Help or hindrance?

James Shedlow discusses the new Personal Dental Services Plus Agreement and the array of new practices and procedures dentists will need to put in place as part of its implementation.

From October 2009, the new Personal Dental Services Plus Agreement was released ahead of schedule by sever-

F

cal spells of under-achievement, and dragged the British Dental Association (BDA) and the Department of Health (DH) into a stand off. The main concerns appear to include the complexity surrounding the calculation of the payments due under the new regime, as well as the significantly increased administrative burden facing den-

The new proposals have already caused a furor within the dental community, and dragged the British Dental Association (BDA) and the Department of Health (DH) into a stand off. The main concerns appear to include the complexity surrounding the calculation of the payments due under the new regime, as well as the significantly increased administrative burden facing dentists under the provisions of the new agreement.

The reliance on UDAs as the sole measure of perform-

ance will be a thing of the past. Instead dentists will be obliged to provide their services to patients in accordance with and subject to the key perform-

ance indicators (KPIs) set out in the agreement.

The KPIs fall into five cat-

gories – Access, Effective Care, Health Promotion, Value for Mon-

ey and Patient Experience (all of which are weighted differently under the agreement in terms of importance). Fur-

thermore, there are three bands of performance level in respect of each category: Band A (desired performance), Band B (minimum acceptable performance) and Band C (unaccep-

table performance).

For each KPI category and relevant performance band (in respect of which guidance is given within the agreement as to what level of performance would equate to the appropriate band), there is a corresponding pay-

ment band.

However, in this regard the KPI payment calculations are so intrinsically complex that it is envisaged that the calculation of the end figures ultimately payable will prove extremely prob-

lematic for dentists.

Administrative burden

There is considerable concern that dentists will become embroiled in a mountain of paper-

work and bureaucracy under the provisions of the new agreement. It is generally considered that at least one very competent practice manager will be essential to deal with such administrative require-

ments, which will include the implementation of the following policies and procedures:

The contracting dentist will be obliged to develop and imple-

ment a “continuous improvement plan” in relation to the services, utilising an evaluation process and patient satisfaction surveys agreed with the PCT, to ensure that the quality of the service is improved. In addition, there will be a requirement to regularly re-

view the KPIs in accordance with the performance bands specified under the agreement so as to en-

sure that the performance of the services is improved.

Clearly, this is going to be a very intensive and time-consum-

ing process.

The dentist will be required at all times to act with full regard to the safety of all people at the practice premises (this will in-

volve the preparation of a suitable Health and Safety Plan), to comply with all Care Quality Commis-

sion requirements and “aspire” to achieve a top performance rating in respect of the KPIs (although quite how such “aspiration” is to be measured remains a mystery).

A “quality assurance system” must be put in place that is fol-

lowed by anyone assisting in the performance of the services un-

der the agreement. This system must reflect the KPI requirements under the agreement.

The contracting dentist is re-

quired to ensure that there are in place arrangements for all per-

formers and staff at the relevant practice to maintain and update their level of competence, skills and knowledge.

No further detail is provided under the agreement, but the impli-

cation is that associates need time allowed for career development and that the practice needs to have a firm training policy in place.

The revised Clinical Govern-

ance provisions in the agreement require the dentist to go beyond simply complying with the PCT’s arrangements in this regard and instead the putting in place of an “effective system” of clinical gov-

ernance (for example, a firm and structured arrangement through which the dentist endeavours to continuously improve the serv-

ices offered).

Aside from this, little guid-

ance is provided as to the crea-

tion of an effective system of clinical governance since there is a requirement to comply with the PCT’s instructions in this regard.

There is a formal require-

ment of strict compliance with the Data Protection Act 1998 and for the contracting dentist to have in place suitable systems and policies to ensure informa-

tion security.

In this regard, the BDA has confirmed that it will shortly be providing comprehensive advice regarding the handling and manage-

ment of patient information.

An unfortunate paradox

Such issues as highlighted in this article only serve to illumi-

nate the stark paradox begin-

ning to progressively engulf the Personal Dental Services Plus Agreement. Namely, that in its present form, it would appear that the agreement through its heightened bureau-

cracy and innate complexity carries the danger of further re-

ducing the accessibility of the public to NHS dental services, as well as the ability of dentists to concentrate on the provision of such services.

These are of course the very same issues that it was hoped this new form of NHS agreement would tackle upon its inception.

About the author

James Shedlow joined Cohen Cramer in 2008 and is a key member of the dental team working on prac-

tice sale and acqui-

sition transactions. His particular area of expertise is in the preparation of expense share agree-

ments and the incorporation of dental practices. To contact Cohen Cramer en-

quirers, call 0115 2449595; email den-

tal.imps@cohen cramerton.co.uk or visit www.cohen cramerton.co.uk.