



Summary Report:

Survey of Views on the Proposed New GDS Contract

Introduction

Morgannwg Local Dental Committee (LDC), representing dentists in the Swansea Bay University Health Board (SBUHB) area, conducted an independent survey of local dental professionals in response to the Welsh Government's consultation on a proposed new General Dental Services (GDS) contract. This summary presents key concerns raised by respondents—highlighting likely effects on patients, dental practices, and overall public dental health.

Survey Context

34 dental professionals responded to a 25-question survey, each question reflecting themes in the official consultation. Responses were mostly quantitative, with additional qualitative comments. Participants included practice owners, associates, practice staff and non-clinical leads.

1. Impact on Patient Access and Continuity of Care

- **Fairer Access:** While some welcomed the principle of improved equity via a centralised access system and a postcode-based model, many doubted its feasibility without significant investment.
- **Continuity of Care Risks:** Strong concerns were raised over plans to reassign patients via the Dental Access Portal (DAP), which could break established relationships and reduce the quality of care.
- **Two-Tier System:** Respondents feared the reforms could drive more dentists to private practice, limiting NHS options for low-income patients.
- **Disruption for Stable Patients:** The proposal to cycle patients through the DAP risks prioritising new or high-needs patients at the cost of routine, ongoing care.
- **High Needs Definition:** The 10-intervention threshold for defining high needs was widely criticised as too high and failing to account for behavioural or medical complexities.

2. Effect on Dental Practices

- **Financial Viability:** The proposed segmentation of contract values and care package payments was viewed as opaque, overly complex, and financially destabilising.
- **Clawback Concerns:** Many practices believe the new measures will increase, not reduce, clawback risk—especially given untested care package metrics and administrative burden.

- **Reimbursement Issues:** Payment levels were seen as insufficient, particularly for complex treatments like root canals or dentures. The drop in remuneration for common interventions was a key worry.
- **Repair and Replacement Guarantees:** The proposed 24-month warranty was considered unworkable and disconnected from the realities of clinical dentistry.
- **Patient Non-Attendance (DNA):** Allowing up to three missed appointments per treatment plan was considered excessively lenient and costly for practices.
- **Administrative Burden:** Despite some suggested efficiencies, respondents largely agreed that overall administrative workload would increase under the new contract.

3. Recruitment and Workforce Morale

- **Low Morale:** Dentists reported feeling demoralised, disrespected, and increasingly inclined to leave NHS work.
- **Seniority Payments:** Strong opposition was voiced against the removal of seniority payments, which are seen as essential to retaining experienced clinicians.
- **Associate Pay Uncertainty:** Lack of clarity on how associates would be remunerated under the new model poses risks to recruitment and retention.
- **Skill Mix Limitations:** Despite intentions to expand the roles of Dental Care Professionals (DCPs), the contract does not offer financial or structural support to enable this.
- **Training Gaps:** There is little evidence of planning for Foundation Dentists or ongoing workforce development.

4. Public Dental Health and Quality of Care

- **Undermining Preventive Care:** Only 5% of the contract value is allocated to prevention, despite widespread agreement that this should be higher.
- **Risk of Fragmented Care:** Shifting patients between practices risks repeated diagnostics, inconsistent records, and diminished patient trust.
- **Urgent Care Pressure:** While emergency treatment access is important, respondents worried it might replace rather than complement routine care.
- **Warranties Encourage Invasive Care:** Clinicians may be pushed toward more aggressive treatments (e.g. crowns or extractions) to avoid future liability.
- **Lack of Evidence Base:** Respondents noted the absence of clear data to justify reforms, including lessons from prior contract pilots.

5. Equality and Protected Groups

- **Potential Benefits:** Some believe DAP could improve access for socioeconomically disadvantaged patients and those without a current dentist.

- **Likely Harms:** Loss of continuity, longer waits, and over-reliance on centralised systems may especially disadvantage anxious patients, those with complex needs, and underserved communities.
- **Disempowered Patients:** Reduced patient choice and reduced clinician autonomy could leave vulnerable groups with limited or inconsistent care.

6. Overall Professional Sentiment

- **Disengagement:** A majority expressed intent to reduce or cease NHS activity if the contract is implemented as described.
- **Distrust in Welsh Government:** There is deep scepticism over the consultation process and perceived abandonment of negotiated reform.
- **Call for Simplicity and Respect:** Respondents urged for a fair, transparent, fee-per-item or trust-based model with realistic expectations, especially around patient behaviour and funding.

Conclusion and Recommendations

The responses to the Morgannwg LDC survey reflect a profession deeply concerned that the proposed contract reforms will harm patients, undermine dental practices, and accelerate the decline of NHS dentistry in Wales. Many fear that rather than resolving systemic problems, the proposals will entrench them further—exacerbating inequalities, discouraging NHS work, and destabilising service provision.

Morgannwg LDC strongly urges the Welsh Government to:

- Rethink the contract structure to prioritise continuity, fairness, and sustainability.
- Re-engage with the profession to develop a model that works for both patients and providers.
- Ensure reforms are piloted, evaluated, and supported by adequate funding and workforce planning.
- Recognise and support the vital contribution of experienced NHS dentists through fair remuneration and respect.

A constructive partnership is essential if NHS dentistry is to remain a viable, effective, and equitable service for the people of Wales.

Morgannwg LDC is committed to transparency and to ensuring that patients, stakeholders, and policymakers fully understand the concerns of dental professionals. [To explore the detailed survey findings and commentary, the full report is available here.](#)