

UDA Uplift to £25.00 and subsequent DDRB uplift - Email threads

There has been considerable confusion around the UDA uplift to £25 and the subsequent DDRB uplift of 2.77%. I have reproduced below some correspondence I have had with colleagues around this matter and following my revisiting the situation am now doubting some of my own views expressed in my responses below. Hopefully the debate in the meeting will end up with a clearer picture and something we as an LDC can take forward. It is important that the letters relating to this from Kim Dunn dated 7th March 2018 (*meeting document Item 8b*) and that from Lowrie Lowe dated 11th June 2019 (*meeting document Item 8c*) are considered in conjunction with this document.

Correspondence with Rob Elliott – Smoke and Mirrors

Rob wrote on 11 June.

It's as I suspected, our uplift to a £25 UDA Value is being eroded by it not being subject to the annual % increase. This continues the unfair differential between low and high UDA values as those who did not have the uplift will have had the 2.7% annual contract increase. What a con! Fine words from the LHB about equalising but underhand deeds keeping the status quo? In fact more work has been committed to by these very same low value practices to gain this illusionary uplift.

Also I thought that our contracts were reduced last month to reflect this claimed (.) overpayment?

What's the LDC view?

I responded on 12 June.

The conditions of the uplift were made clear in the letter from Kim Dunn dated 7th March 2018 which also detailed the QIs and a declaration to be signed agreeing to the terms. The raised UDA value at 31 March 2020 will reflect in the contract value from there on in and will be subject to any DDRB increase. The fact that practices who were over £25 per UDA are getting the benefit of the DDRB uplift is another issue and can only be addressed if they are brought back to £25 - something the LDC couldn't realistically support.

The real question is are you better off now than before accepting the offer? If you feel you are not then you will still be able to backtrack and withdraw, although I suspect that will incur a reclaim, although that is not clear and it's not an issue that I would want to raise - it might give someone ideas! Also, if you feel you have been treated unfairly in what way has the HB not followed the terms of the offer? Perhaps I've missed something, so will be happy to carry anything forward if you can demonstrate this. Please let me know.

The 'overpayment' last year is not going to be reclaimed as is made clear in the latest letter (11 June). As I explained to you before, the back-payment last year (2018-2019) included the back payment from January 2018 to March 2018 (financial year 2017-2018), and will not be reflected in this years' additional payments. All this is very clear on COMPASS, although somewhat confusing in the schedules.

I trust this answers your questions Rob. Let me know if you need further clarification.

Rob replied on 12 June.

Well there is no mention of the annual DDRB increase not being applied until post 31/3/20 in Kim Dunn's letter or the declaration of terms, so as I said, Smoke and Mirrors!

Quote - It is accepted that the disparity in UDA values is unfair- but their remuneration Policy is making this even more of a disparity!

My main concern is the additional conditions applied unilaterally by the LHB post agreement, mainly of a time consuming bureaucratic nature,

I responded on 13 June.

Know what you mean Rob, but there was no mention of the DDRB at all in Kim's letter. As I said before there is no point going on about comparisons with practices of higher UDA values, because it is irrelevant to the argument, although it is relevant to the bigger picture, but that's one for the CDO on an all Wales basis. Not

sure what you mean by *'My main concern is the additional conditions applied unilaterally by the LHB post agreement, mainly of a time-consuming bureaucratic nature'*. I'm not aware of any additional conditions applied, only the QIs mentioned in Kim's letter. Perhaps you can let me know what they are.

You obviously feel very strongly about this Rob, which I respect. Try to come to LDC meeting of July 9th and raise it for further discussion. If you wish I'll get it on the agenda.

End of correspondence

Correspondence with Anwen Hopkins

On 24 June Anwen wrote:

I had WGDPC meeting on Friday. Report will follow. I brought up the £25 uda rate and the lack of the uplift to it (although it had been applied).

They said that they'd be keen to write to Collette to see what could be done.

My personal feeling is that it won't change anything and what's the point! But I am happy to get this done if you feel that as an LDC we should?

I responded on 24 June:

I presume BDA Wales will write to Colette, that being the case then go ahead. I'd like to see the letter before it goes to ensure all the facts are correct.

For your information preliminary notices, etc.for BGM have gone out to dentists. All current documentation relating to BGM on website.

On 24 June Anwen wrote further:

Having just read the email that came out from the LHB again. It states that "it was clearly communicated to practices at the time that the additional income the UDA uplift generated would NOT be automatically added to the contract value" - this is not true - this was something that we kept asking for clarity on?! Can we write to the LHB's and ask for the documents that clearly communicate this information? So far, the only clarity evidence that I have is that email thread that says it would be added?!

Maybe this is something that we should be doing in house as a first instance before getting Collette involved?

I responded, again on 24 June:

Sorry Anwen, you're wrong on this one. Attached is the letter sent to ABM practices with the offer. It clearly states in the paragraph at the bottom of page 1 continuing at the top of page 2 that the additional monies will not be added to the contract value for 2 years. No need to write to LHB, it's there in B and W. The email thread you mention is also attached - I find no reference to the DDRB being added, only an enquiry on 7 August from Colleague 9 raising the question. It doesn't state that it will be applied to the £25.00. If you disagree, let me know on what.

Please raise it at the LDC meeting. I'll make sure it's on the agenda.

End of correspondence

Correspondence with Chris Woods

On 25 June, Chris wrote following receipt and consideration of the letter from HB attempting to explain the confusion around the recent uplift to £25 per UDA and the DDRB uplift:

I'd like to add this to the agenda to be discussed at the next LDC meeting please. The LHB stance seems different to what was promised initially.

I responded on 25 June:

I've had a number of enquiries relating to this, Chris and it will be on the agenda for the next meeting. As a matter of interest, how does the HB stance differ from the initial offer?

Chris responded, again on 25 June:

In one of the meetings in Bridgend Karl Bishop implied the additional sum would be continued to be paid on top of any uplift due.

The fact that the health board is now decreasing the additional payment to offset against uplift has just meant that the gap between those practices below £25 per UDA and those above continues to grow. Yet it is these lower paid practices that have agreed to jump through all the hoops. We have taken on in excess of 500 patients in 12 months and we get rewarded by the health board by being locked in to £25 per UDA whilst others continue to prosper behind closed doors.

Despite all the shortcomings of the contract I strongly believe the biggest challenge we face is the inequality in payments to practices based on a dodgy algorithm on pre 2006 treatment patterns.

Those lower paid practices are struggling to compete in the marketplace for recruiting new staff, as well as the ability to invest in the premises and equipment. It simply won't be viable to provide NHS services much longer. This is compounded by younger graduates feeling unable to achieve the same targets as predecessors. The cost of delivery per UDA has increased dramatically.

Contract reform does nothing to address these issues and unless we have a new contract that allows the inequalities in payments to be addressed then I really do fear for the ability of lower paid practices to continue to provide NHS services.

I know that you feel it is not the LHB's responsibility to see those higher paid practices have their contract reduced. If nothing is done however then the quality of service is going to suffer until breaking point is reached for a good number of practices. I believe a potential crisis of NHS dental service provision should be of concern to the LHB.

I have had access to the contract values for ABMU and it has shocked me considerably. I find it mind blowing that 5 practices in ABMU are on £65 per UDA and the LHB cannot even find way to reward those lowest paid who are helping out the most.

The additional money that was available before year end for all ABMU practices does not seem to have been allocated either so perhaps some light can be shed on that also.

Sorry for the rant but at least you now know my full view point.

On 26 June I responded:

Thanks for that Chris, you make your points very well and I hope that we have a very relevant and good debate at the meeting in July. I agree with most of what you say. but am unsure what you mean when you say that the HB is decreasing the additional payment to offset against uplift, and I'm not sure where you get your information on UDA values but as far as I am aware no practices are on £65 per UDA, that is the UOA value for orthodontics. If you could share the information you have with me I will follow it up if prior to the meeting and hopefully have some answers by that time.

Don't worry about the rant as you call it, happy to listen to your concerns.

And Chris responded again on 26 June:

I'll forward the UDA values when I can put my hands on them. They were figures given to me by the LHB. I specifically asked for UDA contact data and not orthodontic contracts.

With regards to the uplift issue. The LHB had agreed to pay an additional payment monthly to cover the difference between UDA value and the £25. This was on condition that practices met certain targets/criteria. After 2 years the additional sum would be added to the contract provided criteria were met. We discussed at length whether the level of additional funding would still be added when any contract uplift occurred. It was expected, and agreed by Karl Bishop, that when the annual uplift was applied then the additional sum would remain the same. However, as the latest correspondence from the LHB shows, they are decreasing the additional payment in line with the 2.77% uplift to essentially cap all these practices at £25 per UDA. This means the uplift essentially has not occurred for the practices in question.

Meanwhile practices that were already above £25 per UDA have had their uplift applied. The gap between the worst paid practices and those better paid gets wider and wider each time there is an increase based on percentage. This is particularly unfair as it is these lower paid practices that have agreed to the criteria such as continued access for new patients. I cannot talk for others but we have accepted over 500 new (high need majority) patients in the last 12 months. We have worked hard to deliver our end of the deal based on what was offered. I'd be very surprised if many of the higher paid practices were doing this. We shall see if £65 per UDA may be a mistaken for orthodontic UOA, but I know there are many practices on over £30 per UDA, even over £40 per UDA yet they have not had to agree to any additional criteria.

The funding gap gets larger whilst the lowest funded are expected to do more also. I feel it is morally wrong for the LHB not to address this and to take advantage of those struggling the most. I honestly feel if this is not addressed then the viability of providing NHS services is in jeopardy.

Look forward to discussing soon.

End of correspondence
