

## GDPC Report January 2019

The GDPC met on 25<sup>th</sup> January 2019 at BDA HQ.

1. BDA evidence has been submitted to the **DDR**, Government again held up the process with delays. BMA only submitted 7 pages of evidence. It was reiterated that GDPC believe it is for govt to disagree with DDR not to place limits on the system. NHS England describe capping spend at £2.8billion in their evidence.
2. The ongoing confusing surrounding **Brexit** does not help practices with some suggestions from NHS England around contingency planning being mentioned. A letter has been sent from GDPC stating that they believe contract completion problems due to Brexit should be force majeure.
3. **Amalgam**. Plan to phase out across Europe by 2030 – Governments are required to develop plans for this. The regulations to phase down are in UK law, it is not clear how Brexit will impact on this. Welsh Govt say that the Amalgam regulations were considered in the 2.77% uplift.
4. Results were received on a recent email survey exercise which showed **barriers to industrial action** included professional ethics, fear and contractual issues. There were little differences across countries. Further work will be undertaken on a range of measures.
5. In **England Contract Reform** could be rolled out in stages as early as 2020. Specific negotiations are taking place on capitation weightings. However results for the previous years are not out and there seems to be little learning from those who are leaving the process with the Department of Health not showing much engagement. Patient charges are unknown. Existing GDS contracts will remain non time limited.
6. In parts of England, Area Teams are using **flexible commissioning** to provide things such as a reduction of UDA for nurse led fluoride application, being able to do 120% of contracted UDAs. There is big national appreciation of this from commissioners.
7. **LDC Conference 2019** (Birmingham) will be based around motions, the call will go out soon.
8. **GDC** are launching a new document on 30<sup>th</sup> January on working upstream, to try and improve the trust and reduce the fear of the profession in the regulator. It seems the number of cases going to Fitness to Practice cases are reducing. The move to Birmingham is continuing.
9. The problems in **Orthodontic commissioning** in England continue, with examples of people winning tenders with no premises or staff with which to deliver that service, this is having a destabilising impact on patients, with many being left without care.

The next meeting is 3<sup>rd</sup> May 2019

Tom Bysouth