



Report of the General Dental Practice Committee

1. This report provides an overview of the General Dental Practice Committee's work over the last term, outlining its key achievements, and the next steps in addressing the significant challenges faced by NHS dentistry in England. The Committee has played a key role in advocating for fairer funding, securing important contractual changes, and keeping NHS dentistry high on the political agenda. The GDPC's and BDA's position is in favour of a prevention-based, blended contract, incorporating a significant capitation component, activity for very high needs, and sessional payments for urgent care.

GDPC's Role During the Pandemic

2. At the start of the Committee's last term, NHS dentistry was still reeling from the impacts of the COVID-19 pandemic. The profession was facing extensive treatment backlogs, financial instability, and severe workforce shortages. In response, the Committee successfully secured contract mitigations to support dental practices. The Unit of Dental Activity thresholds were adjusted to mitigate financial clawback, and financial protections were extended to stabilise the sector. These measures ensured that NHS dental practices could continue to operate and provide care to patients despite the challenges posed by the pandemic but failed to address the weakened state in which NHS dentistry entered into the pandemic.

First Contractual Changes since 2006

3. A minimum UDA value was implemented for the first time, ensuring a baseline level of fairness in compensation. Additionally, higher numbers of UDAs were awarded for complex treatments such as molar endodontic procedures, which had previously been undervalued. These adjustments were a necessary step towards addressing long-standing inequalities in the system. However, the Committee is still of the opinion that further reform is essential to create a sustainable and equitable model for NHS dental practitioners.

Marginal Changes 2.0

4. The proposed updates were designed to improve access for high-needs patients, introduce quality-focused measures linking funding to patient outcomes, and address inequities in associates' terms and conditions. Although NHS England has indicated support for these changes, implementation has been slow, and the Committee has continued to push for urgent action.

Dental Recovery Plan

5. The Dental Recovery Plan introduced several key measures, including increasing the minimum Unit of Dental Activity value to £28 and implementing a New Patient Premium to encourage patient access. The plan also included provisions for mobile dental units in underserved areas. Financial incentives such as "Golden Hellos" were introduced to attract dentists to areas with significant shortages. Additionally, consultations on tie-ins and provisional registration are ongoing.
6. The BDA said at the time that this Plan would not be sufficient to recover NHS dentistry, even to its poor pre-pandemic state. This was the finding of a subsequent [National Audit Office review](#) of the Plan.

Minimum UDA Value

7. The Committee has been strongly advocating for a minimum UDA value of £35 to better reflect rising operational costs and ensure the financial viability of NHS contracts. A fair and adequately funded system is critical to retaining NHS dentists and maintaining accessibility for patients.

Raising Dentistry's Political Profile- The Impact of the General Election

8. For the first time, NHS dentistry became a significant issue during the general election campaign. The Committee played a key role in ensuring that it remained a political priority. Moving forward, the Committee's focus would be to work with the Government to ensure that manifesto pledges are met and to also push for clear timelines on contract reform.

Pay & Contract Uplifts

9. The Committee has played a crucial role in advocating for better pay for NHS dentists. It has influenced the Doctors and Dentists Review Body's recommendations, leading to higher-than-average pay uplifts over the past three years. However, future pay increases must keep pace with rising costs to ensure that NHS dentistry remains an attractive career option. There remains a significant issue in how the DHSC approaches expenses, with the uplift last year at only 1.68%. There have also been problems with unacceptable delays to implementation, with the 2024/25 uplift only applied in March 2025.

The New Triennium- 2025- 2028

10. I was elected as Chair of the GDPC, with Vijay Sudra and Joe Hendron as Vice-Chairs.
11. The General Dental Practice Committee has remained steadfast in its commitment to securing essential reforms for NHS dentistry. By continuing to engage with policymakers, advocating for fairer funding structures, and applying pressure on government bodies, the Committee will continue to work to ensure a sustainable and equitable future for both dental practitioners and patients.

Shiv Pabary
Chair, General Dental Practice Committee
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