



## Scottish Dental Practice Board Executive Summary, 2008/09

### Chairman's report



**Donald B McNicol**  
Chairman

The Scottish Dental Practice Board has had a busy and demanding year, but it has been one in which we have consistently delivered and met the challenges that we have had to address. The Board continues to have six full Board meetings per year, five of which are preceded by a pre-Board meeting. This format continues to allow a high level of analysis and interpretation of the data

that the Board receives from our executive arm Practitioner Services Division (PSD). I wish to thank Lorna May Raeburn and Greta Laird and their teams in particular for the considerable input that they provide the Board, but also to acknowledge the amount of work that they do on behalf of practitioners that often goes unnoticed.

The Board has continued to develop relationships with the various groups and organisations with which it interfaces. Throughout the year the Board has had regular meetings with the Scottish Government Health Directorates (SGHD), Scottish Dental Practice Committee and Counter Fraud Services. In particular, we have established new links with undergraduates and have signed a Memorandum of Understanding with the National Clinical Advisory Service (NCAS). Additionally, the SDPB has had presentations from the British Dental Association and the General Dental Council at our meetings. The Board especially welcomed the invitation to speak at the Scottish Conference of Local Dental Committees and appreciated the opportunity to interface with the profession at a grass roots level. I found the question and answer session particularly enlightening. It is, though, a pathway the Board is keen to develop as it is imperative that the Board maintains avenues to remain in touch with general dental practitioners.

Following new direction from the SGHD, the "new Statement of Dental Remuneration" (nSDR) continues to be developed with an amended document submitted to the SGHD for further consideration and direction. I would like to thank the Working Group for their considerable efforts in continuing to meet the challenges of such a complex and sensitive piece of work. I am keen to reassure practitioners that the Board is acutely aware of the amount of time this document has been in development but we are pushing hard to have a published document to share with the profession.

The Board continues to work closely with Practitioner Services to develop and redefine policies. The introduction of a new grading structure for

*"The Board continues to work closely with Practitioner Services to develop and redefine policies"*

Scottish Dental Reference Service (SDRS) examinations has been a significant step forward whereby clinical and administrative matters can be distinguished and managed independently. This differentiation creates a greater transparency to these examinations for practitioners, patients and NHS Boards. The Board is keen to acknowledge the cooperation of practitioners in their increased compliance with the Regulations, in particular those pertinent to prior approval. The position of the Board regarding compliance with the Regulations is unchanged and we will continue to work closely with our colleagues at Practitioner Services to deliver a consistent approach to our interpretation of those Regulations for all practitioners. I again wish to reinforce that I make no apology to those practitioners who continue to disregard the Regulations and find themselves being refused payment or having to make a repayment.

During the year, Lay Member Jean Fleetwood was reappointed to the Board. Jean has provided a considerable amount of expertise during her time on the Board, and I am delighted that she has agreed to continue. I wish to record that the Lay members play an important and significant role in the work of the Board and that without their presence the Board would be a poorer organisation. The Board policy and actions continue to be patient centred and committed to the improvement of oral health in Scotland. I take this opportunity to thank all of my Board members for their continued hard work and the considerable support that they afford me in my role as Chairman. I also wish to thank and acknowledge Miss Anne Ferguson, Board Secretary, for her diligence and commitment to her role. Finally, I wish to thank David Baird and Scott Buchanan at Information Services Division (ISD) for their support in producing this year's Annual Report.

*Donald B McNicol*  
*BDS, MFGDP(UK), MGDS RCPS(Glas), FFGDP(UK)*

## Board observation and comment

### Practitioner Services (Dental)

The Board continues to work closely with Practitioner Services to ensure that its statutory functions are fulfilled. The Board holds regular operational meetings with David Knowles, Director PSD, Brian Cowie, Assistant Director PSD, and John Cameron, Senior Dental Adviser PSD. It is with these meetings that the Board and PSD have established a sound working relationship that has led to a robust bridge being established between both organisations that allows full and frank debate on the provision of high levels of service to all of our stakeholders. I therefore wish to thank the aforementioned for their continued support.

PSD continues to meet its key performance indicators around processing claims forms and I wish to acknowledge the dedication that the staff at Practitioner Services show in providing a high quality service to practitioners. This can be especially challenging when schedule closure dates are imminent. PSD receives extremely large volumes of GP17s at this time which currently have been processed in time, but as this practice continues there is a greater chance that these schedules miss the closure date. I would therefore urge practitioners to submit their claims more evenly through the schedule month to decrease this risk.

### Governance and Probity

The Board continues to have a robust position when addressing matters related to the Regulations and the Statement of Dental Remuneration. Practitioners are being paid accurately and timeously and the Board is keen to focus on the patient outcome and patient impact. The Board continues to work with PSD to develop policy and strategies to improve patient attendance at the Scottish Dental Reference Service, whilst acknowledging that poor grades result from only 4% of the grades awarded. The Board continues to provide interpretation of the SDR for practitioners and PSD. Over the period of this report, £53,018.82 was recovered from practitioners who mis-claimed or misinterpreted the narrative.

### Annual Report

As readers will be aware, our Annual Report has reverted to its previous format. On review of last year's report, it was felt that it was not as user-friendly as the current format. We have therefore taken the decision to return to our familiar layout to allow easier access to information.

The Annual Report includes a section specifically relating to Dental Practice Deprivation, which will give the reader valuable information on the impact a dental practice's situation can have on treatment prescription. This section will ultimately be changed to reflect the patient rather than practice, once patient postcodes are collated, and this should be available in the Annual Report 2009-2010.

## Observations

**Allowances** continue to form a significant part of the income of general dental practices and these allowances are no doubt responsible for the improved numbers of patients registered with a GDS dentist in Scotland. The percentage of children registered was 80.1%, an increase of 2.7% from 2008; and adults 61.3%, an increase of 4.1% from 2008. In addition, the numbers of dentists working within the non salaried GDS stands at 2,204, which is an increase of 5% from 2008. The continued commitment from the Minister for Public Health and Sport and the SGHD to deliver these allowances has no doubt had an impact on these figures and the increased stability that NHS practices now have. I therefore commend this positive decision.

The **average cost of treating a child** has increased from £58 to £62. Further analysis of these figures shows that approximately 60% of this relates to orthodontic treatment. The **average cost of treating an adult** has increased from £42 to £43. Further analysis of the figures shows that this increase is related to the associated costs of increased registration numbers and increased volume of treatment.

### SDPB strategic goals for the coming year

- Seek to promote the implementation of the nSDR
- Seek to promote the implementation of an appropriate Index of Orthodontic Treatment Need (IOTN) level in Scotland
- Reinforce compliance of the regulations governing submission timescales for claims
- Continue to enact the prior approval regulations
- Encourage NHS Boards to engage with the Central Disciplinary Unit in order to ensure the improvement of the performance quality of individual practitioners and resolve their patient issues
- Develop mechanisms and pathways to engage with General Dental Practitioners
- Continue the development of strategies to enhance the SDRS
- Seek to improve the quality, consistency and accessibility of the information we provide to patients and the public

## Summary information, year ending March 2009

(a) Non-salaried GDS	
<b>Gross fees</b>	<b>£219,803,823</b>
Item of service fees	£150,991,050
Capitation fees	£36,042,713
Continuing care fees	£28,329,789
Net fees paid by NHS boards (including remissions and exemptions)	£169,931,737
Patient charges	£49,872,086
Remissions	£27,941,641
Exemptions	£29,878,328
<b>No. of forms authorised</b>	<b>4,223,808</b>
<b>No. of principal dentists active at 31 March 2009</b>	<b>2,204</b>
<b>No. of dental assistants active at 31 March 2009</b>	<b>52</b>
<b>No. of vocational dental practitioners active in GDS at 31 March 2009</b>	<b>161</b>
<b>No. of children registered at 31 March 2009</b>	<b>839,496</b>
<b>No. of adults registered at 31 March 2009</b>	<b>2,509,739</b>
(b) Salaried GDS	
<b>Notional gross fees<sup>1</sup></b>	<b>£9,385,493</b>
Item of service fees <sup>1</sup>	£6,146,270
Capitation fees <sup>1</sup>	£2,016,128
Continuing care fees <sup>1</sup>	£1,162,141
Net fees paid by NHS boards (including remissions and exemptions) <sup>1</sup>	£7,212,334
Patient charges	£2,173,159
Remissions	£1,132,616
Exemptions	£1,071,305
<b>No. of forms processed<sup>2</sup></b>	<b>210,742</b>
<b>No. of posts at 31 March 2009<sup>3</sup></b>	<b>387</b>
<b>No. of children registered at 31 March 2009</b>	<b>50,344</b>
<b>No. of adults registered at 31 March 2009</b>	<b>106,054</b>

<sup>1</sup> Notional fees associated with the activity of the salaried GDS; salaried GDSs do not claim IOS or registration fees.

<sup>2</sup> GP17 forms for the salaried GDS are processed for the purposes of recording clinical activity, not authorising payment.

<sup>3</sup> The number of salaried dentist posts active at 31 March 2009.

## Fees authorised

### Payments

Adults who are liable for NHS charges pay 80% of the cost of their GDS dental treatment, up to a maximum of £384. Adults make no financial contribution to their registration fees, which are paid in full by local NHS boards, and children are exempt from charges altogether.

During 2008/09; £49.8 million was charged to patients and £27.9 million was paid by NHS boards in remissions and £29.8 million in exemptions.

### Fees authorised (£000s)<sup>1</sup>; year ending March

	2005	2006	2007	2008	2009
<b>Gross fees<sup>2</sup></b>	<b>173,542</b>	<b>179,022</b>	<b>188,320</b>	<b>198,724</b>	<b>219,804</b>
Net fees	119,649	124,883	142,272	152,214	169,932
Capitation fees	25,000	27,209	29,499	31,953	36,043
Continuing care fees	14,370	16,294	20,513	23,274	28,330
Child IOS fees	19,956	21,792	23,535	24,421	25,734
Adult IOS fees	113,383	112,845	113,520	116,410	125,257
Patient charges	53,893	54,138	46,048	46,509	49,872
Remissions	28,979	28,540	25,614	25,790	27,942
Exemptions	23,991	25,791	27,488	28,274	29,878

<sup>1</sup> The data in this table relate to non-salaried earnings only.

<sup>2</sup> Gross figure includes adjustments and referrals.

### Average cost of a course of treatment

The average cost of a course of GDS treatment is calculated by dividing the total item of service (IOS) costs by the number of courses of treatment provided. During 2008/09, the average cost of a course of treatment rose from £58 to £62 for a child and from £42 to £43 for an adult (figures rounded to the nearest £).

## Item of service (IOS) fees (£); year ending March 2009

NHS board	Child IOS <sup>1</sup>	Ave. cost of child IOS	Adult IOS <sup>1</sup>	Ave. cost of adult IOS
<b>Scotland</b>	<b>25,734,316</b>	<b>62</b>	<b>125,256,733</b>	<b>43</b>
Ayrshire & Arran	2,101,314	66	10,237,186	42
Borders	142,819	26	1,622,905	34
Dumfries & Galloway	216,605	29	2,341,981	36
Fife	1,144,751	51	6,233,550	36
Forth Valley	1,533,108	62	7,987,845	41
Grampian	2,233,438	72	5,531,391	33
Greater Glasgow & Clyde	7,513,912	65	40,465,124	51
Highland	527,978	41	3,077,062	42
Lanarkshire	3,085,702	59	16,761,850	47
Lothian	4,887,480	67	20,509,778	39
Orkney	3,515	51	334	48
Shetland	64	65	170,957	29
Tayside	2,337,610	64	10,127,059	37
Western Isles	6,320	26	189,712	45

<sup>1</sup> IOS fees include the cost of all treatments carried out by fee-earning dentists.

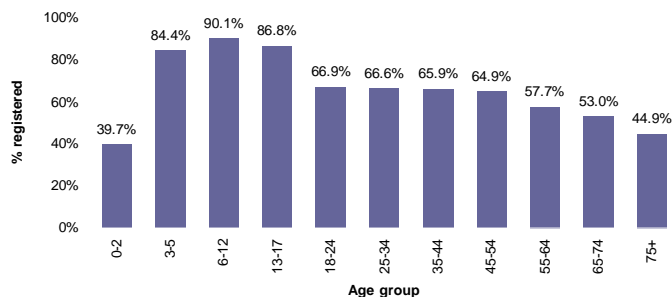
## Registrations

### Patients registered

Patients register with a dentist to receive the full range of dental treatment available under GDS.

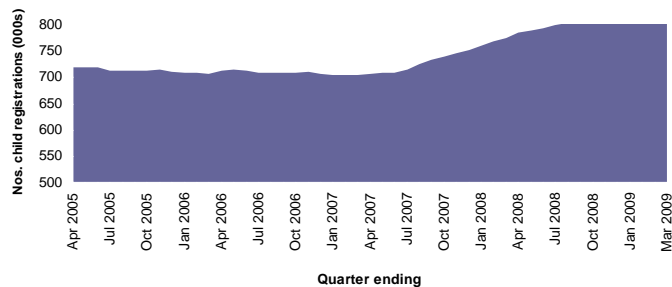
The 6-12 age group continued to have had the highest percentage of population registered (90%) and the 0-2 age group the lowest (40%) at 31 March 2009.

### Level of population registered; 31 March 2009



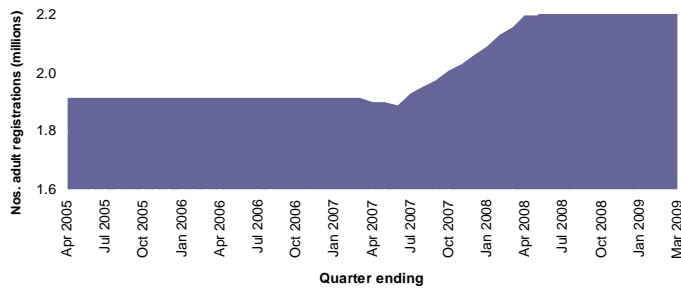
The number of children registered increased during 2008/09: there were 839,496 children registered with an NHS dentist at 31 March 2009 (775,506 at 31 March 2008); the level of registration (80%) was up from the previous year (74%).

### Children registered (000s); 2005 to 2009



The number of adults registered also increased during 2008/09: there were 2,509,739 at 31 March 2009 (2,160,502 at 31 March 2008), while the level of registration (61%) was also up from the previous year (53%).

## Adults registered (millions); 2005 to 2009



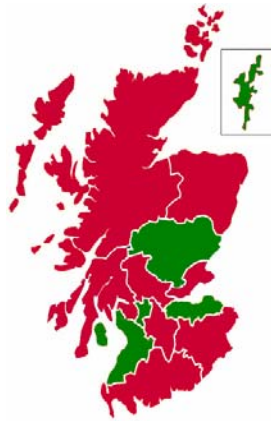
## Registrations by NHS board area

Excluding the Island NHS boards, figures showed variation across the country, with the highest levels of children registered in Greater Glasgow & Clyde (90%) and the lowest in Grampian (66%).

Adult figures also showed variation, with the highest level of adults registered in Greater Glasgow & Clyde (75%) and the lowest in Grampian (35%).

## Children registered by NHS board; 31 March 2009

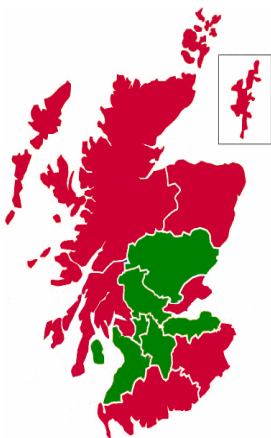
NHS board	Number of children registered	Percentage of children registered
<b>Scotland</b>	<b>839,496</b>	<b>80.1</b>
Ayrshire & Arran	63,331	84.2
Borders	16,014	69.8
Dumfries & Galloway	22,550	77.4
Fife	52,049	70.1
Forth Valley	48,569	78.2
Grampian	71,869	66.3
Greater Glasgow & Clyde	215,185	89.6
Highland	47,644	76.3
Lanarkshire	95,550	78.5
Lothian	132,005	83.4
Orkney	2,742	66.9
Shetland	4,292	85.8
Tayside	64,830	82.7
Western Isles	2,866	54.0



At or above/below Scotland level (80.1%)

## Adults registered by NHS board; 31 March 2009

NHS board	Number of adults registered	Percentage of adults registered
<b>Scotland</b>	<b>2,509,739</b>	<b>61.3</b>
Ayrshire & Arran	205,035	70.3
Borders	40,137	45.4
Dumfries & Galloway	65,042	54.6
Fife	141,883	49.6
Forth Valley	147,299	65.0
Grampian	150,404	35.2
Greater Glasgow & Clyde	714,201	75.0
Highland	97,131	39.4
Lanarkshire	307,163	70.1
Lothian	408,817	62.7
Orkney	7,280	46.2
Shetland	10,284	60.7
Tayside	202,911	64.3
Western Isles	12,152	57.9



At or above/below Scotland level (61.3%)

## Dentists

### Dentists by NHS board area

An NHS general dental practitioner may enter into more than one arrangement with an NHS board if he/she has more than one practice, or enter into an arrangement with more than one NHS board if he/she practises in more than one NHS board area.

As a result, the sum of the number of dentists in each NHS board area exceeds the number of dentists practising in Scotland. The table below shows the headcount of principals in post (not the whole-time equivalent number, as information on the working hours of each dentist is not collected centrally).

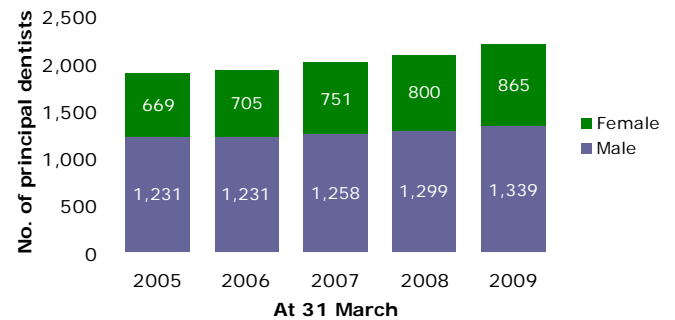
### Number of principal dentists (excluding salaried principals); 31 March

NHS board	2005	2006	2007	2008	2009
<b>Scotland</b>	<b>1,900</b>	<b>1,936</b>	<b>2,009</b>	<b>2,099</b>	<b>2,204</b>
Argyll & Clyde	159	174	x	x	x
Ayrshire & Arran	137	136	137	148	156
Borders	28	29	34	35	36
Dumfries & Galloway	36	35	46	53	51
Fife	127	123	126	136	146
Forth Valley	100	102	100	109	128
Grampian	161	172	179	184	190
Greater Glasgow & Clyde	x	x	595	624	647
Greater Glasgow	453	449	x	x	x
Highland	65	71	101	104	102
Lanarkshire	211	212	213	223	241
Lothian	344	337	355	369	394
Orkney	1	2	2	3	4
Shetland	3	4	4	4	4
Tayside	164	166	168	181	191
Western Isles	2	2	2	4	5

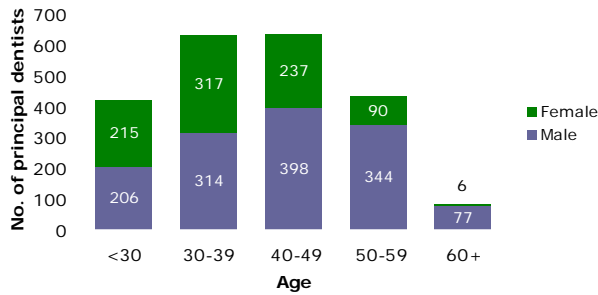
### Age and sex of dentists

The proportion of GDS principal dentists who are female has increased steadily in the last few years from 35% in 2005 to 39% in 2009. Female dentists also tend to be younger (25% aged under 30) than male dentists (15% aged under 30). Males accounted for 93% of dentists aged 60 and over in 2009.

### Number of principal dentists; by gender



## Number of principal dentists; by age



## Salaried dentists

NHS boards may employ salaried dentists to provide an alternative service to that of independent General Dental Practitioners or the Community Dental Service (which provides treatment for people who are unable to access NHS General Dental Services) in order to meet the needs of the local population.

## Activity of salaried dentists; year ending March 2009

NHS board	Forms processed	Number of posts <sup>1,2</sup>	No. of patients registered <sup>3</sup>	
			Children	Adults
<b>Scotland</b>	<b>210,742</b>	<b>387</b>	<b>50,344</b>	<b>106,054</b>
Ayrshire & Arran	11,200	20	2,041	6,508
Borders	14,406	17	3,630	7,615
Dumfries & Galloway	7,430	17	1,779	6,635
Fife	28,816	41	4,398	8,940
Forth Valley	2,499	13	854	1,645
Grampian	38,673	45	5,348	12,848
Greater Glasgow & Clyde	13,526	40	5,392	2,785
Highland	41,970	76	15,991	30,946
Lanarkshire	121	7	-	9
Lothian	17,451	41	1,214	5,038
Orkney	7,659	15	2,521	7,248
Shetland	11,930	19	4,279	6,007
Tayside	6,845	35	802	2,580
Western Isles	8,216	13	2,095	7,250

<sup>1</sup> Includes joint appointments, salaried posts and dentists who hold both salaried and non-salaried list numbers in the GDS.

<sup>2</sup> The number of salaried dentist posts active at 31 March 2009.

<sup>3</sup> The number of registrations at 31 March 2009.

## Quality and probity of NHS General Dental Services

### Scottish Dental Reference Service

The Scottish Dental Reference Service (SDRS) monitors the quality and probity of GDS treatment by reviewing a sample of patients each year.

The SDPB refers patients for examination by dental reference officers. Most of these patients are examined after they have completed their course of treatment, while other patients receive their examination after the treatment plan has been submitted to the SDPB for approval but prior to commencement of treatment.

The dental advisers in Practitioner Services (Dental) generate pre-treatment referrals to the SDRS where there is a requirement for more clinical information or a concern over the appropriateness of the proposed treatment.

## Results of targeted examinations<sup>1</sup>; year ending March

	2008				2009			
	A	B	C	4	A	B	C	4
<b>Pre-treatment</b>								
Child	19	60	72	19	7	16	26	2
Adult	90	395	226	14	118	431	196	16
<b>Total</b>	<b>109</b>	<b>455</b>	<b>298</b>	<b>33</b>	<b>125</b>	<b>447</b>	<b>222</b>	<b>18</b>
<b>Post-treatment</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Child	189	85	43	5	156	59	39	1
Adult	1,214	741	210	40	1,257	709	220	52
<b>Total</b>	<b>1,403</b>	<b>826</b>	<b>253</b>	<b>45</b>	<b>1,413</b>	<b>768</b>	<b>259</b>	<b>53</b>

<sup>1</sup> Data collected on 14/8/2009.

## Description of treatment report gradings

	Pre-A	Post-1	
<b>Fully satisfactory</b>			The treatment provided during the course of treatment is fully satisfactory in both quality and probity.
<b>Satisfactory</b>	B	2	The treatment provided is generally satisfactory with minor reservations (e.g. no radiographs provided for the DRO examination of a root treatment).
<b>Unsatisfactory</b>	C	3	The treatment is unsatisfactory and may include some under-prescription or items that require to be replaced.
<b>Extremely unsatisfactory</b>	4	4	Either the treatment is so unsatisfactory or fees have been claimed without the treatment being provided that the only course of action may be referral to the NHS board.

## Random referrals

The criteria for random referrals are continually assessed, but the priorities of the SDRS remain to examine a larger percentage of patients from newly qualified dentists, and from those dentists who receive unsatisfactory grades, and to include child examinations from every dentist.

Post-treatment referrals are selected on a random basis or where the dental advisers have a concern over the claim for treatment carried out.

In 2008/09, of the 1,490 random post-treatment referrals that resulted in examinations, 92% of these received a satisfactory standard of treatment in all respects.



### Scottish Dental Practice Board, 2008/09

Back row, left to right: Peter Ommer (Dental Member), Alexander J Leven (Dental Member), Donald B McNicol (Chairman), Ashok Sehgal (Lay Member), Bob Thomson (Lay Member). Front row, left to right: Anne Ferguson (Board Secretary); Laura A McCormick (Dental Member), Jean Fleetwood (Lay Member). *Philip Hamill (Dental Member) is absent from this photograph.*

The Scottish Dental Practice Board is a statutory body accountable to Scottish Ministers. It oversees the authorisation of payments to dentists by Practitioner Services, contributes to clinical policy, monitors the General Dental Service and advises on the quality of General Dental Service treatment. Comprehensive data can be found on the website of the Scottish Dental Practice Board at [www.shsc.scot.nhs.uk](http://www.shsc.scot.nhs.uk).

If you have any comments or queries, please contact Anne Ferguson, Board Secretary, at the following address:

Scottish Health Service Centre  
Crewe Road South  
Edinburgh  
EH4 2LF  
Tel 0131 275 7740  
Fax 0131 315 2369  
Email [anne.ferguson3@nhs.net](mailto:anne.ferguson3@nhs.net)

**Peter Ommer** joined the Board in 2007. Graduated from Glasgow in 1989 and worked in general practice for 15 years, during which, as a principal, developed a two-site multi-dentist mixed practice. From August 2005, helped maintain and evolve NHS surgeries in areas of poor dental access in Argyll and from May 2007 was Lead Clinician for Emergency Dental Access in Forth Valley. He is now the Clinical Director for Ayrshire & Arran.

**Alexander J Leven** joined the Board in 2006. Graduated from St Andrews University in 1969. Worked in Children's and Oral Surgery Departments at Dundee Dental Hospital. Was Registrar at Raigmore Hospital in Inverness for 2 years before moving on to General Practice as an assistant in Inverness. Moved on to partnership in Stirling following this and has been Principal in a large general practice in Stirling since 1979. Was previously member of Forth Valley LDC and ADC and the Scottish Association of LDS.

**Donald B McNicol** joined the Board in 2002. Appointed Chairman in 2005. Qualified in 1986 from Dundee University. Committed to continuing postgraduate education, having completed the Career Pathway as promoted by the Faculty of General Dental Practice (UK). Previous experience includes serving on LDC and GDP subcommittees, as an office bearer with the local BDA and as Secretary of the Scottish Dental Fund. Has a particular interest in restorative care and orthodontics.

**Ashok Sehgal** joined the Board in 2003. Management & Resources Development Consultant, working with organisations in the public, private and educational sectors. Prior to retiring in 1998, worked as Depute Principal in a large further education college. Qualified from Strathclyde University with BSc and MBA. Fellow Chartered Management Institute, Chartered Fellow of Chartered Institute of Personnel and Development, Fellow of Institute of Leadership and Management.

**Bob Thomson** joined the Board in 2004. Trained/worked as an engineering draughtsman and was then a trade union official, latterly Associate Scottish Secretary of UNISON. Also served as Chairman of the Health and Social Services Committee of the STUC. Currently a member of the Employment Appeal Tribunal. He has been involved in a number of voluntary organisations over many years.

**Laura A McCormick** joined the Board in 2007. Qualified in 1996 from Dundee University and has been a partner in a large NHS practice in Glasgow since 2000. She presently serves on the LDC and GP Subcommittee. Currently a VT Adviser in the West Region. Previous experience includes being a media spokesperson for the BDA.

**Jean Fleetwood** joined the Board in 2002. Originally trained in microbiology at Edinburgh University, then worked in virology in the city for a number of years, before returning to the Highlands to bring up her family. As well as a decade of committee work in the voluntary sector, she has served on both local and national bodies, including four years on Highland Health Board.

**Philip Hamill** joined the board in April 2004. Qualified from Glasgow University in 1975 and later set up his own practice in East Kilbride. Has been a vocational trainer since 1989. Other qualifications are BA in Sociology, MPhil (Law and Ethics in Medicine) and a GDGP (UK).

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Cuirear am foillseachadh seo ri fhaighinn ann an grunn chànan, clò-bhualadh mòr is Braille (Beurla a-mhàin). Cuir fòn dhan àireamh a leanas airson fiosrachaidh mar a gheibhear eadar-theangachadh an fhoillseachaidh seo nad chànan coimhearsnachd:

يمكن أن يتوفر هذا الإعلان بلغات مختلفة، وطباعة بحجم أكبر، وطباعة برايل (باللغة الإنجليزية فقط). للحصول على معلومات حول ترجمة هذا الإعلان بلغتك المحلية، يرجى الاتصال بالرقم الوارد أدناه.

यह प्रकाशन विभिन्न भाषाओं, बड़े अक्षरों, ब्रेल लिपि (सिर्फ अंग्रेजी) में उपलब्ध कराया जा सकता है। आपके समुदाय की भाषा में इसे प्रकाशन के अनुवाद के बारे में जानकारी के लिए कृपया नीचे दिए हुए नम्बर पर टेलीफोन करें।

এই প্রকাশনাটি বিভিন্ন ভাষায়, বড় ছাপার অক্ষর এবং ব্রেইলী-ত (শুধুমাত্র ইং-রী-ত) সরবরাহ করা যে-ত পা-র। এই প্রকাশনাটি আপনার মাতৃভাষায় অনুবাদ সম্পর্কিত তথ্যের প্র-স্নাক-ন অনুবাদপূর্বক নিম্নলিখিত নাথ-র টেলি-ফোন করুন :

ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਵੱਖ ਵੱਖ ਭਾਸ਼ਾਵਾਂ ਵਿਚ, ਵੱਡੇ ਛਪੇ, ਬ੍ਰੇਲ (ਸਿਰਫ਼ ਅੰਗਰੇਜ਼ੀ ਵਿਚ) ਉਪਲਬਧ ਕੀਤੀ ਜਾ ਸਕਦੀ ਹੈ। ਇਸ ਪ੍ਰਕਾਸ਼ਨ ਦੇ ਆਪਣੇ ਭਾਈਚਾਰੇ ਦੀ ਭਾਸ਼ਾ ਵਿਚ ਅਨੁਵਾਦ ਲਈ ਜਾਣਕਾਰੀ ਲਈ ਕਿਰਪਾ ਕਰਕੇ ਹੇਠ ਲਿਖੇ ਨੰਬਰ 'ਤੇ ਫ਼ੋਨ ਕਰੋ।

یہ طبع مختلف زبانوں اور بڑے چھاپ میں دستیاب کی جاسکتی ہے، براہی (صرف انگریزی میں)۔ اپنی کمیونٹی کے زبان میں اس طبع کے ترجمے کے بارے میں معلومات حاصل کرنے کے لئے، براہ کرم مندرجہ ذیل نمبر پر فون کیجئے۔

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