

# Myth buster and General Q&As for Commissioners and Contractors - £50m additional investment

## Background

NHS England will be making available an additional £50m of non-recurrent funding for NHS Dental care provision for the remainder of 2021/22. This funding is available within this contractual year only and cannot be accrued into 2022/2023 contract year. This is being commissioned on a sessional basis with a national tariff payment of £654 per 3.5-hour session. This figure reflects the requirements for a rapid response on the part of contractors to mobilise additional sessions.

We're very grateful to the practices who have already come forward to offer their services. Many of you have sent in questions around eligibility for this funding. We've put together this myth buster, which we hope clears up any confusion for the dental profession and encourages anybody eligible to take this important opportunity on behalf of patients.

### ***Myth 1: "Contractors who have not already expressed an interest are now unable to access this funding"***

**In fact:** Whilst NHS England sought initial expressions of interest from regions by 31<sup>st</sup> January 2022, this was not a final deadline. The offer will remain open until the end of March 2022, so contractors who are interested are strongly urged to continue to come forward so long as any additional sessions can be delivered before the 31<sup>st</sup> March 2022.

### ***Myth 2: "All additional sessions must take place out of hours"***

**In fact:** Sessions must be delivered outside of contracted hours, not opening hours. Whilst it is likely that most of these additional sessions will be delivered out of hours, delivering in hours care may be funded under these arrangements where a contractor can demonstrate the sessions are delivering additional NHS care over and above their contracted hours. If you think this may apply to you, please speak to your commissioning team.

### ***Myth 3: "All additional sessions must be delivered in one 3 ½ hour block"***

**In fact:** Contractors are able to split sessions, subject to patient demand and by mutual agreement with their local commissioner. This means a 3 ½ hour session could take place over multiple days. This will need to be clearly documented within the national contract variation notice.

### ***Myth 4: "I have to commit to new sessions every week until the end of March"***

**In fact:** There is no commitment needed to do ongoing sessions through to the end of the year. If you can deliver even one or two weekend or evening sessions this will go a long way. Please speak to your commissioning team to discuss options which may work for you.

### ***Myth 5: "Once a patient is out of pain they cannot come back during one of the newly funded sessions"***

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**In fact:** The initial appointment will be classed as an examination of urgent need and treatment requirements, with an average of 4 to 6 patients per session, this gives sufficient appointment time for more than advice and/or dressings.

Clinical restoration/stabilisation will follow this assessment, this can be provided within this or another session funded under the same arrangements, and as a sole course of treatment or in line with The Avoidance of Doubt- Phased Courses of Treatment, published ([here](#)) on 8<sup>th</sup> July 2021.

Where a patient requires care to continue beyond 31<sup>st</sup> March contractors can then claim UDAs in the usual way in the new financial year.

### ***Myth 6: "I have to already be delivering 85% to be eligible for this funding"***

**In fact:** It is important that this activity is able to be delivered in addition to your existing NHS funded activity, and so commissioners may discuss with you how the delivery of additional sessions will impact on your ability to achieve 85% by the end of the quarter.

If you are unsure if you will reach 85% and are still interested in this opportunity, please speak to your commissioner who would be happy to discuss this with you.

### ***Myth 7: "These sessions are being funded through clawback from poorly performing practices"***

**In fact:** No. These sessions are being funded through NHS England making a non-recurrent investment of an additional £50m in NHS dentistry.

### ***Myth 9: "Foundation Dentists may not undertake additional sessions associated with the £50m investment."***

**In fact:** Both NHS England and Health Education England are supportive of Foundation Dentists (FD) involvement in this initiative, but certain criteria will apply in order to prioritise training and ensure wellbeing of trainees:

1. The FD voluntarily agrees to provide additional sessions.
2. The sessions (1 session is 3.5 hours) should be limited in number, 4-6 sessions a month ensuring at least 1 weekend free a fortnight.
3. There should be appropriate named support available on site to the FD during the clinical sessions, ideally the Educational Supervisor (ES) but may be an experienced dentists who has agreed to support the FD.
4. The trainee must have received an outcome 1 at Interim RCP (outcomes available by the end of February 2022).
5. The trainee must have support of their ES and TPD to undertake sessions.
6. The request needs approval of the local HEE Dental Dean or nominated deputy.
7. Clinical activity undertaken in the additional session(s) can be recorded on the FD portfolio. The activity will, however, be outside of the expected 1875 UDA activity of an FD.

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8. The FD should inform their indemnifier prior to undertaking additional sessions to ensure their indemnifier is aware of 'out of training' clinical activity and may be required to pay an additional fee.
9. Remuneration - FD are to receive a fee per session, to be agreed between the FD and the NHS contract holder.
10. HEE will be developing a national template for trainees to complete to ensure appropriate agreement to the additional sessions as per the contract and educational agreement.

### **General Q&As for Commissioners and Contractors**

#### ***Commissioners***

#### **National Reporting**

Regions will be expected to complete a weekly return covering commissioned capacity for the national team, between now and the end of March 2022. Submissions will need to be made before 4pm on Mondays and the national team will share the data with teams on Tuesday mornings.

#### **Support offer for Regions from the NHSBSA**

To support the administrative work relating to additional funding, NHSBSA will provide support to Regional Teams and this will cover:

- Completion of contract variation notices, general administration, including production of the notice and ensuring both parties' co-sign;
- Completion of additional service line, payment, and any adjustments on Compass.

This will be a joint effort by the operational and provider assurance team within the NHSBSA, who will prioritise this work on our behalf.

The instruction from Regional Teams will cover the agreed commissioning intentions, to enable individual variations to be produced and issued on your behalf. NHSBSA will use the nationally produced contract variation notice and incorporate all of the required contractual information and co-ordinate signing of the documentation.

If Regions require this support, please complete and submit the required template to [nhsbsa.dentalcases@nhs.net](mailto:nhsbsa.dentalcases@nhs.net) with the subject heading of "Additional investment for NHS dentistry" along with the name of your region.

#### **When is the closing date for expressions of interest in undertaking additional sessions?**

Commissioners are open to new expressions of interest from contractors up until [add date]. Commissioners are encouraged to remind contractors of this additional funding at regular intervals between now and the end of March to maximise uptake.

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### **Which contractors are eligible for this funding?**

Whilst regions sought initial expressions of interest from regions by 31<sup>st</sup> January 2022, this was to understand the likely level of spend. Contractors can continue to express an interest in accessing this funding until [add date] and so long as any additional sessions can be delivered before the 31<sup>st</sup> March 2022

CDS contractors are also eligible for funding to deliver additional sessions over and above those already contracted for or to fund additional capacity within contracted hours.

### **Contractors**

#### **Eligibility criteria**

If contractors are interested in delivering additional capacity, please have a conversation with your local commissioning team to discuss whether your ability to take on new sessions is likely to impact on your normal NHS capacity and delivery. You do not need to have already delivered 85% in January in order to deliver new sessions.

#### **Requirement around submitting FP17s and indicating the flexible commissioning indicator**

Contractors participating in the initiative are expected to submit FP17 forms with a 48-hour period and ensure the flexible commissioning indicator is ticked on the non-clinical data set.

Once contractors have been identified, NHSBSA will then undertake generic and targeted comms around completing FP17s within the time period and ensuring FP17s are completed in full (in particular the FC indicator). This will support timely and good quality data.

#### **Pensionable pay**

The additional funding will be added as a Service Line on Compass and will contribute to the Total Contract Value. The pensionable ceiling will therefore be increased by 43.9% of the additional funding.

Any additional earnings for Providers and/or Performers can be entered during the ARR Process, which is carried out between 1 April and 30 June 2022, with any additional pension contributions to be deducted when the ARR is processed is complete, usually in June (the July pay statement).

#### **Patient charges**

There is no change to the three standard dental charges patient may pay for the NHS treatment if you see and treat a charge payer.

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- **Band 1 course of treatment – £23.80** This covers an examination, diagnosis (including [X-rays](#)), advice on how to prevent future problems, a scale and polish if clinically needed, and preventative care such as the application of [fluoride](#) varnish or fissure sealant if appropriate.
- **Band 2 course of treatment – £65.20** This covers everything listed in Band 1 above, plus any further treatment such as fillings, [root canal work](#) or removal of teeth but not more complex items covered by Band 3.
- **Band 3 course of treatment – £282.80** This covers everything listed in Bands 1 and 2 above, plus crowns, [dentures](#), bridges and other laboratory work.

### **Can these sessions include emergency appointments for our regular patients, or do they have to be new patients only?**

The sessions can be for any (regular or new) patients requiring urgent treatment and fitting the criteria for unscheduled care and stabilisation.