

GDP Cross Rep Report

GDP met at BDA HQ on 6th May 2016.

Satisfactory completion of DFT

Malcolm Smith, Project Director gave an overview of the current position of satisfactory completion of DFT, which is being piloted at present and due to come into force in September 2016. He stated after questioning from the committee that a key advantage of satisfactory completion would be the increase in evidence to support a trainer should a trainee fail the process as the final decision would come from the panel in which the trainer was not involved. The aim was to create a dentist would be safe to go on the performers list.

It is still unclear how long a training period would be imposed, should a trainee fail nor where they would have to go, the impact on the practice and how this would be funded without compromising places for the following year. It is unknown who will QA the process. GDP will continue to press on these issues.

Greater review and piloting is needed, especially the review process. Again questions were placed on the dental schools with the need to ensure that they were producing a suitable graduate.

Devomanc

At present GDPs are not included and still deal centrally with the area team. Commissioning remains vague and there still is a lack of understanding how dentistry works, that PCR is collected and that the premises and equipment are owned by the practice owner not the area team/health board/pct.

Capitation

Discussion was had as to the desired level of capitation to see in any reformed contract. It was clear that GDP would push for a capitation dominated contract that was reinforced with protective assurances.

DDRB

Disappointment was again raised at the derisory level of contract uplift (1.1% in Wales, 0.7% in England) (higher in Wales as WAG uses a different formula) and the contradictory use of RPI and CPI by government.

DDRB formula for Wales

- Pay (50%): DDRB recommendation 1%
- Staff costs (16.5%): ASHE figure for dental staff pay inflation 1.5%
- Lab/Materials (13.4%): RPIX 1.1%
- Other (20.1%): RPI 1%

Therefore: $(1 \times 0.5) + (1.5 \times 0.165) + (1.1 \times 0.134) + (1 \times 0.201) = 1.1\%$

In England DoH may approach GDP to ask DDRB to step down in exchange for a set uplift (it is not known if this would include conditions and further efficiencies). In Wales there is no suggestion as far as I am aware as yet so DDRB will continue to be used. It is worth giving consideration to this topic should WAG make a similar suggestion.

Alternative methods of income

Given the continued reduction in moral, increase levels of stress and consistent erosion of practice income combined with the reduction in negotiation levels via an increase in access and MPs not being inundated with letters from constituents regarding lack of access. The direction of NHS travel is putting practices at risk.

It is essential that dental practices are sustainable, can provide good quality care and for choice to patients. As such many practices are considering non NHS forms of income. Common barriers include fear from GDC, the hope of a reformed contract and being too old to change. BDA will develop a working group to explore how practitioners can diversify. Motivation must be based around standards and quality and based around high quality patient care.

Compass

Problems remain with problems around breach notices and clawback. The two month deadline has been extended to four months. Practitioners are advised to contact compass with problems. In Wales issues should be directed toward Lisa Howells (Deputy CDO).

We await to see if problems will occur with the ARR process. A guide is available online.

Occupational Health

The latest proposal was reviewed. There was no mention of mental health care which given increasing stress levels is a worry. Dentists suicides are reported at 1.67 times the normal rate. Some elements would be outside of government funding but it is not known what fees may be charged for this.

Other

National insurance contribution for foundation trainees would increase.

GDPC meets again in October 2016

Follow up on previous issues:

- **Indemnity:** As per my previous email circulated by Roger in March, examples are needed in writing so that a case can be developed should indemnity organisations be acting in an inappropriate or unfair action.
- **Prototypes:** I have contacted Lisa Howells to press for publication of the prototype handbook and shall update the LDC when I have received it.

Tom Bysouth

May 2016.