POLICY NOTE

THE NATIONAL HEALTH SERVICE (GENERAL DENTAL SERVICES) (SCOTLAND) AMENDMENT REGULATIONS 2019

SSI 2019/174

The above instrument was made in exercise of powers conferred by sections 2(5), 25(1), (2), (2A), 28A(4), 105(7), 106(a) of the National Health Service (Scotland) Act 1978(a) and all other powers enabling them to do so. This instrument is subject to negative resolution procedure.

These Regulations amend the National Health Service (General Dental Services) (Scotland) Regulations 2010. The purpose of the instrument is to introduce new arrangements for General Dental Practitioners (GDPs) that will allow them to become designated as dentists with enhanced skills in domiciliary care.

Policy Objective

The policy objective is to encourage GDPs to provide oral health domiciliary care, ensuring that we have additional resilience to meet the challenges of the older population group in the future.

At present there is an imbalance or inequality of provision between people who are able to attend surgery in person for oral health care and those that rely on a dentist to attend them in their place of residence. Many people lose connection with their dentist once they are unable to attend the surgery in person, so are less likely to receive routine dental care. Although many care homes provide daily oral hygiene to residents, this is not universally the case.

Since 2007 there has been a 36 per cent increase in the number of GDPs providing NHS dental care and treatment. The new arrangements will allow NHS Boards to consider expressions of interest from GDPs who wish to become designated as dentists with enhanced skills in domiciliary care. GDPs may be put forward by NHS Boards for a programme of training and mentoring, on the completion of which they are designated by their NHS Board and assigned to a care home or homes.

The new arrangements will mean that patients will receive more routine oral health domiciliary care than at present, will be seen more frequently, and in many cases will be seen by the same dentist ensuring better continuity of care. The new arrangements place an emphasis on routine anticipatory care, meaning that once in place there will be less recourse for the patient to be transferred to either a Public Dental Service facility and/or hospital dental services.

Early Adopter Scheme

These new arrangements are being introduced as a phased programme with ‘early adopters’ in the first instance. This comprises 33 GDPs as a testing opportunity for the training and mentoring programme. In the longer term we anticipate that around 10 per cent of the GDP workforce, around 300 GDPs, may become dentists with enhanced skills in domiciliary care.

Care Home Residents and People Care for at Home

The new arrangements will apply to care home residents initially. Once we have sufficient numbers of dentists with enhanced skills in domiciliary care, the arrangements will be expanded to include people who require oral health domiciliary care in their own homes.

Current Arrangements

The new arrangements will not preclude GDPs who do not pursue designation as a dentist with enhanced skills in domiciliary care from continuing to provide domiciliary care under the existing arrangements.

Patients may also continue to choose and retain their own dentist. Where a care home has been assigned a dentist with enhanced skills in domiciliary care, residents will have the choice to switch to the assigned dentist or to continue to see their previous dentist.

Consultation

The British Dental Association (Scotland) have been made aware of these Amendment Regulations.

Impact Assessment

An Equality Impact Assessment has been completed for these Amendment Regulations and is attached.

Financial Effects

The Minister for Public Health, Sport and Wellbeing confirms that no Business Regulatory Impact Assessment is necessary as this instrument has no financial effects on the Scottish Government, local government or on business.

Scottish Government
Directorate of Population Health
CDO & Dentistry Division
May 2019