

On the 13th of July 2020 Sara Hurley, Chief Dental Officer (CDO) of England, released her fifth official letter in a series of regular updates to general dental practices and community dental services regarding the emerging COVID-19 situation. An outline of the letter is below.

NHS Contractual Arrangements

The letter sets out the detail of the abatement and contractual handling for non-urgent dental care centres (UDC) and UDC practices.

“Contractual arrangements: 1 April to 7 June - as all service provision has been delivered remotely, it is recognised that consumable (laboratory and materials) and other variable costs in practices will be lower over this period. In light of this, we have agreed with the BDA that it would be appropriate to apply a 16.75% abatement to the total contract value across the period 1 April 2020 – 7 June 2020. This will be enacted through reconciliation over the period to 31 March 2021”.

Urgent Dental Centres

The letter mentions Urgent Dental Centres - “We remain grateful to those practices that have opened their premises and mobilised UDC centres. This has been an essential part of the national effort to manage the impact of the pandemic and to provide urgent and emergency care. We recognise that practices will have incurred additional cost burdens for items such as consumables, resource and administration. Given this impact, we have agreed with the BDA that it would be appropriate to apply no abatement to UDC practices for the period that they are operational”.

The letter states “For any period of time where the practice was not operating as a UDC they will be subject to the 16.75% contract abatement as outlined above. We will gain assurance of UDC activity via workforce returns, transmitted activity to NHSBSA and eTriage”.

Expectations

From 20 July 2020 the letter says “We expect that all practices should have been able to mobilise for face to face interventions. We recognise that capacity is constrained and that it may not be possible to deliver historical unit of dental activity (UDA) levels during this period, but we expect practices to be making all possible proactive efforts to be delivering as comprehensive a service as possible, with particular regard to need which has not been met during phase one of the incident and any health inequalities issues which have emerged locally. The contractual arrangements need to appropriately take account of the increasing activity levels, the constrained capacity due to infection prevention and control guidance, and the increased costs of PPE”.

Further Arrangements

- From the 8th of June, NHS England have moved to a 0% abatement for all contracts. For UDC practices this will apply automatically from 8 June
- Any practice not delivering the equivalent of at least 20% of usual volumes of Patient care activity will be deemed to be non-compliant with the above criteria
- Any practice that has significantly increased private practice provision at a rate that exceeds that for NHS provision while we provide this funding stability may be deemed to be non-compliant with the above criteria

Contractual Requirements

- Maintenance of the eTriage system for recording of telephone/remote consultations
- FP17 data to be transmitted from all practices to evaluate treatment interventions at a practice level and Patient outcomes
- Submission of declaration around equivalence of NHS service offer and private service offer
- Submission of declaration over continued staff engagement

Stability of Income

The agreement to provide this stability of income was linked to a requirement on practices to ensure that all staff, including associates, non-clinical and others, continue to be paid at previous levels. This continues to be an essential requirement as NHSE move forward and ensure that all practices are playing their part in delivering services as part of the resumption of routine dentistry across the country.

PPE and Fit Testing

Respirator fit testing plans are in place to train fit testers from the dental sector across NHS regions, who will each fit test colleagues in local practice.

QCS recommends that the full version of the letter is also read, which can be found [here](#).