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David McColl  
Chair, Scottish Dental Practice Committee

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Dear David

### **NHS Dental Remobilisation: NHS Support Funding and Conditions**

The remobilisation of NHS dental services is the clear priority, in the near term, and while we are agreed of the need to look afresh at the future funding model for NHS dentistry, the time for that is following a full resumption under the existing treatment model. In order to deliver a sustainable funding model, I am of the view that now is the right time to reintroduce item of service fees and NHS patient charges back into the Statement of Dental Remuneration.

You are aware of the funding gap associated with the loss of patient charge within the overall NHS dental budget and while an unprecedented and temporary level of support funding has been provided to help bridge this gap it remains the case that this arrangement is not sustainable in the longer term.

The funding support measures that have been provided to NHS dental contractors are clearly supporting the capability and capacity of practitioners to be able to return services in good order, as a fuller range of treatments are brought back. However, this highlights two competing issues that need to be addressed; supporting NHS dental contractors to earn sustainable and consistent levels of income; and the need to rebalance the financial support measures, in line with levels of activity. I believe this can be done through the reintroduction of item of service fees and the patient charge, allied to some further changes in the funding support mechanism, as we remobilise NHS dental services.

I propose to maintain the underpinning financial support principles, and alongside this raise the top-up level as a measure to support enhanced funding for dental contractors. I intend to utilise the return of the patient charge to fund the increase in the top-up level and support our budgetary position through a mechanism that will net the charge off against the top-up value level. I also intend to support NHS dental contractor activity by measuring a percentage level of individual contractor activity, benchmarked against pre-COVID-19 levels to provide Ministers with reassurance that patients are receiving the right level of care through the NHS.

I would value a discussion with you at our regular meeting tomorrow about how we might take this forward.



Yours sincerely



Tom Ferris (CDO)

