

National Institute for Health Research Dental Contracting | 2013

About yourself

Male Female Age (yrs) Year you passed your dental qualification

1. With reference to the practice to which you were sent the questionnaire, which roles do you have? (*Tick all that apply*)

Provider/principal/partner (contract holder) Performer (involved in clinical work)
 Corporate business/ practice manager

This practice

2. Into what business category would this practice fall (*Tick one only*)?

Sole trader (practitioner) without associates Sole trader with associates
 Partnership without associates Partnership with associate
 Corporate with fewer than 5 practices Corporate with 5 or more practices

3. This practice and staff in this practice

Number of surgeries Number of dentists

Do you have any hygienists? Yes No
 Do you have any therapists? Yes No
 Do you have any dental nurses with extended duties? Yes No

4. NHS/Private mix: Based on patient numbers, roughly what % of your practice's work is NHS, what % is private:

% NHS % Private.....

If 100% private, roughly how many years is it since you've had an NHS contract?

Now please go to Question 6

5. Your NHS contract

Some practices just have one contract and one contract holder, others have a number of contracts and contract holders. Please detail your practice's NHS contract(s) in the practice below:

Type of contract holder (principal/ associate/ corporate)	Type of contract (GDS, PDS, PDS+, new contract, other)	Type of patient (e.g. everyone, child only, child and exempt only, ortho)	Price per UDA £

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6. How you feel about the PCT

Please complete this section if you have had experience in dealing with commissioners in the last 2 years, if not please go to Question 7

The following is a range of views of how dentists from our interviews feel about their PCT. Please tell us how you feel. *Note that **all** responses in this questionnaire are confidential.*

	Strongly disagree	1	2	3	4	5	Strongly agree
	1	2	3	4	5		
In the past the PCT have made decisions relating to my contract which I felt were unfair							
In the past particular people in the PCT have acted unfairly towards me							
The PCT have placed unreasonable demands on my practice in terms of meeting the contract							
I am aware that the PCT have been unfair to dental colleagues in other practices in the past							
The PCT have treated some practices more favourably than others in the past							
In the past the PCT have always followed proper procedures when dealing with my practice							
In the past I have often felt that the PCT weren't open with what they were really thinking with me							
In the past I have found certain PCT people difficult to talk to							
In the past the PCT have rarely listened to my view							
The PCT have usually told me of forthcoming changes that might impact my practice							
The PCT have usually given me explanations about the decisions they have made which impact my practice							
The PCT have previously misled me							
In the past the PCT have always been consistent in what they have said and how they have behaved to me							
In the past the PCT have made unfounded accusations regarding the practice							
I feel certain people in the PCT have lacked integrity							
I have found the PCT always dependable							
I feel that people I have dealt with in the PCT have tended to serve their own personal interests such as furthering career goals rather than being objective in negotiations with my practice							
I have usually felt that my interests were being looked after by the PCT in negotiations							
Sometimes I feel there is an ulterior motive in decisions by commissioners which is not communicated to me							
I am satisfied with my relationship with the PCT							
The level of PCT expertise in contract administration is excellent							
I feel that the PCT is restricted in what they can do because policy is dictated at a higher level							
Some people working for the PCT are better at their role than others							
I have no reason to think the PCT would treat me badly							
I feel contracts/PCT funding is often given to practices on the basis of perception created by frequent GDP visitors to the PCT not based on hard evidence such as practice statistics generated by NHSBSA							

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6. (continued) <u>How you feel about the PCT</u>	Strongly disagree	1	2	3	4	5	Strongly agree
I am familiar with the pattern of behaviour that the PCT has established and can rely on the PCT to act favourably towards the practice							
I assume the things the PCT tells me are right							
I am familiar with the pattern of behaviour that the PCT has established and can rely on the PCT to act favourably towards the practice							
The PCT can never be trusted to act properly							
I feel when PCTs are gone commissioners are likely to treat me fairly							
When I encounter difficult and new circumstances I don't feel worried or threatened by letting the PCT do what they want							
I am willing to share with commissioners information about my practice which I don't have to share, such as business financial information							

7. What is important to you

Our interviews showed that dentists vary in the way they view various aspects of dental practice. These are covered in the following statements. Please tick **how important each is to you**:

Not at all important 1 2 3 4 5 Essential

	1	2	3	4	5
That I feel proud with the service we provide as a practice is important to me					
Supporting practice staff going through personal difficulties is important to me					
Having a practice business plan is important to me					
Having harmonious relationships among practice staff is important to me					
I value the fact that I am responsible for how we provide care in the practice					
Having a happy atmosphere among staff in the practice is important to me					
Using opportunities to sell to the patient is important to me					
That we build the reputation of the practice in the local community is important to me					
Maintaining the business for the sake of providing secure employment for the practice staff is important to me					
It is important to look at the bigger picture of swings cancelling out roundabouts rather than assessing whether I can afford to undertake particular treatment for each patient					
It is important that staff (fellow dentists and others) I work with share the same work-related values as me					
Identifying new business opportunities for the practice is important to me					
That the practice keeps going so that my long-standing patients can keep coming here for care is important to me					
Retaining staff in the practice is important to me					
Receiving personal and professional support from practice staff is important to me					
That I provide an equally good standard of care whether working on NHS or private patients is important to me					
Getting recognition for providing good clinical care (awards for clinical excellence/additional funding) is important to me					

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7. (continued) What is important to you Please tick how important each is to you :	Not at all important	1	2	3	4	5	Essential
It is important that I discuss treatment options with patients so that they can decide what type of care they want							
It is important that each dentist in the practice is professionally responsible for the work they do on patients							
Thinking about financial implications for the practice when I advise patients of treatment options is important to me							
Considering implications about patient charges when I advise patients about treatment options is important to me							
That I put patients' interests higher than business considerations when I make surgery decisions about treatment bandings is important to me							
That patients I treat are satisfied with the care I give							
It is important that I am accountable to commissioners for the care I provide							
Reviewing our practice policies and procedures regularly is important to me							
Making treatment decisions dispassionately rather than for than being persuaded by how I feel about individual patients as people is important to me							
It is important that I consider that I am providing care as part of a publicly funded system rather than just thinking the particular patient in the chair at the time when treatment planning							
Expanding the practice as a business is important to me							
Building practice goodwill that eventually can be sold is important to me							
It is important to me to have a 'paper trail' of what procedures we follow in the practice e.g. relating to keeping requirements such as handling of patient complaints							
Statistics generated from payment schedules are important to give an overall picture of how care is provided in the practice							
Supporting practice staff going through professional difficulties is important to me							
Using public money for dentistry in the most cost-efficient way possible is important to me							
Feeling part of the NHS is important to me							
Expanding the practice as a business is important to me							
The branding of the practice is important to me							
Taking care of the demands rather than purely the needs of patients is important to me							
Searching for lowest cost materials is important to me							
Business aspects of the practice are important to me							
Positioning the practice in the market is important to me							
Being able to determine practice ethos and how we do things in the practice is important to me							
Reducing inequalities in oral health across the population in the area is important to me							
Adapting the business in a changing environment is important to me							
Having remuneration/ an hourly rate in line with my years of training/skills is important to me							
Identifying new business opportunities for the practice is important to me							
Reviewing our practice policies and procedures regularly is important to me							
Being highly regarded by other dentists practising locally is important to me							

8. Your day to day work

Our interviews showed that there were a number of grey areas in relation to chair-side decisions made interpreting NHS contracts. Dentists varied in how they approached these things. For each of the questions in section 8 please tell us how you have approached these areas and how you feel other GDPs act in these areas:

If you do not treat any NHS patients, for question 8 complete parts numbered in Red only

8.1.1 In the past 2 years, have you ever chosen not to take on an NHS patient because that patient would represent financial loss to your practice?

- Never Rarely Occasionally Often Routinely

8.1.2 If the contract arrangements were to stay the same, in the next 2 years how likely are you to not take on an NHS patient because that patient would represent financial loss?

- Never Rarely Occasionally Often Routinely

8.1.3 How often **do you think** NHS dentists/practices in England have not been able to take on an NHS patient because that patient represents financial loss?

- Never Rarely Occasionally Often Routinely

8.1.4 About what proportion of NHS dentists in England **do you think** might approve of not taking on an NHS patient because that patient represents financial loss to their practice?

- None Less than 10% About 20 - 50% 50-75% Almost all

8.2.1 How often in the past 2 years, have you restricted doing certain types of treatment such as root canal treatment because this would represent a financial loss?

- Never Rarely Occasionally Often Routinely

8.2.2 If the contract arrangements were to stay the same in the next 2 years how likely are you to restrict doing certain types of treatment?

- Never Rarely Occasionally Often Routinely

8.2.3 How often **do you think** NHS dentists/practices in England restrict doing certain types of treatment such as root canal treatment?

- Never Rarely Occasionally Often Routinely

8.2.4 About what proportion of NHS dentists in England **do you think** might approve of restricting doing these types of treatment?

- None Less than 10% About 20 - 50% 50-75% Almost all

8.3.1 How often in the last 5 years, have you undertaken more Band 3 treatments towards the end of the financial year?

- Never Rarely Occasionally Often Routinely

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8.3.2 If the contract arrangements were to stay the same, in the next 2 years, how likely are you to undertake more Band 3 treatments towards the end of the financial year?

- Never Rarely Occasionally Often Routinely

8.3.3 How often **do you think** NHS dentists/practices in England undertake more Band 3 treatments towards the end of the financial year?

- Never Rarely Occasionally Often Routinely

8.3.4 About what proportion of NHS dentists in England **do you think** might approve of undertaking more Band 3 treatments towards the end of the financial year?

- None Less than 10% About 20 - 50% 50-75% Almost all

8.4.1 How often in the last 5 years, have you stopped doing routine care for patients towards the end of the financial year?

- Never Rarely Occasionally Often Routinely

8.4.2 If the contract arrangements were to stay the same, in the next 2 years, how likely are you to stop doing routine care for patients towards the end of the financial year?

- Never Rarely Occasionally Often Routinely

8.4.3 How often in the last 5 years **do you think** NHS dentists/practices in England have stopped doing routine care for patients towards the end of the financial year?

- Never Rarely Occasionally Often Routinely

8.4.4 About what proportion of NHS dentists in England **do you think** might approve of stopping doing routine care for patients towards the end of the financial year?

- None Less than 10% About 20 - 50% 50-75% Almost all

8.5.1 How often in the last 2 years, have you undertaken some treatment as a Band 1 (urgent) rather than a Band 2 (filling) where the filling is small and you are concerned about fairness of patient charges?

- Never Rarely Occasionally Often Routinely

8.5.2 If the contract arrangements were to stay the same in the next 2 years, how likely are you to undertake some treatment as a Band 1 (urgent) rather than a Band 2 (filling) where the filling is small and you are concerned about fairness of patient charges?

- Never Rarely Occasionally Often Routinely

8.5.3 How often in the last 5 years **do you think** NHS dentists/practices in England have undertaken some treatment as a Band 1 rather than a Band 2 (filling) where the filling is small and they were concerned about fairness of patient charges?

- Never Rarely Occasionally Often Routinely

8.5.4 About what proportion of NHS dentists in England **do you think** might approve of undertaking some treatment as a Band 1 rather than a Band 2 (filling) where the filling is small and they are concerned about fairness of patient charges?

- None Less than 10% About 20 - 50% 50-75% Almost all

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8.6.1 How often in the last 5 years have your treatment decisions been swayed by whether the patient is exempt from NHS dental charges?

- Never Rarely Occasionally Often Routinely

8.6.2 If the contract arrangements were to stay the same, in the next 2 years, how likely are your treatment decisions to be swayed by whether the patient is exempt from NHS dental charges?

- Never Rarely Occasionally Often Routinely

8.6.3 How often in the last 5 years **do you think** the treatment decisions of NHS dentists in England have been swayed by whether the patient is exempt from NHS dental charges?

- Never Rarely Occasionally Often Routinely

8.6.4 About what proportion of NHS dentists in England **do you think** are swayed in their treatment decisions by whether the patient is exempt from NHS dental charges?

- None Less than 10% About 20 - 50% 50-75% Almost all

8.7.1 How often in the last 2 years have you been more influenced by what the NHS patient wants when setting a recall period, than in strictly following NICE guidelines?

- Never Rarely Occasionally Often Routinely

8.7.2 In the next 2 years, how likely are you to be more influenced by what the NHS patient wants when setting a recall period, than in strictly following NICE guidelines?

- Never Rarely Occasionally Often Routinely

8.7.3 How often in the last 2 years **do you think** NHS dentists in England have been more influenced by what the NHS patient wants when setting a recall period, than in strictly following NICE guidelines?

- Never Rarely Occasionally Often Routinely

8.7.4 About what proportion of other NHS dentists in England **do you think** might approve of being more influenced by what the NHS patient wants when setting a recall period, than in strictly following NICE guidelines?

- None Less than 10% About 20 - 50% 50-75% Almost all

9. Your actions in relation to the PCT

From our interviews we identified a range of ways dentists have acted in relation to their PCT. Please tell us how you have acted in **the last 5 years** in relation to the PCT

If you do not treat any NHS patients, complete this question if you had dealings with the PCT in the last 5 years, if not go to question 11

1 = Never 2= Rarely 3= Occasionally 4= Routinely

	1	2	3	4
Have you ever done a favour for the PCT?				
Have you ever challenged the legitimacy of the approach taken by the PCT in contract negotiations by taking or threatening legal action?				
Have you ever spoken out in a public meeting e.g. LDC to challenge a PCT policy?				
Have you ever worked together with the PCT to solve problems?				
Have you ever worked closely with the PCT?				

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How have you have acted in the last 5 years in relation to the PCT	1 = Never 2=Rarely 3= Occasionally 4= Routinely			
	1	2	3	4
Have you ever queried the competency of commissioners (verbally or in writing to commissioners) in relation to accuracy of information or knowledge about dental contracting?				
Have you ever been unhappy with a deal with PCT commissioners but agreed and tried to devise strategies to try to make things work at a practice level?				
Have you ever accused (verbally or in writing to commissioners) a particular person/people in the PCT of being unfair or incompetent?				
Have you ever decided to take action (such as moving to a partnership, into the private sector) to protect the practice against possible consequences from unfavourable PCT deals?				
Have you ever presented mitigating circumstances to the PCT hoping for leniency in contract negotiations?				
Have you ever decided to persist in arguing with the PCT to try to wear them down, e.g. approaching several different people in the PCT?				
Have you ever accepted without questioning and borne the consequences of an unfavourable deal with the PCT?				
Have you worked closely with the PCT in order to benefit yourself/the practice? (e.g. gaining access to tenders information, being considered for pilot schemes)				
Have you felt strongly about something but not raised a fuss for the sake of your longer term relationship with the PCT?				
Have you ever written to the dental press or online forums in support of PCT commissioners?				

10. Your likely actions relating to commissioners in the future

If your practice is 100% private please go to Question 11

In the **next two years** how likely are you to do the following?

Extremely unlikely 1 2 3 4 Very Likely

	1	2	3	4
To do a favour for commissioners				
To challenge the legitimacy of the approach taken by the commissioners in contract negotiations by taking or threatening legal action?				
To speak out in a public meeting e.g. LDC publicly to challenge a commissioning policy?				
To work together with commissioners to solve problems?				
To work closely with commissioners?				
To query the competency of commissioners (verbally or in writing to commissioners) in relation to accuracy of information or knowledge about dental contracting?				
To be unhappy with a deal with commissioners but agree and try to devise practice strategies to try to make it work?				
To accuse (verbally or in writing to commissioners) a particular commissioner/s of being unfair or incompetent?				
To take action (such as moving to a partnership, shifting or into the private sector) to protect the practice against possible consequences from unfavourable commissioner deals?				
To present mitigating circumstances to the commissioners hoping for leniency in contract negotiations?				

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In the next two years how likely are you to do the following?						
	Extremely unlikely	1	2	3	4	Very Likely
To persist in arguing with commissioners to try to wear them down?						
To accept without questioning and bear the consequences of an unfavourable deal with commissioners?						
To work closely with commissioners in order to benefit yourself/the practice (e.g. by gaining access to information about tenders, understanding PCT strategies, being considered for inclusion in pilot schemes)?						
To feel strongly about something but not raise a fuss for the sake of your longer term relationship with commissioners?						
To write to the dental press or online forums in support of commissioners?						

11. How the practice has been doing in recent years

This question is for NHS as well as 100% private practitioners

- Looking back over the last 5 years, how difficult have you found sustaining business profits from the practice recently? (**please tick one**)
 - It has been easier in recent years
 - There has been no change in how difficult this is
 - It has been a bit more difficult recently
 - It has been very difficult in recent years
- Have the number of staff (dentists or other staff) employed in the practice changed in the last 5 years?
 - Reduced significantly
 - Increased slightly
 - Unchanged
 - Reduced slightly
 - Increased significantly
- In the last 5 years has the practice ever had clawback?
 - Never
 - Once
 - More than once
 - Not applicable – no NHS contract
- In the last 2 years has the practice financial turnover changed?
 - Reduced significantly
 - Increased slightly
 - Unchanged
 - Reduced slightly
 - Increased significantly
- In the last 5 years has the NHS contract value of the business changed?
 - No
 - Reduced slightly
 - Increased slightly
 - Not applicable: no NHS contract
 - Reduced significantly
 - Increased significantly
- Have you ever tendered for an NHS dental contract?
 - Yes
 - No

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12. Your connections

Question 12 is for NHS and private practitioners, if 100% private please complete part a) only

a)

Have you ever been any of the following?	Yes	No
LDC committee member		
Dental Practice Advisor		
Member of a PCT Steering or Advisory Group		
BDA branch council member		
Foundation Trainer		
Member of GDPUK		
Member of the BDA		
Member of Faculty of General Dental Practitioners		
Member of specialist societies		
Member of a GDP association e.g. DPA		

b) If you had a difficult situation with your contract with the PCT how likely would you discuss this with the following?

Very unlikely 1 2 3 4 5 Very likely

	1	2	3	4	5
Chair of the LDC					
Members of the LDC					
Family members not involved professionally					
Online GDP forums					
Fellow practitioners who are friends					
Involved family members who have dental, legal or business backgrounds					
Dental defence organisation					
A solicitor					
Other: please state:					

c) In the last 6 months, how frequently have you:

0= None 1=Once 2=Twice 3=3-6 times 4=More than once a month

	0	1	2	3	4
Attended a dental meeting outside the practice apart from meetings with the PCT					
Had contact outside the practice in relation to professional issues not to do with your practice					
Discussed clinical issues with people outside the practice, apart from the PCT (include online forums, telephone or e mail conversations as well as face-to-face)					
Discussed practice management issues with people outside the practice, apart from the PCT (include online forums, telephone or e mail conversations as well as face-to-face)					
Discussed commissioning issues with people outside the practice, apart from the PCT (include online forums, telephone or e mail conversations as well as face-to-face)					

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If you have any additional comments you would like to make about dental contracts, please use the space below:

Many thanks for your time.

Please return the questionnaire in the Freepost (no stamp required) envelope provided or to:

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