

Your guide to allowances, payments and grants 2010/11

Figures are correct at time of press, and are subject to change (please refer to the current Statement of Dental Remuneration).

Select the allowance you require:

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COMMITMENT PAYMENT

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SEDATION PRACTICE ALLOWANCE

SENIORITY PAYMENT

VOCATIONAL TRAINING ALLOWANCE

ADOPTIVE LEAVE PAYMENT

Form:
GP226

Paid:
Weekly

Payment duration:
26 weeks

Maximum payment:
£1399.00 per week

Criteria:

- 1) Name included in dental list for at least 2 years; and
- 2) earnings of at least £27,800.00 in 2009/10.

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CLINICAL AUDIT ALLOWANCE

Form:
GP 217

Paid:
As appropriate

Payment duration:
Not applicable

Maximum payment:
£978.15
(£65.21 per hour)

Criteria:

- 1) Name on a dental list;
- 2) first project undertaken is one of not less than 5 hours; and
- 3) maximum amount applies over a 3 year period.

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COMMITMENT PAYMENT Automated payment

Form:
GP224
if part-time,
otherwise
no form

Paid:
Quarterly

Payment duration:
Not applicable

Maximum payment:
£1406.00 per quarter

Criteria:

- 1) Qualifying earnings of £27,800.00;
- 2) eligibility is determined prior to each quarter; and
- 3) paid to a separate list number of practitioner's choice.
For further information on eligibility see Determination IX of the Statement of Dental Remuneration

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CONTINUING PROFESSIONAL DEVELOPMENT ALLOWANCE

Form:
GP 214

Paid:
As appropriate

Payment duration:
Not applicable

Maximum payment:
£1386.60* per year

Criteria:

- 1) Name on a dental list; and
- 2) earnings of at least £27,800.00 or NHS percentage of 90%.

*Additional payments apply: maximum additional payment for remote island dentist = £2,773.20; maximum additional payment for remote mainland dentist = £1,386.60

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EMERGENCY DENTAL SERVICES SESSIONS

Form:
No form

Paid:
Monthly

Payment duration:
Not applicable

Maximum payment:
£119.55 per 3 hour session

Criteria:

- 1) Name on a dental list.

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GENERAL DENTAL PRACTICE ALLOWANCE

All Practices - Automated payment unless you are a part-time or whole-time equivalent dentist

Form:
GP 229
if part-time

Paid:
Quarterly

Payment duration:
Not applicable

Maximum payment:
6% of previous quarter's
gross earnings

Criteria:

- 1) Name on a dental list;
- 2) practice has been satisfactorily inspected within the 3 years prior to the claim; and
- 3) payment is made to one designated dentist, and dentist should inform Practitioner Services.

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GENERAL DENTAL PRACTICE ALLOWANCE

NHS Committed Practices (additional 6%)
Automated payment

Form:
No form

Paid:
Quarterly

Payment duration:
Not applicable

Maximum payment:
6% of previous quarter's
gross earnings

Criteria:

- 1) Name on a dental list;
- 2) practice has been satisfactorily inspected within the 3 years prior to the claim;
- 3) payment is made to one designated dentist, and dentist should inform Practitioner Services;
- 4) NHS Commitment criteria is applied;
- 5) the practitioner must notify Practitioner Services of any other circumstance affecting qualification; and in addition:

For General Dental Practices

- 1) an average of 500 registered patients of which at least 100 are fee paying adults; and
- 2) an average gross earnings of at least £50,000.00.

For Orthodontic Specialist Practices

- 1) an average of 500 referrals;
- 2) an average of 100 item 1(c) claims; and
- 3) an average gross earnings of £75,000.00.

For other Specialised Practices

- 1) an average of 500 referrals;
- 2) an average of 500 item 1(a), 1(b) or 1(c) claims; and
- 3) an average gross earnings of £75,000.00.

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GENERAL DENTAL PRACTICE ALLOWANCE
NHS Committed Practices (additional 3%)
Automated payment

Form:
No form

Paid:
Quarterly

Payment duration:
Not applicable

Maximum payment:
3% of previous quarter's gross earnings

Criteria:

- 1) Name on a dental list;
- 2) practice has been satisfactorily inspected within the 3 years prior to the claim;
- 3) payment is made to one designated dentist, and dentist should inform Practitioner Services;
- 4) an average of 500 registered patients; and
- 5) the practitioner must notify Practitioner Services of any other circumstance affecting qualification.

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LONG TERM SICKNESS PAYMENT

Form:
GP 202

Paid:
Weekly

Payment duration:
22 weeks

Maximum payment:
£349.00 per week

Criteria:

- 1) Name included in dental list for at least 2 years; and
- 2) earnings of at least £27,800.00 or an NHS percentage of 90% or more.

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MATERNITY LEAVE PAYMENT

Form:
GP 203

Paid:
Weekly

Payment duration:
26 weeks

Maximum payment:
£1399.00 per week

Criteria:

- 1) Name included in dental list for at least 2 years; and
- 2) earnings of at least £27,800.00 in 2009/10.

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PATERNITY LEAVE PAYMENT

Form:
GP225

Paid:
As appropriate

Payment duration:
2 weeks

Maximum payment:
£1399.00 per week

Criteria:

- 1) Name included in dental list for at least 2 years;
- 2) earnings of at least £27,800.00 in 2009/10 or NHS percentage of 90%; and
- 3) dentist's wife or partner has given birth.

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PRACTICE IMPROVEMENTS GRANT
Existing Vocational Training Practice

Form:
GP 221

Paid:
As appropriate

Payment duration:
Not applicable

Maximum payment:
Up to £10,000.00
(Invoices of work required)

Criteria:

- 1) Practice requires improvements to continue to meet vocational training standards;
- 2) grant only for items identified by NHS Education for Scotland (NES) as needing upgrading;
- 3) receipts are required for improvements made;
- 4) surgery must continue to be used for vocational training for 3 years; and
- 5) multiple claims can be made for practices with more than 1 Vocational Trainee (VT) as long as each VT has their own room at the practice and that NES have approved improvements to all rooms.

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PRACTICE IMPROVEMENTS GRANT
New Vocational Training Practice

Form:
GP220

Paid:
As appropriate

Payment duration:
Not applicable

Maximum payment:
Up to £10,000.00
(Invoices of work required)

Criteria:

- 1) No dentist has provided vocational training at the premises during the 5 years prior to applying;
- 2) dentist has been assessed by NHS Education for Scotland (NES) as suitable to become a trainer pending improvements to the practice;
- 3) grant only for items identified by NES as needing upgrading;
- 4) receipts are required for improvements made;
- 5) surgery must continue to be used for vocational training or for General Dental Services (GDS) for 3 years; and
- 6) multiple claims can be made for practices with more than 1 Vocational Trainee (VT) as long as each VT has their own room at the practice and that NES have approved improvements to all rooms.

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REIMBURSEMENT OF NON-DOMESTIC RATES

Form:
GP 212

Paid:
Annually/Monthly

Payment duration:
Not applicable

Maximum payment:
N/A

Criteria:

- 1) Dentist is the rate payer;
- 2) the dentist's name is included on the dental list of the NHS Board where the premises are located;
- 3) gross earnings of the premises in preceding financial year are at least £27,800.00; and
- 4) should be claimed within 6 months of the date the rates are due to be paid.

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REMOTE AREAS ALLOWANCE

Form:
GP 215

Paid:
Annually

Payment duration:
Not applicable

Maximum payment:
£9000.00 per year

Criteria:

- 1) Name on a dental list;
- 2) dentist provides General Dental Services in an area that has less than 0.5 persons per hectare; and
- 3) payment is abated based on the proportion which NHS earnings bore to total earnings.

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RENT REIMBURSEMENT OF DENTAL PRACTICE COSTS
Leasehold Practice
Automated payment

Form:
No form

Paid:
Quarterly

Payment duration:
Not applicable

Maximum payment:
Lower of market/actual
rental value

Criteria:

- 1) Subject to valuation, and
- 2) received only if practice is NHS Committed.

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RENT REIMBURSEMENT OF DENTAL PRACTICE
PARTIAL COSTS
Leasehold Practice

Form:
GP231

Paid:
Quarterly

Payment duration:
Not applicable

Maximum payment:
Lower of market/actual
rental value

Criteria:

- 1) Subject to valuation; and
- 2) subject to reduction depending on practice NHS Commitment level.

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RENT REIMBURSEMENT OF DENTAL PRACTICE COSTS
Owned Practice
Automated payment

Form:
No form

Paid:
Quarterly

Payment duration:
Not applicable

Maximum payment:
Market rental value

Criteria:

- 1) Subject to valuation; and
- 2) received only if practice is NHS Committed.

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RENT REIMBURSEMENT OF DENTAL PRACTICE
PARTIAL COSTS
Owned Practice

Form:
GP231

Paid:
Quarterly

Payment duration:
Not applicable

Maximum payment:
Market rental value

Criteria:

- 1) Subject to valuation; and
- 2) subject to reduction depending on practice NHS Commitment level.

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With effect from 16 May 2011

**RECRUITMENT AND RETENTION ALLOWANCE
(GOLDEN HELLO)**

Allowance on first having name included on a dental list following completion of training

Form:
GP 219

Paid:
Annually
(half maximum
paid each year)

Payment duration:
Not applicable

Maximum payment:
£10,000.00 over 2 years (non-designated area*) or £25,000.00 over 2 years (designated area**)

Criteria:

- 1) Name included in sub-part A of the dental list for the first time within 3 months of completing training;
- 2) provide at least 4 sessions of General Dental Service (GDS) each week for 3 years after first payment;
- 3) NHS earnings for 3 years after first payment must be at least 80%;
- 4) must remain on a dental list for 3 years after first payment;
- 5) provide the full range of GDS for 3 years after first payment; and
- 6) claim must be made within 2 months of name being included in dental list.

*Non-designated area: Kilwinning (in NHS Ayrshire & Arran); Hawick and Berwickshire (in NHS Borders); Newton Stewart, Annan and the surrounding area of Annandale & Eskdale (in NHS Dumfries & Galloway).
**Designated area = NHS Grampian, Highland, Orkney, Shetland and Western Isles.

Not available in any other NHS Board area.

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With effect from 16 May 2011

**RECRUITMENT AND RETENTION ALLOWANCE
(GOLDEN HELLO)**

Allowance on first having name included on a dental list or on name being included after a break of 5 years

Form:
GP 227

Paid:
Annually
(half maximum
paid each year)

Payment duration:
Not applicable

Maximum payment:
£5,000.00 over 2 years (non-designated area*) or £15,000.00 over 2 years (designated area**)

Criteria:

- 1) Name included in sub-part A of the dental list for the first time or being included in a list having not been on such a list for 5 years;
- 2) provide at least 4 sessions of General Dental Services (GDS) each week for 3 years after first payment;
- 3) NHS earnings for the 3 years after first payment must be at least 80%;
- 4) provide the full range of GDS for 3 years after first payment;
- 5) must remain on a dental list for 3 years after first payment; and
- 6) claim must be made within 3 months of name being included or re-included in dental list.

*Non-designated area: Kilwinning (in NHS Ayrshire & Arran); Hawick and Berwickshire (in NHS Borders); Newton Stewart, Annan and the surrounding area of Annandale & Eskdale (in NHS Dumfries & Galloway).
**Designated area = NHS Grampian, Highland, Orkney, Shetland and Western Isles.

Not available in any other NHS Board area.

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SEDATION PRACTICE ALLOWANCE

Form:
GP 223

Paid:
Annually

Payment duration:
Not applicable

Maximum payment:
Relative analgesia £3000.00 per year
Intravenous sedation £2000.00 per year

Criteria:

- 1) Practice undertook in the year prior to the claim at least 40 sedation treatments, of which at least 30 must be intravenous;
- 2) practice has been satisfactorily inspected within the 3 years prior to the claim;
- 3) only one allowance is payable. If both treatments used, £3000.00 is payable if at least 20 relative analgesic treatments are carried out, and £2000.00 is payable if less than 20 relative analgesic treatments are carried out; and
- 4) claim must be submitted within 3 months of the start of the financial year.

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SENIORITY PAYMENT

Form:
GP99

Paid:
Quarterly

Payment duration:
From age 55 until
paid superannuation
benefit

Maximum payment:
£3928.00 per quarter

Criteria:

- 1) Aged 55 and over;
- 2) pensionable earnings of £237,000.00 in the last 10 years;
- 3) 2 postgraduate sessions in the previous 15 months;
- 4) payment is made 1 quarter in arrears, so if you turn 55 in May, this will be paid in the September schedule and not the next available schedule; and
- 5) seniority payments can only be back-dated for 1 quarter.

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VOCATIONAL TRAINING ALLOWANCE

Form:
No form

Paid:
Annually
(in the Autumn)

Payment duration:
Not applicable

Maximum payment:
£1500.00 per year

Criteria:

- 1) Dentist has employed a trainee in the year the allowance is to be paid;
- 2) part-time trainers are paid pro-rata, based on a whole-time equivalent per week of 35 hours; and
- 3) dentist registers for payment with NHS Education for Scotland.

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