



**SCOTTISH DENTAL PRACTICE COMMITTEE
12 MAY 2021
REPORT**

The Scottish Dental Practice Committee (SDPC) held a meeting by videoconference on Wednesday 12 May 2021, to discuss the latest Covid-19 developments. This report provides a contemporary record of that meeting, but as this is a fast-moving situation, its content is likely to become rapidly out of date. The BDA provides live updates at <https://www.bda.org/coronavirus>

1. Covid-19 Pandemic

The Chair advised the committee that BDA / SDPC representatives had been unable to meet with the CDO / Scottish Government (SG) for the past six weeks due to pre-election restrictions on policy discussions. He advised that an update on outstanding topics from the CDO had been requested by BDA staff this week. These included:

- Ventilation guidance and the results from SG's survey of practices' ventilation.
- Whether PPE supplies to practices will be extended post-June.
- Clarity on SG's plans to introduce activity monitoring and tiered financial support for NHS dentistry.
- Revised calculations for maternity, paternity, adoptive leave and long-term sickness pay.
- Clarification on whether facial aesthetics and tooth whitening treatments can recommence following the easing of national restrictions.

SG advised they were unable to update SDPC on outstanding matters until new Ministers have been sworn into Parliament.

2. Dentists as vaccinators

The Chair reported that SG had been contacted to clarify the sessional payment for dentists and to provide guidance on how retired dentists can become vaccinators. He advised that the information was outstanding, and that the committee would be updated once this was available. The Chair asked the committee for any issues/feedback on the vaccination programme – there was nothing significant to report.

3. Ventilation

Members discussed the current ventilation guidance available and the SDCEP publication was noted although this is not official guidance but provides an overview on the topic. This was believed to be the most commonly followed literature by practices. It was agreed it would be useful to contact BDA Health and Science colleagues to determine what protocols the rest of the UK are following and how these compare to other countries. Practices had recently been asked to take part in an SG survey on ventilation to help them better understand the issues facing practices and formulate guidance, however the results of this had not yet been shared with the profession. It was agreed that practices require official guidance from SG to make business decisions and that this was considerably overdue. It

was agreed that SG guidance on the subject needs to be centralised and uniform across all NHS Boards to avoid discrepancies arising between Boards.

4. PPE

K Phillips advised the committee on the most recent updates regarding PPE. NSS advised that a decision regarding the extension of PPE supply post-June would not be made until a new Minister and Cabinet Secretary had been appointed. Surgical gowns had been made available on Pecos from Monday 10 May meaning these would be delivered to practices along with simple PPE. NHS Greater Glasgow and Clyde (GG&C) would still have to collect FFP3 masks from the Stobhill Distribution Centre. This issue was being raised with Paul Cushley from NSS on a regular basis. NSS was currently they were looking into whether the pick-up times at Stobhill could be amended to more suitable slots outside of practice hours as a compromise until the delivery issue could be rectified.

There was no date yet for the introduction of FFP3 masks to Pecos as NSS needed to work with manufacturers to amend the box sizes of some masks before this could happen. The committee would be updated when this change was made. It was reported that NSS had made ARCO services available to NHS Boards for staff to be face fitted if necessary. The cost of this would be met by NSS. Some of the committee reported issues with gloves shortages (GG&C and Grampian) advising there were not enough supplies to provide all nurses, LDU operators and clinicians in the practice to treat the allocation of ten patients per day. K Phillips advised she would collate all feedback from the committee and raise this with NSS at the next meeting.

5. £500 Covid Payment for GDPs

The Chair provided an update regarding a recent issue in his own practice relating to the payment of the £500 Covid bonus to staff who have left the practice. PSD advised that in order to pay the bonus that the Chair should put these individuals back onto the practice payroll, deduct tax and NI, redo a P45 and send to HMRC. He advised this was not a suitable solution for practice owners as it was time consuming and suggested that PSD should take back the payment and resubmit to the individual at their new place of work. No other members reported similar problems.

A discussion took place about PSD's error when processing the bonus payments. SG confirmed that GDPs would be entitled to receive the full £500 payment should they declare they work at least 37.5 hours per week, however the payment was abated unless 40 hours was declared. The issue had been raised with SG and PSD who advised they would rectify any incorrect payments.

6. Funding arrangements for NHS Dentistry

P Grigor advised the committee that the arrangements and timeline for revised financial support for NHS dentistry still needed to be confirmed by SG. SG outlined their indicative strategy prior to pre-election restrictions but this needed to be clarified and agreed. The indicative plan was:

- Short-term - tiered financial support (including minimum activity levels and patient registration rates) - from July 2021.
- Medium-term - intermediate funding model - from April 2022.
- Long-term - new long-term funding model to replace the SDR.

There was speculation that the introduction of tiered financial support may be pushed back from July to later in the year. For the intermediate funding model, SG advised that they would set-up a working group including SDPC/BDA representatives but this had not happened yet. For an April 2022 timescale to be achievable, this group should be established as a matter of urgency. Regarding a new long-term funding model to replace the

current SDR it is assumed that this will now be superseded by SNP's commitment to abolish NHS dentistry charges.

A discussion took place about the introduction of tiered financial support as a basis for continued Covid support payments. It was reported that some practice owners are unsure how their practices' activity levels compare to the expected levels which is causing anxiety. The uncertainty surrounding the timescale for the planned implementation of this also means practices are unable to plan their finances. It was agreed that this uncertainty is causing practice owners unnecessary stress and that SG need to communicate better with the profession and provide them with ample notice regarding any impending changes. The issue around treating children was also discussed as due to appointment backlogs it would take a considerable amount of time for children to be examined in the practice before having any treatment done. This is problematic as during the period of examination no income is generated for the practice. This issue had already been raised with SG and it was agreed that it needed to be discussed again.

Further discussion took place around the current Covid support payment system and specific examples were shared regarding how it is not fit for purpose. Examples included the issues caused when a dentist leaves a practice, attracting locums and covering maternity leave. The criteria surrounding exception reporting was also discussed. When SG shared their draft criteria, annual leave was not listed as an exception. It was agreed that annual leave is an important factor to consider and that this should be raised again with SG for consideration. It was also agreed that the method for exception reporting should be centralised instruction from SG rather than simply guidance to avoid discrepancies arising between NHS Boards.

The committee agreed that an urgent update from SG on all the issues discussed was necessary. P Grigor agreed to draft a letter to the CDO from SDPC. The letter would also include other concerns, including ventilation, PPE and payments for vaccinators.

7. SDPO and SDA

The Chair updated the committee on the recent activity of the Scottish Dental Practice Owners (SDPO) group and the Scottish Dental Association (SDA). In March, the SDPO wrote to SDPC/BDA asking to work collaboratively and P Grigor wrote back to the group to reiterate the committee's work during the pandemic, to highlight that most SDPC members (and all SDPC Executive members) are practice owners, and to reinforce the importance of getting involved with LDCs and elected committees via the correct channels.

It was noted that the 'SDA Summit' free virtual event took place on 16 March where the CDO was a main speaker. The Chair asked for the committee's comments on the SDA's recent proposal for a new GDS funding model. Members highlighted that the proposed salary for GDPs in line with GPs would be unrealistic as the job role of a GP commands more negotiating power than a GDP. It was noted that the medical profession liaises with the Cabinet Secretary in SG and the dental profession with the Minister, which is a lower grade. The proposal regarding legal representation at SG meetings was also discussed. The committee agreed that legal representation at SG meetings would be counterproductive and may encourage an environment where SG are less likely to engage with the profession. However, it was agreed that the SDA's proactive approach is something to be noted, as they are easily able to draw media attention to the case of the dental profession.

8. DDRB

The Chair provided an update from the Doctors and Dentists Review Body (DDRB) oral evidence session which took place in April. He advised that the pay uplift for GDPs had been determined this year by SG who capped the pay uplift for those earning over £80,000 per year at 1%. Given this limit on pay increases, he questioned whether the DDRB process was still worthwhile, as SG would be unlikely to implement the DDRB's recommended uplift. He

stressed that the work involved to contribute to the DDRB process is time consuming for all parties and suggested that this may no longer be a worthwhile exercise. Further discussion took place about the DDRB process and parallels were drawn with the other UK countries who expressed similar frustrations. The Chair reiterated the importance of the 2.8% pay uplift being applied to all allowances and commitment payments to truly reflect practitioners 'take home pay'. P Grigor added that referencing the 4% uplift offered to NHS staff may be a useful way to help the GDP cause.

9. Conference of Scottish Local Dental Committees 2021

L Milton, Chair of the Scottish LDC Conference, updated the committee on the Conference which took place on 23 April. This year's conference was the first time the event had been held virtually and it was deemed a success with the organisers receiving positive feedback from delegates. Judith Brady was commended for chairing the event successfully. The CDO and PSD had initially agreed to give a presentation at the conference but withdrew at short notice due to pre-election restrictions. The Chair of SDPC was commended for his presentation and D Manson was thanked for stepping in to fill the vacant speaker slot. It was noted that the CDO and PSD have agreed to present at a separate webinar on the 27 May to discuss policy issues. It was also noted that there were three candidates who put themselves forward for the seat of SDPC Representative from Conference. (Clare Murphy was re-elected). The Chair advised, because of the pandemic, that there may be more interest in the BDA triennial elections taking place in Autumn than there has been in previous years.

10. Motions from Conference of Scottish Local Dental Committees

The 20 motions which were passed by conference delegates were further debated by SDPC. All 20 were passed as SDPC policy and it was agreed that these would be discussed further and taken forward by the SDPC Executive Sub-committee for negotiation with SG.

11. SDPC Constitution/Format Review

A paper discussing the make-up of SDPC had been circulated before the meeting. K Phillips updated the committee on the background of the paper for context, advising that it had been drafted as a basis for discussion on how the committee is currently made up and provide demographic data relating to the GDS in Scotland. Discussions on how well the profession is represented are being held across all BDA craft committees. There were differing views on the make-up of the committee. It was agreed that protected geographical seats need to remain to ensure representation of various NHS Boards. Without this measure, larger boards (such as NHS GG&C) representing more dentists may occupy the majority of seats. Some committee members felt there had been a gradual change over the past few years resulting in the committee being predominantly NHS focused. There was a suggestion that the committee could include more focus on private and corporate dentists as these trends are increasing. It was noted that a BDA UK-wide committee had already been set-up to represent dentists working in private practice. It was also noted that most negotiations with SG are mainly focused on NHS practice. It was advised that in the constitution SDPC representatives currently do not have to be members of their LDC to be eligible for a seat on the committee. It was suggested that the links between LDCs and SDPC could be strengthened and perhaps every LDC should have a seat on SDPC. It was agreed that K Phillips would collate all committee members' views on the subject for discussion at the upcoming SDPC Executive Sub-committee meeting.

The Chair explained that the BDA Young Dentists Committee wished to make a change to their constitution which would affect SDPC, therefore they required approval from the committee. The change would result in one member of YDC filling the Young Dentist seat on SDPC. It was suggested that this change would be positive as it would ensure the seat of Young Dentist was filled. The seat is currently vacant and has been difficult to fill in the past.

The Chair took the discussion to a vote which was passed by majority. K Phillips would advise YDC that SDPC had accepted the proposed change which would require approval by PEC.

12. Dentists in Training – lead employer arrangements

P Grigor updated the committee that the Doctors and Dentists in Training (DDiT) Dental Subgroup had met in March, and that plans to move trainees to NES as the main employer had been pushed back by one year. Core and Specialty trainees will transfer to NES in September 2021, and VDPs will transfer in August 2022.

13. Scottish Council Membership and Communication Working Group

P Grigor updated the committee that, following the recent Scottish Council meeting, a working group had been set up with the aim of improving communication with the profession and increasing BDA membership figures in Scotland which had declined over the past year. The group had met recently and one of the actions was for Scottish committees to make more effective use of social media. He advised that BDA would be seeking out volunteers from craft committees to become social media "ambassadors". The decline in Scottish student numbers was also noted - recruitment had been difficult due to restrictions placed on face-to-face interaction in the dental schools. It was also noted that more focus needed to be placed on retaining and recruiting young dentists, particularly VTs.

14. Scottish Orthodontic Specialist Group

R Irvine provided an update from SOSG. He advised that most practices were trying to provide treatment as normal, however that there was a decline in patient footfall due to the reduction in referrals during lockdown. This was having a knock-on effect on practices' income and activity levels. He advised that SOSG were happy with the current orthodontic funding model and had already moved to e-Ortho. He advised that the committee's preference would be to have a representative from SOSG present when discussing the new funding model. The Chair advised that the issues raised would be discussed with SG at the next meeting.

15. Matters for reporting to / from SDPC and the BDA Principle Executive Committee

P Crooks provided an update from the latest PEC meeting held on 6 May. He advised there was an upcoming UK representative vacancy on PEC and that this would be advertised in the BDJ soon. He advised that 5 seats on PEC would be available at the upcoming BDA triennial elections taking place in Autumn. He updated the committee on the current membership figures in Scotland and alluded to the work already undertaken by the Scottish Council Membership and Communication Working Group. He advised that a bid for a new BDA website was currently out for consultation and noted that the Scottish Universities had agreed to push-back BDS and VT training by one year. He thanked Scottish Council for their comments on the recent Horizon Scanning paper which was circulated by Martin Woodrow.

Date of next meeting

Wednesday 15 September 2021 at 13:30 by videoconference.

David McColl
Chair SDPC
May 2021