

KLDC Minutes April 2020

MINUTES OF THE SIXTY-EIGHTH MEETING OF THE KENT LOCAL DENTAL COMMITTEE HELD ON WEDNESDAY, 8TH JANUARY 2020

These minutes should be read in conjunction with the attached reports relevant to each agenda item were appropriate/available as presented to the meeting. If any links in this page do not work, please let us know via the Top Menu / Contact page.

AT 6.00 PM AT

THE HOLIDAY INN, MAIDSTONE ROAD, ROCHESTER, KENT ME5 9SF

Present: Drs Adesanya, Ahmad, Barham, Banvir, Bhatti, Carstens, R Chopra, Davies, Hartle, Hamill, Hogan, Myint, N Patel, U Patel, Raghava, Ramamoorthy, Sheridan, Smith, Watts and Winstone.

Observers: Dr Muneer Patel.

1. WELCOME AND APOLOGIES FOR ABSENCE

Dr Hogan opened the meeting by wishing members a very Happy New Year. He reminded everyone to register their car number plates at the reception desk as there was a significant fine if they did not do so. He announced that they had received two resignations due to retirement since the last meeting; firstly, Dr Watts and secondly Dr Hymas. Both had attended this evening's meeting to say their goodbyes. Dr Hogan thanked them both individually for their contributions to the meetings; Dr Watts for his work in East Kent and the Antimicrobial Steering Group and Dr Hymas for his tremendous work as Clinical Advisor and Foundation Training. Dr Hogan said they would both be missed and on behalf of the committee wished them both every success in their retirement. The retirements have resulted in two vacancies becoming available in East Kent.

Dr Winstone read out the Constitution –

The KLDC Constitution states at 15.1:

Should a vacancy in the membership of the Committee occur:

15 (a) whether by reason of termination, death or disqualification, a casual vacancy in the membership of the Committee occurs, the Committee shall, except in the circumstances mentioned at 15(d), hold a by-election to fill that vacancy.

15 (d) states; where the remainder of the term of office of the post vacated is less than twelve months the Committee may instead co-opt an eligible practitioner falling within the same category to fill that vacancy for the remainder of that term of office only.

Dr Hogan advised that this meant we are obliged to run a postal ballot in the EK constituency as co-option is not permitted. (Dr Hogan asked the Clerk Mrs Tracy Moynes and she agreed to be the Returning Officer).

Apologies were received from Drs P Chopra, Elder, Shivji, Varghese, Wood and Unter.

2. LAST MEEETING, WEDNESDAY, 9TH OCTOBER 2019

(a) Confirmation of Minutes [[Report attached: Item 2\(a\) Oct19 Minutes](#)] – The minutes were agreed and will be uploaded onto the website as usual with the reports.

(b) Matters Arising (Actions):-

2.2 TPH: DSP Toolkit – Dr Hogan had previously had a discussion with Dr Bhatti and they had taken the view that they were not sure how much the LDC needed to be involved in this as it seems easy enough to navigate. It was therefore decided to remove the current IG10 vers14 Documentation as this is out of date and write an appropriate signpost to a link to the DSPT website. Action: Dr Unter to update website.

2.4 JMU: New BDA LDC Constitution – Dr Unter is still to review this but it is not urgent.

2.5 JMU: Bisphosphonate Guidance – this has been uploaded onto the KLDC website as part of SDCEP web link.

2.10 TPH: Hep B Vaccinations – Dr Hogan advised that he had not been able to progress a service from the GP's despite initial expressions of interest from 5. However, following from the LMC, LDC, LPC joint meeting some pharmacists are certificated to provide Hep B vaccinations and a list of providers with associated charges is currently being compiled by the CEO of Kent LPC – Shilpa Shah. Dr Carstens advised that Lloyds pharmacy can carry this out if the nurse was over 18. Dr Hogan asked the committee if anyone had any further information to let him know so that this could be explored in more detail.

5 (b) Clerk: Donations to be put on January Agenda. This will be discussed under Treasurer's Report.

6 (a)(ii) JMU: DERS meeting - notification was sent to members to submit issues on 15/10/19 for meeting held in Horley on 6/11/19. This was done.

6 (a)(iv) JMU: to report on Ortho letter sent to Annie Godden on behalf of the Channel/SE Coast LDCs group regarding orthodontics. Dr Unter has now received a reply and this will be fed back next time.

8. Andrew Elder: to write to the Secretary so that the KLDC can write a letter of support. A subsequent letter sent by the secretary to Annie Godden was rebuffed saying that they (AT) do not commission primary care services at the request of an individual or LDC – nor do they commission secondary care in that way. Commissioning for head and neck cancer is the responsibility of the specialised commissioning team. She confirmed discussions were taking place in relation to head and neck MDT in West Kent. The Chair of the MCN (Brian Millar is also on the case as well. Dr Hogan advised that Annie Godden had claimed that she had previously advised Dr Elder of these protocols.

11. HW: Record Cards – this action has been removed.

15. TPH: MSc link to send to members – This was a questionnaire which was circulated to members via Dr Hogan. He thanked those who took the time to complete it.

3. ANY OTHER BUSINESS

Presidential Dinner – Dr Watts.

4. SECRETARY

Dr Unter was unable to attend the meeting but Dr Winstone read out the reports on his behalf.

(a) Correspondence – to be brought up during the relevant agenda item.

(b) Report of Meetings - to be brought up during the relevant agenda item.

(c) Notice of Annual General meeting (AGM) – It was noted that the AGM (the next meeting)

is on Wednesday, 1st April 2020 and that there are no biennial elections due this year just the by-election.

5. TREASURER ~[[Report attached: \(a\)\(b\)\(c\) – Treasurers Report](#)]

(a) Report (as attached)

(b) Statutory Levy – Dr Winstone advised that as previously reported the budget amount has been raised by NHS England by NHS schedule deductions and the final instalment received on 01/09/2019.

(c) Donations – Dr Winstone advised we usually consider LDC donations in the January meeting. At the LDC Officials' day at the end of November a representative from the DHST spoke and requested £20 per performer aligned to our area - Kent. Whilst it is difficult to know the exact numbers, they have previously thought this to be approximately 663. Dr Unter last year removed duplications to the performers list; therefore, this figure is thought to be around 600.

Dr Winstone proposed and it was agreed that £15,000 be donated to the British Dental Guild. This was slightly less than last year but it was felt that although they need a certain amount to function, not all LDCs contribute and that by contributing more we are making it too easy for those that have not contributed.

Dr Winstone proposed and it was agreed that £12,000 be contributed to the Dentists Health Support. This was more than last year but it was felt that this was a charitable donation for dentists who find themselves in difficulty.

Dr Winstone proposed and it was agreed that £2,000 be donated to the BDA Benevolent Fund. This was the same amount as last year. This fund holds large sums of money and it helps people by giving them short term grants to assist them whilst getting back on their feet.

Dr Winstone advised that whilst he had some free time, he had devised an LDC spreadsheet form. He asked the committee how they felt about using this new form to replace the existing claim form and it was agreed that he would forward each member an electronic form to trial. He asked members to make sure that they save it with their name on it.

6. LDC OFFICIALS DAY ~[[Report attached: Item 6 BDA LDC Officials Day – Speaking up for Dentistry](#)]

Dr Unter's report was attached. Dr Hogan reported that Dr Winstone, Dr Unter and himself attended. It was a very useful day with an extremely good delivery by Brett Duane on the carbon footprint that dentistry created. There were some controversial contributions by Brett on the lack of scientific evidence behind HTM01-05 and that no one had balanced the harm to the environment with so many single use items.

7. NHS ENGLAND MATTERS

(a) NHS England SE & NHS Improvement (NHSE/I)

(i)(a) Kent Local Dental Network (LDN) ~ [[Report attached: Item 7\(a\)\(i\)\(a\) LDN Report from Meeting held on 7th November 2019](#)]

Dr Hogan advised that he attended this meeting and his report was attached.

(i)(b) Orthodontic MCN & Orthodontic Matters ~ [[Report attached: Item 7\(a\)\(i\)\(b\) OMCN for LDC Meeting Jan 2020](#)]

Dr Sheridan's report was attached. She added that a draft flow chart has been designed to help with decision making regarding extraction of first molars in different age groups.

Action: Dr Sheridan to send the flow chart to the clerk to email out to members of the LDC. [Following the meeting Dr Sheridan forwarded the draft flow chart to the clerk who emailed this to members of the committee].

(i)(c) Oral Health Improvement MCN ~ [[Report attached: Item 7\(a\)\(i\)\(c\) OHI MCN Report held 21/11/19](#)] – Dr Hogan's report was attached. There was nothing further to add.

(i)(d) Restorative MCN – there has not been a meeting since the last time and therefore there is nothing to report.

(i)(e) Routine Care MCN ~ [[Report attached: Item 7\(a\)\(i\)\(e\) RD MCN 6/11/19](#)]

Dr Hogan thanked Dr Smith for her report.

(i)(f) Urgent Care; Oral Surgery & Special Care MCN – There was no report for oral surgery or Special care MCN. The Chair for Urgent Care MCN is Dr Shelley Oliver. There seems to have been a significant misunderstanding of the good intention of a contribution made by Dr Hogan to the draft urgent care clinical guidelines document by the chair Dr Oliver. Dr Unter is trying to resolve an apparent breakdown in communication with resistant success. Apart from issues concerning the guidance document there are concerns that the composition of the UDC MCN does not seem to include involvement from colleagues predominately in general dental practice. This is not a criticism of the Chair – however, as the majority of unscheduled urgent care is actually provided by GDPs this is a concern.

Dr Davies mentioned here that there had been some problems utilising 111 and a problem with the national algorithms. If anyone avulses a tooth and the socket is bleeding, they are taken down the bleeding pathway and get no advice around re-implanting their tooth or seeking urgent dental care. The UDC MCN is in talks with NHS pathways and the clinical lead for 111 around how best to manage this situation.

(ii) Dental Electronic Referral Services (DERS) – There had been no update since the DERS meeting held on 6/11/19.

(iii) PAG – Dr Unter last attended a PAG meeting in October 2019. After the meeting he raised a concern regarding a whistle-blowing document that had not been shared with the practitioner under PAG prior to presentation of the case at PAG. NHSE agreed and apologised. At the same time Dr Unter also raised concerns regarding the whistle blowing report itself, which contained unsubstantiated serious allegations of negligence by the practitioner. Some aspects of the report contained information of a privileged nature that was inappropriate to be divulged to the panel. NHSE were not so receptive to this criticism. Dr Unter felt this was a demonstration of how essential the presence of an independent LDC observer is at these meetings. It was generally felt that there is always a lot of reading to be done the day before to prepare for the meetings and sometimes this is not available until the meeting day itself and it can be difficult when you have a lot of cases. This can make it difficult to realise inaccuracies in papers prior to PAG panel meetings.

(iv) PLDP - NHSE are providing training for Dr Winstone, Dr Hamill and Dr Hogan to prepare them for Oral Hearings as these are increasing in number.

(v) DCQAP Dental Contracts & Quality Assurance Panel ~ [[Report attached: Item 7\(a\)\(v\) DCQAP Report Nov 2019](#)]

Dr Hogan pointed out that they were having fewer meetings and there were not enough cases. Meetings were frequently cancelled at the last minute if there was not much on the agenda.

(vi) SE Coast LDCs (Channel Group) – there was nothing to report.

(b) DentaLine ~ [Item 7(b): Kent LDC Report Dec 2019]

Dr Davies added to her report that the Christmas period was busy as usual with over 400

patients in a nine-day period. They turned away as many patients as they saw. They had 25 lines which were busy all evening with an option to call back and book into the next session. Dr Davies reiterated that people need to be aware that urgent care is up for re-commissioning.

(c) Clinical Advisor Reports – Dr Hamill reported that she had dealt with the usual complaints and Ortho tenders. Dr Winstone reported that he had attended some inspections of new practices and had dealt with an endodontic complaint. Dr Hogan asked Dr Hamill to give some thought as to what role clinical advisors could play in re-educating dentists who mis-prescribe antibiotics once these practitioners are identified with data analysis. A discussion took place and it was felt that dentists would need to be signposted to appropriate guidelines.

8. PASS – PRACTITIONER ADVICE & SUPPORT GROUP

Dr Hogan reported that he had had one case so far with positive feedback.

9. HOSPITAL REPRESENTATIVE REPORT

Dr Elder was not present and there was no report received. Previous comments regarding support for a WK consultant with a letter to Annie Godden were rejected. Item 2(b)~6(a)(iv) refers.

10. SALARIED DENTAL SERVICES

(a) East Kent ~ [[Item 10\(a\): Kent LDC Report Jan 2020](#)]

Dr Willis-Lake did not attend the meeting but her report was attached.

(b) West Kent ~ [[Item 10\(b\) MCH CDS Kent Report Jan 2020](#)]

A discussion took place regarding bounced referrals for sedation clinics. Dr Barham had a child bounce back from Gibraltar House. She contacted them and was told that despite REGO still listing them as a referral option, they had fulfilled their contract and, that they have now fully completed their contract requirements and had no further availability until April 1st when under 12's only will be seen. This will impact on Dr Davies' waiting times which will increase.

Dr Davies has contacted them for clarity on this. It was pointed out that it was important to check the status of referrals at all times so that any bounced referrals can be re-referred on appropriately.

11. GENERAL DENTAL PRACTICE KLDC: REPORT OF KENT REPRESENTATIVE (S)

Dr Hartle reported that she had not attended a meeting since the last KLDC meeting. The next meeting is 17th January 2020.

12. LMC report

(a) LMC Conference ~ [[Item 12\(a\): Kent LMC Conference Report Nov 2019](#)]

Dr Winstone reported on the Kent LMC Conference which was held at the Great Danes Hotel.

(b) LMC/LDC/LPC Officials Meeting ~ [Item 12(b): LMC Officials Meeting 18th November 2019]

This meeting was attended by both Drs Hogan and Unter. The LOC did not send a representative this time. There was a good discussion on pharmacists delivering a HepB service in their pharmacies. Many already provide flu jabs and have the necessary

anaphylaxis drugs available in case of untoward reaction.

There were concerns around antimicrobial prescribing and it seems that although GPs have their prescribing reviewed, the same does not happen for dentists. It was agreed that the KLDC would approach the BSA to see exactly what happens to dental scripts and to try to see if some data could be produced. The BDA may have to be involved in this too.

The Kent and Medway Antimicrobial and Infection Prevention and Control Strategy have approved at Board level (CCG), a five-year strategy for managing AMR and appropriate prescribing across all of health care. Both the LMC and LDC have a role to play. At the strategy meeting Dr Hogan was asked to review the wording on the draft documents which was changed in line with input from the dental commissioners and LDC officers. The new wording has been submitted and the role of the LDC is:

“To support dental practitioners and prescribers of antimicrobials in primary care in the implementation of the PHE (Public Health England) AMS activity. To work with the relevant commissioners on the implementation of this strategy as well as working with Health Education England (HeEE) to facilitate access to education.”

A new operational group is to be formed in January with a view to implementing the 5-year strategy across all health care providers. This will become an agenda item from April. Dr Hogan reiterated the importance of making sure dentists' patients do not come to any harm. It was not the job of the KLDC to be responsible for educating dentists but perhaps the KLDC could do more to support dentists by facilitating dentists. It was agreed that the KLDC should look into holding a CPD study day later in the year. Action: Drs Hogan, Winstone and Unter - It was agreed that a study day would be a good idea and Dr Hogan asked everyone to give it some thought as to what subjects they would like to include. The Great Danes was mentioned as a possible suitable venue.

13. KLDC WEBSITE

Some updates have been made to the website since the October meeting. These include: Links for SDCEP / Bisphosphonate guidance; how to get an NHS.net address; Kent PASS scheme; IMOS NHS fees guide plus flow diagram poster; Canterbury CPD courses, July minutes and all reports; “Every Mind Matters” link; patient NHS exemptions – BDA App; BDA “was not brought” campaign (inc. YouTube links and toolkit); Record Keeping Standards Guidance – promoted by the CDO Sara Hurley and produced by NHSE & I; Mental Health Support for Dentists (link); and update to the website information for Restorative Dentistry in the EK NHS Trust. It was mentioned that Ken Eaton has been adding some useful information to the BDA site. Action TPH/JMU: A link to be added from the BDA to the LDC site.

14. EDUCATION AND TRAINING ~[[attached report: Item 14 HEE London and KSS](#)]

Dr Shivji was not present but his report was attached. He reported that for 2020/2021 there will be 10% less UK graduate output from dental schools. A higher number of UK graduates every year are opting not to do foundation training for different reasons. e.g. overseas students and UK graduates who decide not to stay in UK). Last year it was 33 graduates. Dr Winstone added that at the Deans Conference the Deans have unilaterally decided to pause PLVE for dentists who have not practised dentistry for more than 2 years.

15. DATE OF NEXT MEETING – Wednesday, 1st April 2020 (AGM) – Holiday Inn, Rochester.

16. ANY OTHER BUSINESS

Dr Watts mentioned a presidential dinner on Thursday 30th April followed by a conference on Friday 1st May 2020. This is at the Crown Plaza Felbridge- Gatwick Hotel, East Grinstead. He advised that members check their website.

FUTURE DATES:

Wednesday, 1st July 2020 and
Wednesday, 7th October 2020