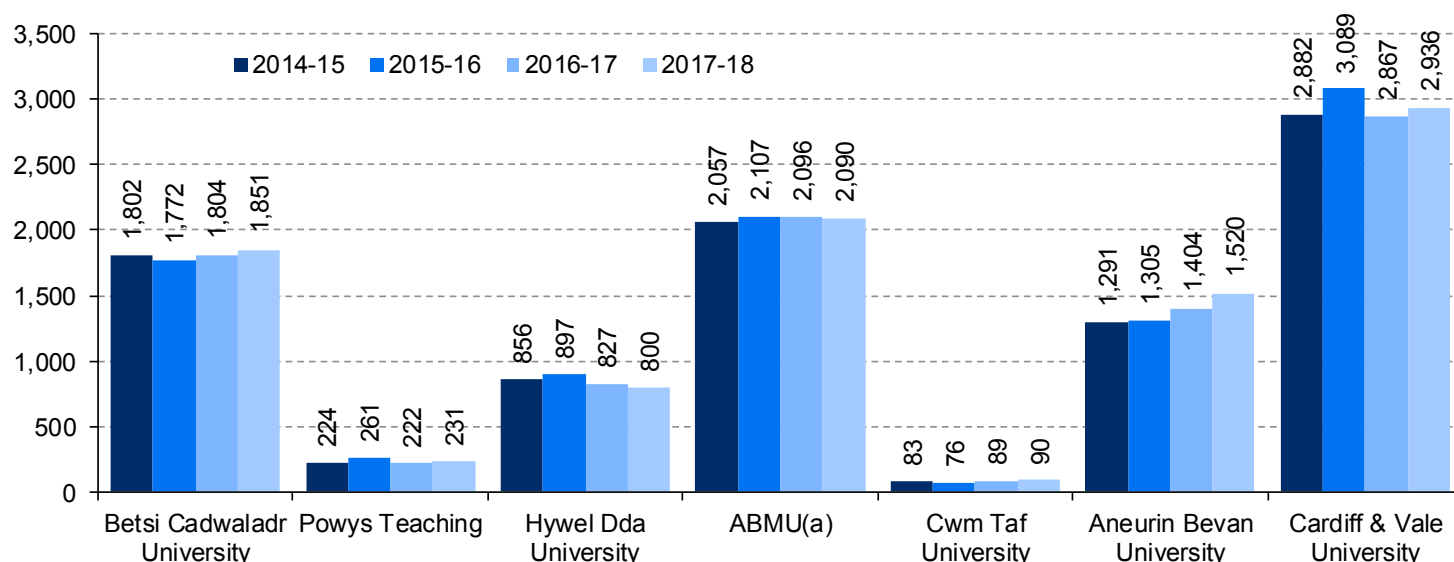
Change since first year of data: Fluoride treatments have increased from 0.7 per cent of the total courses of treatments in 2010-11 to 24.8 per cent in 2017-18. Permanent fillings and sealant restorations have decreased from 23.6 per cent of the total courses of treatments in 2010-11 to 17.5 per cent in 2017-18.

Orthodontic activity

Orthodontics is a specialist area of dentistry concerned with the growth and development of the teeth and jaws and the prevention and treatment of abnormalities of this development. Therefore most patients are children. Orthodontic data is separate from the CoT and UDA data presented earlier in the release and are collected via data submitted on an [FP17W form](#).

- Orthodontic treatment starts as measured by the numbers of patients assessed and accepted during the year for treatment. Note that the treatment relating to these starts may be performed over a number of years.
- The volumes of Units of Orthodontic Activity (UOAs) credited in respect of orthodontic starts, orthodontic assessments and orthodontic appliance repairs between 1 April and 31 March of the following year, as processed up to the June;

Chart 12: Number of treatments undertaken (Assess and Accept FP17Os) by Local Health Board, between 1 April and 31 March



Source: NHS Dental Services

(a) Abertawe Bro Morgannwg University

For assessed and accepted patients, 9,518 treatments were undertaken between April 2017 and March 2018, an increase of 2.2 per cent compared to the previous year. Aneurin Bevan University had the largest percentage increase over the year, with 8.3 per cent more treatments. Hywel Dda had the largest annual percentage decrease of 3.3 per cent.

A course of Orthodontic activity equates to between 4 and 23 UOAs, according to the age of the patient. All of these are credited to the dentist at the commencement of orthodontic treatment course, even though the treatment may be performed over a number of years.

[Table A1](#) shows the total number of UOAs credited in Wales during 2017-18 was 205,500. The total has increased by 1.6 per cent since 2016-17.

See [Table A2](#) for the number of treatments undertaken (Assess and Accept FP17Os) by LHBs.

See the [Quality report](#) and the [Notes](#) pages for more information about orthodontic activity.

Workforce

Dental workforce data presented here is the total number of dentists with NHS activity between 1 April and 31 March. Note that this is a headcount of dentists who have done any NHS activity during the year; whole time equivalent data is not available.

[StatsWales](#) shows that 4.9 per cent of dentists, in 2017–18, were working on Personal Dental Service (PDS) contracts compared with 5.2 per cent the previous year, while 81.9 per cent were on General Dental Service (GDS) contracts compared with 81.8 per cent the previous year. The remaining 13.2 per cent of dentists were on mixed or Trust-led Dental Services (TDS) contracts.

See the [Quality report](#) and the [Notes](#) pages for more information about contract types and dentist types.

Table 2: Total number of Dentists with NHS activity, between 1 April and 31 March (a)

Year (as at 31 March)	Total number of Dentists with NHS activity	Dentists per 10,000 population ^(b)	Population per dentist ^(b)
2007	1,141	3.8	2,617
2008	1,247	4.1	2,411
2009	1,293	4.3	2,340
2010	1,310	4.3	2,320
2011	1,349	4.4	2,261
2012	1,360	4.4	2,253
2013	1,392	4.5	2,208
2014	1,438	4.7	2,144
2015	1,439	4.7	2,149
2016	1,470	4.7	2,108
2017	1,475	4.7	2,111
2018	1,479	4.7	2,113

Source: NHS Dental Services, Office for National Statistics

(a) Performers with NHS activity recorded via FP17W forms.

(b) Based on Office for National Statistics mid-year population estimates of the population.

Summary: The number of dentists with NHS activity continues to rise in line with an increasing population in Wales as shown by the number of dentists per 10,000 population, which has remained constant for the last five years. See [StatsWales](#) for health board counts.

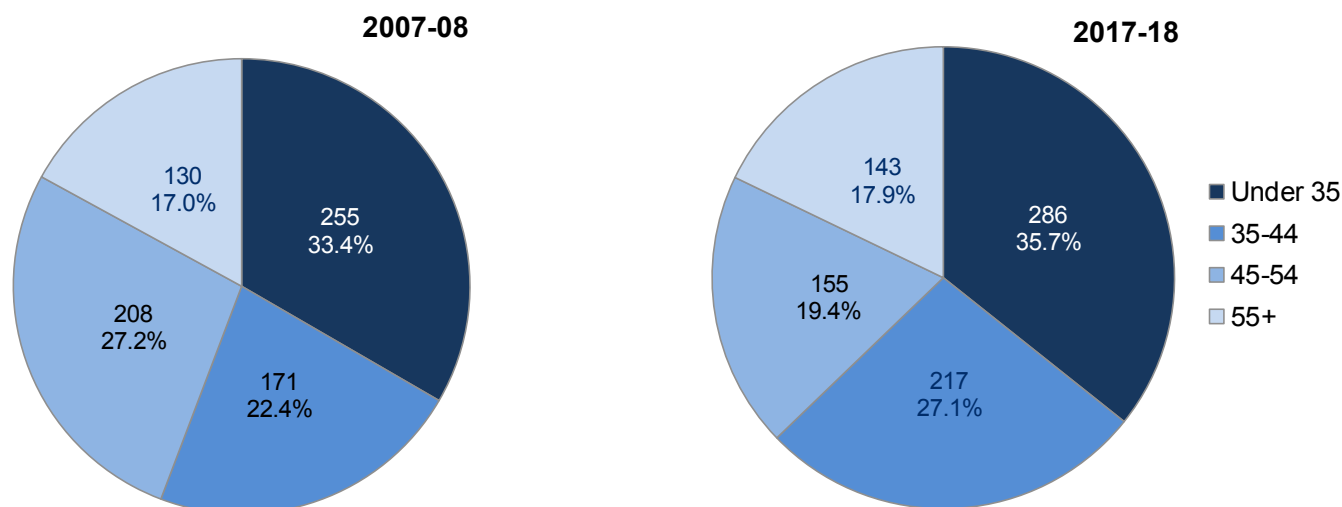
Latest Data: A total of 1,479 dentists with NHS activity were recorded between 1 April 2017 and 31 March 2018. Of which, 155 (10.5 per cent) of these were Providing Performers and 1,324 (89.5 per cent) dentists were Associates. This figure includes 'Dental foundation year 1 posts'. As at 31 March 2018 there were 72 centrally funded Dental Foundation year 1 posts, the same number as in 2016-17.

Annual Change: There were four more dentists with recorded NHS activity in 2017-18 than in 2016-2017. However, there was a decrease of 14 (8.3 per cent) Providing Performers over the year but, over the same time period, there was an increase of 18 Associates (1.4 per cent).

Change since first year of data: The number of people per dentists has decreased from 2,617 in 2007 to 2,113 in 2018.

See [Workforce definitions](#) in the Notes section for further information.

Chart 13: Percentage and number of male dentists with NHS activity (a), by age

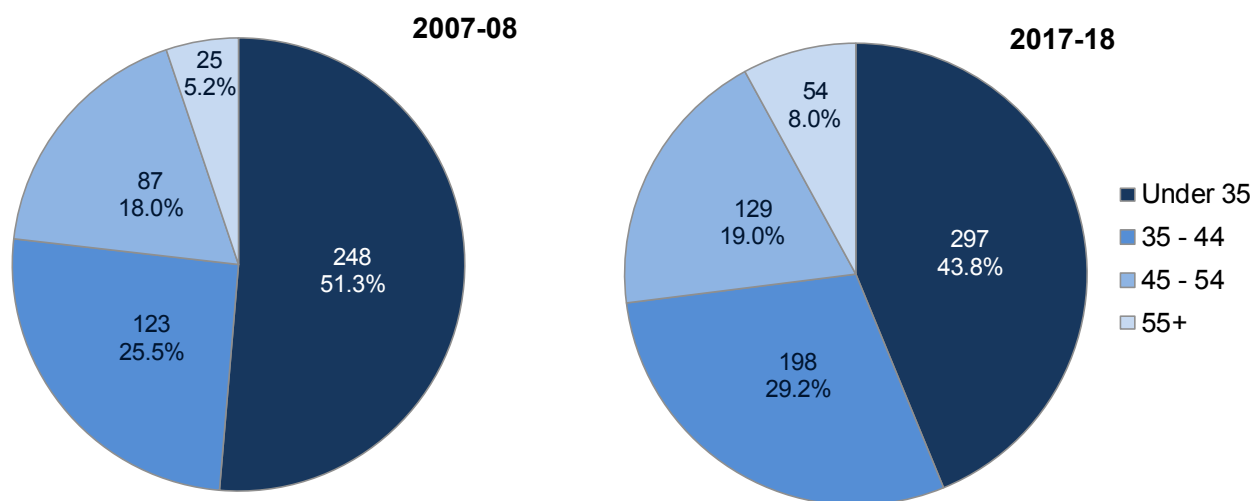


(a) Performers with NHS activity recorded via FP17W forms.

Source: NHS Dental Services

[Chart 13](#) shows the percentage and number of male dentists by age in Wales who had NHS activity recorded in 2007-08 and 2017-18. The number of male dentists in 2017-18 was 801, 6 (0.7 per cent) fewer than in 2016-17, but 37 (4.8 per cent) more than in 2007-08. Over the ten year period, there has been an increase in the proportion of younger male dentists, aged under 35 and between 35 and 44, whereas there has been a relatively large fall in the proportion of male dentists aged 45-54.

Chart 14: Percentage and number of female dentists with NHS activity (a), by age

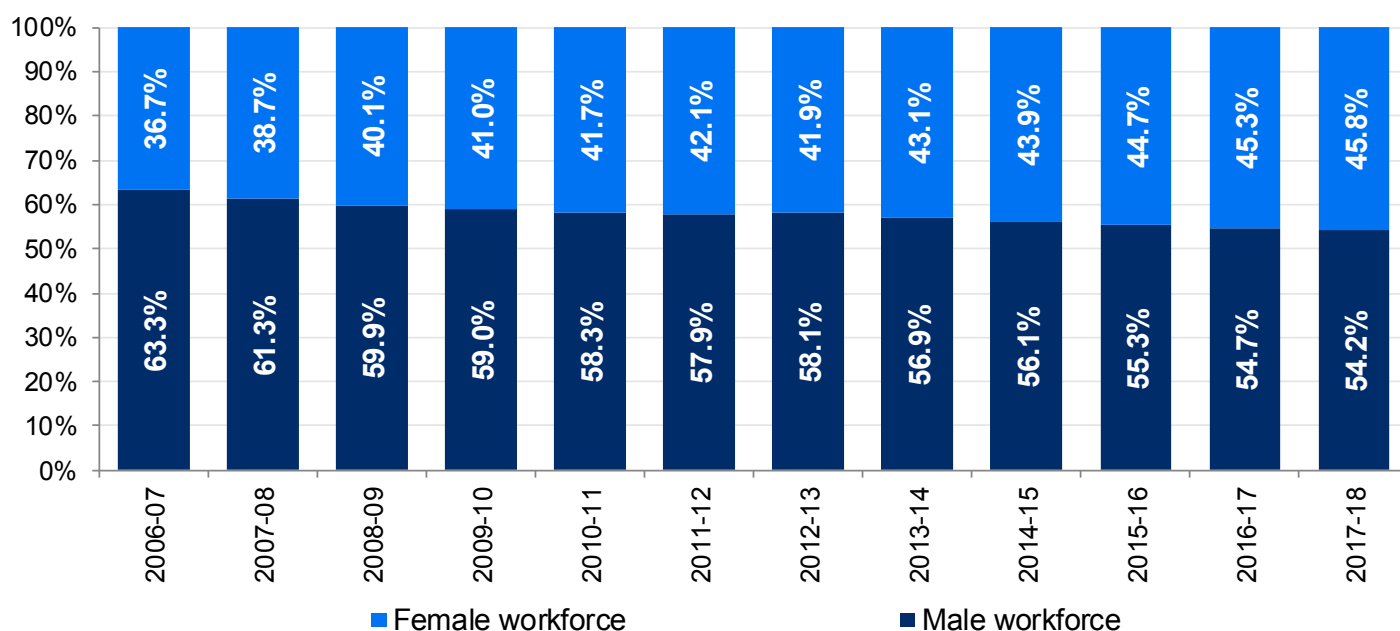


(a) Performers with NHS activity recorded via FP17W forms.

Source: NHS Dental Services

[Chart 14](#) shows the percentage and number of female dentists by age in Wales who had NHS activity recorded in 2007-08 and 2017-18. The number of female dentists in 2017-18 was 678, 10 (1.5 per cent) more than in 2016-17 and 195 (40.4 per cent) more than in 2007-08. This is the highest number of female dentists since the new contract was introduced. While there have been large increases in the absolute number of female dentists in every age group over the ten year period, there have been some changes to the proportion of female dentists in each age group. In 2017-18 there were proportionately fewer younger female dentists under age 35, and proportionately more female dentists in all 3 other age groups compared to 2007-08.

Chart 15: The percentage of the dentists with NHS activity(a) in Wales by gender and year



Source: NHS Dental Services

(a) Performers with NHS activity recorded via FP17W forms.

Summary: Males account for a larger percentage of the dental workforce with NHS activity in Wales but the difference continues to narrow.

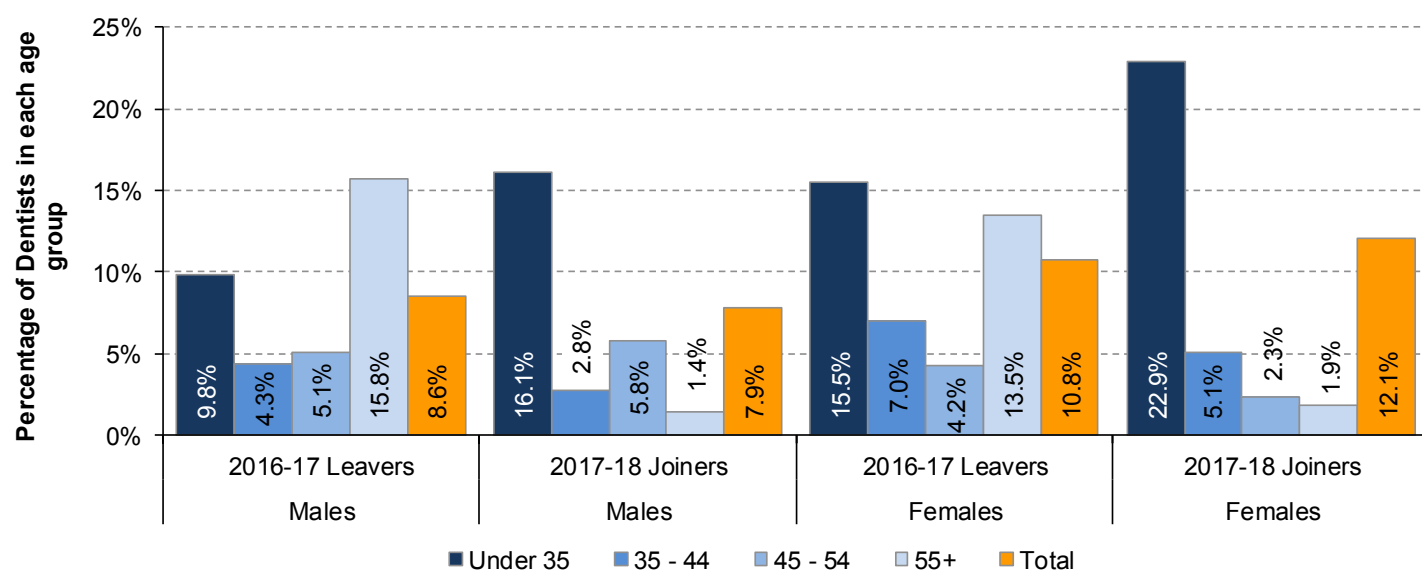
Latest Data: 45.8 percent of dentists with NHS activity were female; the highest percentage on of the workforce to date..

Annual Change: There was a 0.5 percentage point increase in the number of female dentists with NHS activity since 2016-17.

Change since first year of data: There has been a 9.1 percentage point rise in the number of female dentists with NHS activity since 2006-07.

Joiners and leavers

Chart 16: NHS Dental leavers and joiners by age and gender (percentages), between 1 April 2017 and 31 March 2018 **REVISED 6 November 2018**



Source: NHS Dental Services

141 dentists (9.6 per cent of all dentists in 2016–17) stopped performing NHS work in 2017-18. Of these 69 were male and 72 were female. Of the males who left 29 were under 35 and 23 were aged 55 or over. Of the females who left 46 were aged under 35 and 7 were aged 55 or over

145 dentists (9.8 per cent of all dentists in 2017–18) started performing NHS work. Of these 63 were male and 82 were female. Of the males who started 46 were aged under 35 and 6 were aged 35 to 44. Of the females who started 68 were aged under 35 and 10 were aged 35 to 44.

[Table A10](#) shows the number of dentists with NHS activity that left or joined.

See the [Quality Report](#) and the [Notes](#) pages for more information about joiners and leavers.

Notes and definitions

This section of the release provides notes, definitions and quality information for these statistics. Please see the ["NHS Dental services statistics quality report"](#) for further background and quality information of all data items.

Courses of treatment

Information on any NHS dental work completed by an NHS dentist is submitted to NHS Dental Services for payment on an FP17W form, the majority of which are electronic submissions.

Figures presented here on courses of treatment done relate to:

- (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.

Treatments are split into treatment bands which are used to determine the charge paid by patients. These include:

- **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 mid range treatments (such as fillings, extractions, and root canal work) in addition to Band 1 work
- **Band 3** - includes 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:
 - c) 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
 - d) care and treatment is provided only to the extent that is necessary to prevent that significant deterioration or address that severe pain.
- **Free** - 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.

The band is determined by the most complex treatment included in the claim. The patient charge for the urgent band is the same as that for Band 1.

Other work is categorised into the following non-chargeable bands: Arrest of bleeding, bridge repairs, denture repair, removal of sutures and prescription issues.

The term "Claims for Treatment" was replaced by "Courses of Treatment" in the 2008-09 annual dental release. The two terms are interchangeable and it was decided to use "Courses of Treatment" to allow comparisons to be made with England and to avoid confusion. The courses of treatment data are comparable to the claims for treatment data previously.

From 2014 to April 2016, no Units of Dental Activity were allocated to the contract if dentists submitted their activity data more than two months from the date of completion of a course of treatment. The courses of treatments were still recorded. Between April 2016 and August 2016 this rule was extended to 4 months from the date of completion and, from September 2016, it was suspended.

A UDA of 0.75 for prescription issue was removed from 1 November 2012.

Orthodontics

The Orthodontic activity data presented here is:

- the volumes of Units of Orthodontic Activity (UOAs) credited in respect of orthodontic starts, orthodontic assessments and orthodontic appliance repairs between 1 April and 31 March of the following year, as processed up to the June;
- Orthodontic treatment starts as measured by the numbers of patients assessed and accepted for treatment.

Orthodontics is a specialist area of dentistry concerned with the growth and development of the teeth and jaws and the prevention and treatment of abnormalities of this development. Therefore most patients are children. Orthodontic data are separate from the CoT and UDA data presented earlier in the report and are collected via data submitted on an FP17OW form. All orthodontic activity is performed by a dentist with further training in orthodontics. A course of Orthodontic activity equates to between 4 and 23 UOAs, according to the age of the patient. All of these are credited to the dentist at the commencement of the course of orthodontic treatment – however, the treatment may be performed over a number of years.

The orthodontic data presented in this report capture orthodontic activity between 1 April 2017 and 31 March 2018, as processed up to June 2018. The data in this report relate only to starts, assessments and repairs, since no UOAs are credited in respect of completions. Hence all the UOAs relate to orthodontic activity which started within the year ending 31 March 2018. Some orthodontic activity may also have been performed in the year 2018-19 which may not be included in these figures as the full UOAs would have been credited when the treatment began. Similarly, some orthodontic activity will have been credited to this year but may not be performed until after the end of the year.

Orthodontic information is collected separately from dental activity data via the FP17OW form available from the [NHS Dental Services website](#).

Definition of Orthodontic variables on the FP17OW form:

- **Assess and Accept** - FP17s where the assess and accept box has been ticked and the date treatment began has been entered. In effect, this is the number of treatment starts.
- **Assess and Review** – Assessment has been performed, NHS orthodontic treatment is indicated, but the patient is not ready to start.
- **Assess and Refuse** – Assessment has been performed but NHS orthodontic treatment is deemed unnecessary or inappropriate.
- **Treatment completed** – The active treatment has been completed.

- **Treatment Abandoned** – The active treatment was abandoned because patient failed to return.
- **Treatment Discontinued** – Performer decides active treatment is to be discontinued.
- **Repairs** – A repair is made to an appliance fitted by another dentist.
- **Regulation 11 replacement appliances** – An orthodontic replacement appliance under regulation 11 has been provided. A patient charge will be 30 per cent of the band 3 charge per appliance. In all instances a patient's charge should be collected from the patient or patient's parent or legal guardian irrespective of the exemption/remission status. A patient may be able to claim a refund directly from the NHS Dental Services.

Clinical dental activity

NHS Dental Statistics, 2010-11 was the first release where Wales' clinical activity had been published separately from England. The first three publications were joint England and Wales clinical dental reports. These can be found on the [NHS Digital website](#).

On 1 April 2008, the clinical dataset was introduced into the dental data collection process, where additional information can be recorded by dental practitioners about a range of clinical dental treatments. This clinical data in summary can be used to monitor patterns of treatment and assist in national and local planning. Clinical activity is recorded by dentists and submitted with other activity data on the FP17W form to NHS Dental Services. A further three treatment items were added to the FP17W form in April 2010; examination, antibiotic items prescribed and 'other'. One of these was 'examination', which is the most frequent clinical activity being performed.

Sixteen possible clinical treatments are recorded. Note that a patient can receive more than one clinical treatment within a single CoT. The clinical treatments are:

- Scale & polish – this refers to simple periodontal treatment including scaling, polishing, marginal correction of fillings and charting of periodontal pockets.
- Fluoride varnish – a fluoride preparation which is applied to the surfaces of teeth as a primary preventive measure.
- Fissure sealants – where a sealant material is applied to the pit and fissure systems as a primary preventive measure.
- Radiograph(s) taken – often known as an x-ray, dental radiographs provide an image of the teeth, mouth and/or gums that can help the dentist to identify underlying problems, such as decay and gum disease.
- Endodontic treatment – where a tooth is severely decayed or damaged (for example by trauma) a root-filling may be required to restore the tooth. This procedure involves removal of the diseased or damaged pulp of the tooth. The root canal is then cleaned, shaped and filled with a suitable material.
- Permanent fillings & sealant restorations – the restoration of a tooth by filling a cavity to replace lost tooth tissue. Various substances may be used, including composite resin, amalgam or glass ionomer.
- Extractions – where a tooth is extracted, this also includes surgical removal of a buried root, unerupted tooth, impacted tooth or exostosed tooth.

- Crown(s) provided – full coverage of a tooth, provided when the remaining tooth tissue is not sufficient to restore the tooth by other means. (Stainless steel crowns have been excluded from this analysis).
- Dentures – a denture is a removable appliance that replaces some or all teeth. A CoT can include the following:
 - Upper denture – Acrylic
 - Lower denture – Acrylic
 - Upper denture – Metal
 - Lower denture – Metal
- Veneer(s) applied - a layer of material (often porcelain) covering the surface of a damaged or discoloured tooth.
- Inlay(s) – a type of indirect restoration (i.e. created in the laboratory).
- Bridge units provided – a fixed restoration that replaces one or more missing teeth. Note that for most treatments the minimum number of possible items is one, however, for bridge units the minimum is two.
- Referral for advanced mandatory services – where a patient is referred to another contractor for advanced mandatory services.
- Examination – when an examination for treatment is carried out. This would normally include charting of the teeth, recording of the periodontal condition and soft tissue examination all of which would be detailed with other necessary clinical details on the clinical record.
- Antibiotic Items Prescribed – when the patient is issued with a prescription containing antibiotic items. The number of antibiotic items should be entered (i.e. the number of antibiotic treatments rather than the number of pills).
- Other Treatment – when any treatment has been provided for which there is no appropriate clinical dataset item in part 5a. This item can be entered in addition to other clinical data.

The clinical treatments are presented as they are recorded in the FP17W form. Where complex treatments are displayed in the lower bands, such as inlays in Band 2, it is likely that the treatment has been recorded in error. See the Quality Report for more information on the methodology regarding clinical activity data.

Since 2009-10, figures have been estimates based on a full year of clinical data and have been grossed up to match activity data for each year. From 2010-11 onwards the introduction of 'Examination' and 'Other' significantly improved the completion rates. This also provided enough confidence in the data to publish 2010-11 figures without the need for the 'experimental' label. In recent years data completeness has meant that no grossing up has been necessary.

Patients treated

In these statistics we count the number of individual patients who received care or treatment from an NHS dentist at least once in the most recent 24-month period. The National Institute for Health and Care 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.

Under the current contract patients do not register with a dentist. The measure of the level of patient treatment is the number of patients treated in the previous 24 months. It is important to note that the number of patients treated is not equivalent to the previous number of patients registered. 1.72 million patients were recorded as having been treated in the 24 months ending 31 March 2018 amounting to 55 per cent of the population (or strictly "per 100 residents" as patients may not be treated in their resident Health Board - see notes). 67 per cent of the child (under 18 years) and 52 per cent of the adult population (18 years or over) were treated in the previous 24 months. Counts for previous years are shown on [StatsWales](#).

"Patients treated" is a count of the number of distinct patient identities which have been processed during the last 24 months. The methodology for matching patients is not always exact, and is based on patients being identified using; surname, first initial, gender and date of birth. This measure is not directly comparable with patient registrations published under the old contract as it was measured over a 15 month period rather than 24 months using a different system and rule set.

The records relate to the date on which a claim was processed, not the date of attendance at the dental surgery. The patients treated 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 downward bias in the patients treated 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.

Children are defined as 'patients under 18' on the date of acceptance.

Patients treated as a percentage of the population in the 24 months leading up to selected dates were 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. For example, the patients seen measure for the 24 month period ending 31 March 2018, covers 1 April 2016 to 31 March 2018, and uses the ONS mid-2017 population estimates to calculate the proportion of the population seen.

Wales's population estimates can be found on [StatsWales](#).

Workforce

Further to a consultation exercise in 2007–08, the workforce figures presented in the release are based on the definition agreed. This consultation arose due to problems with the way in which dentists were counted in 2006–07, the first year of the new dental contract system. They now measure the number of dental performers who have any NHS activity recorded against them via FP17W claim forms at any time in the year that met the criteria for inclusion within the annual reconciliation process. The data also considers those who worked in 2016–17 and not in 2017–18, and vice versa. Data relating to the pre-2006 contract are not comparable to the current contract and so are not included in this bulletin.

Workforce definitions

Dentist Types

Dentists are assigned to a dentist type depending on how they contract and perform their work:

Providing-performer – A dentist who holds a contract with a Health Board to provide primary dental services and who also delivers NHS dental services themselves.

Associate – Delivers NHS dental services but does not hold a contract with a Health Board themselves. They are employed by a Provider. These have been referred to as ‘Performer-only’ dentists in previous publications.

Provider-only – Sub-contracts all dental activity to other dentists (Associates) and does not perform NHS dentistry on the contract themselves.

This publication does not include data for Provider-only dentists as they have no NHS activity recorded against them.

Contract Type – A performer is assigned a contract type by looking at all the contracts a Performer has activity recorded against and assigning a contract type based on all their contracts. This must be calculated at each level (Wales/Health Board) for which the data is to be presented.

Dental contracts

Dentists can work under a number of contracts:

- **General Dental Services (GDS)** providers must provide a full range of mandatory services.
- **Personal Dental Services (PDS)** providers are not obliged to provide the full range of mandatory services. If a provider-only provides specialist services, such as orthodontic work, this has to be under a PDS agreement.

For example, a performer could have contracts with more than one Health Board within. If one contract was GDS, and the other PDS, they would be GDS on the first Health Board, PDS on the other, but mixed for Wales.

Dentist Type - This refers to the way dentists’ contract and perform their work. Health Boards (HBs) hold contracts with *providers* to deliver an agreed level of dental service. A *provider* that sub-contracts all the dental activity on a contract to *performers* and does not perform NHS dentistry on the contract themselves is classed as *provider only*. A *provider* may also act as a performer (*providing performer*) and deliver dental services themselves. Other dentists will be *performers only (Associates)* and will deliver dental services but not hold a contract with the Health Board (i.e. they will be working for a provider only or ‘provider & performer’ dentist). As the workforce numbers presented in this report are of dentists performing NHS activity, provider only dentists are excluded from this analysis.

Age – Age is calculated as the age of the performer at the mid point in the year (30 September). Performers are assigned to an age band based on the age that is calculated from the Payment Online (POL) data. No ages are queried. Note that a move to a new dental contract management system, ‘[Compass](#)’, in early 2016 involved a cleaning of records which may have improved the data quality of recorded characteristics such as age and contract type. This may affect comparisons between 2015-16 and 2016-17 data.

Joiners and leavers

A Leaver is defined as a performer that had activity recorded against them via FP17W forms in a year, but none the following year. They would be recorded as a leaver in the first year. This definition results in information on the number of leavers for a particular year not being available until the end of the following year’s reconciliation period.

A Joiner is defined as a performer with activity recorded against them via FP17W forms in a year, but none in the previous year. They would be recorded as a starter in the latest year.

Both Leavers and Joiners are categorised at a national level but presented at more local levels (i.e. leavers at a Health Board level only include those that do not work in any other Health Boards nationally). Movements between Health Boards are classed as transfers, not leavers or joiners, and would therefore not be included in this report.

Information on the numbers of leavers prior to 2006-07 is not available.

Patient charge

Patient charge revenue is calculated using the information processed from the FP17W forms. In general, a non-exempt (paying) patient will pay the charge appropriate to the treatment. However, there will be certain cases where an FP17W for a non-exempt adult would not attract the full patient charge or would attract no charge, which are:

The FP17W was a continuation of treatment (no charge or charge reflects difference in band charges).

The FP17W was for treatment on referral (patient charge is collected by referring dentist).

The FP17W 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 FP17W was for a patient that did not complete treatment (patient charge deducted for band of treatment actually provided, but reported as band of treatment planned).

Patient charges cannot be collected from closed contracts (or contracts on which payments are not being made). The counts of FP17Ws processed for closed contracts are included however, so patient charges may appear lower than anticipated. No account is taken in this data of refunds for patients who pay for their treatment and prove at a later date that they should not have paid charges, or penalties imposed on those who should have paid but did not.

[Table 3](#) below show the NHS dental charges applicable to paying adults. Patient charges in Wales increased on the 1 April 2015 for all treatment bands.

Table 3: Patient Charge Rates

Treatment Band	1 April 2012 to 31 August 2012	1 September 2012 to 31 March 2013	1 April 2013 to 31 March 2014	1 April 2014 to 31 March 2015	1 April 2015 to 31 March 2016	1 April 2016 to 31 March 2017	1 April 2017 to 31 March 2018
Band 1	£12.00	£12.40	£12.70	£13.00	£13.50	£13.50	£14.00
Band 2	£39.00	£40.20	£41.10	£42.00	£43.00	£43.00	£44.00
Band 3	£177.00	£177.00	£177.00	£180.90	£185.00	£185.00	£190.00
Urgent	£12.00	£12.40	£12.70	£13.00	£13.50	£13.50	£14.00

Source: Welsh Government

Use of population estimates

In these statistics ONS' mid year estimates of population are used to calculate rates and percentages. Where these are used for financial year data the mid year estimate relating to the first part of the financial year is used, for example, for activity relating to 2006-07 the mid year estimate for mid 2006 is used. Mid year estimates for 2017 have been used as the denominator for rates and percentages relating to 2017-18 activity and workforce data.

Exemptions

Patients are exempt from NHS dental charges if at the time the treatment starts, they fall into one of the following categories:

- Aged under 18, or are a full-time student under 19.
- Aged under 25 or 60 and over (examination and report only).
- Pregnant, or have had a baby in the 12 months before treatment starts.
- An NHS in-patient where the treatment is carried out by the hospital dentist.
- An NHS Hospital Dental Service out-patient

(Hospital treatments are not included in this report so the last two categories above do not apply to these statistics.)

If they qualify for remission of charges on the following benefit eligibility grounds:

- Getting, or have a partner who gets Income Support, income-based Jobseeker's Allowance, Income-related Employment and Support Allowance or Pension Credit Guarantee Credit
- Entitled to, or named on, a valid NHS Tax Credit exemption certificate
- Named on a valid NHS Low Income Scheme HC2 certificate for full health costs.
- Universal Credit and meet the criteria.

If patients are named on a valid NHS Low Income Scheme HC3 certificate then they may be eligible for partial help with dental costs.

Key quality information

This section provides a summary of information on this output against five dimensions of quality: Relevance, Accuracy, Timeliness and Punctuality, Accessibility and Clarity, and Comparability and coherence.

Relevance

What are the potential uses of these statistics?

These statistics will be used in a variety of ways. Some examples of these are:

- advice to Ministers;
- to inform debate in the National Assembly for Wales and beyond; and
- to make publicly available data on dental statistics in Wales.

Who are the key potential users of this data?

These statistics will be useful both within and outside the Welsh Government. Some of the key potential users are:

- Ministers and the Members Research Service in the National Assembly for Wales;
- health boards;
- dentists;
- the Department for Health and Social Services in the Welsh Government;
- other areas of the Welsh Government;
- National Health Service and Public Health Wales;
- British Dental Association and other professional organisations;
- the research community;
- students, academics and universities; and
- individual citizens and private companies.

Accessibility and clarity

This statistical release is pre-announced and then published on the Statistics section of the Welsh Government website. It is accompanied by tables on [StatsWales](#), a free to use service that allows visitors to view, manipulate, create and download data.

Information and links to the relevant cubes can be found in [Annex 2](#)

Comparability and coherence

This is the twelfth annual publication of completed end of year figures following the introduction of the new NHS dental contract on 1 April 2006. This release provides a summary of completed activity during the whole of 2017–18.

Data in this release is not comparable with previous bulletins under the old contractual arrangements.

Similar data for England is published by the [NHS Digital](#).

The patients treated statistics in the English output include patients treated by the Community Dental Service whereas the patients treated statistics in this output do not include patients treated by the Community Dental Service. Therefore the patients treated statistics in the English output are not comparable to the patients treated statistics in this output. Similarly the English workforce statistics are not comparable to the Welsh statistics presented here.

Accuracy

The release covers NHS dental treatment undertaken by 'high street dentists'. It does not cover private work carried out by dentists nor dentists working in the hospital or community dental service. The figures relate to activity during the period April 2017 to March 2018, and are obtained from reports compiled by the NHS Dental Services (DS) for management purposes.

The data are drawn from reports compiled by the NHS Dental Services (DS) using completed FP17W forms and information supplied to LHBs for local management purposes. The data covers General Dental Service (GDS) and Personal Dental Service (PDS). Dentists can work under several different GDS/PDS contracts. This makes it very difficult to separate out, hence the activity and patient charge data has not been split between contract types. The patient charge data exclude orthodontic work which has its own activity measure. The workforce and patients treated data includes those performers with orthodontic contracts.

The clinical treatments are presented as they are recorded in the FP17W form. Where complex treatments are displayed in the lower bands, such as inlays in Band 2, it is likely that the treatment has been recorded in error. See the [Quality report](#) for more information on the methodology regarding clinical activity data.

Since 2009-10, figures have been estimates based on a full year of clinical data and have been grossed up to match activity data for each year. From 2010-11 onwards the introduction of 'Examination' and 'Other' significantly improved the completion rates. This also provided enough confidence in the data to publish 2010-11 figures without the need for the 'experimental' label. In recent years data completeness has meant that no grossing up has been necessary.

The Welsh Dental pilot programme, testing alternative systems of payment to dentists and new approaches to the delivery of NHS dental services, operated in a small number of dental practices in Wales between 2012-13 and 2014-15. These pilot arrangements will have had a small affect on recorded activity and the level of patient charge revenue.

Note that a move to a new dental contract management system, '[Compass](#)', in early 2016 involved a cleaning of records which may have improved the data quality of recorded characteristics such as age and contract type. This may affect comparisons between pre and post 2015-16 data.

Revisions

Activity data for the first three quarters of 2017-18 have been updated in [StatsWales](#) to account for treatments reported too late for inclusion. All statistics in this release can be regarded as final figures, not subject to further revision or update.

Timeliness and punctuality

All outputs adhere to the Code of Practice by pre-announcing the date of publication through the upcoming calendar. Furthermore, should the need arise to postpone an output this would follow the Welsh Government's Revisions, Errors and Postponements arrangements.

We publish data as soon as possible after the relevant time period. The annual release is published in August, and the quarterly data is published on StatsWales in November, February and May.

Symbols and rounding conventions

Where figures have been rounded there may be an apparent discrepancy between the sum of the constituent items and the total. The following symbols are used in the tables:

- .. The data item is not available
- . The data item is not applicable
- The data item is not exactly zero, but estimated as zero or less than half the final digit shown
- * The data item is disclosive or not sufficiently robust for publication

National Statistics status

The [United Kingdom Statistics Authority](#) has designated these statistics as National Statistics, in accordance with the Statistics and Registration Service Act 2007 and signifying compliance with the [Code of Practice for Statistics](#).

National Statistics status means that official statistics meet the highest standards of trustworthiness, quality and public value.

All official statistics should comply with all aspects of the Code of Practice for Statistics. They are awarded National Statistics status following an assessment by the UK Statistics Authority's regulatory arm. The Authority considers whether the statistics meet the highest standards of Code compliance, including the value they add to public decisions and debate.

It is Welsh Government's responsibility to maintain compliance with the standards expected of National Statistics. If we become concerned about whether these statistics are still meeting the appropriate standards, we will discuss any concerns with the Authority promptly. National Statistics status can be removed at any point when the highest standards are not maintained, and reinstated when standards are restored.

Well-being of Future Generations Act (WFG)

The Well-being of Future Generations Act 2015 is about improving the social, economic, environmental and cultural well-being of Wales. The Act puts in place seven well-being goals for Wales. These are for a more equal, prosperous, resilient, healthier and globally responsible Wales, with cohesive communities and a vibrant culture and thriving Welsh language. Under section (10)(1) of the Act, the Welsh Ministers must (a) publish indicators ("national indicators") that must be applied for the purpose of measuring progress towards the achievement of the Well-being goals, and (b) lay a copy of the national indicators before the National Assembly. The 46 national indicators were laid in March 2016.

Information on the indicators, along with narratives for each of the well-being goals and associated technical information is available in the [Well-being of Wales report](#).

Further information on the Well-being of Future Generations (Wales) Act 2015.

The statistics included in this release could also provide supporting narrative to the national indicators and be used by public services boards in relation to their local well-being assessments and local well-being plans.

Further details

The document is available at: <https://gov.wales/statistics-and-research/nhs-dental-services/?lang=en>

[England, general dental services information](#)

[Scotland, general dental services information](#)

[Northern Ireland, dental services publications](#)

Previous Clinical Dental Report publication, England and Wales 2009-10 was published by the [NHS Digital Centre](#).

Next update

September 2019 (provisional)

We want your feedback

We welcome any feedback on any aspect of these statistics which can be provided by email to:

stats.healthinfo@gov.wales

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Annex 1: Supplementary Tables at Health Board Level

Note: Additional data is available through [StatsWales](#). Throughout the year StatsWales will be updated to include additional data from these remaining Annex tables.

Table A1: Orthodontic Activity in Wales (a)

Activity	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	Change to 2017/18 from 2016/17
Assess and Accept FP17Os	8,955	9,431	9,524	9,263	9,195	9,507	9,454	9,633	1.9
Assess and Review FP17Os	13,554	10,450	7,182	8,645	8,791	6,653	6,449	5,319	-17.5
Assess and Refuse FP17Os	1,946	1,940	2,173	2,269	2,032	1,888	1,634	1,777	8.8
Treatment Completed FP17Os	6,603	6,734	6,484	7,223	7,324	7,218	7,141	7,897	10.6
Treatment Abandoned FP17Os	373	396	404	433	403	402	488	408	-16.4
Treatment Discontinued FP17Os	209	193	220	211	211	209	256	204	-20.3
Repairs FP17Os	365	99	55	34	34	29	57	19	-66.7
Regulation 11 Appliances FP17Os	682	610	465	615	542	532	403	479	18.9
Total Ortho forms (FP17Os)	32,687	29,853	26,507	28,693	28,532	26,438	25,882	25,736	-0.6
Units of Orthodontic activity	200,566	208,192	207,351	203,439	202,540	206,552	205,233	207,899	1.3
Total Number of Patients Treated ^(b)	31,434	28,907	26,023	28,195	27,999	25,834	25,481	25,361	-0.5

Source: NHS Dental Services

(a) Number of treatments processed between 1 April and 31 March.

(b) These patients are included in the 1.7 million patients seen in the 24 month period ending March 2017.

Table A2: Number of treatments undertaken (Assess and Accept FP17Os) by Local Health Board (a)

Local Health Board	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	Change to 2017-18 from 2016-17
Betsi Cadwaladr University	1,455	1,960	1,972	1,818	1,802	1,772	1,804	1,851	2.6
Powys Teaching	229	213	254	219	224	261	222	231	4.1
Hywel Dda University	908	999	918	810	856	897	827	800	-3.3
ABMU ^(b)	2,068	2,025	2,059	2,088	2,057	2,107	2,096	2,090	-0.3
Cwm Taf University	69	62	93	72	83	76	89	90	1.1
Aneurin Bevan University	1,281	1,301	1,254	1,275	1,291	1,305	1,404	1,520	8.3
Cardiff & Vale University	2,945	2,871	2,974	2,981	2,882	3,089	2,867	2,936	2.4
Wales	8,955	9,431	9,524	9,263	9,195	9,507	9,309	9,518	2.2

(a) Number of treatments processed between 1 April and 31 March.

Table A3: Total number of adult Courses of Treatment that contain each clinical treatment, by treatment band, between 1 April and 31 March (a)(b)

CoTs	Total number of Courses of Treatment									
	Band 1		Band 2		Band 3		Urgent		Total CoTs ^(e)	
	2016-17	2017-18	2016-17	2017-18	2016-17	2017-18	2016-17	2017-18	2016-17	2017-18
Total number of CoTs^{(c) (d)}	973,031	974,258	509,678	496,432	116,968	111,825	188,951	189,058	1,788,628	1,771,573
Scale and polish	314,929	304,902	226,354	224,991	36,011	35,318	2,929	3,043	580,223	568,254
Fluoride varnish	13,154	14,849	11,321	12,570	1,562	1,738	1,309	1,626	27,346	30,783
Fissure sealants	307	283	600	554	40	35	25	38	972	910
Radiograph(s) taken	160,697	164,465	183,178	183,093	49,832	49,731	42,714	45,579	436,421	442,868
Endodontic treatment	31	26	21,764	19,952	9,694	9,157	650	481	32,139	29,616
Permanent fillings and sealant restorations	535	605	376,409	361,329	36,128	34,731	27,253	28,206	440,325	424,871
Extractions	163	147	95,063	90,493	24,727	23,840	18,647	19,141	138,600	133,621
Crown(s) provided	24	15	118	141	40,773	39,907	259	309	41,174	40,372
Upper denture - acrylic	36	35	400	466	39,029	37,490	14	14	39,479	38,005
Lower denture - acrylic	13	15	150	166	21,534	21,171	3	6	21,700	21,358
Upper denture - metal	0	1	5	6	3,411	3,054	3	2	3,419	3,063
Lower denture - metal	0	0	0	3	1,604	1,418	1	2	1,605	1,423
Veneer(s) applied	1	5	6	6	1,385	1,300	9	13	1,401	1,324
Inlay(s)	4	3	9	11	6,645	5,994	12	12	6,670	6,020
Bridge(s) fitted	4	3	23	14	6,304	6,162	54	66	6,385	6,245
Referral for advanced mandatory services	0	1,058	0	1,944	0	238	0	40	0	3,280
Examination	953,597	959,168	471,836	466,146	111,270	107,238	49,347	50,000	1,586,050	1,582,552
Antibiotic Items Prescribed	3,426	3,423	5,571	5,973	1,125	1,209	17,217	19,357	27,339	29,962
Other Treatment	38,970	43,205	65,862	68,544	21,595	21,133	108,852	110,522	235,279	243,404

Source: NHS Dental Services

(a) In the early years of collection, the clinical data was grossed up to match the activity data, by treatment band. More information is available in the [Quality Report](#).

(b) A patient can receive more than one clinical treatment within a single CoT.

(c) This figure is a count of unique Courses of Treatment and not the sum of the treatments listed within the band.

(d) Some recorded treatments are inconsistent with the recorded treatment band, e.g. band 1 bridges.

(e) The 'total' excludes the categories "free", "not known", and "non banded" and therefore will not match the 'total' in [Table A1](#) and [Table A2](#).

Table A4: Total number of clinical treatment items provided to adults, by treatment band, between 1 April and 31 March

Adults										Total number of items
Item	Band 1		Band 2		Band 3		Urgent		Total CoTs	
	2016-17	2017-18	2016-17	2017-18	2016-17	2017-18	2016-17	2017-18	2016-17	2017-18
Total of items specified ^{(a) (b)}	305,315	304,034	1,079,499	1,015,874	299,910	286,625	97,223	97,644	1,781,947	1,704,177
Fissure sealants	561	424	985	853	61	52	35	53	1,642	1,382
Radiograph(s) taken	303,776	302,534	347,931	338,738	94,134	92,362	47,815	48,871	793,656	782,505
Endodontic treatment	33	24	23,754	21,037	10,681	9,889	693	483	35,161	31,433
Permanent fillings and sealant restorations	665	756	583,301	541,248	69,048	64,769	28,252	27,571	681,266	634,344
Extractions	231	268	123,341	113,804	59,033	56,071	20,079	20,242	202,684	190,385
Crown(s) provided	36	17	137	153	44,100	42,400	270	325	44,543	42,895
Veneer(s) applied	1	5	7	12	1,652	1,558	12	20	1,672	1,595
Inlay(s)	4	2	9	11	6,860	6,091	12	12	6,885	6,116
Bridge(s) units provided	8	4	34	18	14,341	13,433	55	66	14,438	13,521

Source: NHS Dental Services

(a) Some recorded treatments are inconsistent with the recorded treatment band, e.g. Band 1 bridges.

(b) Items that occur only once during a course of treatment (e.g. scale and polish) are omitted from this table.

Table A5: Summary of adult clinical treatment activity, by treatment band, between 1 April and 31 March**Adults**

	Band 1		Band 2		Band 3		Urgent		Total CoTs	
Percentage of CoTs with	2016-17	2017-18	2016-17	2017-18	2016-17	2017-18	2016-17	2017-18	2016-17	2017-18
	Per cent	Per cent	Per cent	Per cent	Per cent	Per cent	Per cent	Per cent	Per cent	Per cent
Scale and polish	32.4	31.3	44.4	45.3	30.8	31.6	1.6	1.6	32.4	32.1
Fluoride varnish	1.4	1.5	2.2	2.5	1.3	1.6	0.7	0.9	1.5	1.7
Fissure sealants	0.0	0.0	0.1	0.1	0.0	0.0	0.0	0.0	0.1	0.1
Radiograph(s) taken	16.5	16.9	35.9	36.9	42.6	44.5	22.6	24.1	24.4	25.0
Endodontic treatment	0.0	0.0	4.3	4.0	8.3	8.2	0.3	0.3	1.8	1.7
Permanent fillings and sealant restorations	0.1	0.1	73.9	72.8	30.9	31.1	14.4	14.9	24.6	24.0
Extractions	0.0	0.0	18.7	18.2	21.1	21.3	9.9	10.1	7.7	7.5
Crown(s) provided	0.0	0.0	0.0	0.0	34.9	35.7	0.1	0.2	2.3	2.3
Upper denture - acrylic	0.0	0.0	0.1	0.1	33.4	33.5	0.0	0.0	2.2	2.1
Lower denture - acrylic	0.0	0.0	0.0	0.0	18.4	18.9	0.0	0.0	1.2	1.2
Upper denture - metal	0.0	0.0	0.0	0.0	2.9	2.7	0.0	0.0	0.2	0.2
Lower denture - metal	0.0	0.0	0.0	0.0	1.4	1.3	0.0	0.0	0.1	0.1
Veneer(s) applied	0.0	0.0	0.0	0.0	1.2	1.2	0.0	0.0	0.1	0.1
Inlay(s)	0.0	0.0	0.0	0.0	5.7	5.4	0.0	0.0	0.4	0.3
Bridge(s) fitted	0.0	0.0	0.0	0.0	5.4	5.5	0.0	0.0	0.4	0.4
Referral for advanced mandatory services	0.0	0.1	0.0	0.4	0.0	0.2	0.0	0.0	0.0	0.2
Examination	98.0	98.5	92.6	93.9	95.1	95.9	26.1	26.4	88.7	89.3
Antibiotic Items Prescribed	0.4	0.4	1.1	1.2	1.0	1.1	9.1	10.2	1.5	1.7
Other Treatment	4.0	4.4	12.9	13.8	18.5	18.9	57.6	58.5	13.2	13.7
Number of items per 100 CoT	Items	Items	Items	Items	Items	Items	Items	Items	Items	Items
Fissure sealants	0.1	0.0	0.2	0.2	0.1	0.0	0.0	0.0	0.1	0.1
Radiograph(s) taken	31.2	31.1	68.3	68.2	80.5	82.6	25.3	25.8	44.4	44.2
Endodontic treatment	0.0	0.0	4.7	4.2	9.1	8.8	0.4	0.3	2.0	1.8
Permanent fillings and sealant restorations	0.1	0.1	114.4	109.0	59.0	57.9	15.0	14.6	38.1	35.8
Extractions	0.0	0.0	24.2	22.9	50.5	50.1	10.6	10.7	11.3	10.7
Crown(s) provided	0.0	0.0	0.0	0.0	37.7	37.9	0.1	0.2	2.5	2.4
Veneer(s) applied	0.0	0.0	0.0	0.0	1.4	1.4	0.0	0.0	0.1	0.1
Inlay(s)	0.0	0.0	0.0	0.0	5.9	5.4	0.0	0.0	0.4	0.3
Bridge units provided	0.0	0.0	0.0	0.0	12.3	12.0	0.0	0.0	0.8	0.8
Average treatment per CoT where the treatment occurs										
Fissure sealants	1.6	1.5	1.6	1.5	1.7	1.5	1.2	1.4	1.6	1.5
Radiograph(s) taken	1.9	1.8	1.9	1.9	1.8	1.9	1.1	1.1	1.8	1.8
Endodontic treatment	1.0	0.9	1.1	1.1	1.1	1.1	1.0	1.0	1.1	1.1
Permanent fillings and sealant restorations	1.1	1.2	1.5	1.5	1.9	1.9	1.0	1.0	1.5	1.5
Extractions	1.4	1.8	1.3	1.3	2.4	2.4	1.1	1.1	1.5	1.4
Crown(s) provided	1.5	1.1	1.1	1.1	1.1	1.1	1.0	1.1	1.1	1.1
Veneer(s) applied	1.0	1.0	0.0	2.0	1.2	1.2	1.0	1.5	1.2	1.2
Inlay(s)	1.3	0.7	1.3	1.0	1.0	1.0	1.0	1.0	1.0	1.0
Bridge units provided	1.0	1.3	1.5	1.3	2.3	2.2	1.0	1.0	2.3	2.2

Source: NHS Dental Services

Table A6: Total number of child Courses of Treatment that contain each clinical treatment March (a)(b), by treatment band, between 1 April and 31 March

Children	Total number of Courses of Treatment									
	Band 1		Band 2		Band 3		Urgent		Total CoTs ^(e)	
	2016-17	2017-18	2016-17	2017-18	2016-17	2017-18	2016-17	2017-18	2016-17	2017-18
CoTs										
Total number of CoTs ^{(c) (d)}	428,475	442,301	124,758	120,831	2,507	2,148	24,301	24,382	580,041	589,662
Scale and polish	20,614	21,802	9,187	9,760	358	333	136	126	30,295	32,021
Fluoride varnish	69,971	110,190	25,389	35,542	193	283	406	482	95,959	146,497
Fissure sealants	2,153	2,089	3,530	3,348	10	13	11	12	5,704	5,462
Radiograph(s) taken	17,897	19,029	16,690	16,902	869	788	2,769	2,685	38,225	39,404
Endodontic treatment	4	3	1,441	1,300	274	224	83	67	1,802	1,594
Permanent fillings and sealant restorations	218	210	103,436	99,896	725	633	2,384	2,402	106,763	103,141
Extractions	68	52	21,067	20,617	101	95	1,187	1,084	22,423	21,848
Crown(s) provided	0	2	26	23	478	462	1	1	505	488
Upper denture - acrylic	0	1	0	0	121	97	0	0	121	98
Lower denture - acrylic	1	0	3	1	17	16	0	0	21	17
Upper denture - metal	0	0	0	0	11	10	0	0	11	10
Lower denture - metal	0	1	1	0	4	1	0	0	5	2
Veneer(s) applied	0	0	0	0	100	81	0	0	100	81
Inlay(s)	0	0	1	0	360	261	1	0	362	261
Bridge(s) fitted	0	0	0	0	105	115	0	0	105	115
Referral for advanced mandatory services	0	432	0	393	0	2	0	14	0	841
Examination	424,743	439,054	118,449	115,617	2,367	2,063	6,735	6,860	552,294	563,594
Antibiotic Items Prescribed	513	523	746	683	14	15	2,045	2,235	3,318	3,456
Other Treatment	9,366	11,915	7,225	7,736	1,096	981	13,712	13,911	31,399	34,543

Source: NHS Dental Services

(a) In the early years of collection, the clinical data was grossed up to match the activity data, by treatment band. More information is available in the [Quality Report](#).

(b) A patient can receive more than one clinical treatment within a single CoT.

(c) This figure is a count of unique Courses of Treatment and not the sum of the treatments listed within the band.

(d) Some recorded treatments are inconsistent with the recorded treatment band, e.g. band 1 bridges.

(e) The 'total' excludes the categories "free", "not known", and "non banded" and therefore will not match the 'total' in Table A1 and TableA2.

Table A7: Total number of clinical treatment items provided to children, by treatment band, between 1 April and 31 March

Children	Total number of items									
	Band 1		Band 2		Band 3		Urgent		Total CoTs	
Item	2015-16	2016-17	2015-16	2016-17	2015-16	2016-17	2015-16	2016-17	2015-16	2016-17
Total of items specified ^{(a) (b)}	33,478	38,854	240,532	239,610	5,080	5,163	6,768	7,170	285,858	290,797
Fissure sealants	4,841	5,923	8,275	8,157	30	26	34	27	13,180	14,133
Radiograph(s) taken	27,772	32,310	28,925	31,410	1,744	1,763	2,923	3,188	61,364	68,671
Endodontic treatment	5	5	1,616	1,561	306	310	62	83	1,989	1,959
Permanent fillings and sealant restorations	650	464	165,906	163,940	1,451	1,643	2,663	2,605	170,670	168,652
Extractions	208	152	35,772	34,511	198	154	1,083	1,265	37,261	36,082
Crown(s) provided	0	0	35	29	467	526	0	1	502	556
Veneer(s) applied	0	0	1	0	172	120	0	0	173	120
Inlay(s)	2	0	2	2	440	364	0	1	444	367
Bridge(s) units provided	0	0	0	0	272	257	3	0	275	257

Source: NHS Dental Services

(a) Some recorded treatments are inconsistent with the recorded treatment band, e.g. Band 1 bridges.

(b) Items that occur only once during a course of treatment (e.g. scale and polish) are omitted from this table.

Table A8: Summary of child clinical treatment activity, by treatment band, between 1 April and 31 March

Children

	Band 1		Band 2		Band 3		Urgent		Total CoTs	
	2016-17	2017-18	2016-17	2017-18	2016-17	2017-18	2016-17	2017-18	2016-17	2017-18
Percentage of CoTs with	Per cent	Per cent	Per cent	Per cent	Per cent	Per cent	Per cent	Per cent	Per cent	Per cent
Scale and polish	4.8	4.9	7.4	8.1	14.3	15.5	0.6	0.5	5.2	5.4
Fluoride varnish	16.3	24.9	20.4	29.4	7.7	13.2	1.7	2.0	16.5	24.8
Fissure sealants	0.5	0.5	2.8	2.8	0.4	0.6	0.0	0.0	1.0	0.9
Radiograph(s) taken	4.2	4.3	13.4	14.0	34.7	36.7	11.4	11.0	6.6	6.7
Endodontic treatment	0.0	0.0	1.2	1.1	10.9	10.4	0.3	0.3	0.3	0.3
Permanent fillings and sealant restorations	0.1	0.0	82.9	82.7	28.9	29.5	9.8	9.9	18.4	17.5
Extractions	0.0	0.0	16.9	17.1	4.0	4.4	4.9	4.4	3.9	3.7
Crown(s) provided	0.0	0.0	0.0	0.0	19.1	21.5	0.0	0.0	0.1	0.1
Upper denture - acrylic	0.0	0.0	0.0	0.0	4.8	4.5	0.0	0.0	0.0	0.0
Lower denture - acrylic	0.0	0.0	0.0	0.0	0.7	0.7	0.0	0.0	0.0	0.0
Upper denture - metal	0.0	0.0	0.0	0.0	0.4	0.5	0.0	0.0	0.0	0.0
Lower denture - metal	0.0	0.0	0.0	0.0	0.2	0.0	0.0	0.0	0.0	0.0
Veneer(s) applied	0.0	0.0	0.0	0.0	4.0	3.8	0.0	0.0	0.0	0.0
Inlay(s)	0.0	0.0	0.0	0.0	14.4	12.2	0.0	0.0	0.1	0.0
Bridge(s) fitted	0.0	0.0	0.0	0.0	4.2	5.4	0.0	0.0	0.0	0.0
Referral for advanced mandatory services	0.0	0.1	0.0	0.3	0.0	0.1	0.0	0.1	0.0	0.1
Examination	99.1	99.3	94.9	95.7	94.4	96.0	27.7	28.1	95.2	95.6
Antibiotic Items Prescribed	0.1	0.1	0.6	0.6	0.6	0.7	8.4	9.2	0.6	0.6
Other Treatment	2.2	2.7	5.8	6.4	43.7	45.7	56.4	57.1	5.4	5.9
Number of items per 100 CoT	Items	Items	Items	Items	Items	Items	Items	Items	Items	Items
Fissure sealants	1.4	1.2	6.5	6.6	1.0	1.4	0.1	0.1	2.4	2.3
Radiograph(s) taken	7.5	7.6	25.2	25.7	70.3	75.7	13.1	12.2	11.8	11.8
Endodontic treatment	0.0	0.0	1.3	1.1	12.4	11.8	0.3	0.3	0.3	0.3
Permanent fillings and sealant restorations	0.1	0.1	131.4	128.6	65.5	60.8	10.7	10.5	29.1	27.1
Extractions	0.0	0.0	27.7	27.1	6.1	6.3	5.2	4.6	6.2	5.8
Crown(s) provided	0.0	0.0	0.0	0.0	21.0	22.5	0.0	0.0	0.1	0.1
Veneer(s) applied	0.0	0.0	0.0	0.0	4.8	4.4	0.0	0.0	0.0	0.0
Inlay(s)	0.0	0.0	0.0	0.0	14.5	12.2	0.0	0.0	0.1	0.0
Bridge units provided	0.0	0.0	0.0	0.0	10.3	14.2	0.0	0.0	0.0	0.1
Average treatment per CoT where the treatment occurs										
Fissure sealants	2.8	2.6	2.3	2.4	2.6	2.2	2.5	1.7	2.5	2.5
Radiograph(s) taken	1.8	1.8	1.9	1.8	2.0	2.1	1.2	1.1	1.8	1.8
Endodontic treatment	1.3	1.0	1.1	1.1	1.1	1.1	1.0	1.0	1.1	1.1
Permanent fillings and sealant restorations	2.1	1.9	1.6	1.6	2.3	2.1	1.1	1.1	1.6	1.5
Extractions	2.2	1.4	1.6	1.6	1.5	1.4	1.1	1.0	1.6	1.6
Crown(s) provided	0.0	0.5	1.1	1.2	1.1	1.0	1.0	1.0	1.1	1.1
Veneer(s) applied	0.0	0.0	0.0	0.0	1.2	1.2	0.0	0.0	1.2	1.2
Inlay(s)	0.0	0.0	2.0	0.0	1.0	1.0	1.0	0.0	1.0	1.0
Bridge units provided	0.0	0.0	0.0	0.0	2.4	2.7	0.0	0.0	2.4	2.7

Source: NHS Dental Services

Table A9: Total number of dentists with NHS activity by Health Board and selected characteristics, at 31 March (a)

	2015				2016				2017				2018			
	% 55 or over	% Female	Dentists per 10,000 population	% 55 or over	% Female	Dentists per 10,000 population	% 55 or over	% Female	Dentists per 10,000 population	% 55 or over	% Female	Dentists per 10,000 population	% 55 or over	% Female	Dentists per 10,000 population	Dentists per 10,000 population
Local Health Board																
Betsi Cadwaladr University	17.8	42.9	4.5	15.3	44.4	4.6	14.6	44.6	4.6	14.1	45.4	4.5				
Powys Teaching	10.8	45.8	6.3	13.3	45.3	5.7	12.7	48.1	6.0	17.7	44.3	6.0				
Hywel Dda University	13.3	45.2	4.3	14.5	48.3	4.5	12.9	46.8	4.5	16.2	47.9	4.3				
ABMU ^(b)	13.6	42.2	5.8	12.9	43.4	5.9	14.1	46.8	6.2	12.5	45.0	6.2				
Cwm Taf University	8.9	46.9	7.2	8.0	44.9	7.6	9.5	43.2	7.4	9.8	44.0	7.8				
Aneurin Bevan University	11.6	40.8	5.0	11.5	42.1	5.2	13.3	42.1	5.3	13.4	45.1	5.2				
Cardiff & Vale University	8.1	45.3	6.4	9.7	42.2	6.6	8.8	44.2	6.5	9.1	42.2	6.7				
Wales	12.3	43.7	4.7	13.2	44.7	4.7	13.4	45.3	4.7	13.3	45.8	4.7				

Source: NHS Dental Services

(a) Performers are counted in every HB where they have a contract and therefore can be counted more than once. The figure for Wales does not include duplication. See [Note](#) on cleaning of contract records in 2016.

(b) Abertawe Bro Morgannwg University

Table A10: Number of dentists with NHS activity who left or joined, between 1 April and 31 March

	2015-16 leavers ^(a)		2016-17 joiners ^(b)		2016-17 Workforce	2016-17 leavers ^(a)		2017-18 joiners ^(b)		2017-18 Workforce
	Number	Percentage of dentists	Number	Percentage of dentists	Number	Number	Percentage of dentists	Number	Percentage of dentists	Number
Performer only	145	11.4%	161	12.3%	1,306	137	10.5%	144	10.9%	1,324
Providing performer	11	5.5%	0	0.0%	169	4	2.4%	1	0.6%	155
Gender / Age group										
Males										
Under 35	31	11.0%	60	20.3%	295	29	9.8%	46	16.1%	286
35-44	15	7.0%	13	6.3%	208	9	4.3%	6	2.8%	217
45-54	17	9.8%	4	2.5%	158	8	5.1%	9	5.8%	155
55+	22	15.2%	2	1.4%	146	23	15.8%	2	1.4%	143
Total	85	10.5%	79	9.8%	807	69	8.6%	63	7.9%	801
Females										
Under 35	47	15.8%	62	20.9%	297	46	15.5%	68	22.9%	297
35-44	13	6.6%	13	6.5%	201	14	7.0%	10	5.1%	198
45-54	7	6.3%	7	5.9%	118	5	4.2%	3	2.3%	129
55+	4	8.2%	0	0.0%	52	7	13.5%	1	1.9%	54
Total	71	10.8%	82	12.3%	668	72	10.8%	82	12.1%	678
Persons										
Under 35	78	13.4%	122	20.6%	592	75	12.7%	114	19.6%	583
35-44	28	6.8%	26	6.4%	409	23	5.6%	16	3.9%	415
45-54	24	8.4%	11	4.0%	276	13	4.7%	12	4.2%	284
55+	26	13.4%	2	1.0%	198	30	15.2%	3	1.5%	197
Total	156	10.6%	161	10.9%	1,475	141	9.6%	145	9.8%	1,479
Contract type										
GDS	110	9.3%	132	10.9%	1,207	112	9.3%	124	10.2%	1,212
PDS	10	12.7%	8	10.4%	77	9	11.7%	6	8.3%	72
Mixed	14	12.7%	3	3.0%	101	5	5.0%	3	2.7%	112
Total ^(c)	156	10.6%	161	10.9%	1,475	141	9.6%	145	9.8%	1,479

Source: NHS Dental Services

(a) A Leaver is defined as a performer that had activity recorded against them via FP17W forms in a year, but none the following year. They would be recorded as a leaver in the first year. This definition results in information on the number of leavers for a particular year not being available until the end of the following year's reconciliation period. The percentage of leavers is based on the number of dentists in the previous year.

(b) A Joiner is defined as a performer with activity recorded against them via FP17W forms in a year, but none in the previous year. They would be recorded as a starter in the latest year. The percentage of joiners is based on the number of dentists in the latest year.

(c) Includes some dentists working in the Emergency Dental service and some CDS (Community Dental Service) staff working on a PDS contract and some trainee (foundation) dentists.

Annex 2: StatsWales table views

[Courses of Treatment and Units of Dental Activity \(UDA\) by local health board and treatment band](#)

[Courses of Treatment and Units of Dental Activity \(UDA\) by local health board, treatment band and quarter](#)

[NHS patients treated for adults and children by local health board](#)

[NHS performers by local health board and dentist type](#)

[NHS performers by local health board and contract type](#)

[Patient charge for Courses of Treatment by local health board, patient type and treatment band](#)