**NHS Payments to dentists in England 2020 - 2021**

# Executive Summary

NHS Payments to dentists in England, analysed by individual contract and main payment category. The main payment categories are baseline contract payments and trainee salaries and grants.

The data, which is published annually, is extracted from the NHS Business Services Authority (NHSBSA) Contract Management, Payments and Superannuation System (CoMPASS) and covers the period from 1 April 2020 to 31 March 2021. These are NHS payments and deductions made through the NHSBSA CoMPASS system to providers of NHS dental services in England. All contracts that received a payment are included in addition to contracts with activity in the period.

Some dentists provide both NHS and private dental services, the data provided here is for NHS dental services only, and no income from private dental services is included.

These payments exclude invoices raised by providers that were paid directly from other sources, for example by NHS England and NHS Improvement regional teams or Local Authority Public Health funding. As these payments are, in effect, the bulk of the NHS income (i.e. turnover) of providers, they do not therefore represent their profits as they take no account of the expenditure incurred in delivering services.

The data (rounded to the nearest £100,000) show the sum of Net NHS payments (Total Contractual Payments less the total Deductions) made in 2020/21 through the NHSBSA CoMPASS system was:

• £2,566 million across 8,818 Dental contracts, of which:

• £2,120 million was to 7,258 providers with a GDS contract.

• £446 million was to 1,560 providers with a PDS agreement.

The complete data table can be accessed at: <http://www.nhsbsa.nhs.uk/860.aspx>

**COVID-19 Impact**

On 25 March 2020 all routine dental services were stopped due to the covid pandemic.  Face to face dental services resumed from 8 June but changes to contractual requirements meant dentist were delivering much lower than usual levels of activity, driven by public health guidance to ensure patient and staff safety. NHS England and NHS Improvement continued to pay dental contractors their full contract value throughout 2020-21, provided contractual requirement were met.  In recognition that when surgeries were closed or delivering lower levels of activity dentists would not incur all their usual costs a reduction for variable costs will be made from contract values in 2021-22. As this report is cash based these variable cost deductions will be included in the 2021-22 report. Around 500 dental contractors acted as Urgent Dental Centres (UDC) and were not subject to any variable cost adjustment for the period 1 April – 7 June 2020 while acting as a UDC.  The significantly lower levels of activity have resulted in dental patient charges being much lower than in a normal year. This does not affect the contractual payment to the dentist as contract payments are not dependent on patient charge income.

**Contacts for queries**

Dental practices included within this report should use their usual payments contact for queries on the figures in the first instance. Exceptionally where queries remain unresolved please contact the NHSBSA helpdesk as follows:

Helpdesk telephone number: **0300 330 1348**

Email: nhsbsa.dentalservices@nhsbsa.nhs.uk

# Introduction

**Background and legal duty to publish**

Both NHS England and NHS Improvement and the NHSBSA are committed to the transparency agenda and consider the details of NHS payments to dentists to be in the public interest. Since December 2012, the NHSBSA published details of each baseline contract with associated activity data on a quarterly basis. The data is now presented in one annual publication with additional payments and deductions to provide a complete picture of payments under dental contracts in a format that is easy to compare.

**Data source**

The data is extracted from the NHSBSA CoMPASS system. This system was chosen over NHS England and NHS Improvement’s accounting system, Integrated Single Finance Environment (ISFE), for the following reasons:

• ease of production and a progression from the data that is already available;

• dental contractors will have had regular access to CoMPASS and so should be able to recognise and check the data if they so choose, without the need to involve support from professionals, such as their accountants;

• unlike ISFE data, the data does not contain accruals and other adjustments. Such adjustments would make reconciliation for the dental contractor difficult and probably necessitate additional involvement of their accountants, which would place unnecessary time and burden on those wishing to validate the figures; and

• in February 2015, the Health and Social Care Information Centre published NHS Payments to General Practice using data from the National Health Applications and Infrastructure Services (NHAIS) GP payments system, the equivalent of CoMPASS for GPs practices. The NHS in Scotland has also published practice-level data from its payments system.

**What the payments are for and how they are calculated**

The basis and calculation of payments to providers of NHS dental services are set out in the General Dental Services (GDS) Statement of Financial Entitlements (SFE) or the Personal Dental Services (PDS) SFE - which can be found at:

<https://www.gov.uk/government/publications/payments-nhs-commissioning-board-to-dental-providers>

A Provider is contracted to provide dental services and is responsible for delivering a set amount of activity for an amount of money. They may employ any number of Performers (dentists) to carrying out the dental work. The Provider can also be a Performer.

There are two types of contract:

* General Dental Services (GDS) contracts, nationally agreed with the British Dental Association (around 85 per cent of total contracts); and
* Personal Dental Services (PDS) agreements, locally negotiated (around 15 per cent):

These contracts provide two main services:

* dental services and
* orthodontic services.

Around 5% of contracts provided both types of service during the period.

Some contracts have NIL or 1 UDA - but a high contract value. This is because they may be providing other services – including, but not limited to:

* sedation services
* domiciliary
* out of hours/emergency dental services and
* minor oral surgery.

**Basis of data and relationship to other reports**

The report is cash-based per contract for NHS dental services, which incorporates patient charges offset against payments due. That data is extracted from the same system as the data provided in eDEN dashboards, which are available to both Commissioners and Dental Providers/Practice Managers. However, those reports only contain the baseline contract data and so do not provide the total cash payment for the contract. Further information on eDEN is available from the following link:

[www.nhsbsa.nhs.uk/access-our-data-products/eden](http://www.nhsbsa.nhs.uk/access-our-data-products/eden)

Eden data is extracted from the system at an earlier point in time than the data provided here. Regional teams can update the data after the eDEN data is extracted so there could be some differences between the data reported in eDEN and this data, although these will be minimal.

# Data Quality Statement

**Accuracy**

Contract data is entered into the NHSBSA CoMPASS system by NHS England and NHS Improvement regional teams and patient charge and activity data is updated by the NHSBSA from FP17 forms provided by dental contractors. At each month end, data is extracted by the NHSBSA from the CoMPASS system and regional teams and dental contractors are provided with monthly statements or reports to reconcile and verify the accuracy of the data.

There are some specialist services, such as community dental services, that are locally commissioned and are not processed centrally through NHSBSA CoMPASS. These payments are not included in this data and are a small proportion of dental services.

NHS dental practices included within this report should use the NHSBSA dental services help desk for any queries on the figures. As data should be reconciled and queried when monthly reports are received, discrepancies with this data should be exceptional.

Data excludes any accruals, prepayments and other accounting adjustments, for example an adjustment made for amounts earned in the current year and paid for in the following financial year. It, therefore, simply constitutes the payments made to a contractor. Figures in the publication are cash-based to the nearest pence and presented to the nearest pound. This facilitates consistency checks between different analyses of data, and avoids users introducing calculation error when deriving other statistics, such as percentage changes.

The NHSBSA seeks to minimise inaccuracies and the effect of missing and invalid data but responsibility for data accuracy lies with the organisations inputting the data i.e. NHS England and NHS Improvement regional teams. Methods are continually being updated to improve data quality.

Figures are an accurate summary of the data supplied and validated as described above. However, given the number of NHS dental contracts, it is constantly changing in composition. Also, due to the nature and timing of local data entry and checking processes, there will always remain some uncertainty about the true position of payments made at a granular level to individual NHS contractors.

The address provided is the address where most of the treatment under the NHS dental contract is performed. However, some contractors will provide services at a number of addresses. Occasionally a contract will not have a treatment address due to no submission of 2020/21 FP17 during the reporting period. However, there may be payments for these contracts during the year: for example, for the provision of emergency dental services, minor oral surgery or late submission of an FP17 from a previous period.

**Relevance**

It is in the public interest to understand the amounts that NHS dental contractors receive to operate and how these vary between contracts and across the country.

**Comparability and Coherence**

This annual series of NHS Payments to Dentists statistics, using data directly from NHSBSA CoMPASS, which has not been the subject of any amendments (e.g. for accruals, etc.). Baseline contract values are directly comparable with baseline contract values provided in eDEN dashboards. However, as the two sets of data are extracted from CoMPASS at different points in time, other data may vary slightly.

The data excludes the lowest level of detail for individual payment codes from the publication due to:

* commercial sensitivity between practices and how they operate; or
* where it is not in the public interest to have such a low level of detail of individual payment codes.

**Timeliness and punctuality**

The first publication of 2014/15 data was published on 27th May 2016.

The data will be published annually every September to cover the previous financial year, the 2019/20 publication was delayed until October due to pressures of covid-19.

**Performance cost and respondent burden**

The statistics are extracted from NHSBSA CoMPASS as part of its operational process and is a secondary use of the data. There is, therefore, no additional burden on NHS organisations or dental contractors to complete and return this data themselves.

**Confidentiality, Transparency and Security**

Published dental payments information is derived from the NHSBSA CoMPASS system. Users of this system for example, appropriate persons from NHS England and NHS Improvement regional teams can monitor their own payments information throughout the year. They also have access to reports which provide the same level of information as that which is published by the NHSBSA. Contractors also have access to CoMPASS, providing them with information on FP17s and various reports, along with monthly payment schedules, from which they can monitor their payments and activity.

# Headings and Descriptions

| **Section** | **Term** | **Description** |
| --- | --- | --- |
| Contract information | Region Code | Regional teams have direct commissioning responsibilities dental services, pharmacy and certain aspects of optical services, while some regional teams lead on specialised commissioning across England. A smaller number of regional teams carry out the direct commissioning of other services, such as military and prison health. Reporting by STP Name (Sustainability and Transformation Partnerships) ensures consistency with all other 2020/21 NHSBSA reports on dental activity. |
| Region Name  |
| STP Code |
| STP Name |
| Contract  | The contract number and tag identifies a contract using a 10 character number identifying the contract. A provider can have many contracts. |
| Full name or company name | Name of the provider or the name of the company that is responsible for the contract. The treatment address where the largest amount of activity was scheduled during the financial year. Where no treatment address is available, this is because no FP17 has been received during the year.  |
| Treatment Address |
| Treatment Postcode |
| Contract Start Date | Only includes a date for those contracts with a start date between 1 April 2020 and 31st March 2021. |
| Contract End Date | Only includes a date for those contracts with a contract end date between 1 April 2020 and 31st March 2021. |
| Contract Type Name | General Dental Services (GDS) or Personal Dental Services (PDS). |
| Activity  | Total Contracted UDA | The contracted units of general dental activity (UDA) to be achieved for the reporting period. |
| Total Contracted UOA | The contracted units of orthodontic dental activity (UOA) to be achieved for the reporting period. |
| Payments and AdjustmentsNote: As the amounts are rounded some payments or adjustments may be shown as Zero in this report.  | Baseline Payment | The monthly payment made under the contract. It will reflect any adjustments to the monthly baseline allocation. |
| AT Specific Items | Payments made in addition or deduction to the baseline payment. These will be time limited or non-recurrent items, which may not be included within the baseline total contract value such as emergency dental services, minor oral surgery and sedation services. |
| Performance Adjustments | Positive or negative payments made to reflect the actual performance of a contract. Where there has been an under performance, deductions will be made to reflect this. |
| Business Rates | Payments made for business rates re-imbursement in accordance with the statement of financial entitlement. See part 4 section 10 of the GDs or PDS SFE. |
| Trainee Salaries and Grants | Payments relating to vocational trainee costs and dentists who train vocational trainees as defined in the statement of financial entitlement. See part 4 section 7 of the GDS or PDS SFE. |
| Other Payments | Sickness, paternity, seniority pay as defined in the statement of financial entitlement. See part 4 sections 6 and 8 of the GDS or PDS SFE. |
| Total Contractual Payments | The sum of all payments due under the contract. |
| Deductions | Patient Charge Revenue | Using the information processed from FP17 forms, the NHSBSA calculates the amount of money that should have been collected from the patient by the dentist for treatments carried out. This calculated patient charge revenue is then deducted from the payments paid to the contract provider. |
| Deductionscontinued | Other Deductions | The NHSBSA CoMPASS system makes deductions for pensions, professional levies, clinical waste, etc. from the Total Contractual Payment and pays these amounts to the pension providers, suppliers and professional bodies on behalf of the dentist. These are all costs the dentist is responsible for paying, but it is more efficient to centrally ‘collect’ the money and make the payment where a dentist so chooses. Not all dentists will choose to make these payments centrally. |
| Net Payment to Dental Contract | This is the amount that is paid into the contractor’s bank account via the NHSBSA CoMPASS system; it is the Total Contractual Payments less the total Deductions. |
| Maximum Net pensionable earnings per contract | The maximum net pensionable earnings for each contract, calculated as 43.9% of the baseline payment. |
| Number of active dentists | The number of active performers operating at that contract. Active performers are defined as performers where the total FP17s or FP17Os for 2020/2021 submitted is greater than zero. |
| Maximum Net pensionable earnings per active dentist | Maximum Net pensionable earnings per contract / Number of active dentists. |