KLDC

The 2016/17 Annual Report

KENT LOCAL DENTAL COMMITTEE

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THE 2016/2017 ANNUAL REPORT

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Kent Local Dental Committee

The Secretary's 2016/2017 Annual Report

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The KLDC Secretary Julian Unter writes…

I have pleasure bringing you another year's report of the activities of the Kent Local Dental Committee (KLDC). Your elected dental representative colleagues on KLDC have continued to meet at least quarterly and discuss matters that affect the quality of your daily professional working lives, both now and in the future. The KLDC covers many obvious and many not so obvious issues that directly affect how dentists practice in Kent. In this report I hope to update you on the many issues the committee has been involved with and how we have tried to promote the interests of all Dental Performers, Providers and patients in Kent.

A lot of time has been spent again this year supporting practitioners with patient complaints handling, issues surrounding underperformance and possible inappropriate claiming. Support to practices trying to cope with increasingly complex administration requirements of practice inspections, CQC visits, Information Governance requirements and the common pitfalls to avoid. Whistle blowing has been in sharp focus as some dentists are using this as a threat in breakdowns of business relationships with former colleagues with some unreasonable financial demands rather than for patient protection as originally intended. The GDC is aware of our concerns and will view cases reported accordingly whilst gathering their evidence. This and a lot more is reported below – so take your time to read on! Colleagues are welcome to respond to any issues raised (secretary@kldc.org.uk) and always welcome as an observer at the quarterly KLDC meetings held in Rochester. Contact the chair in the first instance chairman@kldc.ork.uk

Kent Local Dental Committee? Who are we and what exactly do we do?!

- LDCs were set up in 1948, at the inception of the NHS. The Kent LDC remains as the only *NHS body created by Statute* representing dentist's interests within the NHS in the Kent and Medway area. The reorganisation of NHS England to now have a "Local Office" (LO) covering Kent Surrey and Sussex has meant closer ties with our neighbouring LDCs in East Sussex, West Sussex and Surrey through the Channel LDCs Group and joint participation in KSS wide committees and processes. The KLDC's function is to represent the interests of all Performers and Providers through its representation on various committees.

- The Kent LDC continues to be officially recognised by NHS England South (South East) Local Office as the statutory representative of primary care practitioners working within the NHS in the former Kent & Medway boundary. We continue to advise the NHS England South (South East) commissioners, contracts managers, and the Primary Care Directors, Medical Directors and Dental Leads on any issue that is in the interests of GDPs. Meetings are increasing held that also cover Surrey and Sussex (part of NHS England South (South East) administrative responsibilities.

- The Kent LDC has been elected from general dental practitioners (GDPs) on the list of the three former Primary Care Trusts (PCTs) in Kent & Medway. In addition, we have co-opted members such as the Consultant in Dental Public Health (this seat currently vacant) and representation from the dental leads of the Salaried and Hospital Dental Services. The Committee is funded by the statutory levy from all general dental practitioners in Kent.

- The Kent LDC continues to work closely with the NHS England Local Office on all dental contractual and performance related matters. It has given commercial leads to practitioners on representational issues, consultative matters and quality standards. We continue to consult widely with colleagues in other regions and professional bodies such as the General Dental Council, British Dental Association, Kent County Council, Health & Wellbeing Boards (HWBs), various Borough Councils in Kent and other Local Representative Dental Committees throughout the South East (Surrey, East & West Sussex) and the rest of the UK. We meet with our colleagues on the other Local Medical, Optical and Pharmaceutical Representative Committees in Kent to discuss matters of mutual concern on a regular basis.

- The Kent LDC remains committed to improving the viability of general dental practice in your part of Kent and dedicated to represent your interests. Please feel free to confidentially approach any members of the Local Dental Committee if you believe they may be of some assistance to you (membership list on pages 12 & 13).

Membership

The committee has continued to be very competently chaired by Tim Hogan; Steve Newell as vice-chair; Julian Unter and Huw Winstone remained as Secretary and Treasurer respectively.

The KLDC meets as a committee representing all of Kent and Medway coterminous with the current boundaries of NHS England Kent & Medway Area Team. Our next biennial election when approximately half the full committee is re-elected will be due in late March 2017.

Current membership of the committee (and the roles undertaken within the committee) are listed at the end of the Annual Report (pages 11 to 13).

NHS England - Kent & Medway, Surrey and Sussex

NHS England continues to re-invent itself last year with NHS England redescribing the Local "Area Team" (AT) covering Kent, Surrey and Sussex as simply the Local Office (LO) of NHS England South (South East).

The main offices for dental contracts and contract/clinical performance issues are now in Tonbridge and Lewes with performance issues handled in the Horley offices.

NHS England is responsible for national strategy and planning, commissioning and monitoring all primary care medical, dental, optical and pharmacy services. Dental community, secondary and urgent care services are also directly commissioned by NHS England.

Clinical Commissioning Groups and Kent Local (Dental) Professional Network in Kent.

The Governments stated purpose of the reforms is (*apparently*) to refine and streamline the NHS and to make greater use of clinicians in decision making. GP-led NHS commissioning through Clinical Commissioning Groups (CCGs) progress although they stage have not had much if any involvement with primary care dentistry in Kent. There are however two CCGs involving LDC members (Tim Hogan and Mike Watts) in the development of Antimicrobial Resistance (AMR) planning and the misuse of antibiotics (with our focus being within dentistry).

For other directly-commissioned services, clinical expertise resides in Local Professional Networks (LPNs) which are meant to function as an integral part of the Area Team. For dentistry, the LPN which replaced the former Dental Network group (LDN) is already well developed in Kent and is currently chaired by Mark Johnstone.

Complications with the separate development of a matching LDN in Surrey/ Sussex have raised representation concerns for our neighbouring LDC colleagues. After a consultation paper strongly resisted by Kent LDC, a decision has been made to merge the two committees of Surrey/Sussex and Kent into one large committee meeting more frequently. This larger group will be co-chaired by Mark Johnstone (Kent) and Brett Duane (Surrey/Sussex) for a trial period of 12 months. The KLDC view is that a lot of time will be spent planning matters for Surrey Sussex at the detriment of time for Kent and our already well organised Managed Clinical Networks (see below). Time will tell and we will work hard to make the planned change succeed nevertheless.

The past year has seen the further development of Managed Clinical Networks (MCNs) in Orthodontics, Oral Surgery, Oral Health Promotion, Restorative Dentistry and Special Needs Dentistry (the latter two both across KSS rather than just Kent). The Chairs of the MCNs feed directly into the LPN and provide a rapid and effective way of working for the benefit of patients and clinicians.

As the new joint LDN develops it is hoped it will clinically lead and own the delivery of: quality and performance improvement and assurance; local implementation of NHS England strategy; planning and designing local care pathways and services; oral health strategy and improvement; clinical and professional leadership and engagement.

The LDN has KLDC representation and works with the KLDC to ensure that there are clear lines of engagement with the profession locally so that contracting and provider issues across the Kent patch can be openly discussed and receive a consistent response. NHS England South (South East) Dental Leads, Dental Advisers for Kent, representatives from the Salaried Services, Hospital Representatives, Kent Surrey & Sussex (KSS) Education and Training Board (LETB) also attend the LPN.

Kent, Surrey & Sussex (KSS) "Local Team" & Contract "Year End".

Colleagues have probably had reduced personal contact with the renamed NHS England South (South East) as the number of NHS England staff in Tonbridge, Horley and Lewes maintaining contract matters has remained significantly reduced. Many six month and full year contract reviews are a routine email exercise. Despite this, the KLDC has been actively involved maintaining open lines of communication with the NHS England Team and has continued to act as 'go between' linking GDPs and the NHS England management. Contract and performance leads often seek advice from the KLDC on day-to-day matters assisting management of the large dental work force in Kent. Our attendance at the regular Dental Contracts Quality and Assurance Panel (DCQAP) meetings enable us to be well aware of any problems and commissioning staff openly welcome LDC input.

As I comment every year since the introduction of the 2006 contract - relating UDA/UOA as the target by which all judgements are made and by which potential financial sanctions may be applied is iniquitous. It merely continues to generate resentment in practitioners and is unhelpful to patients. A new contract is desperately needed and yet little progress appears to have been made?

The data being produced by the Dental Payments Department (DPD) of the Business Services Authority (BSA) still does not truly reflect day-to-day activity. However, the development of the DAF (Dental Assurance Framework) has resulted in reports being available from the BSA which look in some detail at the claims submitted by performers for NHS treatments. This framework was developed with the objective of giving dental commissioners, contractors and performers as simple a set of indicators as possible along with narrative on how they might be interpreted and how any concerns can be followed up.

Where concerns or "flags" are raised contractors are required to submit a written explanation or action plan around their interpretation of the reports. In some cases contractors have been invited into the Tonbridge or Lewes offices for a face-to-face meeting with Contracts/Dental Leads staff who will have sought clinical advice through the medical directorate usually via their Dental Practice advisers. The KLDC Chair and Secretary have attended several meetings with colleagues to offer support and advice. Some matters are easily explained – however some flags will require a significant correction of current practice and claiming, plus in some cases a reimbursement of fees to NHS England for inappropriate claiming.

Generally the Dental Leads have all been extremely supportive of practitioners in Kent. We shall continue to press them to discuss issues on an individual performer basis so that fair and equitable solutions can always be found. I feel strongly that whatever commitment practitioners have to the NHS, whilst dental care should be available for everyone - it should not be at the expense of the person providing it?

Breach & Remedial Notices.

Not a popular threat and one that NHS England seems to threaten for any deemed misdemeanor. As warned previously, the Local Office (LO) has issued "Breach Notices" to those contract holders who have not performed to their contract requirements i.e. less than 96% performance of their allocation. There is little room for manoeuvre as the LO is required to follow policy issued by NHS England and the only exceptions seem to be those that are *force majeure* ie that essentially frees both parties from liability or obligation when an extraordinary event or circumstance beyond the control of the parties occurs. That may be hard to prove and therefore is best avoided wherever possible. Early discussions with the AT regarding potential contract under-performance are absolutely essential.

Contract "underperformance" is one of several reasons for the issue of a Breach or Remedial Notice. Colleagues will find an extensive guidance regarding common reasons for Breach and Remedial notices in an article prepared by the Chair Tim Hogan on the KLDC website which gives accurate and updated information. www.kldc.org.uk/information/breach-notices . The current Chair (Tim Hogan) and Secretary (Julian Unter) are always available to support individual cases if confidential advice is needed.

Dental Electronic Referral Service (DERS)

The introduction of IMOS (for referral of complex extractions/oral surgery etc) several years ago in Kent was seriously hampered by the slow triage arrangements. With the variety of referral arrangements for the different dental specialties in Kent, NHS England has been looking to introduce a comprehensive dental electronic referral service (DERS). This would assist dentists to comply with the GDC "Standards for the Dental Team" supporting them to provide sufficient detail of the care required when referring patients. NHS England recognised the need for dentists to meet these standards and ensure patients are treated at the right location, by the right service, at the right time. A comprehensive system that could then be rolled out in Surrey and Sussex was the next requirement.

Most colleagues will now be familiar with the Dental Electronic Referral Service (DERS) introduced by the NHS England Local Office supplied by Vantage Diagnostic Ltd who have ten years' experience in dealing with medical patient referrals.

Considerable consultation had taken place both prior and subsequent to launch between Vantage, the KLDC, Dental Practice Advisers, Specialists and Consultants across Kent to ensure that their cloud-based system 'Rego' was customised appropriately for Kent's referral processes. Rego, as a system, is compatible with most existing dental software and so there is no need to populate patient demographic information and it has the ability to upload digital radiographs & photographs. Scanners were supplied to practices that were still film based. The option to include all endodontic referrals was included in the initial launch, then sedation referrals and now all orthodontic referrals in Kent since December April 2016. Eventually Community and will be added too.

Whilst there have been "teething troubles" - generally the system has proved to be very effective speeding up the system considerably. Uniquely it allows practitioners to monitor the progress of all referrals once initiated. The opportunity to fine tune the system ahead of its subsequent launch to Surrey and West and East Sussex has quickly resolved the need to manually triage every oral surgery referral and raised the clinical and administrative standards of the referral process.

Intermediate Minor Oral Surgery (IMOS)

The Intermediate Minor Oral Surgery referral service (IMOS) is now well established across Kent and has been significantly enhanced since the introduction of triage via DERS . All practitioners are required to refer difficult extractions or other surgery of complexity beyond their competence to the IMOS service. This service has reduced the number of inappropriate referrals to the hospital services and provides care more locally and promptly for your patients.

Endodontic referrals

Referrals to the Kent endodontic referral service via DERS also continue to be monitored to avoid overload and abuse. Referrals are accepted against some fairly strict criteria effectively excluding molar teeth unless they are an essential requirement such as a bridge abutment. Like the IMOS referrals, the quality of referrals and particularly radiographs submitted by practitioners are often of an extremely poor standard and reflect badly upon the referring dentist. The new DERS system is improving the quality of referrals as data often missed previously now has to be entered before the referral process proceeds.

CQC (Care Quality Commission)

The KLDC has continued to offer support subsequent to enquiries from constituents, as practice owners try to fulfil the somewhat onerous continuing requirements of CGQ registration and regulation.

Provider Compliance Assessment visits by CQC Officers have continued across Kent – although the process seems to have slowed considerably. The CQC apparently now operate a more "targeted" approach to their inspections relying upon varying sources of soft as well as tangible information. Since the arrival of John Milne (Senior National Dental Adviser) and the appointment of Sampana Banga – Head of Dental Inspections at the CQC plus using dentally qualified support for the inspections some sense has at last arrived.

Knowledge of the Mental Capacity Act, Infection Control, HTM01-05, audit and staff training are still among the most likely to be assessed areas.

Complaints & KLDC Support for Practitioners

The basics are that any complaints should be acknowledged within 2 working days. The complaints investigation/response period should be negotiated with the complainant, but there is nothing wrong in suggesting 10 working days and if they do not contest that then that would be taken as agreement. However, if you are going to take longer than you need to notify the complainant, and the date for doing this would be part of negotiating the complaints plan with the complainant. Verbal complaints can be taken, but should be written up and if possible confirmed with the complainant.

NHS complaints may be made to either the practice directly, or to NHS England for the Local Office to investigate as the Commissioners.

Help! Counselling Support Line – Sometimes things just get too much - both for dentists and their staff/colleagues. Frustratingly previous NHS funding for the much needed support service offering a personal and confidential counselling self-referral service to all practices and their staff through a network of counselling practitioners disappeared. Up to date information regarding self-referral counselling is available on the KLDC website http://www.kldc.org.uk/information/counselling-services Help with psychological therapies is free of charge through the NHS or you can pay to receive service by 'going private' – which inevitably will be quicker. Please contact the KLDC (*in confidence*) if you need help (secretary@kldc.org.uk)

Some useful further contacts include:
HSE Guidance: http://www.hse.gov.uk/stress/mystress.htm
NHS Choices: Beat stress at work http://www.nhs.uk/Conditions/stress-anxiety-depression/Pages/workplace-stress.aspx
and Ten stress busters http://www.nhs.uk/Conditions/stress-anxiety-depression/Pages/reduce-stress.aspx to identify signs of stress and monitor personal stress levels
MIND: How to be mentally healthy at work
http://www.mind.org.uk/media/46937/how_to_be_mentally_health_at_work_2013.pdf
Relate: Maintaining a healthy work-life balance http://www.relate.org.uk/relationship-help/help-relationships/relationship-common-problems/im-finding-it-hard-maintain-good-work-life-balance
The Dentists' Health Support Programme (DHSP): The DHSP provides advice and support on addiction, mental illness and fitness-to-practise concerns. Advice is free of charge via a confidential helpline: 020 7224 4671 or dentistsprogramme@gmail.com

How can <u>your</u> LDC help…? Please remember that your LDCs' elected members are always willing *on a strictly confidential basis*, to offer advice on complaints and practice problems, should you feel in need of support, in addition to recommending the assistance of your Professional Indemnity Provider if appropriate. If you are unsure who to approach on the LDC, or you want advice from someone out of your area, speak to the Secretary as a first point of contact – PLEASE DON'T GO IT ALONE! A number of colleagues avail themselves of this confidential service and usually find the reassurance and advice of a like-minded colleague of considerable support. Contact details are listed at the end of the Annual Report

Dental Advisory Group (PAG) & Performer List Decision Panel (PLDP) – Representing practitioners' interests

The NHS England South (South East) Local Office has two committees that deal with concerns over practitioner performance and "suitability". PAG deals with specific issues referred to it regarding alleged practitioner performance issues. Referral may come from contract performance / claiming concerns; whistle blowing; patient complaints; GDC referrals etc. This group has always extended an invitation for KLDC Representation and this is now taken in rotation with Surrey and East Sussex LDCs.

The PAG maintains strict confidentiality. Investigations include inviting practitioners to talk directly to dentally qualified investigating officers and to confidentially discuss matters of concern when serious complaints have been raised against them. In suitable cases, this may reassure NHS England to defer possible further disciplinary action being taken against the practitioner and persuade the practitioner to make a marked change in practice or clinical procedures to prevent further problems. The PAG has continued to be effective in supporting colleagues. Discussions of individual cases enable the group to learn from the difficulties practitioners are experiencing and offer experienced support as necessary. The PAG makes recommendations to the Performance List Decision Panel (PLDP) who ultimately decide whether practitioners continue to be suitable to remain on the NHS Performers List and practice in Kent. Each case is thoroughly investigated as panel procedures are very strict and discuss conditions and standards based on civil law rather than criminal law. KLDC is also represented with continuing voting rights at PLDP.

Dentist agreements – not a problem…or is it?

Sadly the answer is **YES** and **FREQUENTLY**! Every year for the last 26+ years I have to repeat the need for Providers and Performers to have an approved written agreement between them as I regularly find they need to seek advice from the KLDC when verbal or poorly written agreements fail. In the world of Providers and Performers many existing 'old style' Associate Agreements will have required significant amendment to meet new CQC obligations. Providers (Principals) generally hold the NHS contract for themselves and their Performers in Practice based contracts and a written agreement covering arrangements is absolutely crucial.

It is essential that Practitioners have proper written contracts between themselves that set out the basis of the agreements between the two parties covering working conditions and financial matters. This requirement extends to self-employed Hygienists and Therapists too. The BDA is a good source for outline contracts that can be amended to suit specific practice circumstances.

LDCs 64th Annual Conference – June 2016* *@ 8TH- 9TH JUNE HELD IN THE HILTON DEANSGATE HOTEL, MANCHESTER*

Drs Hogan, U Patel, V Patel, Shivji and Winstone attended the conference and dinner as members of the LDC with Drs Wood and Hartle (who kindly prepared a written report) attending on behalf of the GDPC.
Kent submitted the following motion - *"This Conference supports the continuation of travel and subsistence reimbursement for Dental Foundation Dentists and Educational Supervisors according to NHS terms and conditions".*

Manchester 16/17th June 2016 - LDC Conference Report*

This year's annual LDC Conference took place in Manchester and was a success with excellent speakers and changes which made it a more manageable and productive two day event. The introduction of iPads for all to view presentations and vote on has brought us up to date with technology at last.

All the speakers' presentations are available on the LDC Website. Even though the minister, Alastair Burt, pulled out at the eleventh hour, Tony Grime from PCSE, Sara Hurley the CDO and Matthew Hill from the GDC were worth the journey. Nick Stolls, the Conference Chair, was kept busy managing the queues at the microphones as there were a lot of delegates with questions. The speakers all answered candidly what questions they could and Sara Hurley stayed 'til the close of Conference answering questions and mingling with delegates.
The opening speaker was Henrik Overgaard-Neilsen, Chair of GDPC at the BDA. He led us through a presentation on the current prototypes, of which there are 82 (3 salaried, 58 rolled on from the pilots and 21 from UDA system), he clearly favours Blend B, which has the higher capitation element. He introduced MPIG (Minimum Practice Income Guarantee) into the debate and stressed that prevention was an activity, discussed the risks of DQOF and claw backs. It has been debated at GDPC meetings that NHS dental practices are being used as tax collectors for the government and alternatives are being sought. The prevalence of caries in adults has decreased over the last 11 years……thanks to the continuing good work of the dental profession not the government!

Tony Grime from PCSE followed, that afternoon, and he was very careful to stress that he only worked for the PCSE side of Capita not Compass. (Compass which is having so many "fixes" it might actually be fit for purpose one day!) PCSE is aiming to answer 80% of calls within 3 minutes. Hopefully they will sort out their stock levels and we will all see Citysprint vans approaching before we actually run out of supplies. The question was asked …will we one day be charged for stationery supplies? It went unanswered.

Motions were debated and voted throughout the two days the majority were passed 21, 1 unanimously and 6 defeated. Passed unanimously was motion 22 proposed by Enfield & Haringey LDC:

> *"This Conference demands that when new software is developed for the NHS all contractors dependent on that software should be automatically indemnified against financial penalty or breach notice until an agreed period following either introduction of the software or agreement that the software is fit for purpose."*

Food…….Catering for dentists must be fun! Can't complain as it was all very palatable this year. The after dinner speaker was Stephen Hancocks OBE, who came out with some hilarious jokes and some very Mancunian humour….at one particular celebrity's expense! There is a cocktail in his honour served on a strip of Astro Turf! Nick Stolls, conference chair, delivered a brilliant end of dinner speech that really laid out the key issues for dentists and was received with a thunderous applause and many favourable comments by delegates the following day.

Next morning, back to work. Elections and motions! With military precision Sara Hurley CDO appeared at the podium to speak at 9.20 on the dot! As usual she presented a lot of material and issues that she is advising on currently. She referred to integration of dentistry within the NHS, FYFV (Five Year Forward View), rebalancing regulation, The Guardian's article "The secret life of a dentist" and the looming elections. She feels that we the profession should be offering the Government some of the solutions. There is competency and desire at LDN level but the question is do they have the capacity and capability to answer the questions and the accountability to deliver the solutions! Nine months into her new job she is still talking the talk but is it time to turn that advisory roll into a more influential one? Representing the interests of dentists within the constraints of the CDO job spec was never going to be easy.

Matthew Hill, from the GDC, was next up and as he prepared for what many would perceive as a difficult audience…….He showed us that he has the desire to improve the culture at 37 Wimpole Street! He admits it is going to take some time to turn the GDC into a "high performing official regulator that has the confidence of the patients and practitioners". He was applauded for his views on the current "regulation" and how punitive it is and wants to turn this into a system based on learning and promoting good behaviour! He recognizes that improvements are needed to the FTP system and that we need more local resolution and better management of the GDC budget. This autumn there will be a major GDC consultation. He has volunteered to visit LDCs all around the country as part of the reformation process. Not quite what we were all expecting.

As usual there were presentations from BDG, DHST and the Ben Fund. All these bodies do extremely good work supporting dentists working for the profession and in looking after professionals in their hours of need. Kent LDC is as always amongst the most generous contributors and it is hoped that all LDCs will contribute £20-25 per dentist. Legal opinion has been sought on whether the Statutory Levy can be used to support these bodies. The regulations are above the guidance and they stipulate that the Statutory Levy can be used to fund these activities as it is "representing and supporting local practitioners".

Many thanks to this year's sponsors and organisers. Lots of work to keep GDPC busy trying to action the motions that succeeded. Next year we will be in Birmingham with Alisdair McKendrick in the Chair. Jo Hendron from Wakefield LDC following in the esteemed footsteps of John Milne and Mick Armstrong ….they do breed them like that up in Yorkshire……. was voted in chair elect for 2017 after a close contest.

* With special thanks to Dr Liz Hartle Kent LDC and GDPC member for preparing this report.

LDC Officials Day December 2016

LDC Officials Day in December 2016 was attended by Drs Hogan & Unter along with Drs Hartle and Wood (GDPC). Officials Day was well attended both by colleagues and informative speakers.

This year there was a welcome from Joe Hendron – Chair Elect for the LDC Conference and Eddie Crouch – BDA Principal Executive Committee; presentations from; Henrik Overgaard-Nielsen (Chair GDPC) with the GDPC responses to the 2016 LDC Conference motions and Jill Matthews – from the Intensive Expert Management Team PCSE – [Primary Care Support England]; there was an update from Capita taking over responsibility for the National Performers List, and; there were presentations from the British Dental Guild (Howard Jones); from the Dentists' Health Support Trust (Brian Westbury) and The BDA Benevolent Fund (Laura Hannon). Finally Matthew Hill – Director of Strategy at the GDC on Rebalancing Regulation – presented a very similar report to the one he gave the committee in October and the LDC Conference in June 2016.

In the afternoon under the chairmanship of Alistair McKendrick, there were updates on: Commissioning Developments and current work on Regulation and Quality Improvement from Sara Hurley – CDO; Eric Rooney & Janet Clark – both deputy CDOs. Finally, a presentation from Hamid Butt, Head of Dental and Eyecare Finance and Financial Policy Lead for the Dental Contract Reform Programme, Department of Health. His presentation on contract reform suggests steady but very slow progress. This day is an excellent day for information transfer to a smaller group of officials and helps drive the year ahead.

DentaLine - Out-of-Hours Emergency Dental Services (EDS)

Performers and providers are not contractually responsible for providing out-of-hours emergency cover for their NHS patients (but remember you continue to have a professional responsibility for your private patients). The DentaLine centres continue to attract much out-of-hours activity in Kent. The use of telephone triage at the centres has effectively filtered out many non-emergency attendances significantly improving the availability and particularly the quality of the service provided by DentaLine care in the centres.

DentaLine is managed and provided by Medway Community Healthcare (MCH) based in MCN House, Gillingham Business Park. Facilities at the Canterbury DentaLine centre are poor and efforts are still being made to relocate the service within the Canterbury area. This relocation has unfortunately become excessively protracted and no real change has occurred since I reported over the last several years. This is not a fault of the MCH service but more NHS Estates who manage the property the clinic occupies.

If you have problems providing emergency cover during any periods of absence or holiday, then contact the Dental Practice Advisers via the NHS England offices at Wharf House in Tonbridge ☎ 0113 807 0104, who can help put you in touch with local colleagues who may be able to assist.

Dental Practice Advisers

We have continued to maintain an excellent dialogue with the Dental Practice Advisers (DPAs) to the NHS England South (South East) Local Office. All advisers are experienced General Dental Practitioners and regularly attend LDC meetings to receive feedback from GDPs. The NHS England South (South East) Local Office has recently appointed several new advisers after suitable selection.

Practice Inspections

The NHS England South (South East) dental team continued over the year to carry out the on-going 'rolling' three year practice inspections in order to assess the compliance of dental practices. The practice inspection document forms a corner stone of practice Clinical Governance compliance in the Quality Standards obligations of the current dental contract. The inspection document has recently undergone further review in order to comply with the ever changing legislative regulations affecting dental practice including CQC etc. The KLDC has had a protracted period of discussions with NHS England regarding what qualifies as an instrument and therefore what has to be "wrapped" when it is stored. Some sense was finally been agreed regarding film holders, plastic sucker tips and impression trays and hopefully achieved a more open attitude to some aspects of infection control that are not covered in HTM01-05. A post inspection feedback form is being devised that will allow practices either directly or anonymously via the KLDC to feedback to the Local Office and DPAs on any aspect of the inspection process.

Colleagues are reminded that two members of the KLDC have particular knowledge of practice inspections and are able to offer realistic advice to practices undergoing compulsory inspection from the PCTs. Contact the Chairman (chairman@kldc.org.uk) or Secretary (secretary@kldc.org.uk) in the first instance.

Kent Oral Health Promotion Network (OHPN)- (*previously* Kent Dental Advisory Committee)

Six members of the KLDC have maintained a positive contributory role on the Kent Oral Health Promotion Network chaired by Sarah Davies (Clinical Lead Dental Service / Specialist Dentist - MCH Community Dental Service).

The committee is attended by hospital (HDS) & salaried (CDS/PDS) practitioners, BDA representatives, KSS Deanery staff, Dental Practice Advisers (DPAs) as well as general dental practitioners (GDPs) and colleagues working with Oral Health promotion in Kent.

The OHPN is part of the Managed Clinical Network that reports directly to the Kent Local Dental Network (LDN). OHPN advises the LDN on oral health promotion matters through the Chair with the aim to improve the oral health of the residents of Kent through partnership working, building healthy public policy, strengthening community action, creating supportive environments, developing personal skills and re-orientating health services.

There is great motivation and aspiration in all attendees to promote dental health and discussion at well attended meetings have been wide ranging. Much is already being done in Kent – and plenty more is planned!

South East Coast LDCs ('Channel Group')

The South East Coast group of LDCs (Kent, East Sussex, West Sussex & Surrey) have quarterly meetings of the chairs and secretaries. This enables Kent LDC to compare and contrast with the other S E Corner LDCs many matters of mutual interest that are occurring throughout the South East Region of Kent, Surrey and Sussex (KSS). Wide-ranging discussions have covered, amongst other things: NHS England Local Office contract problems; breach and remedial notices, complaints and actions of the Performers List Decision Panel (PLDP) and Performance Advice Panel (PAG), Practice Inspections, Emergency Dental Services and roll out of the Dental Electronic Referrals service (DERS) across KSS. The Channel Group also send a representative to the BDA's Regional Representative Group of LDCs so we are in touch with national issues affecting general practice.

With the restructuring of Kent, East and West Sussex and Surrey into one "Local Office" (now simply NHS England South (South East), maintaining this unique dialogue continues to be very important and now incorporates liaison attendance by the Senior Contracts Manager (Dental) for NHS England – South (South East). This is particularly important now that contract issues and performance matters are dealt with centrally for all four LDCs.

Something else you should know!

- **KLDC Website** – **www.kldc.org.uk** The website continues to be developed and is an increasingly useful resource for colleagues. We have posted urgent information pertinent to Kent GDPs as soon as it is released. More recently we have published guidance on: Information Governance Toolkit 10 – (Version 14) for Dentists; Breach & Remedial notices; Anticoagulants – Reference guide for management of dental patients taking anticoagulants or antiplatelet drugs; Antimicrobial Prescribing & Resistance in Dental Practice; DERS – for IMOS, endodontic, restorative and orthodontic referrals in Kent. There are also updated sections on the Mental Capacity Act, Counselling Services and NHS England Practice and CQC Inspections (no intended connection between these four items!) www.kldc.org.uk

  The site also posts KLDC membership inc. telephone and email contact details; approved Minutes of KLDC meetings and advice on topical issues such as CQC registration are on the site too. Have a look at this useful resource and let us know if

there is anything you would like to see published on the website to assist you or colleagues in Kent that we have not already thought of!

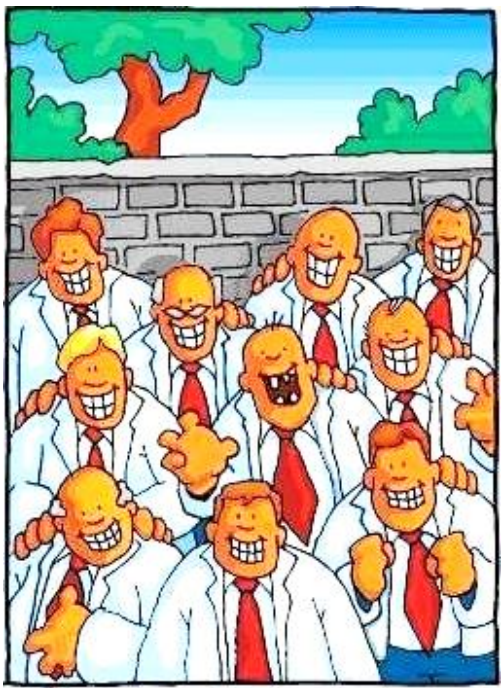
- **Statutory Levy –** All GDPs are working in the General Dental Services are statutorily required to pay the Statutory Levy which funds members supporting practitioners, funds attending NHS England Area Team meetings and day-to-day running and office expenses of the committee. The levy supports the very important activities of the BDA's General Dental Practice Committee and, more particularly, any actions taken by the KLDC in support of practitioners to promote practice viability in Kent. Locally this would be activities such as practitioner support meetings; backing for individual practitioners with performance issues with NHS England (attending hearings offering support and an independent view); assisting colleagues with alcohol/drug and /or emotional problems.

...and finally.

Huw Winstone and Shabir Shivji have reported on the KSS Deanery (KSS Health Education England) Dental Foundation Training Schemes in Kent and the Statutory and Voluntary Levies. A statement of accounts for 2016/2017 is also presented together with full details of the membership of the Committees for 2016/2017, including the status of members and their main functions on the Committee(s): additionally, representation on other committees and related bodies is listed.

Julian M. Unter BDS LDSRCS
March 2017 ©
Secretary to the Kent Local Dental Committee
secretary@kldc.org.uk

KLDC Secretary's REP 2016~17.Doc



Nine out of ten dentists
recommend brushing your teeth….

Statement of Accounts

KENT LOCAL DENTAL COMMITTEE 2016/2017

	TRAVEL	LOSS OF EARNINGS	OFFICE	STATIONERY POST & PHONE	CLERICAL	SUBSIST-ENCE	HONORARIA	ANNUAL CONFERENCE	OTHERS	TOTAL
2015/2016	4,052.00	31,892.00	0.00	2,498.22	2,581.80	996.00	25,850.00	450.00	1,231.43	69,551.45
2016/2017	4,240.22	40,582.50	772.95	1,287.57	2,745.00	1,134.75	26,290.00	3,525.76	1,866.00	82,444.75

RECEIPTS

Balance b/fwd	£57,197.66
Income: Statutory & Voluntary Levies	£108,444.78
	£165,642.44

EXPENDITURE

Expenditure above	£82,444.75
To British Dental Guild	£16,575.00
To Dentists Health Support Trust	£10,000.00
To BDA Benevolent Fund	£4,000.00
Balance at Bank at year end	£52,622.69
	£165,642.44

Huw Winstone – Treasurer April 2017

Health Education England

2016/17 Report on HEE Dental Foundation Training

for Kent LDC Annual Report

1. In September 2016, twelve new graduates commenced the 2016/2017 HEKSS (Health Education, Kent, Surrey & Sussex) East (Canterbury) Dental FT scheme and another twelve commenced the HEKSS Central (Pembury) scheme. Foundation Dentists on the HEKSS Schemes all are entered for the Postgraduate Certificate in Primary Dental Care, which is validated by the University of Kent.

2. After a successful pilot year, all UK DFT schemes now have assessment processes and logs of FD achievements to evidence satisfactory completion of Dental Foundation Training

3. Foundation Dentists on all HEKSS schemes took part in the Older Persons Oral Health Initiative. This involved visiting care homes to help carers to improve the oral health of residents. This is running again this year under the guidance of Mike Wheeler.

4. HEKSS is merging with Health Education London and will in future be known as Health Education London and South East (HE LASE). The KSS Dental Education Booking Service (DEBS) and the London eWisdom website are being merged. The DEBS site will soon be discontinued.

5. HEKSS Associate Dean for workforce and DCPs, John Darby has now been appointed as Postgraduate Dean for Thames Valley and Wessex.

6. Recruitment of foundation dentists for all England and Wales DFT schemes is via a national recruitment process. Interviews for the 2016/2017 entrants took place in November 2016 at various venues around the U.K.

7. A local recruitment event where potential Foundation Dentists meet the trainers on the schemes they have been provisionally allocated to took place in April 2017 at the education centres.

8. Dentists wishing to be trainers for the HEKSS Dental FT schemes should check the LASE web site dental pages for details. For further details, contact Iris Handy on ☎ 020 7415 3424 or ihandy@hee.nhs.uk All new applicants will be expected to attend an information introductory session.

9. For local advice about Dental FT, Shabir Shivji or Huw Winstone can be contacted via Iris Handy on ☎ 020 7127 6264 or sshivji@hee.nhs.uk and hwinstone@hee.nhs.uk

10. Full-time trainers received (2016/2017) a total contract value of approximately £107,700 for a full time foundation dentist (FD). From this money the trainer pays the Foundation Dentist their salary (currently) £31,044 and also has to fund their own loss of earnings for Foundation Training sessions attended – usually 14 half days per year, for which a trainer grant of £9,324 is included in the total sum. Employer's National Insurance costs are also reimbursed. The remainder (£64,164) represents a payment for the cost of treatments provided by the Foundation Dentist.

Huw Winstone - Associate Dean for Dental Foundation Training & Training Programme Director KSS East
Shabir Shivji – Training Programme Director KSS Central
Dental Department

Health Education England
Stewart House | 2nd Floor | 32 Russell Square | London | WC1B 5DN
W: www.lpmde.ac.uk

Listing of Representatives on KLDC Committees/Other Bodies

2017/18 members are listed for guidance. Members are appointed to certain positions by the committee rather than elected (indicated thus†). All other positions listed are open to elected members however some committee positions require continuity each year because of the nature of the work involved. In this case members are appointed.

Name of Committee	Member(s)
PAG Performance Advice Group **PLDP** Performance List Decision Panel	Dr J M Unter (as LDC Sec) † Dr T Hogan†
OHP MCN Kent Oral Health Promotion Managed Clinical Network (*Co-ordinator* - Dr Sarah Davies)	Dr T Hogan Dr J M Unter (as LDC Sec) † Dr M Nugent Dr M Watts
OMCN Orthodontic Managed Clinical Network Service Improvement Group	Dr C Sheridan Dr N Ahmad (deputy)
OSMCN Oral Surgery Managed Clinical Network Service Improvement Group	Dr J M Unter (as LDC Sec)† Dr M Watts (as deputy)†
Dental Foundation Training **Programme Directors (Kent)**	Dr H Winstone* & Dr S Shivji*
Hospital Representative	Dr A Elder†
LMC Representative	Dr M Nugent
BDA - General Dental Practice Committee	East Kent Dr Cheryl Wood* West Kent Dr Elizabeth Hartle*

† Appointed position * Denotes not appointed by the KLDC

March/April 2017

Membership of the Kent Local Dental Committee - April 2017

Constituency / *former PCT*, Main Functions and contact number ☎or email ✉@

OLUROTIMI ADESANYA: Medway
☎ 01634 576688 ✉@ timi@watlingstreetdental.co.uk

NASIR AHMAD: Eastern & Coastal Kent**;** Orthodontic Managed Clinical Network (OMCN) (*deputy)*
☎ 01233-610353 ✉@ nasirahmad77@hotmail.com

SURINDER BHATTI: Eastern & Coastal Kent
☎ 01227 761158 ✉@ surinder.dental@gmail.com

SOMITRA BANVIR: Eastern & Coastal Kent
☎ 01227 765851 ✉@ somitra88@yahoo.com

JUDITH BARHAM: West Kent
☎ 01622 756652 ✉@ judibarham@btinternet.com

RETHA CARSTENS: Eastern & Coastal Kent
☎ 01795 434910 ✉@ retha@btinternet.com

SARAH DAVIES: Co-opted member; Clinical Lead for MCH Community Dental Service.
☎ 01634 334660 ✉@ sarah.davies4@nhs.net

ANDREW ELDER: Co-opted member; Consultant in Restorative Dentistry; Hospital Representative
☎ Sec: 01233 616683 / Mob: 07887 560275 ✉@ andrewelder@nhs.net

ELIZABETH HARTLE: West Kent; GDPC member for West Kent
☎ 01892 833926 ✉@ elizabeth.hartle@gmail.com

TIMOTHY P. HOGAN: West Kent; Chairman to Kent LDC; NHS England South (SE) Local Office Performance List Decision Panel (PLDP); Kent Oral Health Promotion Managed Clinical Network; NHS England South (SE) Local Office Dental Contracts and Quality Assurance Panel (DCQAP); SE Coast (Channel) LDCs Group Representative
☎ 01622-844892 ✉@ tim1.hogan76@gmail.com or chairman@kldc.org.uk

KENNETH HYMAS: Eastern & Coastal Kent; Dental Practice Adviser
☎ 07939 527253 ✉@ ken.hymas@nhs.net

MARK JOHNSTONE: Co-opted member; Managing Director of Dental Services. Kent Community Health NHS Foundation Trust; Co-chair KSS Local Dental Network (LDN)
☎ 0300 790 0158 ✉@ mark.johnstone@nhs.net

YE KYAW MYINT: Eastern & Coastal Kent
☎ 01227 765851 ✉@ yegman@gmail.com

STEVE NEWELL: West Kent; Vice-Chair to Kent LDC; (Specialist Orthodontist)
☎ 07710327566 ✉@ ortho@may.be

MARK NUGENT: Medway; Kent Oral Health Promotion Network; LMC Representative
☎ 01634-231776 ✉@ wickhamhall@aol.com

NAISHAD PATEL: Eastern & Coastal Kent
☎ 01303 262683 ✉@ nash@pennypotdental.co.uk

UJWAL PATEL: Medway
☎ 07985 710036 ✉@ uj1patel@hotmail.co.uk

VIKAS PATEL: Medway
☎ 01634 232204 ✉@ vikaspatel78@gmail.com

CONNIE SHERIDAN: West Kent; Orthodontic Adviser; Orthodontic Managed Clinical Network (OMCN)
☎ 01474-704736 ✉@ sheridan.cm@gmail.com

LAURA SMITH: Eastern & Coastal Kent
☎ 01843 603946 ✉@ lauraems_uk@hotmail.com

SHABIR SHIVJI: West Kent; Programme Director HEKSS Central (Tunbridge Wells) Dental Foundation Training Scheme; Dental Practice Adviser
☎ 01622 750809 ✉@ shabba@shivji.me.uk or sshivji@hee.nhs.uk

JULIAN M. UNTER: Medway; Secretary to Kent LDC; Kent Oral Health Promotion Managed Clinical Network; KSS Local Dental Network (LDN); NHS England South (SE) Local Office Performance Advice Group (PAG); Oral Surgery Managed Clinical Network (IMOS) LDC Rep; NHS England South (SE) Local Office Dental Contracts and Quality Assurance Panel (DCQAP); KLDC Website; SE Coast (Channel) LDCs Group Representative/Treasurer

☎ 01634 235377 Fax: by arrangement *(call or email first)* ✉ secretary@kldc.org.uk

BOBBY VARGHESE: West Kent

☎ 0844 375 6363 ✉ drbobs1979@hotmail.com

MIKE WATTS: Kent Oral Health Promotion Network; Oral Surgery Clinical Network (IMOS) LDC Rep *(Deputy)*

☎ 01843 591155 ✉ dr_mike_watts@btinternet.com

JUNE WILLIS-LAKE: Co-opted member; Strategic Dental Director, Governance - Dental Service Business Unit: East Kent Salaried Primary Care Dental Service

☎ 0300 790 0158 ✉ june.willis-lake@nhs.net

HUW M. WINSTONE: West Kent; Treasurer to Kent LDC; Programme Director KSS East (Canterbury) Dental Foundation Training Scheme; Associate Dean for Dental Foundation Training (Year One) HEKSS East; Dental Practice adviser.

☎ 07769 687181 ✉ huw.winstone@nhs.net or treasurer@kldc.org.uk or hwinstone@hee.nhs.uk

CHERYL WOOD: Eastern & Coastal Kent; GDPC member for East Kent

☎ 01303 251598 ✉ cherylaewood@gmail.com

GDPC Members for Kent (who attend KLDC meetings)
East Kent: Cheryl Wood
West Kent: Elizabeth Hartle
Both attend KLDC meetings as elected members of the committee

Members who served during the year to March 2016
SHRIKANT KULKARNI: West Kent
JOHN LYNCH: West Kent
COLETTE O'SULLIVAN: West Kent
MAHESH PATEL: Eastern & Coastal Kent
MANOJ PATEL: Eastern & Coastal Kent

We are very grateful for their help and support

There are currently (April 2017) two vacancies on the committee – all in West Kent. These are open to any eligible practitioner on the Kent list in West Kent.

Abbreviation key:
DERS – Dental Electronic Referral Service
LO – Local Office - of NHS England South (South East) – *was called* - AT - Area Team
PLDP – Performers' List Decision Panel
PAG – Performance Advisory Group
FT – Foundation Trainee / Trainer
KSS – Kent, Surrey & Sussex
IMOS - Intermediate Minor Oral Surgery
LDN - (Kent) Local Dental Network

Thank you to all who have contributed to the production of this report.
Please address any comments or queries to the Secretary.