



Mr Michael O'Neill  
Head of General Dental & Ophthalmic Services  
Department of Health  
Castle Buildings  
Stormont Estate  
Belfast  
BT4 3SQ

9<sup>th</sup> December 2021

**Re. Statement of Dental Remuneration 2021/22**

Dear Michael

Thank you for your letter of 8<sup>th</sup> December inviting BDA to provide any additional information to be considered as part of the pay review process.

Comprehensive written evidence relating to this pay round was supplied to the Pay review body back in January of this year, as well as a subsequent oral submission which included strong representation of the pertinent issues relating to Northern Ireland.

Perhaps the most significant additional factor since we furnished our evidence is the passage of time since the 49<sup>th</sup> Report was issued in July, and the point at which the Executive is in a position to make an offer. Furthermore, we note the considerable delay in updating the SDR and awarding pay uplifts experienced last year, a point we made clear in our recent letter to both Minister for Health, and Minister of Finance.

The high rate of inflation means that even were the Minister to offer the 3% recommendation in full, by the time this is paid to practitioners in Northern Ireland - approaching a whole year later - any benefit will have been wiped out. This is a factor that ought to be taken into consideration in how DoH will calculate the expenses component of the uplift if this is to truly deliver a net increase in pay.

Of course, the unacceptable delays to the application of the DDRB uplift in Northern Ireland is something that the Review Body has itself noted in recent reports. Despite the earlier than usual setting of the Public Sector Pay Policy, and the Minister committing to try to expedite payments this year, once again the local dysfunctional budgetary process has ensured pay reviews are on track to be paid a whole year late, at odds with the situation in other parts of the UK. This is a national process that is highly predictable, it adopts similar timescales each year and should be accounted for.

Indeed, BDA is in the process of finalising our written evidence for next year's pay round while 21/22 still has not been implemented.

This situation of perpetual year-long delays simply must change, and perhaps a move to multi-annual budgets will permit this change. And, the pay uplift does not only impact GPs, but also dentists working in the community, hospital and other salaried services.

While timely payment of annual uplifts is intrinsic to the very integrity of the pay review process, the pressures in General Practice are such that this in itself is not going to be sufficient to safeguard the sustainability and financial viability of Health Service dentistry.

Only by a combination of incremental fixes to address historic deficiencies in dental remuneration, through initiatives we hope will be progressed via the GDS Rebuilding Stakeholder Group, combined with fundamental Contract reform, will be enough to start to rebuild the GDS in a way that makes the service financially viable in its own right for the benefit of the public and practitioners alike. This is very much where our focus lies over the coming months.

Yours sincerely



Tristen Kelso  
**BDA NI Director**