**DENTAL TRIBUNE United Kingdom Edition - October 20-26, 2008**

**GDS financial entitlements revealed**

The Department of Health has launched a volte face in its proposal for maternity payments as set out in its draft General Dental Service (GDS) statement of dentists’ financial entitlements from April 2009.

The draft letter, sent out by the DH to dentists on October 2, set down proposals to follow the Statutory Maternity Pay (SMP) route and pay 90 per cent of pensionable earnings for the first six weeks, followed by the standard rate of £117.18 per week for the remaining 35 weeks, which was likely to be much lower than the dentists’ NHS earnings.

But in a surprise statement on October 7, the DH confirmed that ‘the intention is to retain current arrangements rather than mirror SMP’.

The payment for Maternity Leave Payments (MLP) is not the same as SMP which covers 59 weeks. MLP pays a sum equivalent to dentists’ net pensionable earnings, for 26 weeks. In contrast, SMP covers 59 weeks, paying 90 per cent of pay for the final six weeks, but dropping considerably for the final 35 weeks.

The letter also states that the DH does not want to introduce a national scheme to ensure quality, as it believes PCTs are beginning to reward quality themselves.

Regarding seniority payments, the DH is proposing to freeze the scheme for ‘current members’, with no newcomers admitted after March 2009.

Eddie Crouch, from Birmingham local dental committee (LDC), said: ‘Until the new contract, dentists were contributing towards eventual receipt of seniority payments to reward older dentists as they slowed their work rate.

‘Stopping these payments to those approaching 55 isn’t acceptable, as the UDA system entirely relies on their work rate. The BDA should look for suitable replacements for those affected.’

He said last summer’s LDC conference requested clarification on seniority payments and passed the following motion. ‘This conference demands that contributions should remain available, returned to contributors and not merged into general payments.’

He said the GDPC should take note of the conference’s over-whelming support for the motion.

Peter Ward, chief executive of the BDA, said: ‘The proposed changes address a number of issues. The BDA is concerned about several of the proposed changes, including seniority payments, and the short timeframe stipulated for responses to them.

‘An urgent meeting is being sought with the DH to address these concerns.’

Derek Watson, from the Dental Practitioners Association, also addressed the issue. He said: ‘Seniority payments were a contrivance, which rewarded dentists by giving them their own top-sliced money back in the latter stage of their careers.

‘PCTs have no intention of replacing this scheme and dentists’ contributions are being stolen by the DH.

‘This will encourage experienced dentists to leave the NHS. The money must be refunded.

‘We have no evidence that PCTs are setting up quality assurance schemes in any meaningful way or doing anything to replace the seniority element.’

The PDS statement of financial entitlements, which will follow the same financial arrangement as being published in due courses.

The final version on the proposed GDS SFE will be published on the DH’s website in December. Comments are welcome until the end of October.

Showcase beats all records

More than 500 exhibitors demonstrated their wares during the BDTRA Dental Showcase at ExCel earlier this month, attended by 3000 visitors. Cutting-edge technologies and innovations were complemented by lectures and seminars.

Visitors packed out the world premiere of Smile-on and Dental Protection (DP) innovative series, Communications in Dentistry – stories from the practice. Along with Smile-on founder, Noam Tamir, Stephen Hancock demonstrated through the soap opera style DVD, the essentials of good communication for the dental team. These include willingness to listen, talking to rather than at, eye contact, taking time and having an open-minded attitude.

Kevin Lewis of DP, who introduced proceedings, said: ‘Effective teams are developed through clear communication. Its only by setting clear goals, efficient leadership and problem-solving skills that team-work succeeds.’

Clearstep, which focuses on clear positioning, launched its new orthodontic systems. MD, Alastair McCance, said: ‘Our orthodontists are designed to treat any malocclusion, from mild to severe, with minimal discomfort.’

PracticeWorks launched its new Kodak R4 version 111, with functions including automatic software updates and virus protection with a hosted service, a comprehensive appointment diary, online booking for patients and a new report manager, which almost instantly locates relevant data. There is also simplified credit-card processing, a detailed clinical notes section and an SMS text message reply service for patients.

Neil Sanderson, from PracticeWorks, said: ‘The B4 111 offers complete freedom to prac-tise from the burden of IT system management.’

Dental Design launched its interactive e-touch system, for patient information and education about products, fees and treatments at the touch of a screen, complemented by animated images. Dr Chris Potts, BDHF president, said: ‘When I first saw it, I was blown away with its potential. As an educational tool, the e-touch is unparalleled.’

Pioneering dental plan scheme, Denplan, launched its brand-new online Essentials Direct scheme. Patients who visit finds a Dentist page – used by nine thousand patients monthly, can sign up there and then.

Denplan has also launched, Membership Plan, to encourage loyalty among ‘fee for item’ patients and secure some regular income for dentists.

Denplan has more than 6,500 member dentists nationwide and 1.8 million registered patients.

Modern dentistry needs time, says BDA

The British Dental Association (BDA) has told the Government that dentists must be given the time to provide patients with top quality modern dentistry. BDA executive chairman, Susie Sanderson, wrote to health minister, Ann Keen, urging the Department of Health (DH) to undertake an exercise on timing, following the Health Committee’s (HC) critical report on the Government’s reorganisation of NHS dentistry.

Ms Sanderson said: ‘This exercise must consider the time required to deliver a genuinely personalised service in line with the four pillars of the Next Stage Review and the time required to undertake treatment to the quality and standard that patients expect. Without this information, we believe it is impossible to develop a system to provide a sustainable future for NHS dentistry.’

Dr Sanderson’s letter accompanied the publication of the BDA’s detailed response to the July publication of the HC report. She continued: ‘The introduction of the new contract has led to confusion for dentists and patients and it is important that the HC report has made those problems a matter of public record.’

The BDA response reinforces criticism of the new target-driven contract and highlights the failure of the Government to meet its own success criteria, as set out in the DH report GDS Dentistry: Options for change. These included facilitating a more predictable system, improving access to care and improving patient access.

A BDA spokesman said: ‘Recent BDA negotiations with NHS employers over the salaried primary dental care contract provide an excellent example of open and transparent talks.’

The BDA also supports an urgent explanation from the DH of the apparent decline in the number of complex treatments since the new contract. It is committed to showing work on good practice in commissioning, launched at a special conference in April. In addition, it supports calls for review of items such as units of dental activity and treatment bands.

It has challenged the DH to publish a review of how services might develop over the next five years.

The BDA proposes the review should address future service provision and how far NHS dentistry should offer ‘the growing number of treatments which do not address clinical ill-health but are concerned with improving quality of life.’