

KLDC Minutes July 2020

MINUTES OF THE SEVENTIETH MEETING OF THE KENT LOCAL DENTAL COMMITTEE HELD ON WEDNESDAY, 1st JULY 2020 AT 6.00 PM HELD AS A VIRTUAL MEETING ON “ZOOM” DUE TO THE COVID 19 OUTBREAK

Present: Drs Adesanya, Ahmad, Barham, Banvir, Bhatti, Carstens, R Chopra, Davies, Elder, Hartle, Hamill, Hogan, Myint, Nugent, A Patel, N Patel, P Patel, U Patel, V Patel, Ramamoorthy, Sheridan, Smith, Unter, Winstone, Wood.

Apologies: None received although it was noted 5 members were absent from the meeting.

Observers: There were no observers present; however, an email was received after the meeting had commenced from Dr Suma Venugopal who had previously requested to attend as an observer offering her apologies.

1. WELCOME AND APOLOGIES FOR ABSENCE

Dr Hogan welcomed members to the July meeting (70th). He advised that the role of the LDC was to support dentists out there who were struggling and to help and share information as much as possible. He and the Secretary reported numerous contacts since the last KLDC meeting with colleagues regarding the various documents produced by NHS England / Improvement (NHSE/I), the Office of the Chief Dental Officer (OCDO) and Public Health England (PHE). This had included NHS, mixed practice and wholly private practitioners. Dentists are struggling with the requirements but this is probably more to do with rapid change of frequently conflicting advice and guidance. The role of the LDC was not to judge but to guide and support dentists where the committee had perhaps more time and access to information sources. Dr Hogan mentioned a recent really useful webinar run by the London Federation of LDCs: “Resuming Dentistry – what does the guidance say?” **Action:** Dr Hogan to ask the Secretary to send out the link for the webinar for members to watch. Dr Barham (agenda item 3) has also enquired about the link for this webinar.

[Secretary’s note - Link is as follows: 25th-jun20-resuming-dentistry-what-does-the-guidance-say

2. LAST MEETING, 1st APRIL 2020

(a) Confirmation of Minutes ~ [[Report Attached: Item 2\(a\) Apr20 Minutes](#)] – The minutes were agreed and will be uploaded onto the website as usual.

(b) Matters Arising – there were no matters arising.

3. NOTICE OF ANY OTHER BUSINESS

Prior to the meeting Dr Unter had sent out an email requesting that if anyone had any other business to let him know if possible, prior to the meeting. There were two requests and it was decided to discuss the two items under the appropriate subjects on the agenda. Dr

Barham had enquired about the Federation of London LDCs webinar already referred to in agenda item 1 and Dr Ahmad's item is raised under agenda item 7(a)

4. SECRETARY:

(a) Correspondence (not reported elsewhere) – Dr Unter advised that he had been busier as the KLDC Secretary in the last 14 weeks than he has been in the last 29 years! There has been frequent contact with colleagues seeking advice regarding innumerable issues including for example AAA, furlough arrangements in mixed practice and interpretation of the various guidance documents from NHSE/I, OCDO & PHE. He has also been working his way through numerous complaints, mainly from performers, who have had unreasonable deductions made from their NHS pay. He commented that significantly fewer Principals had approached the LDC. In all cases he had tried to support both the Performer and the Provider to negotiate a sensible agreement rather than one being unilaterally imposed risking a breakdown in business relationships.

(b) Report of Meetings (Not reported elsewhere) – there was no meetings to report here.

(c) Annual Report – [[Report Attached ~ Item 4\(c\) Annual Report 2019/2020](#)] – A final draft of the Secretary's report had been presented for publication approval. Dr Unter advised he had updated the membership details and requested members to check that all their information was correct and to let him know if there were any errors. The Annual Report will be emailed out to all dentists as it had been in recent years. Dr Unter advised members that the Chair and Secretary had inserted a preface detailing current activity into the report. This reflects the fact that the report is only for the period up until March 2020 and it was important once circulated to dentists in Kent that they were fully aware of the work now being undertaken on their behalves. Dr Unter sought approval from the committee for the publication of the Annual Report which was **approved** overwhelmingly without the need for a vote. Dr Hogan thanked Dr Unter for all his hard work on the Annual Report as usual.

(d) Clinical Study Day – This was originally scheduled for the 9th October 2020 with an excellent selection of speakers already arranged - however, regrettably it was decided that this should be cancelled this year due to the Covid pandemic.

5. TREASURER:

(a) Report [[Attached Report ~ Item 5\(a\)](#) Payments from the Kent LDC Account & [Item 5\(a\) Treasurers Report](#)] Dr Winstone had circulated a copy of his annual Treasurer's report to be included in the KLDC Annual Report. He has also circulated an amended statement reflecting what members can and cannot claim for meeting expenses and activity on behalf of the committee. He encouraged members to email across to him the new expense claim form in future.

(b) Statutory Levy – Dr Winstone advised that the budget had been set as usual; however, the deduction from schedules had unfortunately been taken in one large payment instead of over the rest of the financial year. This had meant a significant drain on funds for practices at a difficult time. It was not practicable for the BSA to return the money deducted. He said that he was confident the LDC would remain solvent this year and that although there was an increase in activity this year from the officers there would be less activity in other ways, for example the Annual LDC Conference is virtual and therefore the costs would be less. He said that Drs Hogan and Unter were doing a great job and Kent was

well known for being a very proactive LDC. There was a lot of sharing of information with Kent, Surrey and Sussex and in turn with the Isle of Wight / Hampshire LDC. Dr Hogan thanked Dr Winstone for his report.

6. THE LDC ANNUAL CONFERENCE – to be held “virtually” on Saturday 25th July 2020

(a) Members Attending – Members wishing to attend the conference are Drs Hogan, Unter and Winstone. Also expressing an interest to attend was Dr Ahmad. There is also a special place open this year for a younger more recent graduate member and Dr Rishi Chopra expressed an interest in attending. Dr Hartle will also attend as the GDPC Rep.(b) Motions for Submission – There was discussion concerning a motion to be presented to the Conference regarding electronic prescribing. It was felt by members that dentists were not on the spine as were doctors and it would be hugely beneficial for dentists to have access to electronic prescribing. **Action:** Dr Davies proposed an outline motion regarding dental electronic pharmacy prescriptions which was agreed immediately after tonight’s meeting by the KLDC Officers & Dr Davies. The motion **agreed** was *“This Conference believes primary care dentists should have access to electronic prescribing”* (to be presented by Dr Winstone).

7. NHS ENGLAND MATTERS

(a) NHS England SE & NHS Improvement (NHSE/I) – There had been much activity since the announcement of the closure of practices – particularly to enable opening of Urgent Dental Care Centres (UDCs) for emergency dental provision during the early stage of the pandemic. Dr Unter advised that there were seven workstreams which included the following: - Workforce; Premises Group; PPE (*training, x-infection & mask fit-testing*); Standard Operating Procedures (SOP); Communications & Clinical Pathways; Contracting & Finance, and; Project Management. Some groups are now no longer needed and have merged. The PPE group however (attended by Dr Hogan) currently continues to meet. There have been fifteen “zoom” meetings so far and there is one next week. It is very helpful to draw information around mask fit-testing in particular.

Dr Ahmad’s question was raised at this time. He asked with regards to surgery fallow time *“If a practice has a virus killer (the Radic8) installed, what is the LDC position on fallow time for AGP & non-AGP? Also, should an air-con system (with outside ventilation) be used with virus killer on when a procedure is taking place”*? He had been approached by another dentist and was not sure how to answer this.

Dr Hogan suggested that he refer his colleague to the Thursday webinar (Item 1 refers) as there was all sorts of useful information on this matter. He felt it was not for the LDC to take a position on this but basically everyone was responsible for keeping their patients safe and as long as what you are doing is in the interest of the patient then the Regulatory Body would not take action.

Dr Nash Patel felt that the referrals had gone down since they opened their UDC and that aerosol generating procedures (AGPs) had increased. A lot of unregistered patients were being sent to the hub and the patients had very unrealistic expectations, wanting all their treatments, not just the emergency ones. For the new UDC hubs opening up in July there

was no guarantee of abatement payments with PPE payments only. Dr Winstone advised that there were 42 potential sites in KSS. NHS England were not offering support beyond July. Not all sites will be full time – most offering just a couple of days cover – effectively a “Kent Consortia” available via REGO.

Dr Davies reported that they still see category 2/3 patients. These patients are shielded, vulnerable or Covid patients. They are hugely complex and take a huge amount of time to triage. They currently have three hubs open and have no indication of when these will close. They see a very limited number of patients and have no access to GA. They have had one Covid +ve patient. She wanted to make people aware that they have no idea when CDS will re-open. Queen Mary Sidcup had closed ten days ago and now all referrals are going back to Kings. Dr Barham asked Dr Davies if they were now starting to take standard referrals and Dr Davies advised that they needed to go via the DERS hub route if they wanted their patients seen urgently.

(i)(a) Kent Local Network (LDN) – Dr Unter reported that an estimated 30% of practices have re-opened but few providing AGPs currently.

(i)(b) Orthodontic MCN – [[Attached Report: LDC Ortho Report 1st July 2020 – Part A](#)] and [[Attached Report: LDC Ortho Report – Part B](#)] - Dr Sheridan’s reports were attached. She reported she is now seeing approximately 20% of the patients that she normally sees. She has a “Zoom” orthodontic MCN meeting in a couple of weeks. She felt that she was in a slightly easier position than most as she can get on and see people. They are trying to come to an agreement with regards to some extra UOAs for remedial work for children’s repairs where no fault can be apportioned. They cannot start any new or AGP treatments. Dr Hogan thanked Dr Sheridan for her reports.

(i)(c) Oral Health Improvement – This group has been looking at new ways of working, digitally and with videos. They cannot get out in person to support patients.

(i)(d) Restorative MCN – Dr Unter reported that the last meeting was before the last LDC meeting. Brian Miller (MCN Chair) had reported a drop in referrals for restorative care at the LDN group meeting.

(i)(e) Routine Dental Care MCN – [[Attached Report: RD MCN 06/05/2020](#)] and [[Attached Report: RD MCN 24/6/2020](#)] – Dr Smith’s reports were attached. She advised that Dr Agi Tarnowski (MCN Chair) was very proactive and sent regular updates every three days. A webinar chaired by Agi & run by HEE had taken place at the end of May titled “Safer Working”. This had been particularly interesting and useful to update viewers (over 350 dentists viewed it). Drs Hogan/Winstone had been speakers at this event.

(i)(f) Urgent Care: Oral Surgery & Special Care MCNs – Dr Unter reported: There was concern on how to make Urgent Care more efficient and fund it when half the population do not have a dentist. Many of this group of people need advice during the day too. There were also concerns over GA provision, the two-week rule and children’s care. It was noted that many UDC hubs have not been able to see their own patients whilst providing care for everyone else. In one Sussex practice nurses have apparently been utilised for giving advice

and there was some discussion around whether or not this would be appropriate using the right algorithms and adequate training. The conclusion was to ensure you check this out with your indemnifier.

(i)(g) Kent Infection Prevention & Control Antimicrobial Stewardship (KIPCAS) – Dr Hogan had not attended any meetings but said he was worried about C-Diff cases as a consequence of repeated courses of antibiotics being prescribed under AAA. He had been asked to help with one case where fortunately it transpired the dentist had done nothing inappropriate.

(ii) Dental Electronic Referral Services (DERS) – Dr Winstone advised that he had been approached by NHS England to draw up a list of drugs and worked together on this with the Pharmacy Team of NHS England to add to DERS. The dosages had to be linked to the drugs. He spent many nights putting it together finding solutions as he went along. The Vantage (DERS) data was sent to the Chief Dental Officer. People making referrals got in touch as they had patients awaiting cancer treatments and they asked if he could make some interventions. Work continues around this issue.

(iii) KSS Performance Advice Group (PAG) – Dr Unter advised that there was a virtual meeting next Thursday and that the January and February meetings had been cancelled.

(iv) KSS Performers List Decision Panel (PLDP) – Dr Hogan did not have anything to report.

(v) DCQAP – Dental Contracts & Quality Assurance Panel – This group has been disbanded. We await what reorganisation involving the entire NHSE/I region will happen to recommence the wider meetings but the current Covid pandemic has delayed this.

(vi) SE Coast LDCs (Channel Group) – Dr Unter reported that there had been 15 regular weekly virtual meetings with lots of discussion regarding setting up the UDCs and all the various sub-committees SE LDCs / Channel Group officers were involved in. It was felt that this relatively long-standing group of the four S E Coast LDCs had managed through mutual cooperation to be a rapid and effective source of guidance to both NHSE/I and to colleagues in the KSS area. A meeting had also been held with the LDCs of IoW/Hampshire, Buckinghamshire, Bedfordshire & Oxfordshire. Dr Hogan advised that Dr Unter had done huge amounts of work.

(b) DentaLine – [[Attached Report: DentaLine Kent LDC Report July 2020](#)] – Dr Davies' report was attached. Dr Davies advised that they are working through the transition. They have only seen one face-to-face patient but have helped over thirty-five patients a night via telephone triage calls. Once the volume of calls decreases people will need somewhere to go during the day. Members were reminded that practices are still obliged to see AAA patients even if they are not their regular / usual patients.

(c) Dental Practice Advisors – Dr Hamill reported that she has received no complaints and has an oral “zoom” hearing in a couple of weeks. Her contract has been renewed.

Dr Winstone reported that he has had eight complaint reviews and is very busy.

8. PASS – PRACTITIONER ADVICE & SUPPORT SCHEME

There was nothing official to report although both the Chair and the Secretary were currently heavily involved in individual colleague support at both personal and practice level.

9. HOSPITAL REPRESENTATIVE REPORT

Dr Elder reported that he had had a couple of busy months and was keeping his front-line staff very busy with adopting the new work procedures and seeing patients. He felt it would be a good couple of months before he would be able to see any new patients. He had had staff off with positive (*Covid*) test results and advised to make sure you follow proper guidance as you may find once you have one positive result all your staff may go down with Covid.

10. SALARED DENTAL SERVICES

- (a) East Kent – Dr Willis-Lake was not present and there was no report submitted.
- (b) West Kent – [[Attached Report: MCH CDS Kent LDC Report July 2020](#)] – Following OCDO guidance they are preparing to reopen CDS and are aiming to start providing care to the 1500 patients cancelled during the Covid shutdown period. They are only able to re-open three clinics out of eleven due to capacity issues with staff still in UDC hubs and staff shielding. Some buildings are not yet cleared to re-open. It will be many months before they can clear the backlog of cases cancelled mid-treatment.

11. GENERAL DENTAL PRACTICE COMMITTEE: REPORT OF KENT REPRESENTATIVE

Link to website: <https://kldc.org.uk/gdpc-reports/>

Dr Unter advised that Dr Hartle now has her own link to a website page so that all her reports can be published on the KLDC website. Dr Hartle reported that things were very different over the four countries. The GDPC had had a very interesting meeting with the BMA with an update on the doctors doing individual risk assessments, associate pay disputes, Facebook page and contract negotiations. There was a debate regarding mask fit-testing especially when alcohol has been consumed the night before. There were mental health and stress issues and they were trying to push testing for staff and request antibody tests for practices. Dr Hogan thanked Dr Hartle for her report and advised members to look at her page.

12. LMC REPORT

- (a) LMC Report – Dr Winstone advised that there was a meeting last Thursday and that things are ‘ticking along’. Covid dominated the majority of the meeting. GPs are getting payments per patient but are worried about getting funding for injections. Dr Winstone advised them of what is happening in dentistry and about the problems we are facing with regards to electronic prescribing.
- (b) LMC/LDC/LPC Officials Meeting – This is a meeting which Drs Hogan and Unter attend which due to the pandemic was held via MS Teams. Doctors are reluctant to get involved with any dentist’s patients but asked if dentists could help out with PPE supply initially after lock-down. There was a complaint from a doctor where a triage dentist asked for advice

about a patient. It was felt the request was justified as the patient was housebound and their ability to attend an emergency UDC was compromised. Dr Hogan advised that this was a very useful forum and enabled regular 1:1 discussions with the officers of the other Kent LRCs.

13. KLDC WEBSITE (kld.org.uk)

Dr Hogan advised that Dr Unter had done a lot of work updating on the website almost daily as new documents and advice sources were published to assist colleagues and have all the reference material in one place. Dr Unter asked if anyone had any issues to let him know.

14. EDUCATION AND TRAINING – DENTAL FOUNDATION TRAINING

Dr Shivji was not present [Secretary's note: Dr Shivji subsequently tendered his apologies for non-attendance].

Dr Davies advised that CDS had been approached to help with the foundation training and Dr Elder advised that AAA training will not bring the same experiences to the dentists and it was important to keep them occupied for the next year.

15. DATE OF NEXT MEETING

The next meeting is Wednesday, 7th October 2020. It is hoped that this will be at The Holiday Inn Rochester but members will be advised nearer the time by the Secretary if there are to be any changes and the meeting to be once again held in virtual format.

16. ANY OTHER BUSINESS

There was no other business.

FUTURE DATES:

Wednesday, 6th January 2021

Wednesday, 31st March 2021

Wednesday, 7th July 2021 and

Wednesday, 6th October 2021

The meeting closed at 8.23 pm.