DIRECTIONS

NATIONAL HEALTH SERVICE, ENGLAND

The Primary Dental Services Statement of Financial Entitlements (Amendment) (No. 4) Directions 2026

The Secretary of State for Health and Social Care, having consulted in accordance with section 103(4) of the National Health Service Act 2006([a]) with the bodies appearing to the Secretary of State to be representative of persons to whose remuneration these Directions relate, gives the following Directions in exercise of the powers conferred by sections 103(1) and (3), 109(4) and (5), 272(7) and (8) and 273(1) and (4) of that Act.

Citation, commencement, extent and application

1.—(1) These Directions may be cited as the Primary Dental Services Statement of Financial Entitlements (Amendment) (No. 4) Directions 2026.

(2) These Directions come into force on 30 September 2026 and, except as otherwise provided for in sub-paragraph (3), have effect from that date.

(3) Directions in paragraphs 2(3) and 3(3) have effect from 1st April 2026.

(4) These Directions extend to England and Wales but apply in relation to England only ([b]).

Amendment of the General Dental Services Statement of Financial Entitlements 2013

2. The General Dental Services Statement of Financial Entitlements 2013([c]) is amended as follows —

(1) in Section 8 (Payments in respect of maternity, paternity and adoption leave), in paragraphs 8.3(a), 8.4(a), 8.5(a) and 8.6(a), for "the Dentist Performer's name has been included in the Dental List" substitute "the Dentist Performer has been providing NHS dental services";

(a) 2006 c. 41. Section 103(3) was amended by paragraph 45 of Schedule 4 to the Health and Social Care Act 2012 (c. 7) and paragraph 18 of Schedule 3 to the Health and Care Act 2022 (c. 31).
(b) By virtue of section 271(1) of the National Health Service Act 2006, the powers being exercised by the Secretary of State are exercisable only in relation to England.
(c) The General Dental Services Statement of Financial Entitlements 2013 was given on 28th March 2013. These Directions and the various amendments to them are available at: https://www.gov.uk/government/collections/primary-dental-services-statements-of-financial-entitlements-directions. Hard copies of these documents can be obtained by writing to the Dentistry Team, Department of Health and Social Care, 3rd Floor, 39 Victoria Street, London SW1H 0EU.

(2) in Section 9 (Payments in respect of long-term sickness absence), in paragraph 9.3(a), for "the Dentist Performer's name has been included in the Dental List" substitute "the Dentist Performer has been providing NHS dental services";

(3) after Section 10F (Complex Care Pathways) insert—

"**10G Quality Improvement Programme**

10G.1 This Section sets out contractor eligibility for participation in the funded QIP and sets out how payments under the scheme are to be made.

10G.2 The QIP is a voluntary programme that rewards contractors for undertaking structured quality improvement activities aimed at improving patient care. The QIP supports the implementation of evidence-based guidance using data, shared learning and continuous improvement methods focused on nationally agreed priority areas (annual topics).

Interpretation: general

10G.3 In this Section—

"Annual topic" means the topic that has been specified by NHS England as the focus of the Quality Improvement Programme for a given financial year;

"Community dental services" has the meaning given in regulation 17A of the GDS Contracts Regulations;

"Contract Management and Payment System" means the system operated by the NHS Business Services Authority to support contract management and payment to dental practices, including any subsequent system that may replace it;

"Eligible contract" means a GDS contract to provide mandatory services and a minimum of 100 units of dental activity in a financial year;

"External peer review" means an internal practice review that is conducted across various dental teams with the aim of improving quality standards;

"Internal practice review" means a structured, collaborative process where the dental team identifies strengths and weaknesses and shares best practice and learning to inform the QI plan;

"QI plan" means a plan developed in accordance with the national template provided by NHS England, agreed by the dental team and setting out the identified improvement activities the contractor will carry out, how these will be implemented and timescales for doing so applying specific, measurable, achievable, relevant and timebound objectives;

"QI report" means a report using the national template provided by NHS England and including the findings of the internal practice review, the areas identified for improvement, the QI activities developed and how these were implemented, the outcomes seen from testing the QI activities, and the identified learning and how this has been shared and discussed across the dental team;

"QI Unit" means a unit that is credited in respect of activity performed as part of the Quality Improvement Programme;

"Quality Improvement Lead" means a member of the dental team based in the Contractor's practice who understands the requirements of the QI programme, undertakes to ensure these are met within required timescales, ensures engagement of members of the dental team with the QI topic activities and participates in external peer group meetings;

"Quality Improvement Programme" or "QIP" has the meaning given in paragraph 10G.2;

"Monetary Value of a Unit of Dental Activity" or "MV(UDA)" has the meaning given in regulation 2 of the GDS Contracts Regulations; and

"relevant contract value" has the meaning given in regulation 2 of the GDS Contracts Regulations.

Eligibility

10G.4.1 Subject to paragraphs 10G.4.2 and 10G.4.3, the QIP is available to those contractors providing mandatory services under an eligible contract for primary dental services. Where a contractor also holds a contract described in paragraph 10G.4.2, the contractor is only permitted to participate in the QIP in respect of their eligible contract.

10G.4.2 Subject to paragraph 10G.4.3, the QIP is not available in respect of contracts that are only for the provision of one, or a combination, of the following—

(a) sedation services;

(b) domiciliary services;

(c) children-only services provided before 1 April 2006;

(d) dental public health services;

(e) dental services in secure and detained estates;

(f) community dental services; and

(g) orthodontic services.

10G.4.3 Where NHS England considers that the annual topic in a particular financial year is relevant to the provision of community dental services, they may extend eligibility to these contractors for a given year and provide a notification to confirm they may apply to the programme.

Entry criteria

10G.5.1 Contractors who wish to sign up for participation in the QIP for a financial year must do so by the date set and published by NHS England, using the appropriate form. Contractors will receive confirmation of their eligibility following their application.

10G.5.2 Participation in the QIP is for the entire financial year only and cannot be commenced partway through the year. Any application to sign up to the scheme received after the published date will be rejected.

QIP requirements

10G.6.1 Contractors participating in the QIP are required to do all the following—

(a) identify a Quality Improvement lead;

(b) use data that is provided nationally and, where appropriate, clinical system data to support internal practice review and discussion on the topic area;

(c) develop and implement a QI plan;

(d) participate in external peer review;

(e) produce a QI report; and

(f) submit a year-end declaration confirming that all QIP requirements and actions described in the QI plan have been completed. The year-end declaration should be submitted using the appropriate electronic form by 6pm on 31 May for the previous financial year's QI programme.

10G.6.2 Contractors must demonstrate their compliance with the requirements specified in paragraph 10G.6.1 by retaining accessible records, including the QI Report, for each year of their participation in the QIP. These records should be retained for a period of 6 years following the end of the financial year to which the evidence relates. NHS England may exercise its discretion to request such evidence, or a copy of the QI Report, from a contractor participating in the QIP to check compliance. Failure to provide such evidence on request, or provision of evidence which does not confirm satisfaction of all the requirements, will result in a retraction of all payments made to the contractor in respect of the QIP for the relevant financial year.

Payments under the Quality Improvement Programme (QIP)

10G.7.1 Subject to paragraph 10G.7.5, for each financial year the contractor participates in the QIP, it will receive a payment of £3,400 where it is able to demonstrate full compliance with the requirements of the scheme, in accordance with paragraphs 10G.6.1 and 10G.6.2.

10.G.7.2 Subject to paragraphs 10G.7.4 and 10.G.7.5, that payment will be converted to and credited in QI Units. These credits will be applied across each month of the financial year starting from June.

10G.7.3 Subject to paragraph 10G.7.5, the QI Units a contractor will receive for participation in the QIP for a financial year is calculated by (rounded up to two decimal places)—

$$\frac{£3{,}400}{MV\ (UDA)}$$

10G.7.4 Subject to paragraph 10G.7.5, for operational purposes QI Units may be reported within the Contract Management and Payment System alongside Units of Dental Activity and will have a financial value equivalent to UDAs but will be distinguished in reports as being a credit for QI activity.

10G.7.5 Notwithstanding anything provided in paragraphs 10G.7.1 to 10G.7.4, the amount a contractor will be credited in QI Units and paid in accordance with paragraph 10G.7.1, for its participation in the QIP, will not exceed the amount which, when taken together with Appraisal Units and Units of Dental Activity for that year, adds up to the relevant contract value.

Withdrawal from the QIP

10G.8 Contractors may withdraw from the QIP at any point during the financial year. Should a contractor wish to withdraw, written notification must be provided to NHS England at the earliest opportunity. Any QI units that have been credited prior to withdrawal will be recovered.

Non-compliance

10G.9 Failure to complete all QIP requirements fully, including submission of the end-of-year declaration by the submission date in accordance with paragraph 10G.6.1(f) will result in full recovery of all credited QI units attributed to the QIP and nil payment for QIP participation in that financial year.

10H Annual Appraisal Payments

10H.1 This Section outlines contractor eligibility and the requirements for annual appraisals for Eligible Professionals, Annual Appraisal Payments and non-compliance.

Interpretation: general

10H.2 In this Section—

"Annual Appraisal Payment" means the amount paid to a Contractor in respect of an Eligible Appraisal in accordance with paragraphs 10H.5.1 to 10H.5.9;

"Appraisal Unit" means a unit that is credited in respect of an Eligible Appraisal as calculated in accordance with Paragraph 10H.5.4;

"Appraiser" means an individual engaged by the contractor who is suitable to conduct the Eligible Appraisal with the Appraisee in accordance with paragraph 10H.4.2 and who conducts the Eligible Appraisal;

"Appraisee" means the Eligible Professional who meets the conditions of eligibility in paragraph 10H.3.1 and receives an Eligible Appraisal;

"Contract Management and Payment System" means the system operated by the NHS Business Services Authority to support contract management and payment to dental practices, including any subsequent system that may replace it;

"Eligible Appraisal" means an appraisal which satisfies the requirements set out paragraphs 10H.4.1 and 10H.4.2;

"Eligible Professional" means, for the purposes of this Section, a dentist, dental therapist or dental hygienist;

"Minimum Qualifying Period" means at least 12 working days across a continuous period of 26 weeks;

"Monetary Value of a Unit of Dental Activity" or "MV(UDA)" has the meaning as given in regulation 2 of the GDS Contracts Regulations;

"NHS dental care" means, for the purposes of this Section, the provision of NHS primary dental services and NHS services delivered in community dental settings, excluding the provision of level 2 complexity care; and

"relevant contract value" has the meaning given in Regulation 2 of the GDS Contracts Regulations.

Eligibility

10H.3.1 Subject to paragraphs 10H.4.1 and 10H.4.2, a contractor is able to claim an Annual Appraisal Payment in respect of an Eligible Appraisal for an Eligible Professional who—

(a) provides NHS dental care to patients in accordance with the GDS Contracts Regulations;

(b) is able to demonstrate that they have spent the Minimum Qualifying Period immediately prior to the Eligible Appraisal delivering NHS dental care to patients;

(c) for the last 26 weeks immediately prior to the Eligible Appraisal, has been continuously employed or engaged by the contractor to provide NHS dental care in accordance with the GDS Contracts Regulations; and

(d) has a personal ID number and is listed as a clinician who is authorised to make a submission under the relevant contract.

10H.3.2 An Annual Appraisal Payment may not be claimed in respect of an Eligible Appraisal of the following—

(a) a Dental Care Professional who does not meet the conditions set out in paragraph 10H.3.1;

(b) a salaried Dental Care Professional who is employed on NHS Terms and Conditions;

(c) a dentist who is currently undertaking Dental Foundation Training;

(d) a dental therapist who is currently undertaking Dental Therapy Foundation Training;

(e) Dental Care Professionals who provide dental care in secure and detained estates; and

(f) any other salaried staff who are not Eligible Professionals.

10H.3.3 An Eligible Professional, who meets the conditions in paragraph 10H.3.1, should confirm that they have received an Eligible Appraisal by submitting a self-declaration on the Contract Management and Payment System.

Requirements

10H.4.1 The appraisal should focus solely on those aspects of the Appraisee's role that relate to the provision of NHS primary dental services.

10H.4.2 The appraisal should be in the form of a conversation between the Appraiser and the Appraisee and be recorded in writing. The appraisal should cover the following areas as a minimum—

(a) achievements;

(b) challenges;

(c) goals and objectives;

(d) support and enablers;

(e) professional development; and

(f) development of a personal development plan,

and all agreed outcomes and objectives, including training and development needs, for the Appraisee must be fully documented in either hard copy or electronic form.

Annual Appraisal Payments

10H.5.1 A contractor may receive a maximum of one Annual Appraisal Payment in respect of an Eligible Appraisal of, and claim submitted by, an Eligible Professional providing primary dental services under its contract in each financial year. An Eligible Professional may only claim payment in respect of one Eligible Appraisal in a financial year, regardless of whether they work for more than one contractor.

10H.5.2 An Annual Appraisal Payment will be made based on the submission of a self-declaration by an Appraisee following an Eligible Appraisal, in accordance with paragraph 10H.3.1, which must be submitted within two months of the date the Eligible Appraisal was completed. Failure to submit a self-declaration within the required time-frame renders the Eligible Appraisal ineligible for payment.

10H.5.3 The Annual Appraisal Payment in respect of each Eligible Appraisal conducted in accordance with this Section will be £213. That payment will be converted to, and credited in, Appraisal Units.

10H.5.4 The Appraisal Units a contractor will receive in respect of an Eligible Appraisal is calculated by (rounded up to two decimal places)—

$$\frac{£213}{MV\ (UDA)}$$

10H. 5.5 For operational purposes Appraisal Units may be reported within the Contract Management and Payment System alongside Units of Dental Activity as having a financial value equivalent to UDAs but will be distinguished in reports as being for appraisal activity.

10H.5.6 Notwithstanding anything in this Section, the amount a contractor will be credited in Appraisal Units, and thus paid, for Eligible Appraisals, will not exceed the amount which, when taken together with QI Units and Units of Dental Activity for that year, adds up to the relevant contract value.

10H.5.7 NHS England is entitled to seek evidence from contractors either as part of a post-payment verification process, or at any time, to establish that any or all conditions and requirements under this Section have been satisfied by the contractor. Failure to submit the required and sufficient information within 30 days of the date of the request by NHS England may result in a withdrawal of any credits of Appraisal Units in respect of Annual Appraisal Payments made to the contractor for that financial year.

10H.5.8 The contractor must make a payment to the Appraisee based on a proportion of Appraisal Units credited in accordance with paragraph 10H.5.4 and which is equivalent to the agreed proportion set out in the Appraisee's contract of engagement. The contractor must make this payment to the Appraisee within two months of the date from which the Appraisal Unit credit in respect of the Appraisee's Eligible Appraisal was applied to the contract. Failure to do so will result in a contract breach and consequent action in accordance with Schedule 3 of the GDS Contracts Regulations may be taken.

10H.5.9 All payments received under this Section are subject to superannuation contributions for those individuals who are participating in the NHS Pension Scheme.

Non-compliance

10H.5.10 Subject to paragraph 10H.5.11, a contractor will forfeit an entitlement to one or more Annual Appraisal Payments, as applicable, where they are unable to demonstrate compliance with all the requirements as provided in this Section.

10H.5.11 NHS England may determine that a contractor should receive payment despite a failure to meet one or more of the requirements in this Section in exceptional circumstances and only where it is considered reasonable to do so."; and

(4) in Part 3 (Supplementary Provisions), in paragraph 12.3, insert in the appropriate place—

""NHS dental services" means dental services provided as part of the NHS in England, including primary dental services, community dental services and secondary care dental services.".

Amendment of the Personal Dental Services Statement of Financial Entitlements Directions 2013

3. The Personal Dental Services Statement of Financial Entitlements 2013(a) is amended as follows: —

(1) in Section 8 (Payments in respect of maternity, paternity and adoption leave), in paragraphs 8.3(a), 8.4(a), 8.5(a) and 8.6(a), for "the Dentist Performer's name has been included in the Dental List" substitute "the Dentist Performer has been providing NHS dental services";

(2) in Section 9 (Payments in respect of long-term sickness absence), in paragraph 9.3(a), for "the Dentist Performer's name has been included in the Dental List" substitute "the Dentist Performer has been providing NHS dental services";

(3) after Section 10F (Complex Care Pathways) insert—

"**10G Quality Improvement Programme**

10G.1 This Section sets out contractor eligibility for participation in the funded QIP and sets out how payments under the scheme are to be made.

10G.2 The QIP is a voluntary programme that rewards contractors for undertaking structured quality improvement activities aimed at improving patient care. The QIP supports the implementation of evidence-based guidance using data, shared learning and continuous improvement methods focused on nationally agreed priority areas (annual topics).

Interpretation: general

10G.3 In this Section—

"Annual topic" means the topic that has been specified by NHS England as the focus of the Quality Improvement Programme for a given financial year;

"Community dental services" has the meaning given in regulation 13A of the PDS Agreements Regulations;

(a) The Personal Dental Services Statement of Financial Entitlements 2013 was given on 28th March 2013. The Statement and the various amendments to it are available at: https://www.gov.uk/government/collections/primary-dental-services-statements-of-financial-entitlements-directions. Hard copies of these documents can be obtained by writing to the Dentistry Team, Department of Health and Social Care, 3rd Floor, 39 Victoria Street, London SW1H 0EU.

"Contract Management and Payment System" means the system operated by the NHS Business Services Authority to support contract management and payment to dental practices, including any subsequent system that may replace it;

"Eligible contract" means a PDS agreement to provide mandatory services and a minimum of 100 units of dental activity in a financial year;

"External peer review" means an internal practice review that is conducted across various dental teams with the aim of improving quality standards;

"Internal practice review" means a structured, collaborative process where the dental team identifies strengths and weaknesses and shares best practice and learning to inform the QI plan;

"QI plan" means a plan developed in accordance with the national template provided by NHS England, agreed by the dental team and setting out the identified improvement activities the contractor will carry out, how these will be implemented and timescales for doing so applying specific, measurable, achievable, relevant and timebound objectives;

"QI report" means a report using the national template provided by NHS England and including the findings of the internal practice review, the areas identified for improvement, the QI activities developed and how these were implemented, the outcomes seen from testing the QI activities, and the identified learning and how this has been shared and discussed across the dental team;

"QI Unit" means a unit that is credited in respect of activity performed as part of the Quality Improvement Programme;

"Quality Improvement Lead" means a member of the dental team based in the Contractor's practice who understands the requirements of the QI programme, undertakes to ensure these are met within required timescales, ensures engagement of members of the dental team with the QI topic activities and participates in external peer group meetings;

"Quality Improvement Programme" or "QIP" has the meaning given in paragraph 10G.2;

"Monetary Value of a Unit of Dental Activity" or "MV(UDA)" has the meaning given in regulation 2 of the PDS Agreements Regulations; and

"relevant contract value" has the meaning given in regulation 2 of the PDS Agreements Regulations.

Eligibility

10G.4.1 Subject to paragraphs 10G.4.2 and 10G.4.3, the QIP is available to those contractors providing mandatory services under an eligible contract for primary dental services. Where a contractor also holds a contract described in paragraph 10G.4.2, the contractor is only permitted to participate in the QIP in respect of their eligible contract.

10G.4.2 Subject to paragraph 10G.4.3 the QIP is not available in respect of contracts that are only for the provision of one, or a combination, of the following—

(a) sedation services;

(b) domiciliary services;

(c) children-only services provided before 1 April 2006;

(d) dental public health services;

(e) dental services in secure and detained estates;

(f) community dental services; and

(g) orthodontic services.

10G.4.3 Where NHS England considers that the annual topic in a particular financial year is relevant to the provision of community dental services, they may extend eligibility to these contractors for a given year and provide a notification to confirm they may apply to the programme.

Entry criteria

10G.5.1 Contractors who wish to sign up for participation in the QIP for a financial year must do so by the date set and published by NHS England, using the appropriate form. Contractors will receive confirmation of their eligibility following their application.

10G.5.2 Participation in the QIP is for the entire financial year only and cannot be commenced partway through the year. Any application to sign up to the scheme received after the published date will be rejected.

QIP requirements

10G.6.1 Contractors participating in the QIP are required to do all the following—

(a) identify a Quality Improvement lead;

(b) use data that is provided annually and, where appropriate, clinical system data to support internal practice review and discussion on the topic area;

(c) develop and implement a QI plan;

(d) participate in external peer review;

(e) produce a QI report; and

(f) submit a year-end declaration confirming that all QIP requirements and actions described in the QI plan have been completed. The year-end declaration should be submitted using the appropriate electronic form by 6pm on 31 May for the previous financial year's QI programme.

10G.6.2 Contractors must demonstrate their compliance with the requirements specified in paragraph 10G.6.1 by retaining accessible records, including the QI Report, for each year of their participation in the QIP. These records should be retained for a period of 6 years following the end of the financial year to which the evidence relates. NHS England may exercise its discretion to request such evidence, or a copy of the QI Report, from a contractor participating in the QIP to check compliance. Failure to provide such evidence on request, or provision of evidence which does not confirm satisfaction of all the requirements, will result in a retraction of all payments made to the contractor in respect of the QIP for the relevant financial year.

Payments under the Quality Improvement Programme (QIP)

10G.7.1 Subject to paragraph 10G.7.5, for each financial year the contractor participates in the QIP, it will receive a payment of £3,400 where it is able to demonstrate full compliance with the requirements of the scheme, in accordance with paragraphs 10G.6.1 and 10G.6.2.

10.G.7.2 Subject to paragraphs 10G.7.4 and 10.G.7.5, that payment will be converted to, and credited in, QI Units. These credits will be applied across each month of the financial year starting from June.

10G.7.3 Subject to paragraph 10G.7.5, the QI Units a contractor will receive for participation in the QIP for a financial year is calculated by (rounded up to two decimal places)—

$$\frac{£3{,}400}{MV\ (UDA)}$$

10G.7.4 Subject to paragraph 10G.7.5, for operational purposes QI Units may be reported within the Contract Management and Payment System alongside Units of Dental Activity and will have a financial value equivalent to UDAs but will be distinguished in reports as being a credit for QI activity.

10G.7.5 Notwithstanding anything provided in paragraphs 10G.7.1 to 10G.7.4, the amount a contractor will be credited in QI Units and paid in accordance with paragraph 10G.7.1, for its participation in the QIP, will not exceed the amount which, when taken together with Appraisal Units and Units of Dental Activity for that year, adds up to the relevant contract value.

Withdrawal from the QIP

10G.8 Contractors may withdraw from the QIP at any point during the financial year. Should a contractor wish to withdraw, written notification must be provided to NHS England at the earliest opportunity. Any QI units that have been credited prior to withdrawal will be recovered.

Non-compliance

10G.9 Failure to complete all QIP requirements fully, including submission of the end-of-year declaration by the submission date in accordance with paragraph 10G.6.1(f) will result

in full recovery of all credited QI units attributed to the QIP and nil payment for QIP participation in that financial year.

10H Annual Appraisal Payments

10H.1 This Section outlines contractor eligibility and the requirements for annual appraisals for Eligible Professionals, Annual Appraisal Payments and non-compliance.

Interpretation: general

10H.2 In this Section—

"Annual Appraisal Payment" means the amount paid to a Contractor in respect of an Eligible Appraisal in accordance with paragraphs 10H.5.1 to 10H.5.9;

"Appraisal Unit" means a unit that is credited in respect of an Eligible Appraisal as calculated in accordance with Paragraph 10H.5.4;

"Appraiser" means an individual engaged by the contractor who is suitable to conduct the Eligible Appraisal with the Appraisee in accordance with paragraph 10H.4.2 and who conducts the Eligible Appraisal;

"Appraisee" means the Eligible Professional who meets the conditions of eligibility in paragraph 10H.3.1 and receives an Eligible Appraisal;

"Contract Management and Payment System" means the system operated by the NHS Business Services Authority to support contract management and payment to dental practices, including any subsequent system that may replace it;

"Eligible Appraisal" means an appraisal which satisfies the requirements set out paragraphs 10H.4.1 and 10H.4.2;

"Eligible Professional" means, for the purposes of this Section, a dentist, dental therapist or dental hygienist;

"Minimum Qualifying Period" means at least 12 working days across a continuous period of 26 weeks;

"Monetary Value of a Unit of Dental Activity" or "MV(UDA)" has the meaning as given in regulation 2 of the PDS Agreements Regulations;

"NHS dental care" means, for the purposes of this Section, the provision of NHS primary dental services and NHS services delivered in community dental settings, excluding the provision of level 2 complexity care; and

"relevant contract value" has the meaning given in Regulation 2 of the PDS Agreement Regulations.

Eligibility

10H.3.1 Subject to paragraphs 10H.4.1 and 10H.4.2, a contractor is able to claim an Annual Appraisal Payment in respect of an Eligible Appraisal for an Eligible Professional who—

(a) provides NHS dental care to patients in accordance with the PDS Agreements Regulations;

(b) is able to demonstrate that they have spent the Minimum Qualifying Period immediately prior to the Eligible Appraisal delivering NHS dental care to patients;

(c) for the last 26 weeks immediately prior to the Eligible Appraisal, has been continuously employed or engaged by the contractor to provide NHS dental care in accordance with the PDS Agreements Regulations; and

(d) has a personal ID number and is listed as a clinician who is authorised to make a submission under the relevant contract.

10H.3.2 An Annual Appraisal Payment may not be claimed in respect of an Eligible Appraisal of the following—

(a) a Dental Care Professional who does not meet the conditions set out in paragraph 10H.3.1;

(b) a salaried Dental Care Professional who is employed on NHS Terms and Conditions;

(c) a dentist who is currently undertaking Dental Foundation Training;

(d) a dental therapist who is currently undertaking Dental Therapy Foundation Training;

(e) Dental Care Professionals who provide dental care in secure and detained estates; and

(f) any other salaried staff who are not Eligible Professionals.

10H.3.3 An Eligible Professional, who meets the conditions in paragraph 10H.3.1, should confirm that they have received an Eligible Appraisal by submitting a self-declaration on the Contract Management and Payment System.

Requirements

10H.4.1 The appraisal should focus solely on those aspects of the Appraisee's role that relate to the provision of NHS primary dental services.

10H.4.2 The appraisal should be in the form of a conversation between the Appraiser and the Appraisee and be recorded in writing. The appraisal should cover the following areas as a minimum—

(a) achievements;

(b) challenges;

(c) goals and objectives;

(d) support and enablers;

(e) professional development; and

(f) development of a personal development plan,

and all agreed outcomes and objectives, including training and development needs, for the Appraisee must be fully documented in either hard copy or electronic form.

Annual Appraisal Payments

10H.5.1 A contractor may receive a maximum of one Annual Appraisal Payment in respect of an Eligible Appraisal of, and claim submitted by, an Eligible Professional providing primary dental services under its contract in each financial year. An Eligible Professional may only claim payment in respect of one Eligible Appraisal in a financial year, regardless of whether they work for more than one contractor.

10H.5.2 An Annual Appraisal Payment will be made based on the submission of a self-declaration by an Appraisee following an Eligible Appraisal, in accordance with paragraph 10H.3.1, which must be submitted within two months of the date the Eligible Appraisal was completed. Failure to submit a self-declaration within the required time-frame renders the Eligible Appraisal ineligible for payment.

10H.5.3 The Annual Appraisal Payment in respect of each Eligible Appraisal conducted in accordance with this Section will be £213. That payment will be converted to, and credited in, Appraisal Units.

10H.5.4 The Appraisal Units a contractor will receive in respect of an Eligible Appraisal is calculated by (rounded up to two decimal places)—

$$\frac{£213}{MV\ (UDA)}$$

10H. 5.5 For operational purposes Appraisal Units may be reported within the Contract Management and Payment System alongside Units of Dental Activity as having a financial value equivalent to UDAs but will be distinguished in reports as being for appraisal activity.

10H.5.6 Notwithstanding anything in this Section, the amount a contractor will be credited in Appraisal Units, and thus paid, for Eligible Appraisals, will not exceed the amount which, when taken together with QI Units and Units of Dental Activity for that year, adds up to the relevant contract value.

10H.5.7 NHS England is entitled to seek evidence from contractors either as part of a post-payment verification process, or at any time, to establish that any or all conditions and requirements under this Section have been satisfied by the contractor. Failure to submit the required and sufficient information within 30 days of the date of the request by NHS

England may result in a withdrawal of any credits of Appraisal Units in respect of Annual Appraisal Payments made to the contractor for that financial year.

10H.5.8 The contractor must make a payment to the Appraisee based on a proportion of Appraisal Units credited in accordance with paragraph 10H.5.4 and which is equivalent to the agreed proportion set out in the Appraisee's contract of engagement. The contractor must make this payment to the Appraisee within two months of the date from which the Appraisal Unit credit in respect of the Appraisee's Eligible Appraisal was applied to the contract. Failure to do so will result in a contract breach and consequent action in accordance with Schedule 3 of the PDS Agreements Regulations may be taken.

10H.5.9 All payments received under this Section are subject to superannuation contributions for those individuals who are participating in the NHS Pension Scheme.
Non-compliance

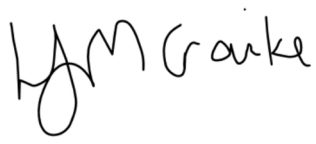
10H.5.10 Subject to paragraph 10H.5.11, a contractor will forfeit an entitlement to one or more Annual Appraisal Payments, as applicable, where they are unable to demonstrate compliance with all the requirements as provided in this Section.

10H.5.11 NHS England may determine that a contractor should receive payment despite a failure to meet one or more of the requirements in this Section in exceptional circumstances and only where it is considered reasonable to do so."; and

(4) in Part 3 (Supplementary Provisions), in paragraph 12.3, insert in the appropriate place—

""NHS dental services" means dental services provided as part of the NHS in England, including primary dental services, community dental services and secondary care dental services.".

Signed by authority of the Secretary of State for Health and Social Care



Linsey Craike

Date: 29 September 2026

Member of the Senior Civil Service

Department of Health and Social Care