

Mr Robin Swann MLA Minister Department of Health Castle Buildings Stormont Belfast Northern Ireland BT4 3SQ

### Re. Collapse in Health Service Dental earnings

Dear Minister

We write to express our utmost concern following the publication of latest Dental Earnings and Expenses Estimates for 2019/20<sup>1</sup>. These reveal a further 4.2% decrease in average taxable income for all GDPs in Northern Ireland compared with the previous year.

The Report clearly shows how financially unviable Health Service dentistry has become. Quoting directly from the report, 'the lowest combined taxable income from Health Service and Private dentistry for all dentists, of £51,500, was reported for those dentists whose Health Service earnings accounted for at least 75% of their total gross earnings'.

This translates into a new low average £49,700 annual taxable income for Associate dentists, compared with an average £94,500 for those Associates with just 25% or less earnings from Health Service dentistry. In addition, female Associates who comprise the majority of the dental workforce have the lowest average taxable income of £48,900.

2019/20 figures follow a steep downward trajectory in dentists' pay recorded over the past 11 years, equating to a considerable real-terms pay cut of 36% for Associate dentists since 2008/09, and by 43% for practice owners over the same period.

While dentists across the UK have experienced sustained cuts to their incomes, practitioners in Northern Ireland have seen their pay eroded by the largest proportion. In addition, these latest published figures largely pre-date the further impact that COVID-19 has had on general dental services and practice finances. Combined, they underline the extremely precarious state of GDS. To summarise, the more NHS care dentists provide on behalf of the DOH, the less they earn.

<sup>&</sup>lt;sup>1</sup> NHS Digital Dental Earnings and Expenses Estimates 2019/20, 19 August 2021



In these days of graduating with significant debt, it is understandable that new graduates are increasingly reluctant to commit to providing low-paid NHS care and this is translating to vacancies in largely NHS practices.

The stark fall in dentists' pay follows successive years of wholly inadequate fee pay uplifts, and cuts in the form of the removal of approximately £6.5m per annum in Health Service Commitment payments. BDA has been warning your department for years that Health Service dentistry is fast becoming financially unsustainable under the current GDS remuneration model. Health service dentistry is not financially viable in its own right, therefore the service is at severe risk of complete collapse.

It is hardly surprising then, that many practice owners are finding it almost impossible to recruit Associate dentists to provide Health Service dentistry. Added to the inflexibility offered by the Financial Support Scheme (FSS) to accommodate new entrants, and the disincentives in place acting against dentists from growing Health Service lists, the fact that DoH will be re-introducing a 15% abatement to FSS3 payments from 8 September which is likely to translate into a further pay cut, many dentists are seriously questioning whether they can afford to continue to provide Health Service dentistry.

These latest earnings figures MUST serve as a wake-up call. Already, we see the difficulties patients have in being able to access NHS dental services. That situation will only be compounded many times over if dentists continue to see little hope that their decades-old contract model will be replaced with something that works both for practitioners, and the public alike.

Over the past 15 months, BDA has sought to work constructively with you as Minister, and with your officials in providing collective leadership to try to avoid a complete collapse of Health Service dentistry in the GDS. While we recognise the short-term supports provided, including FSS and ventilation funding, we stress that without a fundamental shift of trajectory away from a race to the bottom, Health Service dentistry will not survive. We have reached a point where the majority of NHS committed dental professionals are feeling utterly demoralised, burned-out, and concerned for the future.

Those same practitioners who volunteered to work in Urgent Dental Care Centres at the start of the pandemic have been working harder than ever under incredibly challenging conditions due to more stringent Infection Prevention Control (IPC) measures, hamstrung in the number of patients they can see in a day. And, in addition to trying to address their own patient backlog, as a condition of FSS support they continue to be compelled to treat unregistered patients, and to be on-call to provide emergency cover at weekends and holiday periods.



With no end in sight from being on-call every weekend/holiday period in the absence of Emergency out of hours cover being reinstated (despite input from LDCs about how these services should be reinstated) our dental teams are now also being subjected to new levels of abuse. They have to perform complex dentistry with the constraints and exhaustion of wearing enhanced PPE and all the while knowing how far Health Service pay has been eroded and continues to be eroded. It is no surprise that GDP morale has dropped to just 4% 'high' or 'very high' according to the latest BDA survey and this was before the 15% FSS3 pay-cut was applied.

Our grim assessment is that the conditions pertaining to the provision of Health Service dentistry in Northern Ireland have reached a point where many dentists feel like they are being pushed out of being able to continue to offer care under the NHS. As small businesses and self-employed practitioners, goodwill, the bond with their patients and cross-subsidisation of NHS by private dentistry is no longer enough to make up for years of inaction by the department to heed the warnings. Enough is enough.

Without an end game in sight on the seemingly indefinite shouldering of what was hitherto HSCB responsibilities towards unregistered patients and providing emergency out of hours cover, those factors alone could precipitate withdrawal from NHS provision. Add to this for associates, the prospect of a 15% pay cut to their FSS payments, you are likely to be looking at the final straw that causes them to consider withdrawing from a system that has failed to reward their hard work, skill and dedication. They will be forced to consider alternative private income streams that provide more meaningful reward and recognition. Practice owners are increasingly fed-up at trying to justify the unjustifiable, with one part of their business having to subsidise the department's failure to keep up with current costs to provide care.

Ultimately, it will be for individual practitioners to make the tough decisions that they need to at this time, but it is with regret for the swathes of our population who need it the most, that we are seeing an increase in those concluding there is no future for them continuing to provide Health Service dentistry.

The collapse in dental earnings and morale means that the work of the recently established GDS Rebuilding Stakeholder Group needs to take on utmost urgency. The Department needs to be honest with the profession and the public about where the service is heading, what resources will be put on the table, and if GDS can be transformed to be sufficiently attractive to enable business planning to be undertaken, and talented professionals retained to provide NHS dental care.

As the recognised Trade Union, and with the express backing of each of the LDCs in Northern Ireland and almost 500 signatures to this letter received from grassroots dentists, we cannot express in any stronger terms the dire situation facing dentistry in Northern Ireland. Together, we



urge your Department to face up to the crisis in dentistry and prioritise coming forward with meaningful solutions to the serious issues we have raised in our letter.

We would welcome an urgent meeting with you to discuss these issues further.

Yours sincerely

Richard Graham

Chair, NI Dental Practice Committee

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