

Scottish Dental Practice Committee Policy Document

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Executive Summary

Purpose of the Scottish Dental Practice Committee Policy Document

- The purpose of the Scottish Dental Practice Committee (SDPC) policy document is to provide a dynamic, strategic and non-anecdotal approach to SDPC policies based on evidence and new issues as they emerge.

Communication

- SDPC is committed to communicating effectively with BDA members and non-members through a range of channels, including the BDA website, newsletters and social media.

Privacy (GDPR Compliant)

- SDPC supports the need for general dental practices to have access to NHS Boards' Data Protection Officers

Capacity and Quality

- SDPC is committed to maintaining and developing a quality service to patients and highlighting to the public the actual costs of dental treatment and the unsustainability of the current funding system.

Scottish Government Oral Health Improvement Plan

- SDPC is committed to communicating effectively with Scottish Government to ensure the profession has a key role in how the Plan is implemented.

Funding

- SDPC is committed to increasing the dental budget for dental services in Scotland and resisting any further erosion of dental allowances.

Prevention

- SDPC endorses the Childsmile Programme and on-going work with Scottish Government to promote oral health in children and young people.

Governance Bodies – Direct Access

- SDPC supports dental care professionals within the dental led team and is entirely opposed to direct access on the grounds of patient safety.

Regulatory Body

- SDPC supports the need for a Scotland based regulatory body which is 'fit for purpose' to be established.

Combined Practice Inspections

- SDPC recognises the importance of combined practice inspections as part of a wider quality framework, but remains concerned about the onerous and bureaucratic process.

DDRB

- SDPC will continue to work on behalf of the NHS General Dental Service dental profession to ensure that robust and persuasive evidence is submitted to the DDRB.

Vocational Dental Practitioner Training

- SDPC policy is that every graduate from Scottish dental schools should have a Scottish vocational dental practitioner training placement.

Workforce

- SDPC urges Scottish Government to formulate a more realistic and deliverable approach to workforce planning in Scotland.

Crowd Funding

- To allow SDPC to demonstrate to the dental profession how crowdfunding might benefit the profession when facing legal challenges with regard to regulation, Scottish Government guidelines and from the General Dental Council.

Quality Improvement

- SDPC urges NHS Education for Scotland to allow for an anonymous reporting of adverse clinical and practice events, which can be reviewed and the learning shared with the profession.

The Prescriptions and Limitations Act 1973

- Legal advice provided to the BDA in 2014 surrounding the recovery of over-payments by Practitioner Services Division was based on a contractor having a contract or an agreement with an NHS Board i.e. Scottish Government claimed it was an agreement and as such the five-year limit on claims was not applicable. In BDA Scotland's opinion, the contract and agreement would be the same and that Contractors' have a contract with the NHS Board to provide GDS.

Automatic External Defibrillators

- BDA Scotland and SDPC supported the Scottish Government's initiative to introduce defibrillators into every Scottish NHS dental practice in 2014, to ensure that both patients and the wider community would have improved access to this life-saving equipment. It was a condition of the scheme, either through receiving a defibrillator or receiving some recompense, that practices would be mapped on to the Scottish Ambulance Service control system.

IT

- SDPC supports the provision and implementation of the Scottish Government e-Dental Programme for dentistry to maximise the accuracy of online reports to support the financial and reporting requirements within dental practices

1. Purpose of the Scottish Dental Practice Committee Policy Document

The purpose of the policy framework is to ensure that each of the key issues delivered by non-salaried general dental practitioners (GDPs) are addressed in terms of considered and developed policies by the SDPC. The development of the framework enables the committee to make decisions which have been informed by a considered and strategic approach to their policies.

The policy framework is a dynamic document, which should be formally revised and reviewed on an annual basis and be held as an 'organic' document which can adapt and change as and when new issues emerge throughout each triennium. The document will also be used as a reference during meetings to emphasise the promotion of SDPC policies, however the policy document will be the responsibility of the entire committee.

SDPC agreed that the six main areas within the following six areas and would be used as a baseline and these are listed below:

- Focus on the quality of patient care
- Improve the oral health of Scotland's most vulnerable patients
- Raise awareness of oral cancer
- Ensure that Scotland has a properly-funded NHS dental service
- Recognise the contribution of the mixed dental practice
- Invest in Scotland's dental workforce
- Let communities choose fluoridated water

In addition to the six main issues listed above the current committee has emphasised specific aims for SDPC policy and these are as follows:

1. Protect and increase funding
2. Reduce the levels of bureaucracy
3. Ensure meaningful and well thought future changes to government regulations

SDPC Executive Sub-committee strongly believes the central plank of SDPC policy is based on GDPs being appropriately resourced to deliver a quality service to their patients. SDPC recognises that quality costs money and SDPC policy emphasises the need that adequate funding is made available to fund NHS dentistry.

As a Trade Union the BDA has a major role to protect the interests of its members and it is important that this is recognised in the SDPC policy framework. The BDA and SDPC work to influence Scottish Government, however recognise that Scottish Government will not always be bound by these decisions.

The need to prioritise areas of concern and issues of interest is crucial to ensure the policies were effectively pursued and that the committee are not deflected away from key priorities. SDPC seek to adopt a proactive stance to the development of policy and move away from anecdotal views.

2. Communication

SDPC Executive Sub-committee is in agreement that SDPC represents all independent non-salaried GDPs and not only BDA members.

SDPC acknowledges that the BDA website is of paramount importance in promoting 'real-time' communications with members and non-members.

The BDA and SDPC are committed to communicating effectively with BDA members and non-members, and key stakeholders using a range of channels:

3. Capacity and Quality

The view of SDPC is that quality is at the heart of all elements of the policy framework.

The following issues are considered to be of key importance:

- Whilst recognising patient registrations have increased across Scotland, SPDC policy is to promote increases in patient participation rates
- Promote improvements in oral health through patient education and prevention
- Promote the development of appropriately funded Oral Health Risk Assessments
- Promote high quality care to patients
- Seek to have the Statement of Dental Remuneration, which is currently unfit for purpose reflect the actual cost of delivering dental treatment
- Promote high-quality training for dentists provided by specialist providers such as NHS Education for Scotland and the BDA
- Ensure that dental professionals are supported or mentored in their developmental needs
- Promote early detection of oral cancers and work with secondary care to improve survival rates
- Seek to protect dental allowances where possible to prevent any further erosion of such payments
- Seek to have Scottish Government / NHS National Services Scotland be responsible for the procurement and upkeep of emergency drugs
- Seek to have NHS Board review the SCI Gateway referral system and support the implementation of an agree national standard
- Seek to have Practitioner Services Division provide GDPs with a supported single practice management system
- Seek to have GDP Sub-committee representation in the appointment of Directors of Dentistry, with the introduction of funding to enable GDPs to apply for the positions

This is an important element in the SDPC policy as it highlights to the public the actual costs of dental treatment and the unsustainability of the current funding system.

4. Scottish Government Oral Health Improvement Plan

- SDPC wishes to work constructively with Scottish Government to determine how the Plan is implemented through representation on working groups and effective negotiation and meaningful testing phases / early adopter practices. SDPC believes that any outcomes must be able to provide the best quality of care for patients and to be in their best interests.

- SDPC seeks assurances from Scottish Government that it monitors and ensures that no dental practice is financially destabilised by a reduction in NHS income following the implementation of the Plan

5. Funding

Funding is one of the main priorities and there are concerns on a number of issues which SDPC seeks to address. One of these concerns is the move by Scottish Government to a fixed GDS budget for dentistry this is perceived as inherently counter-intuitive and largely unworkable as it conflicts with Scottish Government's primary policy objective in achieving 100 per cent full patient registration. It is also SDPC's view is that, given the increasing number of dentists in Scotland and the increase in patient registrations, the cumulative effect will be to generate greater demand for services and therefore increased costs.

SDPC:

- Recognises the rise in demand and the large increase of NHS GDPs and supports the need for an increase in dental funding
- Seeks to address the 30 percent real-terms reduction in dental practitioners' income over the last five years
- Seeks an increase in the dental budget by at least that of inflation to increase practitioners' remuneration
- Seeks to increase the dental budget for dental services in Scotland and resist further erosion of dental allowances
- Promotes the benefits of e-dentistry to all GDPs
- Seeks to influence Scottish Government in raising the threshold for Prior Approval
- Seeks to exert pressure on Practitioner Service Division (PSD) to improve the quality and accuracy of data and reduce fees payment timescales
- Urges Scottish Government to reinstate free replacement restoration claims for patients aged 65 years and over.

6. Prevention

SDPC policy is to pursue with Scottish Government further improvements in the oral health of all the Scottish population, with a strong emphasis on prevention.

- SDPC endorses the Childsmile Programme and supports continued funding of the programme and the benefits it has provided
- SDPC supports a dental prevention programme for the elderly both in their own homes and in residential care homes
- SDPC supports a tax on sugar
- SDPC endorses the BDA's overall objective that communities strive to move towards the decision to choose fluoridated water
- SDPC calls on all political parties to consider investing a proportion of the income generated by the sugar tax in a second stage of the Childsmile Programme to be targeted at caries prevention in children aged between 6 years and 17 years of age.

7. Privacy (GDPR)

A motion was passed unanimously at the 2019 Conference of Scottish LDCs to align GDP practices with general medical practices to have access to a NHS Board Data Protection Officer. Scottish Government agreed to investigate this in May 2019.

8. Governance Bodies - Direct Access

SDPC has raised a number of concerns regarding direct access which reflect the wider issues raised by the BDA at a national level. These concerns include the all-encompassing nature of direct access and the opportunity for the establishment of direct access centres without the leadership of a dentist. Dentistry is, first and foremost, the provision of healthcare to the public. The BDA is unconvinced that direct access would be in the best interests of patients or indeed in line with the GDC's overall *raison d'être* of protecting the public.

- Concerns include the potential that direct access would create a surplus in the dental workforce with no clear strategy
- SDPC endorses the Chief Dental Officer's (CDO) view that Dental Care Professionals (DCPs) function optimally as part of the dentist led team
- In the interests of patient safety, SDPC does not support Direct Access for DCPs working out with the dentist-led team

9. Regulatory Body

Two motions were passed unanimously at the 2015 Conference of Scottish Local Dental Committees about the General Dental Council's (GDC) poor performance. These motions highlighted the profession's lack of confidence in the GDC to regulate the dental team, and proposed the establishment of a regulatory body more relevant to the needs of the dental profession in Scotland.

SDPC subsequently conducted a survey of GPs across Scotland which received a high response rate in favour of SDPC investigating the creation of a Scottish-based regulatory body which is fit for purpose.

A further motion was passed unanimously at the 2018 Conference that the GDC's registration fees which are the highest of any UK regulator should be significantly lowered.

- SDPC supports the establishment of a Scotland-based regulatory body which is fit for purpose
- SDPC opposes the GDC practise of holding all disciplinary hearings in London
- SDPC supports the re-establishment of local resolutions by NHS Boards
- SDPC opposes the current GDC annual retention fee which is significantly higher than other UK health regulators

10. Combined Practice Inspections

SDPC recognises the importance of quality assurance within a wider quality framework in Scotland. However, the Committee has concerns about individually onerous and bureaucratic process of combined practice inspections (CPI).

SDPC:

- Supports CPI with consistent implementation across the NHS Boards
- Opposes sanctions for practices which have struggled to complete the CPI process, supports the provision of Continuing Professional Development (CPD) for Dental Care Professionals (DCPs) who assist the CPI process at practice level

- Seeks to ensure that there is adequate representation of GDPs in the CPI process across NHS Boards
- Promotes the profile of the BDA Expert package as a mechanism to significantly reduce CPI preparation time within dental practices tailored to the Scottish system
- Works to ensure that DCPs working in practice gain accreditation for their role in the CPI process
- Opposes financial charges for compulsory training courses under the new CPI
- Opposes sanctions or financial penalties targeted at individual dentists rather than at a dental practice, who have not met their Clinical Audit requirements, and promotes a consistent approach by NHS Boards
- Supports the need for the implementation of an allowance or sessional payment, or CPI time be incorporated into new Scottish Government Protected Learning Time proposals to compensate practices for lost time during a CPI

11. DDRB

Scottish Government continues to refer on the matter of dentists' salaries and terms and conditions to the DDRB on a national basis. It remains SDPC policy to: support the process, present robust evidence on earnings and expenses; promote the interests of general dental practitioners and the wider profession; and protect the quality of care to patients.

A motion was passed unanimously at the Conference of Scottish Local Dental Committees in April 2017; '*This conference calls for review of the mechanisms by which the profession negotiates on NHS fees.*' The motion was also supported unanimously by SDPC at their May 2017 meeting to make this SDPC policy.

SDPC:

- Continues to work on behalf of the profession to ensure that robust and persuasive evidence is presented to the DDRB
- Supports the development of robust practice cost information in line with requirements of the DDRB
- Continues to work with DDRB to promote the interests of BDA members and other GDPs in Scotland
- Promotes the use of benchmarking to enable practices to undertake a comparative evaluation of practice costs
- Seeks to review how the profession negotiates on NHS fees
- Promotes the use of the current expenses template, developed in conjunction with BDA Scotland, and continues to explore practice expenses with Scottish Government

12. Vocational Dental Practitioner Training

SDPC policy is that every graduate from Scottish dental schools should have a guaranteed and properly funded Scottish VDP training placement.

- SDPC to consider a policy to encourage dentists during the later stages of their practising careers to take on training and other developmental roles in order to promote a better work-life balance

13. Workforce

SDPC has serious concerns about the apparent lack of robust workforce planning for the General Dental Service. There are an increased number of dentists joining the profession year on year, and a growing number of DCPs graduating from Scottish universities. SDPC is concerned there is no clear government strategy on how these numbers are absorbed into the workforce.

SDPC will:

- Provide career pathway opportunities in NHS dentistry for young graduate dentists
- Maintain the Seniority Allowance and promote other measures to enable experienced dentists nearing retirement to seek alternative career paths
- SDPC supports the reinstatement of the default NHS Pension age of 60
- Promote continued interaction between SDPC and SPDSC on workforce issues
- Work with Scottish Government to assess current level of dental graduate output in Scotland and to form a business case to justify the continuation of Aberdeen Dental School including the impact on academic recruitment

14. Crowd Funding

Crowdfunding is the practice of funding a project or venture by raising monetary contributions from a large number of people. Crowdfunding is a form of crowdsourcing or alternative finance. Following a motion passed at 2016 Conference of Scottish Local Dental Committees, SDPC agreed to draft a crowd funding policy to demonstrate how it might benefit the dental profession when facing legal challenges with regard to regulation, Scottish Government guidelines and from the General Dental Council.

- All independent GDPs and possibly PDS GDPs could be responsible for providing funding to promote crowdfunding. Local Dental Committees and / or the Scottish Dental Fund, as well as the Conference of Scottish Local Dental Committees could also share the role. It should be noted that if SDPC did not win a case the opposition would be able to claim for some of their costs and SDPC would need to take account of this.
- SDPC would have to establish a crowdfunding platform in order to launch an individual venture and agree who will be responsible for the management and organisation of the platform.
- In the event of a crowdfunding event a responsible person from SDPC would need to be nominated or nominate themselves with the agreement of the voting members of the committee. The role of the nominated person would be to oversee, manage and be financially accountable for the funding raised.

15. Quality Improvement

SDPC has concerns about the performance and accountability of quality improvement, dental clinical audit and Significant Event Analysis (SEA). It is essential the systems operated by NHS Education for Scotland (NES) are transparent and that appeals processes have clear timeframes.

- SDPC urges NES to review its documentation relating to assessment of Quality Improvement clinical audit activity, to check the robustness of its processes, and identify areas for enhancement

- SDPC suggests that the agreed NES reviewer guidance and/or review criteria should be shared with the GDP community (with suitably anonymised examples of reviewed projects accompanied by a brief commentary)
- SDPC suggests that an independent body be established to allow anonymous reporting of adverse clinical and practice events
- Seek to have NHS Boards operate national sanctions in relation to Quality Improvement
- SDPC suggests that NES must recognise hours are based on the process of audit and not on the outcome

16. Prescription and Limitations Act 1973

Scottish Government has stated that in relation to Dental payments the Prescriptions and Limitations Act 1973 does not apply. SDPC disagree and would necessitate a Judicial Review to establish the position as both sides councils' opinion differed.

- SDPC did not pursue the Judicial Review in 2014, because Scottish Government stated that if BDA Scotland did, NHS dentistry would not get a fee uplift in that year

17. Automatic External Defibrillators

Scottish Government issued [PCA\(2019\)\(D\)1](#) in January 2019, which advised of revised arrangements for the first responder element to AED (defibrillator) scheme.

- In light of the additional responsibilities for dental practices to provide emergency care outwith their premises as first responders, SDPC suggests that GDPs and their staff should no longer be required to self-finance their annual Basic Life Support training and should be reimbursed

18. IT

SDPC recognises the importance of having a workable dental IT system and suggests that this will be of the utmost importance for any success of the Scottish Government Oral Health Risk Assessment proposals.

- SDPC urges Scottish Government and NHS Boards to review and re-design the dental SCI Gateway referral system to an agreed national standard
- SDPC suggests that Scottish Government / NHS National Services Scotland should be responsible for the procurement and upkeep of emergency drugs
- SDPC suggests that Scottish Government / NHS National Services Scotland could greatly enhance patient safety with the establishment of an accessible database of prescribed medicines and required medical protocols
- SDPC urges Practitioner Services Division to provide GDPs with a supported single practice management system