

Thursday, 29 April 2021

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

Re. Dental administration in DoH/HSCB Bill

Dear Minister

In the context of the HSCB Bill and the significant implications likely to flow from this, we wish to engage with you constructively on how dentistry will be administered within DoH.

Over a number of years, we have become increasingly concerned at the severe lack of resource dedicated to administering dentistry within your department, and in particular to undertake the strategic planning work that is now so essential. We refer to the office of CDO -which is currently being filled by an acting CDO and with no deputy CDOs in post -and also to the number of whole-time equivalent personnel dedicated to dentistry within GDOS.

Furthermore, the removal of CDO from the DoH Management Board, and a lack of connect between Oral Health policy and wider departmental policy priorities has downgraded dentistry's place within DoH over recent years, and the ability to contribute in partnership towards improved health outcomes.

We the Chairs of BDA NI committees - NI Council; Northern Ireland Dental Practice Committee (NIDPC); Northern Ireland Salaried Dentists Committee (NISDC); and NI Hospitals Group -strongly believe that this Bill, and in particular the new arrangements that will follow offers a unique opportunity to overhaul how dentistry/oral health services are administered by your department, at precisely the time when this is needed more than ever to be able to plan for the future oral health provision of the population.

As you are aware, the challenges facing dentistry now, and in the years ahead are unprecedented in the aftermath of a pandemic that has had such a profound impact on how dentistry can be carried out:

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- Work to produce a new prevention-oriented GDS contract is critical since the pandemic has made a return to the current GDS contract based on high volume, low margin unworkable;
- A revised Oral Health strategy/policy framework that can underpin and guide oral health provision in an integrated and outcomes-based way, to replace the 2007 Oral Health Strategy, and connect oral health with wider health is long overdue;
- CDS and Hospital dental services need to be rebuilt, with the long-awaited CDS Workforce Review to be taken forward;
- A much stronger emphasis on prevention has taken on increased urgency in preparation for the phase-out of dental amalgam by 2030 by the EU;
- Maintaining day to day delivery of dental services, at the same time as the essential strategic work is being carried out.

It would be remiss of BDA not to thank you for your helpful interventions in signing-off on much needed support for the GDS over the past year. We also wish to pay tribute to the work of key officials within your department -namely the collaboration shown by your acting Chief Dental Officer Michael Donaldson -and by Michael O'Neill in GDOS, in combination with their HSCB colleagues and with significant input from BDA in trying to achieve a degree of stability particularly in GDS over recent months.

However, for the reasons already stated, it is clear dentistry needs to be in a position to look forward in a strategic way beyond short-term stop-gap arrangements. Having properly resourced, fit-for-purpose administrative arrangements, and a roadmap in the shape of a new oral health policy is a prerequisite to being able to move forward.

We want to see dentistry become more outward facing and better integrated within your department, able to successfully input into shared outcomes. We want to see the role of CDO have a similar standing to that of CNO or CPO; ultimately, we want to see structures created that can deliver a *fully functioning oral health system* in Northern Ireland, reflecting the combined role of all dental services working together.

It is in the spirit of wishing to make progress that we share our recent submission to the Health Committee's call for evidence on the Health and Social Care Bill, specifically our recommendations for the creation of a new Dental Unit within DoH, headed up by the aCDO, who would report directly to the Permanent Secretary and have a seat at the top Management Board.

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Finally, we believe there is strong synergy between BDA and officials who are most closely involved with dental administration of the reforms that are needed to be taken forward within dentistry at this time.

It is on this considered basis then that we formally request the opportunity to meet with you to discuss how we can move dentistry forward together. We very much hope your office can liaise with us to arrange a suitable meeting date at your earliest convenience.

Yours sincerely

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Caroline Lappin Chair, NI Council

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Grainne Quinn Chair, NI Salaried Dentists Committee

Gerry McKenna Chair, BDA Hospitals Group, NI Division

Richard Graham

Chair, NI Dental Practice Committee

Encs. BDA Northern Ireland submission to Health Committee on Health and Social Care Bill

Cc: Mark Ovens, Special Advisor Michael Donaldson, acting Chief Dental Officer

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