

Urgent action needed to reform NHS dentistry contracts

Urgent action is needed to reform NHS dentistry contracts and improve patient access, according to Lord Darzi's independent report on the state of the NHS in England.

The report found that access to dental treatment was severely impacted by the pandemic and has still not recovered. Although there are enough dentists in England, too few of them are willing to carry out NHS work, which has resulted in the poorest people in society being underserved.

Just 40% of NHS dental practices are accepting new adult registrations, and only 30% are accepting new child registrations. Regional variations in the availability of NHS dentists mean that access to dentistry is severely limited in rural and coastal communities, where there are fewer than 46 dentists per

100,000 people, compared to over 60 in areas such as London.

The report was commissioned in July 2024 by the Department of Health and Social Care, which asked Lord Darzi to carry out a rapid investigation of patient access, quality of care and overall NHS performance.

Lord Darzi concluded that a reformed dental contract is urgently required if dentistry is to continue to be provided as a core NHS service. The contract must balance treatment and prevention of dental health problems. It must be attractive to dentists, and it must reward those who work in poorly served parts of England.

The report also revealed that NHS budgets are not being spent where they should be, with too great a

share being spent in hospitals and too little on community services, including dentistry.

According to the British Dental Association (BDA), the report findings echo recommendations that have already been made by parliamentary committees, think tanks and the dental profession itself.

In September 2024, the Government had begun talks to reform dentistry contracts. However, the BDA has warned that reform cannot succeed without new investment, and underspend in the dental budget must be ringfenced and used to keep dental practices sustainable while they are waiting for reforms to be implemented.

Read more about the report at: <https://tinyurl.com/2usfnp34> and <https://tinyurl.com/mxhyu4km>



New prescribing exemptions for dental therapists and hygienists

The NHS has published guidance to help dental practices make use of new prescribing exemptions for dental therapists and hygienists. The exemptions, which were introduced in June 2024 under the terms of amendments to the Human Medicines Regulations 2012, enable suitably trained dental therapists and hygienists to administer or supply certain prescription-only medicines without a patient-specific direction (PSD) or a patient group direction (PGD). A PSD is a written instruction to administer a medicine to patients who have been individually assessed by a dentist. A PGD is a set of instructions drafted by a multi-disciplinary group to help dental hygienists and dental therapists supply or administer

medicines to patients in planned circumstances.

The exemptions apply across the UK and can be used both by NHS contractors and private practices. According to the NHS guidance, practices may wish to consider using them if they can identify potential benefits for patient care or clinical efficiency, for example if the use of PSDs is significantly delaying patient care.

Before administering medicines under the terms of the exemptions, therapists and hygienists are strongly recommended to have training that complies with a curriculum developed by NHS England, the Department of Health

and Social Care, the British Society of Dental Hygiene & Therapy and The British Association of Dental Therapists. Training courses are currently being created by NHS England and Health Education and Improvement Wales.

Therapists and hygienists making use of the exemptions are required to work within their competence and may require in-practice support in addition to their training. Practices must also ensure that they have adequate indemnity arrangements in place.

Read more about the exemptions at: <https://tinyurl.com/4kytx355> and <https://tinyurl.com/2s3wpsza>

Toolkit to help doctors tackle climate change

The Royal College of Physicians (RCP) has published a toolkit to help doctors make their practice more sustainable and mitigate the impact of climate change on their patients' health and wellbeing.

The Green Physician Toolkit is split into four separate tools. The first explains the link between climate change and health in the UK. The second suggests high-level actions that doctors can take to support the sustainability of their practice, such as reducing unnecessary prescriptions, switching from intravenous to oral antibiotics to reduce waste, and limiting travel. The third and fourth provide case studies and list resources respectively.

The RCP recognises that prioritising sustainability can be challenging at a time when there is very high demand for clinical care. However, the RCP believes that reducing climate change and its impact on health will reduce pressure on the NHS in the long term. The toolkit is intended to support doctors to make

small changes that can make a difference in the short and long term.

According to the toolkit, doctors are uniquely placed to discuss threats to public health, such as the extreme temperatures and air pollution caused by climate change. Certain patient groups are particularly vulnerable to these threats. This includes, for example, elderly people and those with long-term health conditions.

NHS England has pledged to reduce the NHS Carbon Footprint (the emissions it controls directly) to net zero by 2040. The NHS is responsible for 4% of total emissions in the UK and for 40% of public sector emissions.

Read more about this story at: <https://tinyurl.com/5avbdt3c>



In brief...

Blood pressure checks at dentists and opticians

NHS England is trialling blood pressure checks at dentist and optometry appointments to identify people who are at hidden risk of stroke or heart attack. The trial will focus on patients who may otherwise not have interactions with NHS services, and therefore are less likely to have had blood pressure checks. Overall, 60 clinical practices across England will take part in the trial, which is expected to deliver more than 100,000 blood pressure checks over 12 months.

Read more about the trial at: <https://tinyurl.com/34zjneza>

Underpayment issue costs practices tens of thousands of pounds

GP practices across the UK have lost tens of thousands of pounds due to a data discrepancy that resulted in underpayment for patients in care homes. This is according to the Institute of General Practice Management (IGPM), which revealed that 70% of its members have been impacted by the discrepancy. As a result, the IGPM has urged integrated care boards to work with practices to determine how much funding is owed and for it to be paid as soon as possible. It has also called for integrated care boards to ensure that systems are in place to identify discrepancies in practice income going forward.

Read more about the discrepancy at: <https://tinyurl.com/3fxt2e6u>

Dental technicians could cease to exist by 2055

Industry experts have warned that an ongoing fall in the number of dental technicians will lead to longer wait times, reduced quality of care and increased costs for patients. Overall, the number of dental technicians fell by 34% between 2008 and 2024. Furthermore, if the current rate of decline continues, there will be no technicians working in the UK by 2055. Low pay, increased regulatory pressures, a lack of recognition and a fall in new students have all contributed to the decline in the number of dental technicians.

Read more about the decline at: <https://tinyurl.com/ykdt83ye>

Pharmacies forced to close due to contract delays

More community pharmacies are being forced to close due to a six-month delay in agreeing the community pharmacy contract. This means that core funding has not been uplifted since 2019. Pharmacies have warned that ongoing delays in contract negotiations are making it impossible to plan and develop their business, while funding shortages mean they cannot pay enough to retain staff. Many pharmacies are also delivering unpaid care for non-commissioned services due to pressure on other parts of the NHS, which is contributing to funding challenges.

Read more about the delays at: <https://tinyurl.com/mvkc7esk>

Increase in cost of settling clinical negligence claims

The cost of settling clinical negligence claims through NHS Resolution reached £2.8 billion in 2023/24, up from £2.7 billion in 2022/23. The GP negligence claim bill increased by £9 million to £149 million. Legal experts have warned that the payout figures are unsustainable and called for the clinical negligence system to be reformed so that more money can be spent on delivering NHS services.

Read more about the figures at: <https://tinyurl.com/ypt466yj>

Funding for pilot to increase clinical capacity

Primary care networks taking part in a new pilot scheme to accelerate the delivery of NHS England's long-term workforce plan will receive a 10% uplift in funding for more GP clinical staff. The pilot will investigate whether implementing the workforce plan helps address gaps in clinical capacity. Integrated care boards will provide additional funding for other interventions with the potential to increase capacity, such as automating routine processes to reduce admin. Funding will also be available to compensate practices for the intensive data collection that will be required to support the pilot.

Read more about the pilot at: <https://tinyurl.com/2s4vfkyj>



Only half of GP practices have enough staff

Only half of GP practice staff think their teams are sufficiently resourced, with a similar number saying they are likely to leave in the next five years.

A survey by healthcare advisory and training organisation Qualitas found that 49% of practice staff felt there were enough people in their teams to cope with current workloads. Just 52% could see themselves working at their current practice in five years' time. The survey of 173 GP practices received responses from workers in ten different roles, from practice managers, GPs and nurses, to admin and reception staff. Respondents

were asked questions on eight wellbeing themes: leadership and management, culture, staff morale, team, vision and strategy, engagement, continuous improvement, and roles.

While responses varied across roles, staff across the board expressed concerns about workload and requested additional staff. Almost all roles asked for improved rotas to account for absences and annual leave. Pay concerns were most prevalent in the categories of administration, reception and medical secretary, and nurse. In terms of leadership and management, 59% of respondents said that managers resolved negative staff behaviours, although over 82% felt supported and respected by their manager.

Managers had a higher score than average for longevity, with 66% saying they could see themselves working in the practice in five years' time, although 20% indicated a dissatisfaction with workload. Managers were more likely to feel proud to be part of their practice (95% compared to an overall average of 85%) and to say they enjoy working with the team (95% compared to 91%).

Partners (clinical and non-clinical) had the highest scores across all the areas of wellbeing, with practice nurses, paramedics and admin and reception staff among the groups that gave the lowest scores.

Read more from the survey here: <https://tinyurl.com/yjud3bpk>

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Majority of pharmacies struggling, with 16% set to close within a year

Almost two-thirds of community pharmacies in England are losing money, with 16% predicted to close within the year, according to a survey by Community Pharmacy England.

The survey involved more than 900 pharmacy owners representing over 6,100 pharmacy premises and 2,000 pharmacy team members. It found widespread uncertainty about the future, with 64% of pharmacies losing money and 34% reporting they were only just profitable. Staff costs were the biggest reason for cost increases, followed by the cost of medicines. Other issues driving up costs were regulatory and administrative burdens, medicine shortages and supply issues, poor infrastructure and technology, and patient care and safety concerns.

The findings paint a bleak picture, with 80% of pharmacy owners saying they were currently managing the threats to their business, but were not sure how long they would be able to do so. Although only 3% of owners said the threats to their

business were having such a serious impact that they would not survive another six months, 13% said they would not survive another year. Only 4% of owners described the threats to their business as 'manageable'. The impact on patients was significant, with over 40% of pharmacy owners saying the financial strain was limiting their ability to provide some advanced services. More than half (52%) of pharmacies reported that patients were being negatively affected and 18% said patients were severely impacted.

According to Community Pharmacy England, the results stemmed from years of funding cuts and spiralling costs and should sound alarm bells for the sector. It has called for more investment into the clinical future of community pharmacy, as well as a sustainable funding model and a plan to safeguard the pharmacy workforce. It has also urged a full review of the medicine supply market and short-term relief measures.

Read more about the survey here: <https://tinyurl.com/3zmm9x3m>