



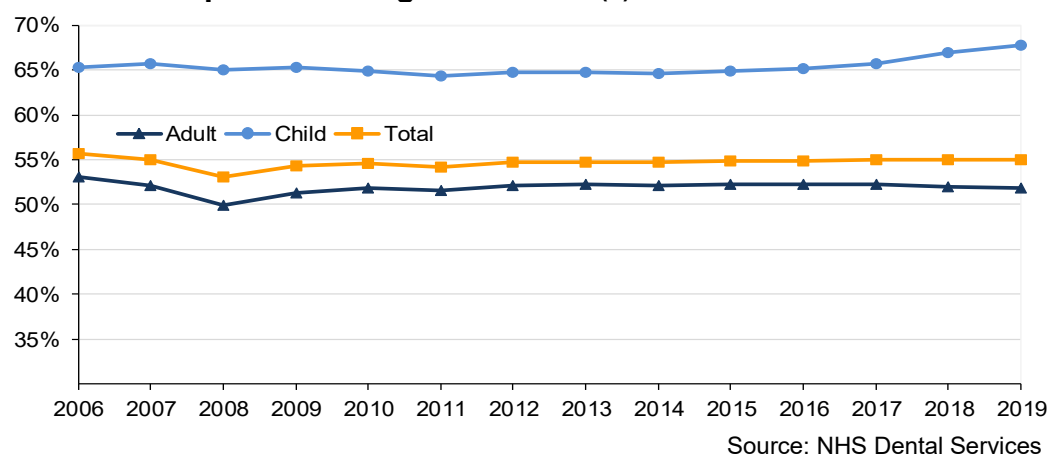
NHS Dental Statistics in Wales, 2018–19

5 Sept 2019
SFR 70/2019

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

Comparable data is available from when the current dental contract was introduced in 2006.

Chart 1: The percentage of the adult and child population treated in the 24 month period ending March 2019(a)



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

Patients treated in the 24 months before 31 March 2019

- 1.7 million patients were seen in the 24 month period ending March 2019. In Wales, 51.9 per cent of adults and 67.7 per cent of children were treated.

Between 1 April 2018 and 31 March 2019

- There were 2,426,600 courses of treatment; 60.9 per cent of which were Band 1 treatments.
- 45.6 per cent of all courses of treatment were for paying adults.
- 1,506 dentists had NHS activity recorded.
- The total patient charge was £36.4 million.
- 4.9 million units of dental activity (UDA) were carried out.

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 2018–19 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.

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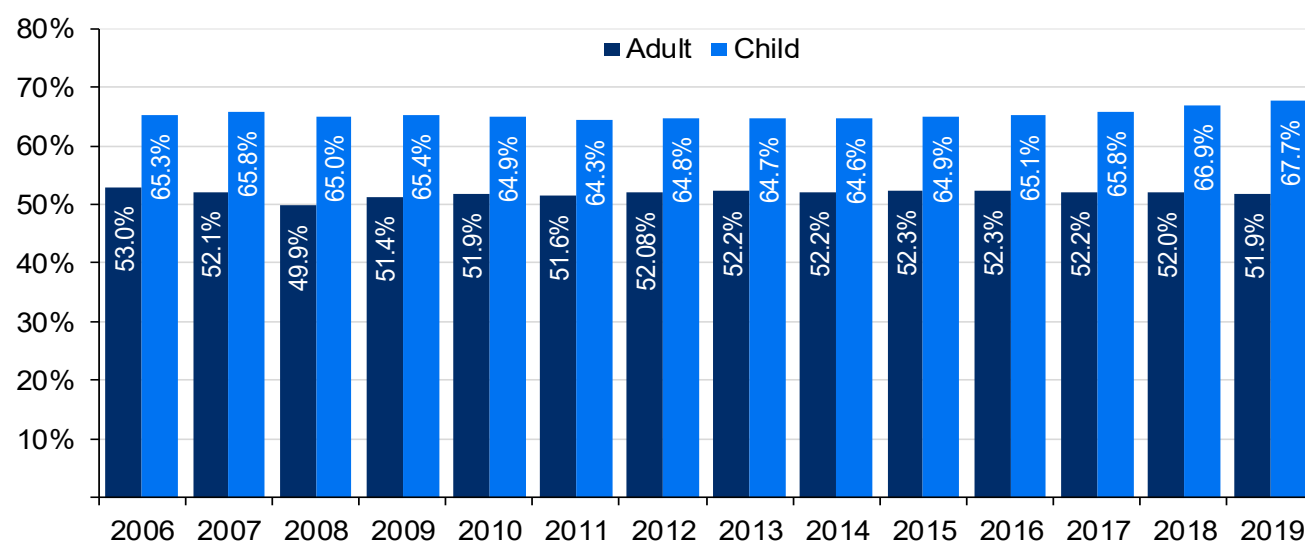
Patients treated

'Patients treated' counts the number of distinct patients that have been processed during the last 24 months. This is a count of unique patients; 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 and 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: The percentage of the adult and child population treated in the 24 month period ending March 2019(a)



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

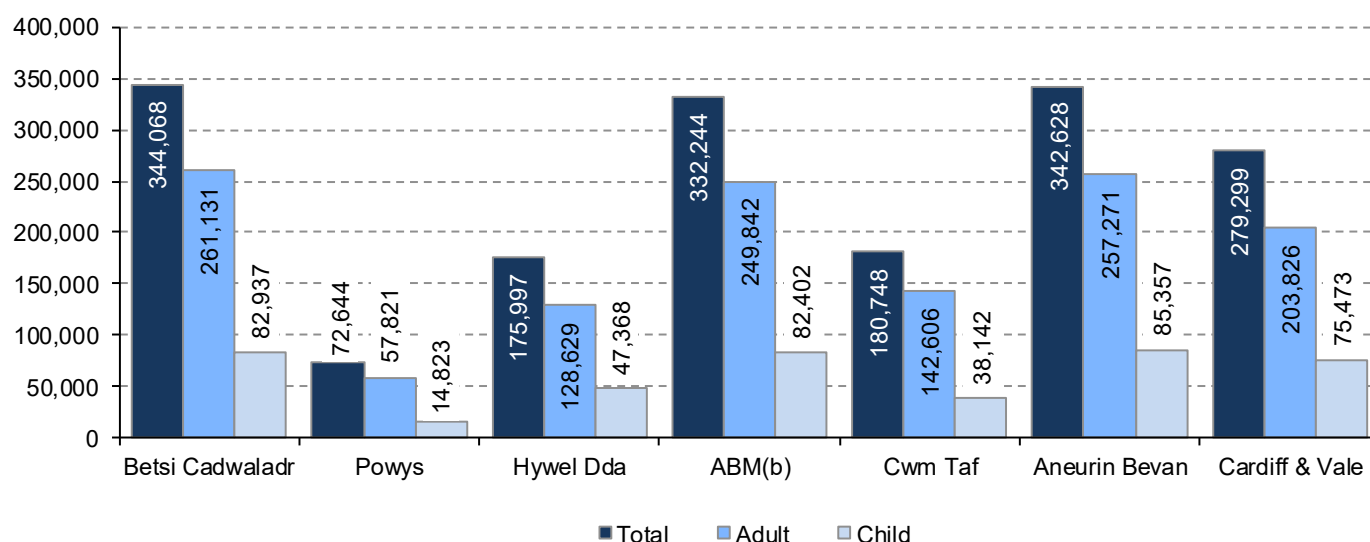
Summary: [Chart 2](#) shows the proportions of adults and children who were treated in Wales since 2006. The percentage of adults treated in Wales has remained stable over time, despite a slight drop in 2008. Note that the adult population has risen substantially during this time period and, according to ONS mid-year estimates, there were around 166,500 more adults in June 2018 than in June 2006 and around 73,500 more patients were treated in 2018-19 than in 2006-07. In contrast, the percentage of children treated has increased to 67.7% this year compared to 65.3% over the 24 month period ending March 2006, however the child population has decreased by 13,600 between June 2006 and June 2018.

Latest Data: In the 24 month period ending March 2019, 51.9 per cent of adults and 67.7 per cent of children were treated. Overall 55.0 per cent of the Welsh population received treatment.

Annual Change: When comparing the 24 month period ending March 2019 and the 24 month period ending March 2018 there was a 0.5 per cent increase in the total number of people treated. Within this, the number of children treated increased by 6,105 (1.5 per cent) and the number of adults treated increased by 2,540 (0.2 per cent).

Change since first year of data: When comparing the 24 month period ending March 2019 and the 24 month period ending March 2006 there was a 4.4 per cent increase in the total number of people treated. Within this, the number of children treated increased by 3,710 (0.9 per cent) and the number of adults treated increased by 69,810 (5.7 per cent).

Chart 3: Number of patients treated in the 24 month period ending March 2019 (a)



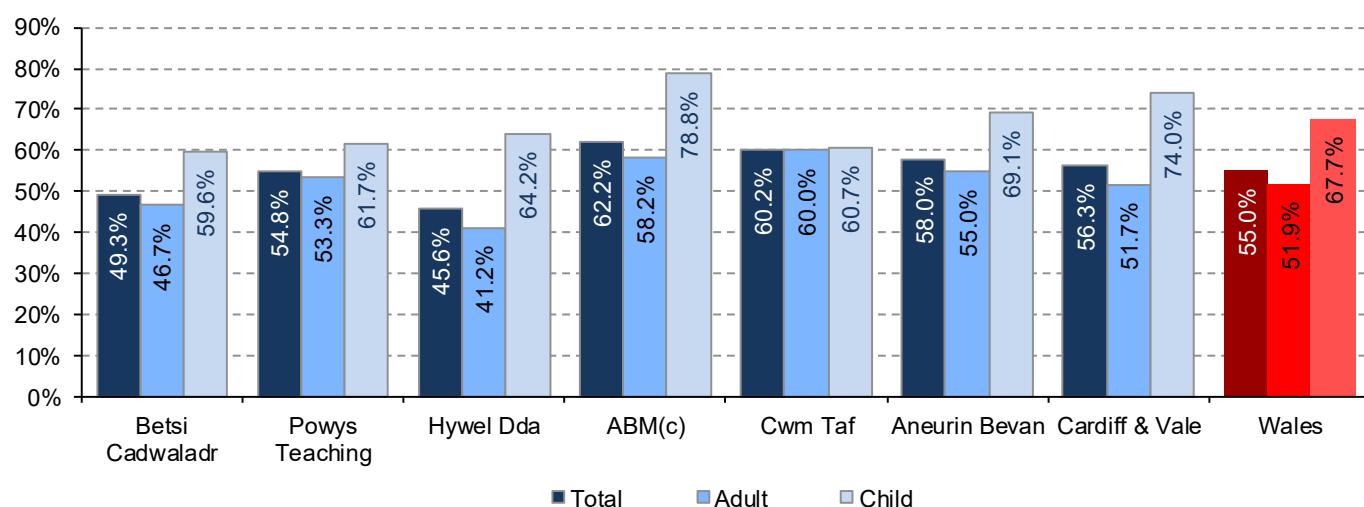
Source: NHS Dental Services

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

(b) Abertawe Bro Morgannwg

[Chart 3](#) shows the Number of patients treated in the 24 month period ending March 2019 Just over 1.7 million patients (55.0 per cent of the population) were treated in the 24 month period ending March 2019; of which just over 1.3 million were adults and just over 425,000 were children. In total, this is 8,645 (0.5 per cent) compared to the previous 24 month period ending March 2018. See [StatsWales](#) for further information.

Chart 4: Percentage of the population treated in the 24 month period ending March 2019 (a)(b)



Source: NHS Dental Services, Office for National Statistics

(a) Adults are defined as the number of resident population aged 18 years or over. Children are defined as the percentage of resident population aged 0-17 years. Local health board of last recorded treatment.

(b) Based on Office for National Statistics 2018 mid-year estimates of the population. More information on population data is available in the [Notes](#) page.

(c) Abertawe Bro Morgannwg

[Chart 4](#) shows the percentage of adults and children treated in the 24 month period ending 31 March 2019. The lowest percentage of adults treated was recorded in Hywel Dda (41.2 per cent) and the highest was recorded in Cwm Taf University (60.0 per cent).

The lowest percentage of children treated was recorded in Betsi Cadwaladr University (59.6 per cent) and the highest was recorded in Abertawe Bro Morgannwg University (78.8 per cent).

Patient charges

Patient charges are paid by adult patients who are eligible to pay for treatment. The amount charged 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:

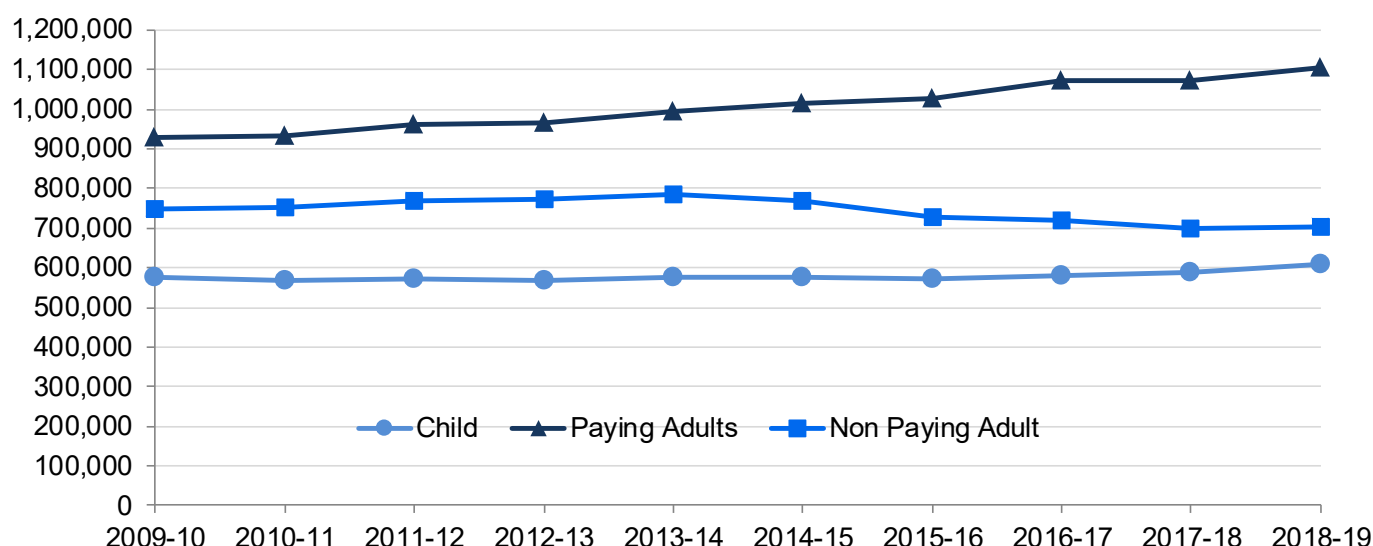
- Band 1 - covers a check up and simple treatment (such as examination, diagnosis (e.g. X-rays), advice on preventative measures, and a scale and polish).
- Band 2 - includes mid-range treatments (such as fillings, extractions, and root canal work) in addition to Band 1 work.
- Band 3 - includes complex 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:
 - 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
 - care and treatment is provided only to the extent that is necessary to prevent that significant deterioration or address that severe pain.
- Free – courses of treatment 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.

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: Number of chargeable courses of treatment, by patient type, between 1 April and 31 March (a)



- (a) Adults are defined as the number of resident population aged 18 years or over. Children are defined as the percentage of resident population aged 0-17 years. Local health board of last recorded treatment.
- (b) Chargeable courses of treatment are those in Bands 1, 2, 3, Urgent or Reg 11 Replacements. Only paying adults will be charged for chargeable treatments.

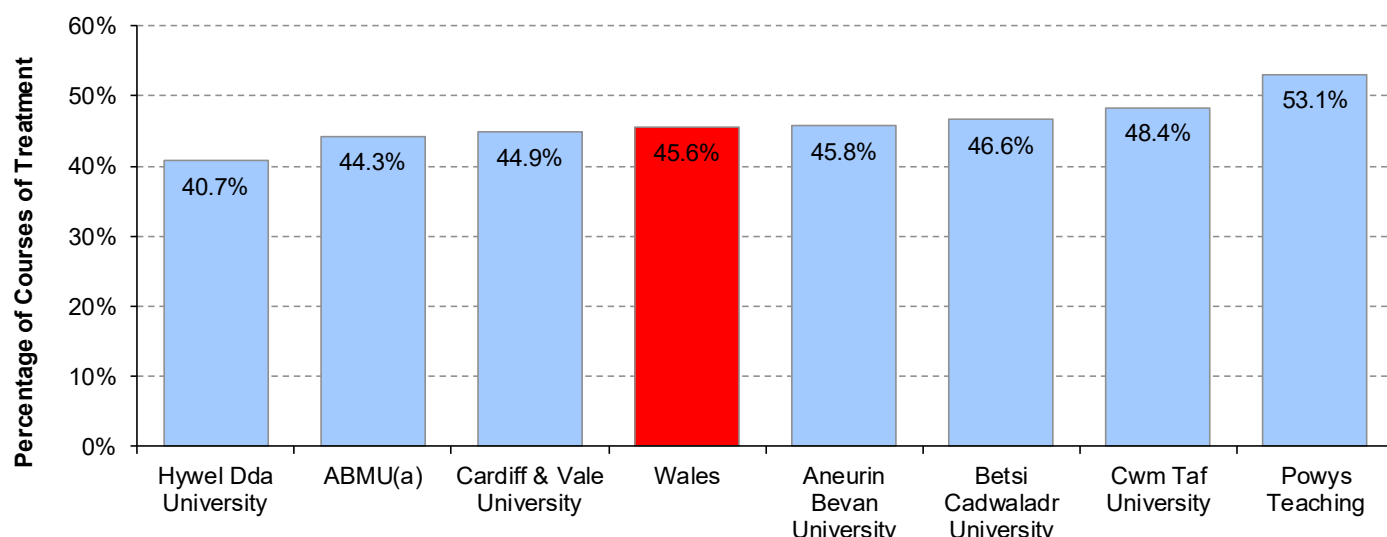
Summary: [Chart 5](#) shows the number of chargeable courses of treatment given to different patient types between 2009-10 and 2018-19. The number of courses of treatment undertaken by paying adults has consistently increased while the number given to non paying adults has fallen since 2013-14. Courses of treatment for children have risen slowly since 2015-16.

Latest Data: The figures for paying adults and children are the highest on record. In 2018-19 there were over 1.1 million chargeable courses of treatment for paying adults and 607,070 for children. The number of chargeable courses of treatment for non paying adults was around 701,400, a similar figure to last year.

Annual change: The number of chargeable courses of treatment for paying adults has increased by 32,140 compared with 2017-18, a rise of 3.0 per cent. Treatments for children and adults exempt from charge increased by 2.9 per cent and 0.4 per cent respectively. Treatments for non-paying adults decreased by 0.4 per cent.

Change since first year of data: Paying adults have received over 176,170 more chargeable courses of treatment in 2018-19 compared with 2009-10, an increase of 18.9 per cent; non paying adults have received 47,360 fewer, a decrease of 6.3 per cent; and courses of treatment for children have increased by just over 31,490, or 5.5 per cent.

Chart 6: Percentage of courses of treatment which were not exempt from charge by health board, between 1 April 2018 and 31 March 2019

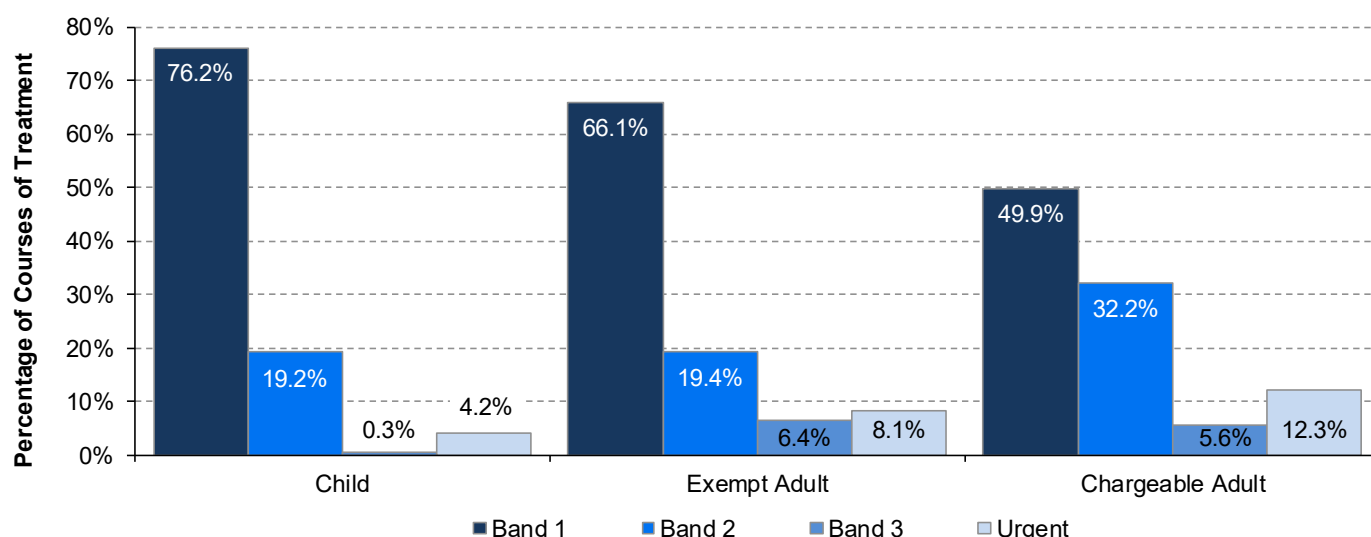


Source: NHS Dental Services

(a) Abertawe Bro Morgannwg

[Chart 6](#) shows the percentage of courses of treatment which were not exempt from charge by health board. 45.6 per cent of all courses of treatment were for paying adults in 2018–19 compared to 45.2 per cent in 2017–18. This proportion varied across health boards according to the profile of the local patient population. [Chart 5](#) shows that the lowest percentage of treatments for paying adults was recorded in Hywel Dda (40.7 per cent) and the highest was in Powys (53.1 per cent).

Chart 7: Percentage of courses of treatment by type of patient and treatment band, between 31 April 2018 and 31 March 2019 (a)

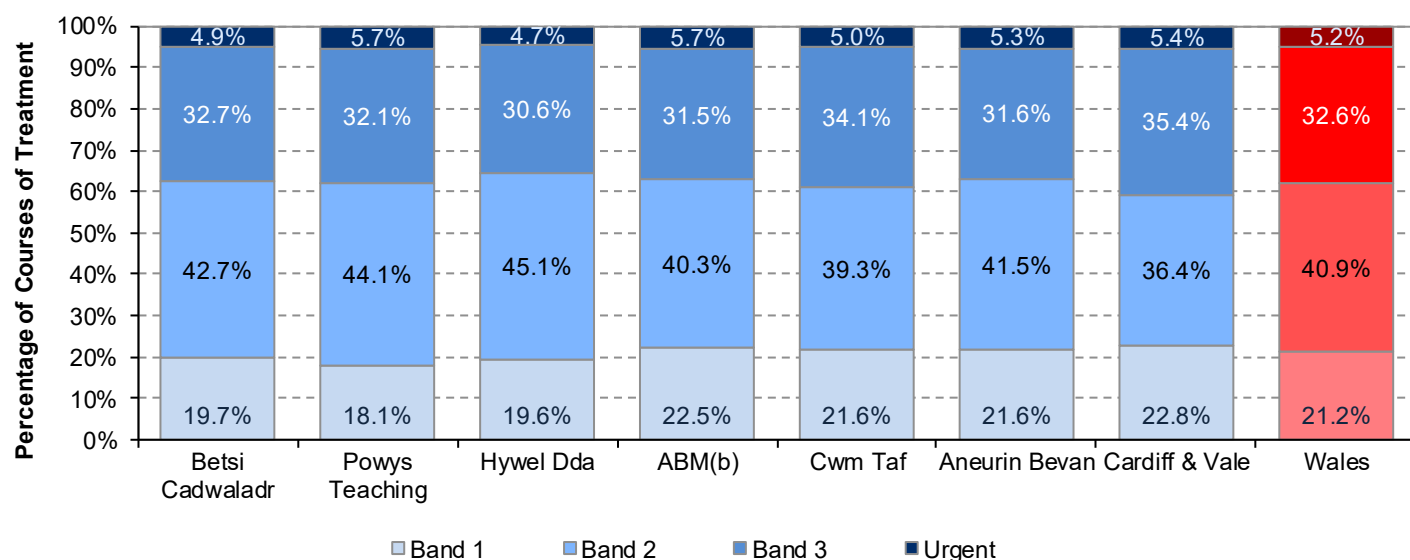


Source: NHS Dental Services

(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 7](#) shows the proportion of courses of treatments in each treatment band for each patient type. The highest proportion of treatments in all patient categories were Band 1 treatments; however, this ranged from three quarters of the treatments for children to a half of treatments to chargeable adults. A similar proportion of treatments were Band 2 treatments in both children and exempt adults, but Band 2 made up nearly a third of all treatments for chargeable adults. A higher proportion of urgent treatments were given to adults than children.

Chart 8: Proportion of patient charges by health board and band, between 1 April 2018 and 31 March 2019 (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

[Chart 8](#) shows that although Band 1 treatments made up nearly half of chargeable treatments they attracted only just over a fifth of the patient charge.

The more complex and expensive Band 3 payments accounted for only 5.6 per cent of chargeable treatments but attracted nearly a third of the total patient charge.

Band 2 patient treatments had the largest proportion of charge overall and accounted for between 36.4 per cent and 45.1 per cent of total patient charges for each health board.

Total patient charge values for each band are available on [StatsWales](#).

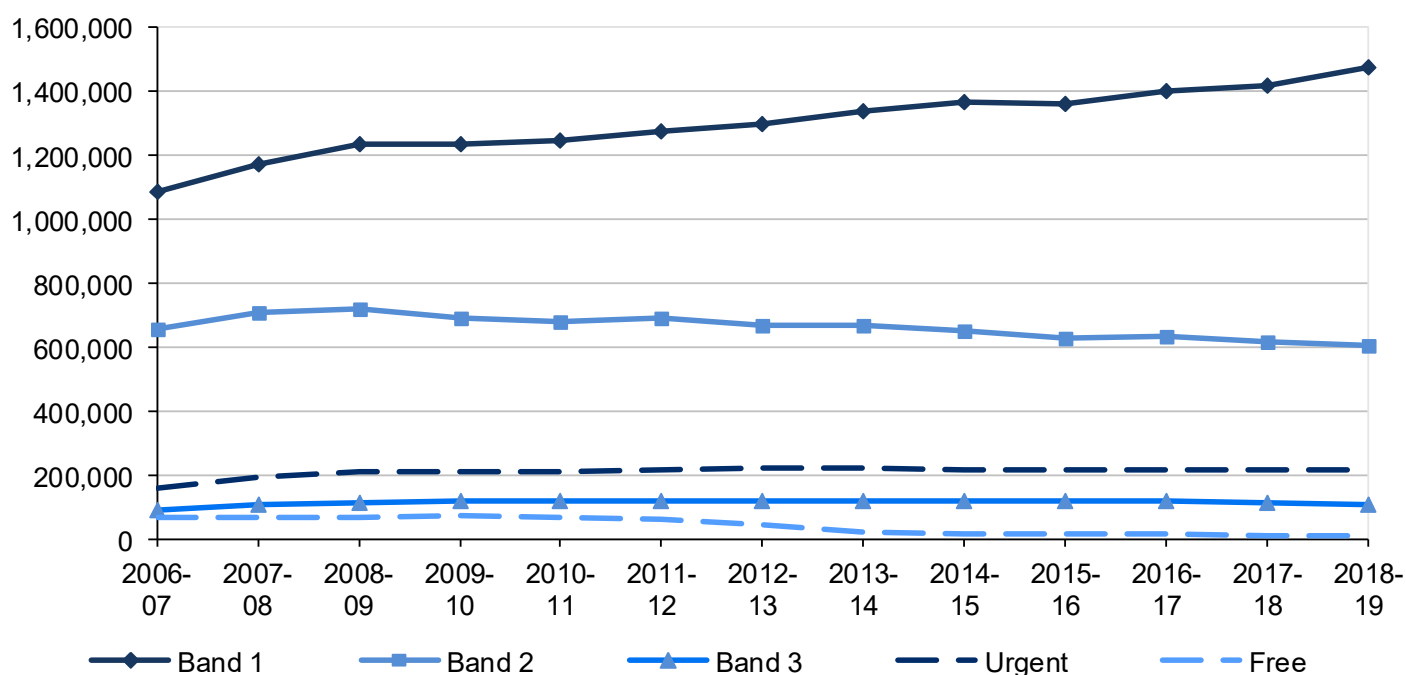
Activity: Courses of treatment

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.

Further data can be found on [StatsWales](#).

Chart 9: Annual number of courses of treatment, by treatment band, between 1 April and 31 March



Source: NHS Dental Services

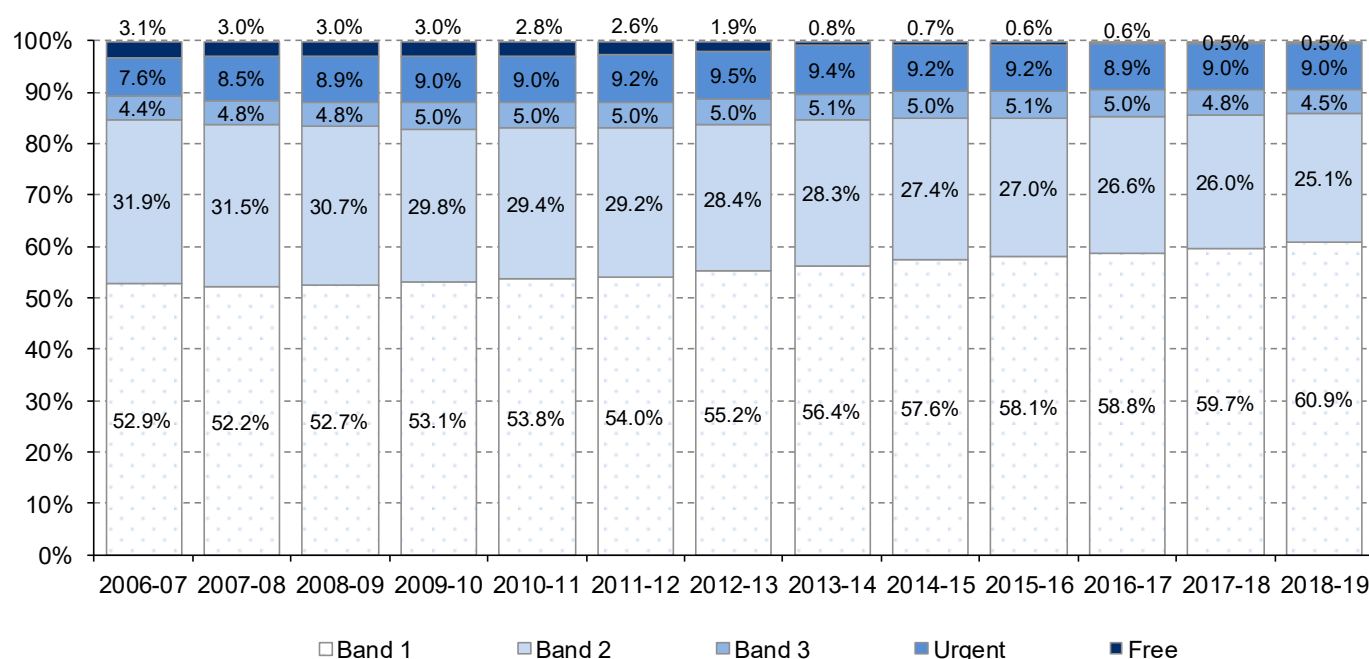
Summary: [Chart 9](#) shows the number of courses of treatment by each treatment band from the introduction of the current contract in 2006-07 to 2018-19. In 2018-19 there were over 2.4 million courses of treatment. Since 2006-07, the largest increase has been in the number of Band 1 courses of treatment, with almost 390,000 (35.8 per cent) more courses of treatment in 2018-19. Meanwhile the number of Band 2 courses of treatment has decreased by just over 47,000 (7.2 per cent) between 2006-07 and 2018-19.

Latest Data: The number of Band 1 courses of treatment is at an all-time high (1,477,655), while free and Band 2 courses of treatment are the lowest on record (11,950 and 608,510 respectively). There were also 109,360 Band 3 treatments in 2018-19 (the lowest figure since 2007-08), and 218,090 urgent courses of treatment.

Annual Change: There has been an increase of 52,040 (2.2 per cent) in the number of courses of treatments performed between 2017-18 and 2018-19.

Change since first year of data: The overall number of courses of treatment has increased by 371,600 (18.1 per cent) since 2006-07.

Chart 10: Percentages of Courses of Treatment, by treatment band, between 1 April and 31 March



Source: NHS Dental Services

Summary: [Chart 10](#) shows the proportion of each course of treatment band from the introduction of the current contract in 2006-07 to 2018-19. Band 1 courses of treatment make up the largest proportion of courses of treatment, at 60.9 per cent in 2018-19. Band 3, urgent and free treatments make up smaller proportions of the total courses of treatments. The proportion of free treatments in 2018-19 is only a sixth of what it was in 2006-07.

Latest Data: The percentage of Band 1 courses of treatment is at an all time high (60.9 per cent). Free and Band 2 courses of treatment are the lowest on record (0.5 and 25.1 per cent respectively). Band 3 accounted for 4.5 per cent, the lowest figure since 2008, and urgent courses accounted for 9.0 per cent in 2018-19.

Annual Change: The proportion of Band 2 courses of treatment fell by 0.9 percentage points between 2017-18 and 2018-19 while the proportion of Band 1 courses of treatment increased by 1.2 per cent points. Other bands have remained stable.

Change since first year of data: There has been an increasing proportion of Band 1 courses of treatment being performed since 2006-07, a rise of 8 percentage points from 2006-07. The proportion of Band 2 courses of treatment has decreased from 31.9 per cent to 25.1 per cent over the same period. Free treatments have decreased to half a percent of all treatments, while other bands have remained stable.

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 2018-19.

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, a routine examination that 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.

Taking Oral Health Improvement and Dental Services Forward in Wales, published by Welsh Government in March 2017, outlines the key priorities for NHS dentistry with contract reform identified as a priority.

From 1 April 2019 a total of 94 practices across Wales form part of the GDS Reform programme, over 20% of dental practices in Wales who provide NHS treatment.

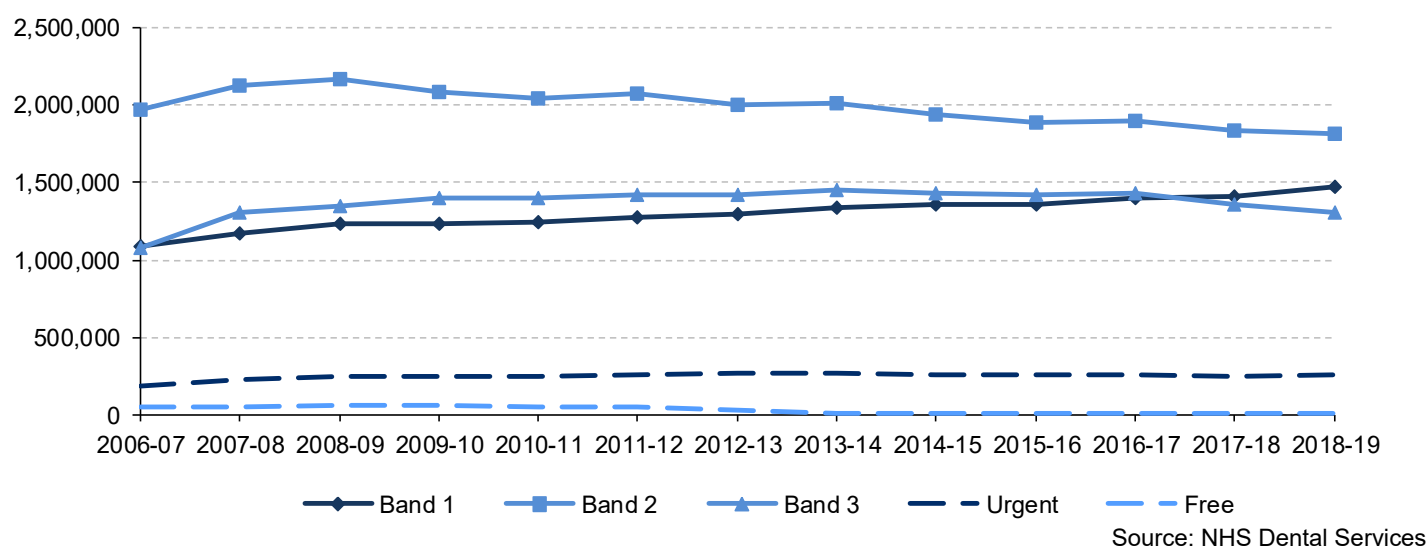
Practices in this first phase of the reform programme see their total Units of Dental Activity (UDA) target reduced by 10% to enable them to undertake individual clinical assessments of risk and need, plan care, give personalised preventive advice and agree appropriate recall intervals with patients.

This will impact upon the number of UDAs and COTs carried out in Wales. Caution should be taken when comparing data from this time period onwards with data from previous years/quarters. As the roll-out continues, this will increasingly impact on future data.

Further information on the dental contract reform in Wales can be found here: [Oral health and dental services response](#)

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

Chart 11: Number of Units of Dental Activity, by treatment band, between 1 April and 31 March (a)(b)



(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 [notes](#).

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

Summary: [Chart 11](#) shows the total number of Units of Dental Activity (UDA) of treatment for Wales from the introduction of the new contract in 2006-07 to 2018-19, by treatment band. Trends for each band are different over time: Band 1 UDA has generally increased year-on-year since 2006-07, while Band 2 UDA has generally fallen every year. The difference between Band 2 and Band 1 UDA has decreased from nearly 900,000 in 2006-07 to just under 350,000 in 2018-19. Band 3 UDA had been relatively stable over the medium term but has been falling in recent years and is lower than Band 1 for the second consecutive year.

Latest Data: In total in 2018-19, there were just under 4.9 million UDA. Band 2 accounted for the largest proportion of the total UDA (37.3 per cent of the total number of UDA). Band 1 remains as the second largest proportion, with 30.2 per cent of all UDA.

Annual Change: Overall there was little change in the total number of UDA delivered but within bands numbers have changed considerably. Over the year, the number of Band 1 UDA increased by 63,110 (4.5 per cent), the number of Band 2 UDA decreased by 21,415 (1.2 per cent), the number of Band 3 UDA decreased by 52,130 (3.8 per cent) and the number of urgent UDA increased by 8,420 (3.4 per cent).

Change since first year of data: Since 2006-07 the total number of UDA performed has increased by 11.5 per cent. The number of UDA in Band 1 increased by 35.3 per cent, UDA in Band 3 increased by 21.0 per cent and urgent UDA increased by 38.1 per cent. However, the number of Band 2 and free UDA has decreased by 7.5 and 81.8 per cent respectively.

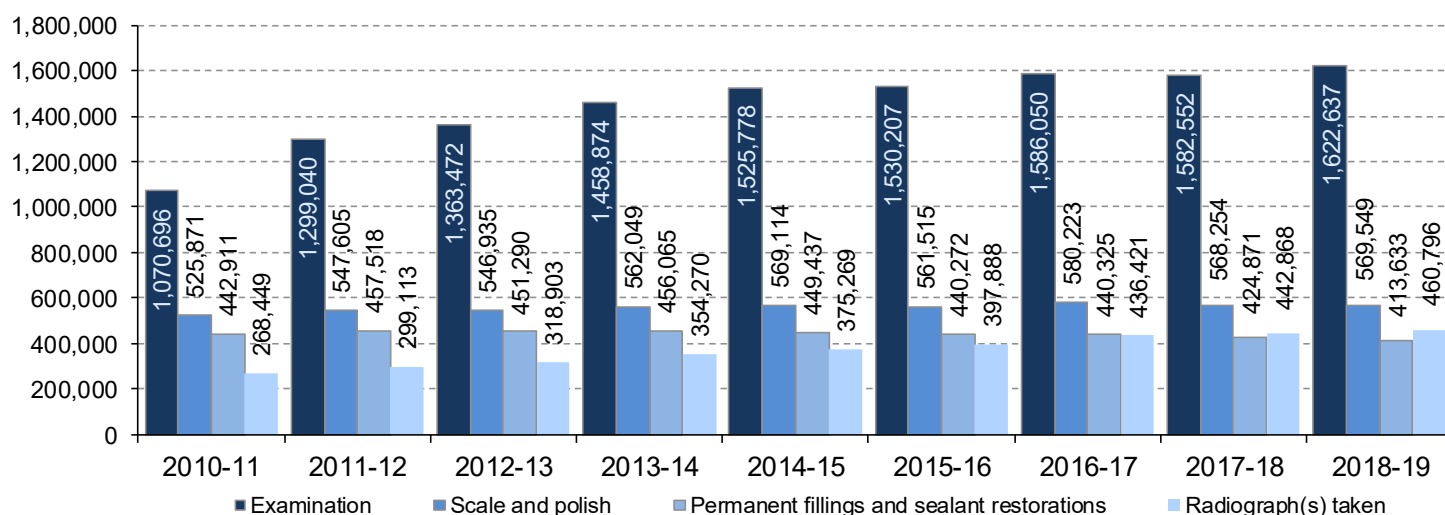
Activity: Clinical dental activity

Numbers of clinical treatments are estimates based on a full year of clinical data. In the early years of data collection, a weighting factor was applied to clinical treatment data so that they matched 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 12: Selected number of clinical treatments 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 course of treatment.

Summary: [Chart 12](#) shows the number of clinical treatments for adults by treatment type and year since 2010-11. For adult treatments, the proportion of courses of treatment including an examination has increased over time. The number of clinical treatments including radiographs has also increased, reaching an all-time high of 460,795 in 2018-19. Scale and polish and permanent fillings and sealant restorations have remained at a consistent level.

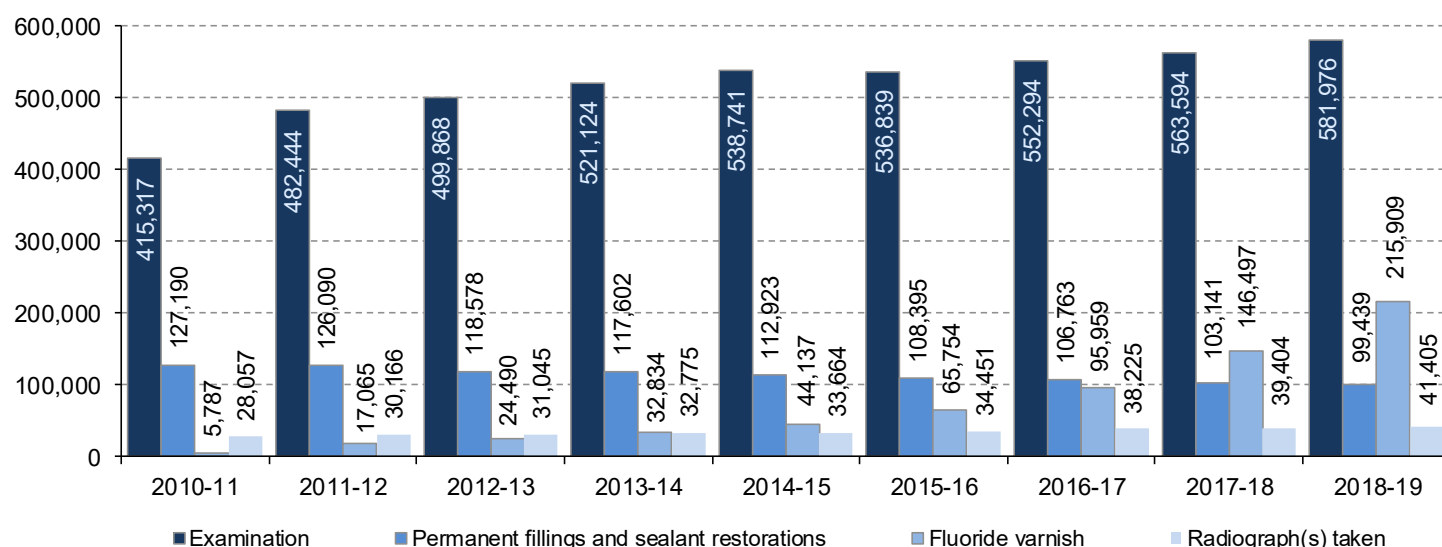
Refer to [Table A3](#) for the total number of adult courses of treatment that contain each clinical treatment for 2017-18 and 2018-19. See [Table A5](#) for proportions of adult clinical treatment activity, by treatment band, for the previous 2 years.

Latest Data: 1,622,635 (or 89.8 per cent of) adult courses of treatments included an examination in 2018-19.

Annual Change: The number of examinations increased by 40,085 (2.5 per cent) to 1,622,635 in 2018-19 from 1,582,550 in 2017-18. The proportion of courses of treatment including an examination increased, up from 89.3 per cent to 89.8 per cent.

Change since first year of data: The proportion of courses of treatment including an examination has increased over time, up from 63.6 per cent in 2010-11 to 89.8 per cent in 2018-19 (a rise of 551,940 examinations). In 2010-11, 1,070,695 adult courses of treatments included an examination.

Chart 13: 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 course of treatment.

Summary: [Chart 13](#) shows the number of child courses of treatment for selected clinical treatment by treatment type and year since 2010-11. A record high number of examinations of 581,975 were carried out on children in 2018-19 and there are an increasing proportion of children receiving fluoride varnish as part of their course of treatment, up from 24.8 to 35.6 per cent between 2017-18 and 2018-19.

See [TableA6](#) for the total number of child courses of treatment that contain each clinical treatment for 2017-18 and 2018-19. 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 12](#).

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: 581,975 examinations were carried out and 6.9 per cent of the total courses of treatment involved a radiograph being taken as part of the treatment.

Annual Change: Over the year, the number of permanent fillings and sealant restorations decreased by 3,700 (3.6 per cent), the number of examinations increased by 18,380 (3.3 per cent), the number of fluoride varnish treatments increased by 69,410 (47.4 per cent) and the number of radiographs taken increased by 2,000 (5.1 per cent).

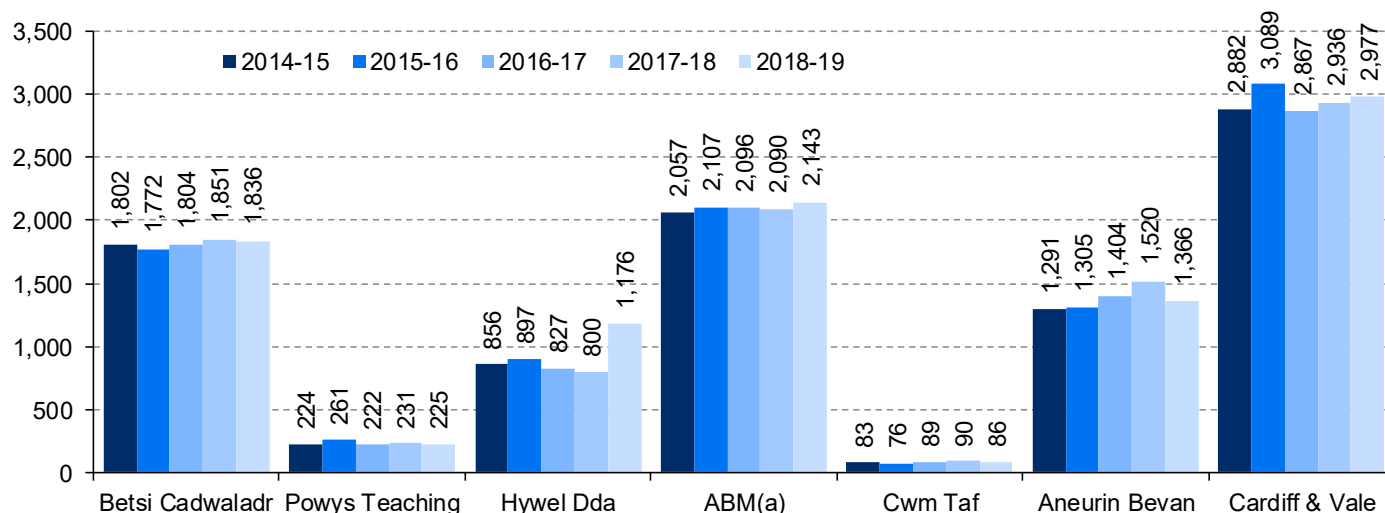
Change since first year of data: The number of permanent fillings and sealant restorations has decreased by 27,750 (21.8 per cent), the number of examinations has increased by 166,660 (40.1 per cent), the number of fluoride varnish treatments increased by 210,120 (3,630.9 per cent) and the number of radiographs taken increased by 13,350 (47.6 per cent).

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 courses of treatment and units of dental activity 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 may be performed over a number of years, but is recorded from the year it starts.
- 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.

Chart 14: Number of treatments undertaken (Assessed and Accepted FP17Os) by local health board, between 1 April and 31 March



Source: NHS Dental Services

(a) Abertawe Bro Morgannwg

[Chart 14](#) shows the number of treatments undertaken (Assessed and Accepted FP17Os) by local health board, between 1 April and 31 March. For assessed and accepted patients, 9,810 treatments were undertaken between April 2018 and March 2019, an increase of 3.1 per cent compared to the previous year. Hywel Dda had the largest percentage increase over the year, with 47.0 per cent more treatments. Aneurin Bevan had the largest annual percentage decrease of 10.1 per cent.

[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 local health boards.

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

Workforce

Dental workforce data presented here shows 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.

Note that due to changes in the collection system at NHS Business Services Authority it has not been possible to determine the working arrangements (i.e. dentist type) of dentists this year. Please see [StatsWales](#) for previous years' data by dentist type and contract type. See the [notes](#) section for further information on dentist type.

Regardless of this change, this publication does not include data for Provider-only dentists as they do not have NHS activity recorded against them.

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
2019	1,506	4.8	2,084

(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 has continued to rise in line with population increases in Wales, with the number of dentists per 10,000 population rising by 0.1 per cent after remaining constant for the previous five years. See [StatsWales](#) for health board counts.

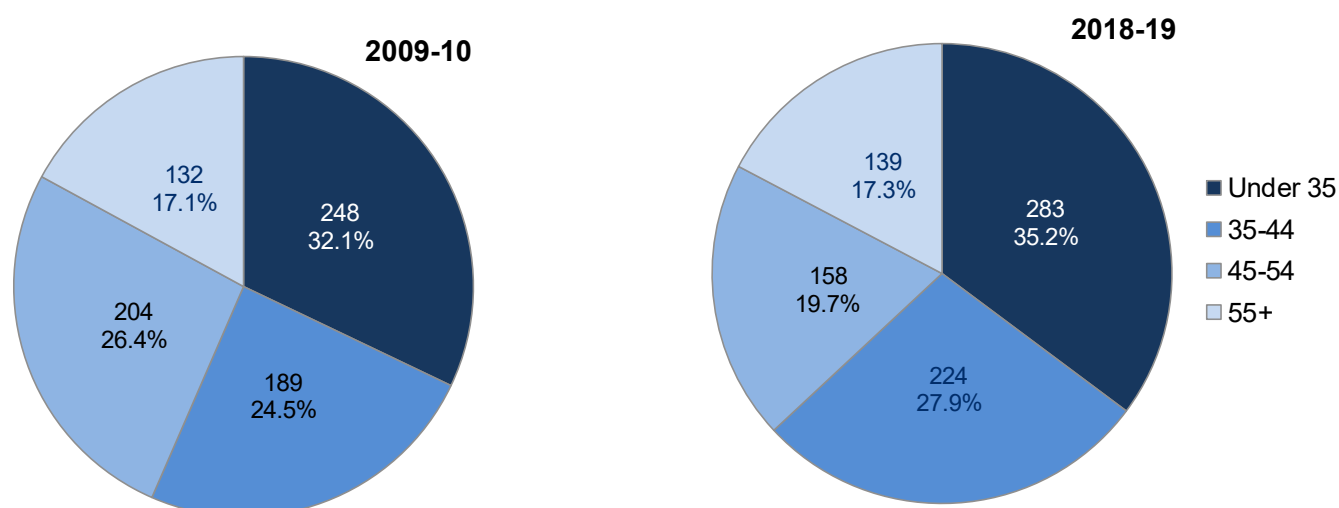
Latest Data: A total of 1,506 dentists with NHS activity were recorded between 1 April 2018 and 31 March 2019. This figure includes 'Dental foundation year 1 posts'. As at 31 March 2019 there were 73 centrally funded Dental Foundation year 1 posts, one more than 2017-18.

Annual Change: There were 26 more dentists with recorded NHS activity in 2018-19 than in 2017-2018.

Change since first year of data: The number of dentists with NHS activity has increased by 365 (32.0 per cent) from 2006-07 and so the number of people per dentists has decreased by 533 (or 20.4 per cent), falling from 2,617 in 2007 to 2,084 in 2019.

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

Chart 15: Percentage and number of male dentists with NHS activity (a), by age

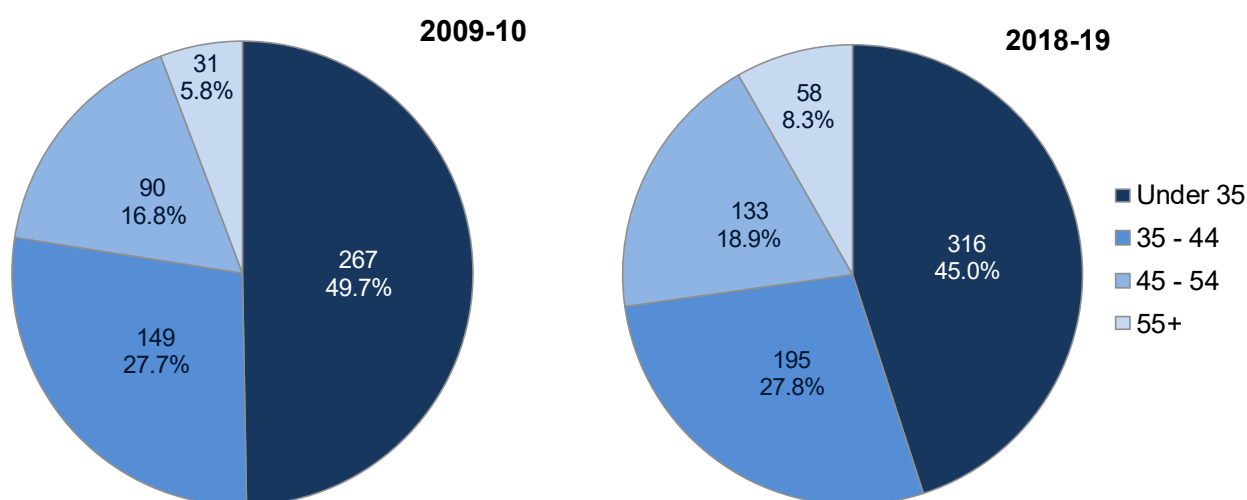


(a) Performers with NHS activity recorded via FP17W forms.

Source: NHS Dental Services

[Chart 15](#) shows the percentage and number of male dentists by age in Wales who had NHS activity recorded in 2008-09 and 2018-19. The number of male dentists in 2018-19 was 804, 3 (0.4 per cent) more than in 2017-18, but 31 (4.0 per cent) more than in 2009-10. 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 16: Percentage and number of female dentists with NHS activity (a), by age

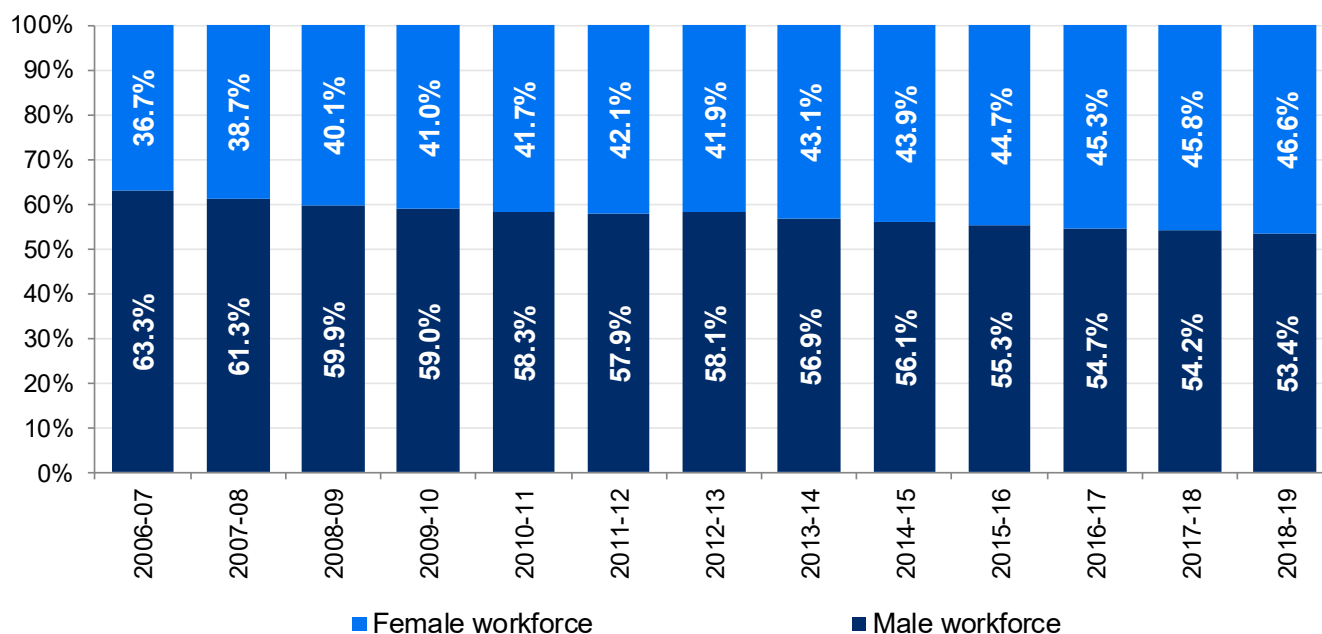


(a) Performers with NHS activity recorded via FP17W forms.

Source: NHS Dental Services

[Chart 16](#) shows the percentage and number of female dentists by age in Wales who had NHS activity recorded in 2008-09 and 2018-19. The number of female dentists in 2018-19 was 702, 24 (3.5 per cent) more than in 2017-18 and 165 (30.7 per cent) more than in 2009-10. 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 most age groups over the ten year period, there have been some changes to the proportion of female dentists in each age group. In 2018-19 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 17: 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: [Chart 17](#) shows the percentage of the dentists with NHS activity (a) in Wales by gender and year. Males account for a larger percentage of the dental workforce with NHS activity in Wales but the difference continues to narrow.

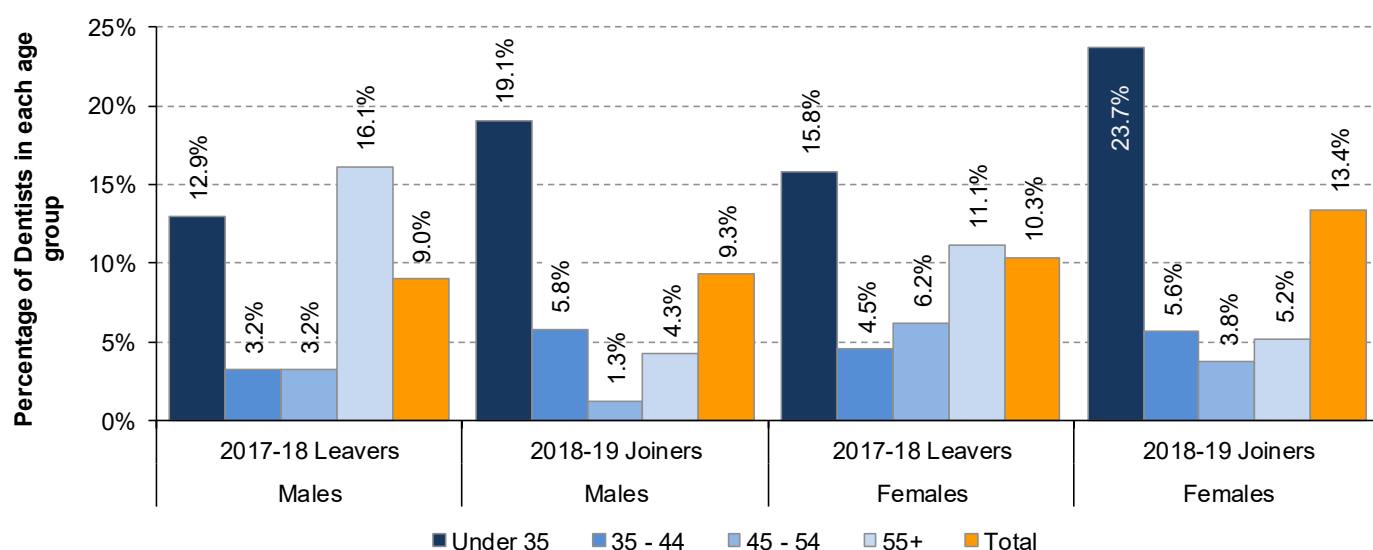
Latest Data: 46.6 per cent of dentists with NHS activity were female; the highest percentage on of the workforce to date.

Annual Change: There was a 0.8 percentage point increase in proportion of female dentists with NHS activity since 2017-18.

Change since first year of data: There has been a 9.9 percentage point rise in the proportion of female dentists with NHS activity since 2006-07.

Joiners and leavers

Chart 18: NHS Dental leavers between 2017-18, and joiners between 2018-19 by age and gender



Source: NHS Dental Services

Summary: [Chart 18](#) shows the percentage of NHS Dental leavers between 2017-18, and joiners between 2018-19 by age and gender.

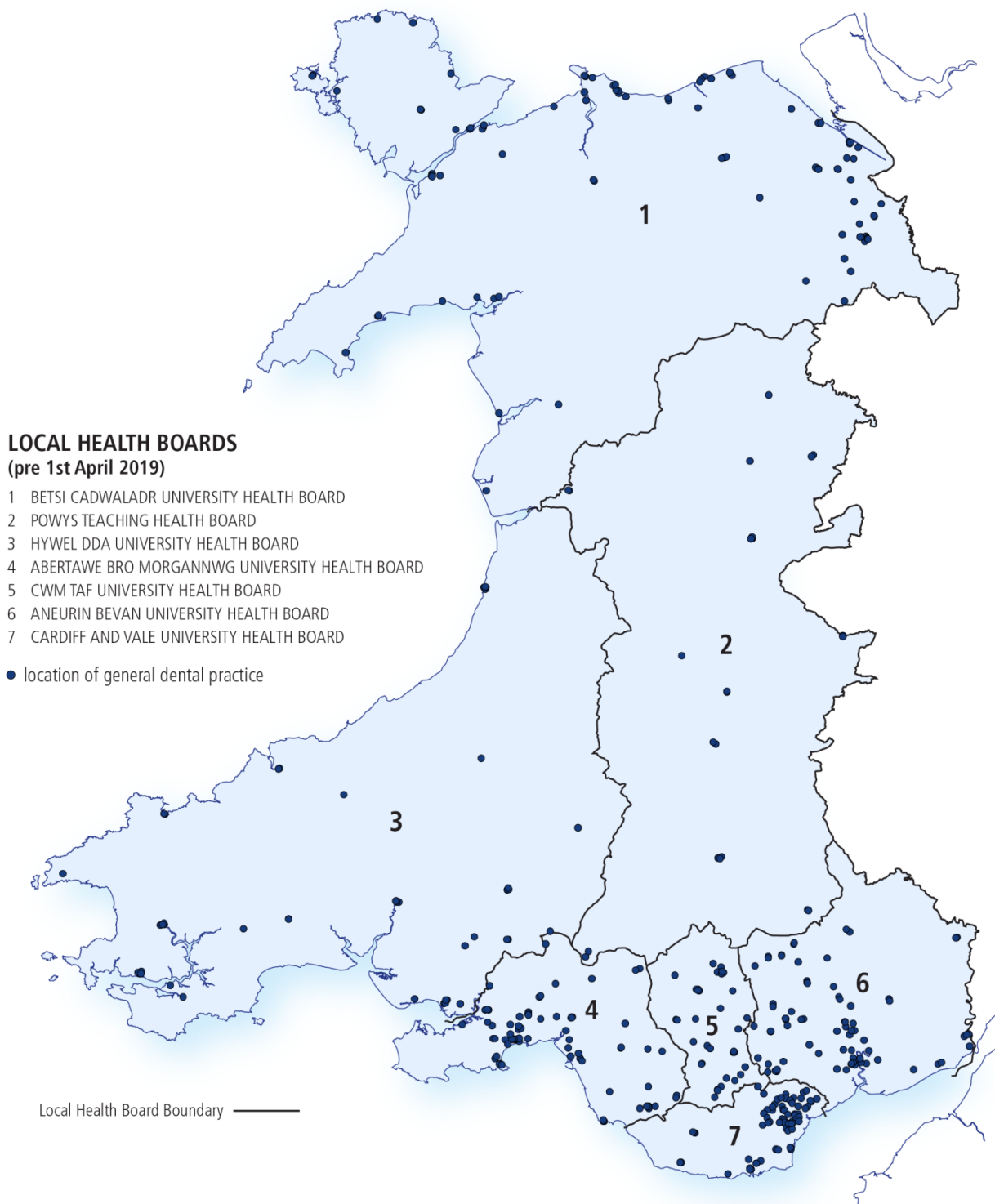
142 dentists (9.6 per cent of all dentists in 2017–18) stopped performing NHS work in Wales in 2017-18. Of these 72 were male and 70 were female. Of the males who left 37 were under 35 and 23 were aged 55 or over. Of the females who left 47 were aged under 35 and 6 were aged 55 or over

169 dentists (11.2 per cent of all dentists in 2018–19) started performing NHS work in Wales. Of these 75 were male and 94 were female. Of the males who started 54 were aged under 35 and 13 were aged 35 to 44. Of the females who started 75 were aged under 35 and 11 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.

General Dental Practices (as at 31st May 2019)



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September 2019

OGL



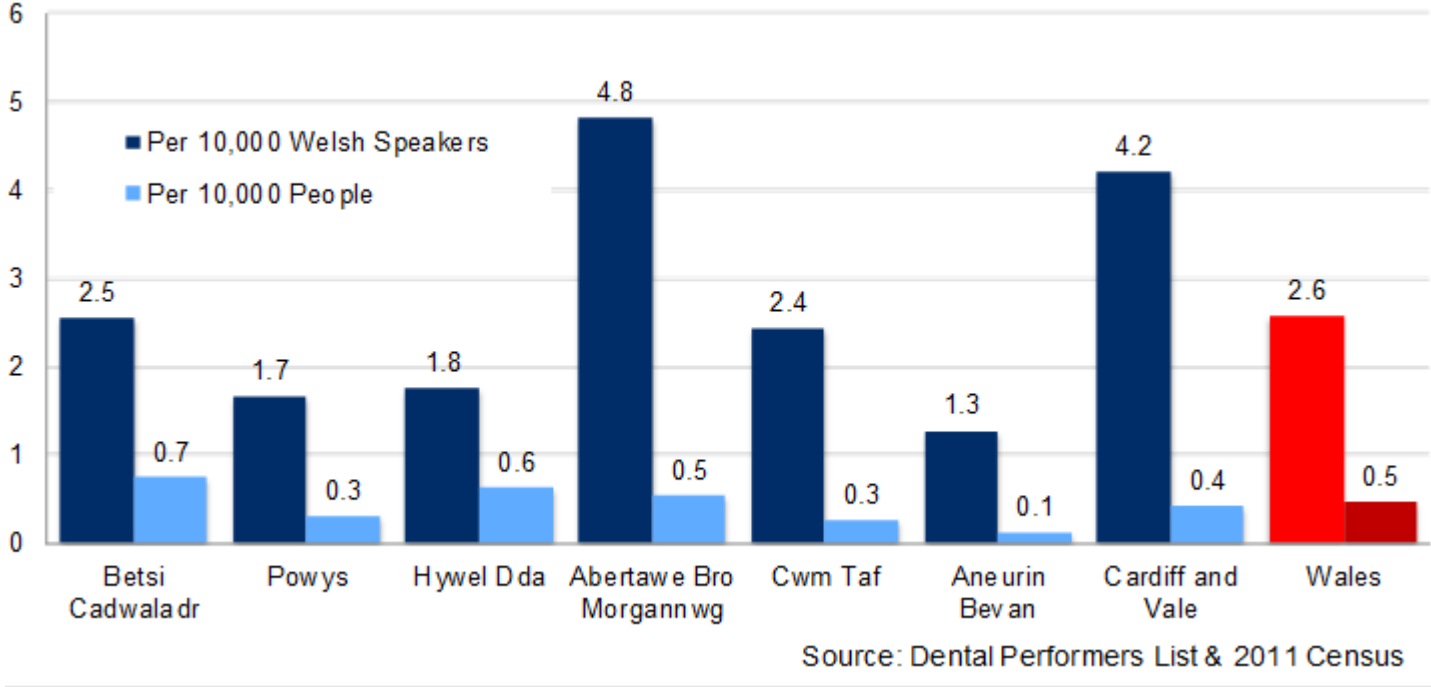
Llywodraeth Cymru
Welsh Government

Welsh language (section revised on 4 October 2019)

All dentists undertaking NHS dentistry in Wales are required to be registered on the Dental Performers' List and when registering, a dentist self-reports if they are able to speak Welsh. This information is currently collected by a simple 'Yes/No' question, rather than grading their level of fluency. Typically this information is not updated throughout the dentist's tenure on the list.

This data may not necessarily represent the number of dentists who currently consult in Welsh or who are able to consult in Welsh.

REVISED: Chart 19: Welsh speaking dentists (a) per 10,000 Welsh speaking people and per general population, by local health board, as at 15th April 2019



(a) Excludes three dentists whose local health board could not be identified

Summary: Chart 19 shows the number of Welsh speaking dentists per 10,000 Welsh speaking people and per general population, by local health board, as at 15th April 2019.

As of April 2019 there were 148 Welsh speaking dentists in Wales, according to the Dental Performers List.

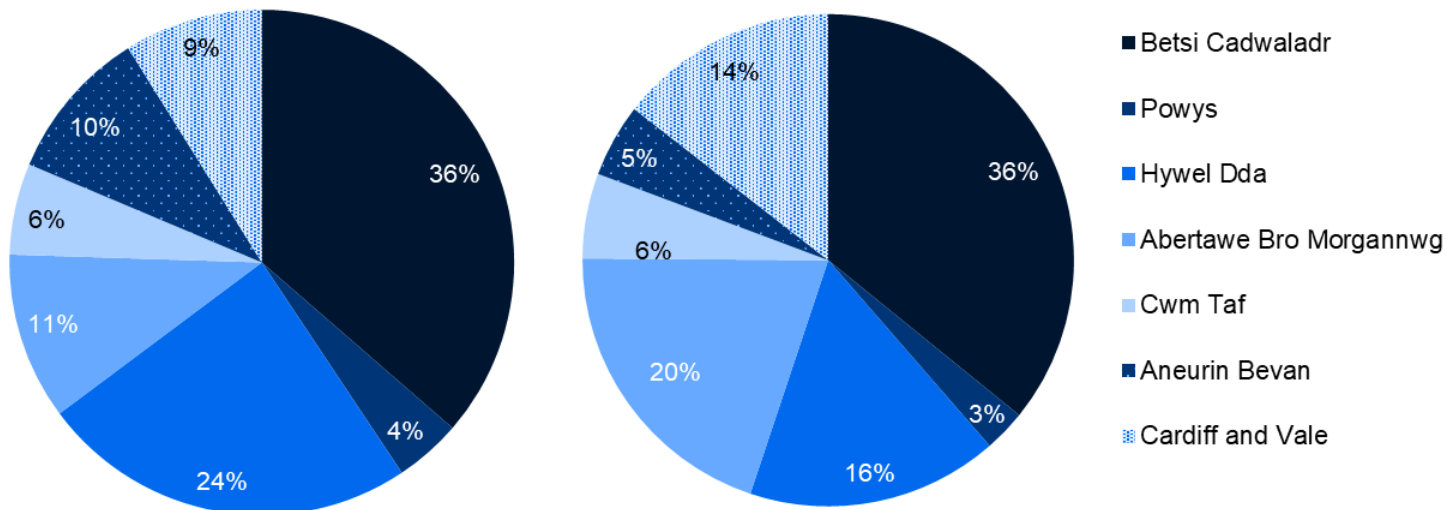
Numbers for Welsh speaking people are taken from the 2011 census and population estimates have been taken from ONS 2018 mid-year estimates.

Betsi Cadwaladr University has the highest number of Welsh speaking dentists per 10,000 people, at 0.7, while Aneurin Bevan had the lowest, at 0.1.

Overall there were 0.5 Welsh speaking dentists per 10,000 people in Wales. However, the health board with the highest number of Welsh speaking dentists per 10,000 Welsh speakers was Abertawe Bro Morgannwg, with 4.8 dentists and the health board with the lowest number was Aneurin Bevan, with 1.3.

Overall, Wales has 2.6 Welsh speaking dentists per 10,000 Welsh speakers in Wales.

REVISED: Chart 20: Proportion of Welsh speakers in Wales, 2011 Census (left) and the proportion of Welsh speaking dentists in Wales, as at 15th April 2019 (right), by LHB



Source: Dental Performers List & 2011 Census

Summary: [Chart 20](#) illustrates the share each local health board has of both the Welsh speaking population and of Welsh speaking dentists in Wales. According to the 2011 census there were 562,015 Welsh speakers in Wales and as of April 2019 there were 148 Welsh speaking dentists, according to the DPL.

Betsi Cadwaladr, Powys and Cwm Taf each have a share of Welsh speaking dentists that is proportionate to their share of the Welsh speaking population. However, Abertawe Bro Morgannwg had a higher proportion of Welsh speaking dentists within the local health board, 20 per cent, when compared to the proportion of Welsh speakers within the local health board, 11 per cent.

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:
 - 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
 - care and treatment is provided only to the extent that is necessary to prevent that significant deterioration or address that severe pain.
- Free – courses of treatment 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.

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 courses of treatment and units of dental activity 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 2018 and 31 March 2019, as processed up to June 2019. 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 2019. Some orthodontic activity may also have been performed in the year 2017-18 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 course of treatment. 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 course of treatment 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.

'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 2019, covers 1 April 2017 to 31 March 2019, and uses the ONS mid-2018 population estimates to calculate the proportion of the population seen.

Wales's population estimates can be found on [StatsWales](https://stats.wales.gov.uk/).

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 2017–18 and not in 2018–19, 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 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..

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	1 April 2018 to 31 March 2019
Band 1	£12.00	£12.40	£12.70	£13.00	£13.50	£13.50	£14.00	£14.00
Band 2	£39.00	£40.20	£41.10	£42.00	£43.00	£43.00	£44.00	£45.00
Band 3	£177.00	£177.00	£177.00	£180.90	£185.00	£185.00	£190.00	£195.00
Urgent	£12.00	£12.40	£12.70	£13.00	£13.50	£13.50	£14.00	£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 2018 have been used as the denominator for rates and percentages relating to 2018-19 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.

Dental practices

Dental practice data has been sourced from [NHS Digital's website](#) and can be found in the following link.

This data has been used to generate [Map 1](#) after selecting the practices within this file which have a status code 'A', an 'active' practice and an Organisation Sub-Type Code 'D', an NHS and Private Dental practice.

According to this data, there were 428 dental practices as at 31st May 2019.

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 2018–19.

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 2018 to March 2019, 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 2018-19 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.

The continued designation of these statistics as National Statistics was confirmed in June 2012 following a compliance check by the Office for Statistics Regulation [Statistics on Health and Personal Social Services in Wales](#) against the Code of Practice in 2012.

Since the latest review by the Office for Statistics Regulation, we have continued to comply with the Code of Practice for Statistics, and have made the following improvements:

- Included additional open data, with more detailed breakdowns, on our [StatsWales](#) website.
- Updated key quality information and refreshed commentary throughout the release, including longer time comparisons of data.

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/nhs-dental-services>

[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

August 2020 (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	2018-19	Percentage change to 2018/19 from 2017/18
Assess and Accept FP17OWs	8,955	9,431	9,524	9,263	9,195	9,507	9,454	9,633	9,950	3.3
Assess and Review FP17OWs	13,554	10,450	7,182	8,645	8,791	6,653	6,449	5,319	3,823	-28.1
Assess and Refuse FP17OWs	1,946	1,940	2,173	2,269	2,032	1,888	1,634	1,777	1,926	8.4
Treatment Completed FP17OWs	6,603	6,734	6,484	7,223	7,324	7,218	7,141	7,897	7,270	-7.9
Treatment Abandoned FP17OWs	373	396	404	433	403	402	488	408	263	-35.5
Treatment Discontinued FP17OWs	209	193	220	211	211	209	256	204	178	-12.7
Repairs FP17OWs	365	99	55	34	34	29	57	19	26	36.8
Regulation 11 Appliances FP17OW	682	610	465	615	542	532	403	479	455	-5.0
Total Ortho forms (FP17OWs)	32,687	29,853	26,507	28,693	28,532	26,438	25,882	25,736	23,891	-7.2
Units of Orthodontic activity	200,566	208,192	207,351	203,439	202,540	206,552	205,233	207,899	213,583	2.7
Total Number of Patients Treated ^(b)	31,434	28,907	26,023	28,195	27,999	25,834	25,481	25,361	23,534	-7.2

(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 2019.

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	2018-19	Percentage change to 2018/19 from 2017/18
Betsi Cadwaladr	1,455	1,960	1,972	1,818	1,802	1,772	1,804	1,851	1,836	-0.8
Powys	229	213	254	219	224	261	222	231	225	-2.6
Hywel Dda	908	999	918	810	856	897	827	800	1,176	47.0
ABM ^(b)	2,068	2,025	2,059	2,088	2,057	2,107	2,096	2,090	2,143	2.5
Cwm Taf	69	62	93	72	83	76	89	90	86	-4.4
Aneurin Bevan	1,281	1,301	1,254	1,275	1,291	1,305	1,404	1,520	1,366	-10.1
Cardiff & Vale	2,945	2,871	2,974	2,981	2,882	3,089	2,867	2,936	2,977	1.4
Wales	8,955	9,431	9,524	9,263	9,195	9,507	9,309	9,518	9,809	3.1

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

(b) Abertawe Bro Morgannwg

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)

Adults

CoTs	Band 1		Band 2		Band 3		2018-19	2019-20
	2017-18	2018-19	2017-18	2018-19	2017-18	2018-19		
Total number of CoTs ^{(c) (d)}	974,258	1,014,880	496,432	491,748	111,825	107,309		1
Scale and polish	304,902	305,682	224,991	226,843	35,318	33,909		
Fluoride varnish	14,849	22,977	12,570	18,058	1,738	2,498		
Fissure sealants	283	301	554	539	35	33		
Radiograph(s) taken	164,465	176,808	183,093	185,412	49,731	49,382		
Endodontic treatment	26	16	19,952	18,982	9,157	8,702		
Permanent fillings and sealant restorations	605	519	361,329	350,740	34,731	32,747		
Extractions	147	125	90,493	88,675	23,840	22,761		
Crown(s) provided	15	16	141	98	39,907	38,906		
Upper denture - acrylic	35	46	466	521	37,490	36,335		
Lower denture - acrylic	15	13	166	160	21,171	20,745		
Upper denture - metal	1	0	6	4	3,054	2,447		
Lower denture - metal	0	1	3	1	1,418	1,141		
Veneer(s) applied	5	2	6	3	1,300	1,177		
Inlay(s)	3	3	11	9	5,994	4,837		
Bridge(s) fitted	3	1	14	26	6,162	6,177		
Referral for advanced mandatory services	1,058	1,145	1,944	2,201	238	248		
Examination	959,168	1,003,166	466,146	466,253	107,238	103,600		
Antibiotic Items Prescribed	3,423	3,237	5,973	5,758	1,209	1,103		
Other Treatment	43,205	51,955	68,544	71,341	21,133	20,470		1

(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 course of treatment.

(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

Item	Band 1		Band 2		Band 3		2017-18
	2017-18	2018-19	2017-18	2018-19	2017-18	2018-19	
Total of items specified ^{(a) (b)}	304,034	337,490	1,015,874	1,031,569	286,625	281,775	97,111
Fissure sealants	424	506	853	867	52	52	
Radiograph(s) taken	302,534	336,022	338,738	353,489	92,362	93,211	48,111
Endodontic treatment	24	17	21,037	20,725	9,889	9,673	
Permanent fillings and sealant restorations	756	645	541,248	542,121	64,769	62,302	27,111
Extractions	268	275	113,804	114,206	56,071	54,024	20,111
Crown(s) provided	17	19	153	112	42,400	42,510	
Veneer(s) applied	5	2	12	3	1,558	1,410	
Inlay(s)	2	3	11	9	6,091	4,975	
Bridge(s) units provided	4	1	18	37	13,433	13,618	

(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		Urgen
Percentage of CoTs with	2017-18	2018-19	2017-18	2018-19	2017-18	2018-19	2017-18
	Per cent	Per cent	Per cent	Per cent	Per cent	Per cent	Per cent
Scale and polish	31.3	30.1	45.3	46.1	31.6	31.6	1.6
Fluoride varnish	1.5	2.3	2.5	3.7	1.6	2.3	0.9
Fissure sealants	0.0	0.0	0.1	0.1	0.0	0.0	0.0
Radiograph(s) taken	16.9	17.4	36.9	37.7	44.5	46.0	24.1
Endodontic treatment	0.0	0.0	4.0	3.9	8.2	8.1	0.3
Permanent fillings and sealant restorations	0.1	0.1	72.8	71.3	31.1	30.5	14.9
Extractions	0.0	0.0	18.2	18.0	21.3	21.2	10.1
Crown(s) provided	0.0	0.0	0.0	0.0	35.7	36.3	0.2
Upper denture - acrylic	0.0	0.0	0.1	0.1	33.5	33.9	0.0
Lower denture - acrylic	0.0	0.0	0.0	0.0	18.9	19.3	0.0
Upper denture - metal	0.0	0.0	0.0	0.0	2.7	2.3	0.0
Lower denture - metal	0.0	0.0	0.0	0.0	1.3	1.1	0.0
Veneer(s) applied	0.0	0.0	0.0	0.0	1.2	1.1	0.0
Inlay(s)	0.0	0.0	0.0	0.0	5.4	4.5	0.0
Bridge(s) fitted	0.0	0.0	0.0	0.0	5.5	5.8	0.0
Referral for advanced mandatory services	0.1	0.1	0.4	0.4	0.2	0.2	0.0
Examination	98.5	98.8	93.9	94.8	95.9	96.5	26.4
Antibiotic Items Prescribed	0.4	0.3	1.2	1.2	1.1	1.0	10.2
Other Treatment	4.4	5.1	13.8	14.5	18.9	19.1	58.5
Number of items per 100 CoT	Items	Items	Items	Items	Items	Items	Items
Fissure sealants	0.0	0.0	0.2	0.2	0.0	0.0	0.0
Radiograph(s) taken	31.1	33.1	68.2	71.9	82.6	86.9	25.8
Endodontic treatment	0.0	0.0	4.2	4.2	8.8	9.0	0.3
Permanent fillings and sealant restorations	0.1	0.1	109.0	110.2	57.9	58.1	14.6
Extractions	0.0	0.0	22.9	23.2	50.1	50.3	10.7
Crown(s) provided	0.0	0.0	0.0	0.0	37.9	39.6	0.2
Veneer(s) applied	0.0	0.0	0.0	0.0	1.4	1.3	0.0
Inlay(s)	0.0	0.0	0.0	0.0	5.4	4.6	0.0
Bridge units provided	0.0	0.0	0.0	0.0	12.0	12.7	0.0
Average treatment per CoT where the treatment occurs							
Fissure sealants	1.5	1.7	1.6	1.6	1.7	1.6	1.2
Radiograph(s) taken	1.8	1.9	1.9	1.9	1.8	1.9	1.1
Endodontic treatment	0.9	1.1	1.1	1.1	1.1	1.1	1.0
Permanent fillings and sealant restorations	1.2	1.2	1.5	1.5	1.9	1.9	1.0
Extractions	1.8	2.2	1.3	1.3	2.4	2.4	1.1
Crown(s) provided	1.1	1.2	1.1	1.1	1.1	1.1	1.0
Veneer(s) applied	1.0	1.0	0.0	1.0	1.2	1.2	1.0
Inlay(s)	0.7	1.0	1.3	1.0	1.0	1.0	1.0
Bridge units provided	1.3	1.0	1.5	1.4	2.3	2.2	1.0

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

CoTs	Band 1		Band 2		Band 3		2018-19
	2017-18	2018-19	2017-18	2018-19	2017-18	2018-19	
Total number of CoTs ^{(c) (d)}	442,301	462,773	120,831	116,762	2,148	2,052	
Scale and polish	21,802	22,775	9,760	10,106	333	270	
Fluoride varnish	110,190	168,497	35,542	46,362	283	357	
Fissure sealants	2,089	2,261	3,348	3,449	13	24	
Radiograph(s) taken	19,029	20,554	16,902	17,038	788	774	
Endodontic treatment	3	3	1,300	1,262	224	205	
Permanent fillings and sealant restorations	210	255	99,896	96,042	633	580	
Extractions	52	62	20,617	20,446	95	94	
Crown(s) provided	2	1	23	51	462	461	
Upper denture - acrylic	1	9	0	1	97	110	
Lower denture - acrylic	0	0	1	1	16	15	
Upper denture - metal	0	0	0	0	10	11	
Lower denture - metal	1	0	0	0	1	6	
Veneer(s) applied	0	0	0	1	81	85	
Inlay(s)	0	2	0	0	261	205	
Bridge(s) fitted	0	0	0	0	115	130	
Referral for advanced mandatory services	432	534	393	499	2	9	
Examination	439,054	460,749	115,617	112,388	2,063	1,979	
Antibiotic Items Prescribed	523	427	683	649	15	11	
Other Treatment	11,915	14,669	7,736	8,686	981	934	

(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 course of treatment.

(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

Item	Band 1		Band 2		Band 3		2017-18
	2017-18	2018-19	2017-18	2018-19	2017-18	2018-19	
Total of items specified ^{(a) (b)}	39,789	43,964	228,452	227,781	4,498	4,339	0
Fissure sealants	5,481	5,512	7,922	8,136	29	80	2
Radiograph(s) taken	33,830	37,543	31,010	32,073	1,627	1,544	2
Endodontic treatment	3	5	1,382	1,352	254	224	2
Permanent fillings and sealant restorations	400	731	155,368	151,947	1,307	1,233	2
Extractions	74	170	32,743	34,204	135	150	2
Crown(s) provided	1	1	27	67	484	501	2
Veneer(s) applied	0	0	0	2	95	104	2
Inlay(s)	0	2	0	0	262	208	2
Bridge(s) units provided	0	0	0	0	305	295	2

(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
	2017-18	2018-19	2017-18	2018-19	2017-18	2018-19	2017-18
Percentage of CoTs with	Per cent	Per cent	Per cent	Per cent	Per cent	Per cent	Per cent
Scale and polish	4.9	4.9	8.1	8.7	15.5	13.2	0.5
Fluoride varnish	24.9	36.4	29.4	39.7	13.2	17.4	2.0
Fissure sealants	0.5	0.5	2.8	3.0	0.6	1.2	0.0
Radiograph(s) taken	4.3	4.4	14.0	14.6	36.7	37.7	11.0
Endodontic treatment	0.0	0.0	1.1	1.1	10.4	10.0	0.3
Permanent fillings and sealant restorations	0.0	0.1	82.7	82.3	29.5	28.3	9.9
Extractions	0.0	0.0	17.1	17.5	4.4	4.6	4.4
Crown(s) provided	0.0	0.0	0.0	0.0	21.5	22.5	0.0
Upper denture - acrylic	0.0	0.0	0.0	0.0	4.5	5.4	0.0
Lower denture - acrylic	0.0	0.0	0.0	0.0	0.7	0.7	0.0
Upper denture - metal	0.0	0.0	0.0	0.0	0.5	0.5	0.0
Lower denture - metal	0.0	0.0	0.0	0.0	0.0	0.3	0.0
Veneer(s) applied	0.0	0.0	0.0	0.0	3.8	4.1	0.0
Inlay(s)	0.0	0.0	0.0	0.0	12.2	10.0	0.0
Bridge(s) fitted	0.0	0.0	0.0	0.0	5.4	6.3	0.0
Referral for advanced mandatory services	0.1	0.1	0.3	0.4	0.1	0.4	0.1
Examination	99.3	99.6	95.7	96.3	96.0	96.4	28.1
Antibiotic Items Prescribed	0.1	0.1	0.6	0.6	0.7	0.5	9.2
Other Treatment	2.7	3.2	6.4	7.4	45.7	45.5	57.1
Number of items per 100 CoT	Items	Items	Items	Items	Items	Items	Items
Fissure sealants	1.2	1.2	6.6	7.0	1.4	3.9	0.1
Radiograph(s) taken	7.6	8.1	25.7	27.5	75.7	75.2	12.2
Endodontic treatment	0.0	0.0	1.1	1.2	11.8	10.9	0.3
Permanent fillings and sealant restorations	0.1	0.2	128.6	130.1	60.8	60.1	10.5
Extractions	0.0	0.0	27.1	29.3	6.3	7.3	4.6
Crown(s) provided	0.0	0.0	0.0	0.1	22.5	24.4	0.0
Veneer(s) applied	0.0	0.0	0.0	0.0	4.4	5.1	0.0
Inlay(s)	0.0	0.0	0.0	0.0	12.2	10.1	0.0
Bridge units provided	0.0	0.0	0.0	0.0	14.2	14.4	0.0
Average treatment per CoT where the treatment occurs							
Fissure sealants	2.6	2.4	2.4	2.4	2.2	3.3	1.7
Radiograph(s) taken	1.8	1.8	1.8	1.9	2.1	2.0	1.1
Endodontic treatment	1.0	1.7	1.1	1.1	1.1	1.1	1.0
Permanent fillings and sealant restorations	1.9	2.9	1.6	1.6	2.1	2.1	1.1
Extractions	1.4	2.7	1.6	1.7	1.4	1.6	1.0
Crown(s) provided	0.5	1.0	1.2	1.3	1.0	1.1	1.0
Veneer(s) applied	0.0	0.0	0.0	2.0	1.2	1.2	0.0
Inlay(s)	0.0	1.0	0.0	0.0	1.0	1.0	0.0
Bridge units provided	0.0	0.0	0.0	0.0	2.7	2.3	0.0

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

Local Health Board	2017			2018		
	% 55 or over	% Female	Dentists per 10,000 population	% 55 or over	% Female	Dentists per 10,000 population
Betsi Cadwaladr	14.6	44.6	4.6	14.1	45.4	4.5
Powys	12.7	48.1	6.0	17.7	44.3	6.0
Hywel Dda	12.9	46.8	4.5	16.2	47.9	4.3
ABM ^(b)	14.1	46.8	6.2	12.5	45.0	6.2
Cwm Taf	9.5	43.2	7.4	9.8	44.0	7.8
Aneurin Bevan	13.3	42.1	5.3	13.4	45.1	5.2
Cardiff & Vale	8.8	44.2	6.5	9.1	42.2	6.7
Wales	13.4	45.3	4.7	13.3	45.8	4.7

(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

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

	2016-17 leavers ^(a)		2017-18 joiners ^(b)		2017-18 Workforce	2017-18 leavers ^(a)	
	Number	Percentage of dentists	Number	Percentage of dentists	Number	Number	Percentage of dentists
Performer only	137	10.5%	144	10.9%	1,324	-	-
Providing performer	4	2.4%	1	0.6%	155	-	-
Gender / Age group							
Males							
Under 35	29	9.8%	46	16.1%	286	37	12.9%
35-44	9	4.3%	6	2.8%	217	7	3.2%
45-54	8	5.1%	9	5.8%	155	5	3.2%
55+	23	15.8%	2	1.4%	143	23	16.1%
Total	69	8.6%	63	7.9%	801	72	9.0%
Females							
Under 35	46	15.5%	68	22.9%	297	47	15.8%
35-44	14	7.0%	10	5.1%	198	9	4.5%
45-54	5	4.2%	3	2.3%	129	8	6.2%
55+	7	13.5%	1	1.9%	54	6	11.1%
Total	72	10.8%	82	12.1%	678	70	10.3%
Persons							
Under 35	75	12.7%	114	19.6%	583	84	14.4%
35-44	23	5.6%	16	3.9%	415	16	3.9%
45-54	13	4.7%	12	4.2%	284	13	4.6%
55+	30	15.2%	3	1.5%	197	29	14.7%
Total	141	9.6%	145	9.8%	1,479	142	9.6%
Contract type							
GDS	112	9.3%	124	10.2%	1,212	111	9.2%
PDS	9	11.7%	6	8.3%	72	5	6.9%
Mixed	5	5.0%	3	2.7%	112	4	3.6%
Total ^(c)	141	9.6%	145	9.8%	1,479	142	9.6%

(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.

REVISED: Table A11: Welsh language ability among dentists in Wales in 2019

Local health board and authority	Dentists who speak Welsh (a)	Population of LHB	Welsh speaking dentists per 10,000 people	Welsh speaking population of LHB	Welsh speaking dentists per 10,000 Welsh speaking people
Betsi Cadwaladr	52	698,369	0.7	204,406	2.5
Anglesey	14	69,961	2.0	38,568	3.6
Gwynedd	14	124,178	1.1	77,000	1.8
Conwy	1	117,181	0.1	30,600	0.3
Denbighshire	7	95,330	0.7	22,236	3.1
Flintshire	4	155,593	0.3	19,343	2.1
Wrexham	3	136,126	0.2	16,659	1.8
Powys	4	132,447	0.3	23,990	1.7
Hywel Dda	24	385,615	0.6	135,798	1.8
Ceredigion	3	72,992	0.4	34,964	0.9
Pembrokeshire	3	125,055	0.2	22,786	1.3
Carmarthenshire	16	187,568	0.9	78,048	2.1
Abertawe Bro Morgannwg	29	534,248	0.5	60,133	4.8
Swansea	16	246,466	0.6	26,332	6.1
Neath Port Talbot	1	142,906	0.1	20,698	0.5
Bridgend	12	144,876	0.8	13,103	9.2
Cardiff and Vale	21	496,413	0.4	49,924	4.2
Vale of Glamorgan	3	132,165	0.2	13,189	2.3
Cardiff	3	364,248	0.4	36,735	3.8
Cwm Taf	8	300,314	0.3	32,807	2.4
Rhondda Cynon Taf	7	240,131	0.3	27,779	2.5
Merthyr Tydfil	1	60,183	0.2	5,028	2.0
Aneurin Bevan	7	591,225	0.1	54,958	1.3
Caerphilly	2	181,019	0.1	19,251	1.0
Blaenau Gwent	0	69,713	0.0	5,284	0.0
Torfaen	0	93,049	0.0	8,641	0.0
Monmouthshire	2	94,142	0.2	8,780	2.3
Newport	2	153,302	0.1	13,002	1.5

Source: Shared Service Partnership, Dental Performers List

(a) Numbers for local health boards will not match the sum of the local authorities, local authority data was not available for all Welsh speaking dentists.