Report of the General Dental Practice Committee

The General Dental Practice Committee (GDPC) met on 7 October 2022.

Chair's report

1. We discussed the current volatile political and economic environment, the ongoing impact of that environment on dentistry, and the BDA's work with a range of stakeholders to make the case for fair remuneration and a sustainable future for NHS dentistry. I shared my sense that the media and public perception of who was responsible for the crisis facing the profession was turning toward Government. I noted the deteriorating position regarding delivery of UDAs, that practices continue to move away from NHS work, and the related reports that private plan providers have never been busier.

2. We discussed that only 28 per cent of the £50m provided by NHS England to improve access was taken up, and noted that the BDA had informed NHS England at the time of the limited efficacy of the cash injection given ongoing wider challenges.

3. Members expressed that there was ongoing concern from the profession regarding the lack of a clear and reasonable process around year-end reconciliation, abatement and clawback. We heard further reports of dentists having monies clawed back before the end of year reconciliation was agreed between both parties. Similarly, we discussed frustrations with the effectiveness of the year-end process as run by the BSA. I noted this was the subject of regular discussion with NHS England and others, passed on that I would continue to raise these issues, and asked members to share any specific examples.

4. I had attended the BDA's Honours and Awards ceremony in September, it was clear that despite considerable challenge, the dental profession had much to be proud of and continued to do outstanding work for patients.

Dental contract reform

5. I updated the Committee regarding the discussions occurring with NHS England on contract reform, including our having had to cancel a planned meeting because of NHS England's failure to give us appropriate notice to consider materials they had shared. I shared my view that this was not the first time this had occurred and that we had already showed considerable patience and restraint in the process. I reiterated that our position has followed that mandated by GDPC, including in highlighting the primacy of the BDA as the formal representative body in negotiations. I also shared my profound scepticism regarding the likelihood of additional funding being made available to stabilise NHS

dentistry given wider economic challenges, while noting we would continue to forcefully make the case for fair remuneration in every forum available to us.

6. We discussed the challenges of recruitment facing practices delivering NHS dentistry, and what options were available to make it more attractive to those entering the profession. More specifically, we considered the most effective strategic approach for the BDA to take in contract reform discussions given the likelihood of no additional funding for dentistry, the Government's focus on securing access, and the consequent difficulty of recruitment. Some members called for a focus on delivering a 'core service', while others felt that a 'core service' approach was strategically dangerous for the profession and could reduce support for dentists among the public. We considered a suggestion that robustly quantifying demand for dentistry in collaboration with external partners could force NHS England and Government to acknowledge the impossibility of what they appear to be seeking.

Marginal changes implementation

7. I updated the Committee regarding the implementation of the marginal changes package. We discussed the changes to the FP17 form. We discussed that the regulatory amendments required for the implementation of increased UDA allocations are due to be delivered in November, and that NHS England has rejected our argument for backdating payments, based on legal advice they received from the Department of Health and Social Care. I also informed the Committee that the regulations relating to consistent contractual underperformance were expected to be laid later this year.

Reports from the devolved nations

8. We were updated by Ciara Gallagher, Chair of the NIDPC, on work with the administration in Northern Ireland to mitigate reduced remuneration for dentists in the 2022/23 pay round, as well as her work to explore whether legal remedies were available to the profession in Northern Ireland if forced to provide NHS dentistry at a loss. Ciara noted the ongoing difficulties of working in partnership with the Northern Ireland administration given the absence of a functioning Executive.

9. We heard an update on the Scottish Government's deliberations regarding changes to the Statement of Dental Remuneration (SDR,) and noted that the funding 'multiplier' that had supported remuneration for dentists in Scotland would come to an end in April 2023. She shared that morale within the profession in Scotland was very poor.

10. We also heard a report of a recent meeting with the Chief Dental Officer in Wales Andrew Dickenson; in particular, we discussed the forthcoming expectation for practices in Wales to distinguish in reporting between sessions that are 'NHS activity' and sessions that are 'private activity' and the challenges of doing so in a meaningful way. This was a deeply concerning proposal. We also discussed that while it there would be some relaxation of the contractual requirements regarding new and emergency patients, additional information was being collected from practices which added to their administrative burden.

DDRB and contract uplift

11. The DDRB had recommended 4.5 per cent on the pay element of the contract uplift. This was clearly well below the current rates of inflation. There had still been no consultation from the DHSC on the expenses element of the contract uplift, but the BDA had written to the DHSC seeking an uplift in line with dental inflation, at 15 per cent for the staff pay expenses component and 11.15 per cent for other expenses.

Meetings

12. We discussed the challenges and opportunities presented by online meetings of the GDPC, and some members expressed their sense that the appetite for online meetings following the pandemic had diminished. We would meet in-person in February and this was welcomed by the Committee.

Charlotte Waite

13. The Committee recorded our heartfelt thanks to Charlotte Waite for her work as Chair of the England Community Dental Services Committee and commended her on her appointment as Director for BDA Scotland.

Shawn Charlwood
Chair, GDPC
October 2022