KLDC Minutes July 2022

MINUTES OF THE SEVENTY-EIGHTH

MEETING OF THE KENT LOCAL DENTAL COMMITTEE HELD ON WEDNESDAY

6TH JULY 2022 AT 6.00 PM AT THE BRIDGEWOOD MANOR HOTEL, WALDERSLADE WOODS ROAD, ME5 9AX AND VIRTUALLY ON "ZOOM"

Present: Drs Barham, Batistoni, Bhatti, P Chopra, R Chopra, Elder, Hamill, Hartle, Hogan, Kolozsvari, Lone, Mauthe, Myint, Nugent, A Patel, M Patel, N Patel, U Patel, Ramamoorthy, Sheridan, Shivji, Smith, Unter, Winstone, Willis-Lake and Wood.

Guest Speakers: Dr Natalie Bradley and Jill Harding – "Connecting Kent to the Dentaid Community".

1. WELCOME AND APOLOGIES FOR ABSENCE

Dr Hogan welcomed members to the 78th KLDC summer meeting and apologised for the delayed start waiting for some members who had advised that they would be attending but were not yet present. Apologies were received from Drs Davis, Hamill and Power. Dr Hogan also welcomed guests Dr Natalie Bradley and Jill Harding who would shortly be doing a presentation "Connecting Kent to the Dentaid Community".

2. LAST MEETING, WEDNESDAY, 6TH APRIL 2022 (AGM) – held virtually on "zoom".

(a) Confirmation of Minutes ~ {Attached Report} – Dr Hogan advised that he and Dr Unter had gone through the minutes and made any necessary corrections. There were no other changes to the minutes and they were therefore approved. **Action**: Agreed Minutes & reports to be uploaded onto the KLDC website.

(b) Matters Arising:

- Pg 3: Dr Hogan was to write to Kate Langford – this has not been done yet as she has only just taken up the position of Chief Medical Officer. He stated that he had had discussions with her prior to her being awarded the position and she was very keen to work with the LDC.
- Pg 4: Urgent Care Procurement – Dr Shivji advised that as part of the PODAC project on producing a shared care record, one of his recommendations what that he insisted that electronic remote prescribing must be made available to dentists to facilitate an effective and efficient shared care record.
- Pg 4: DentaLine recruitment - Dr Power said that he would put a message on the East Kent WhatsApp group – this has now been done.
- Pg 4: The LDC Conference – Dr Smith volunteered to submit a report with the July Minutes of the Annual Conference – this has been done.

3. NOTICE OF ANY OTHER BUSINESS

(a) There was no other business

(b) Presentation (via Zoom): Dr Natalie Bradley/Jill Harding – 'Connecting Kent to the Dentaid Community'

Jill Harding introduced herself as the Communications Director of Dentaid and gave a talk along with a slide presentation. She explained that Dentaid is a charity providing dental care for the homeless and children. It is also run overseas and has been going for about 26 years. 70% of homeless people have dental pain which leads to 15% of people extracting their own teeth. Many find it impossible to access dental services which leads to a delayed diagnosis and unnecessary suffering. There is increased pressure on the NHS. Dentaid has set up clinics in hostels, shelters and soup kitchens and runs about 35 clinics a month. It has also set up mobile dental units and trailers. They work from Exeter to Cromer and Weymouth to York with new locations being added all the time. Volunteer dentists and nurses support the Dentaid staff. Demand is increasing with oral cancer screening and examinations as well as emergency and oral health advice. Dentaid can also help patients with dental anxiety and phobias. Taking the mobile units to the patients makes them feel safe and comfortable whilst breaking down barriers. There are more clinics for refuges and asylum seekers now at Napier Barracks which started in 2021 and is funded by the Home Office. Dental Clinics have also been set up for fishing communities on the Kent Coast. The BrightBites Oral Health Programme has been delivered in schools for hard to reach families.

Dr Sheridan expressed concern with orthodontic patients from the Ukraine where records were requested from the beginning of treatment and she said that technically she was not allowed to treat these patients. Dr Bradley said that it may be a case of demonstrating a need. [Secs note: This problem has now been recognised by NHSE and there have been changes to the National Protocol to facilitate appropriate ongoing care]

Dr Bhatti said that he had a number of team members who would like to get involved in Dentaid and asked what the process was. Dr Bradley advised that there were lots of volunteering opportunities and anyone interested should contact them. Email address natalie@dentaid.org. There would be an application form to complete which would be subject to CQC checks etc..

Dr Willis-Lake added that the OHI MCN was not aware of BrightBites. She said that they had the manpower to help in Kent and suggested that Dentaid come to one of the Oral Health Improvement MCN meetings. She added that she has lots of trainers who get involved in projects and this would be a good opportunity. **Action:** Dr Willis-Lake to contact Dentaid to discuss further how she can help.

Dr Hogan requested members (because of time pressure) to put any further questions to Dentaid directly outside of the meeting but said that if Dentaid could put together an email with ways that the LDC could assist them this would be helpful. He thanked both Jill and Natalie for their time.

4. SECRETARY:

(a) Correspondence – (not reported elsewhere) – Dr Unter advised that as usual he would report on items as they appear on the agenda.

(b) Report of Meetings (not reported elsewhere) - Dr Unter will report on items as they appear on agenda.

(c) Free CPD for Dental Teams ~ [Attached Report} – Dr Unter reported that the LDCs of Kent, Surrey and Sussex were hosting free core CPD for dentists and their teams, supported by Health Education England via Accent. The CPD was in virtual format over four evenings in October and November 2022 giving 8 hours of free verifiable CPD. Members were asked to bring the availability to the attention of colleagues and their staff in their constituency areas.

An A4 poster had been included in the meeting papers and was published on the KLDC website providing links and booking details. The nominal cost of providing this was shared by the four KSS LDCs.

5. TREASURER:

(a) Report ~ {Attached Report}

(b) Kent LDC Payments – Dr Winstone advised that the KLDC budget for this year had been agreed at the previous meeting. Subsequently the increase recommended by the British Dental Guild had been higher than anticipated but could still be implemented with no further budget increase.

Dr Winstone said that the electronic meeting claim form should be emailed across to him for payment and that if anyone had any problems to let him know. The current evening allowance was calculated at approximately 15% of the British Dental Guild rate (rounded up to the nearest pound) and was £51 from 1st April 2022.

(c) Statutory Levy – This had already been agreed as sufficient. Dr Hogan thanked Dr Winstone on behalf of the committee for all he did of the LDC.

6. REPORT OF THE LDC ANNUAL CONFERENCE - held on Thursday, 9th June (dinner) and Friday 10th June (Conference) at the International Conference Centre, Newport, Wales ~ {Attached Report 1} / {Attached Report 2}

Dr Hogan thanked Dr Smith for her detailed report. Dr Hogan reported that there had been the most incredible feeling of doom and gloom that he had ever experienced before. He advised that there appeared to be a big disparity between the amount that dentists were being paid across the country for UDAs. Some were being paid £23, some in excess of £30 with the average somewhere around £25. This variation worked well for some dentists because it increased the value of their practice but clearly not so well for others. There was general comment that it seemed to be apparent that a lot of MPs do not understand how NHS dentistry works.

Dr Unter had attended virtually and found it to be a very interesting day. He commented that the minister had cancelled their afternoon attendance at Conference so at a late stage a panel of four speakers had been assembled discussing their views on NHS practice and a potential

move to private practice. Dr Unter expressed some disquiet that a meeting funded by NHS levies was having a discussion on how to leave the NHS and "go private". Was this appropriate particularly for colleagues that truly have no choice because of their personal (practice) circumstances and rely on the NHS for their livelihood with little chance of moving to private care? Whilst suggesting this was an over-simplification, the target audience of NHSE or HMG had no representatives present to appreciate the seriousness of the situation and pass this on to their organisations. Dr Unter felt that as Conference is meant to instruct GDPC on their way forwards, although this may have set a path some would argue is overdue – some less fortunate may disagree.

Action: It was that the Secretary would write to the Chair of Conference expressing our concerns.

7. NHS ENGLAND MATTERS

(a) NHS ENGLAND SE (NHSE) -There was nothing specific to report.

(i) Unscheduled Care Recommissioning Steering Group ~ {Attached Report x 1} / {Attached Report 2} – Dr Hogan attached two reports from meetings on 28/04/22 and 26/05/22. Two further meetings were cancelled so there was no further progression.

(ii) (a) Kent Local Dental Network (LDN) ~ {Attached Report} - Dr Unter had submitted a report of the most recent meeting of the LDN. Dental PH has now moved within NHSE and the LDCs were recommended to engage with local Directors of Public Health to ensure dentistry is kept at the top of any agenda. There is a new Consultant Aditi Mondkar who is keen to attend a KLDC meeting as a guest. **Action**: Dr Unter to invite Aditi Mondkar to the October meeting.

(ii)(b) Orthodontic MCN & Orthodontics ~ {Attached Report 1} / {Attached Report 2}– Dr Sheridan attached a report together with information on how to refer a patient for Orthodontic opinion/and or assessment. She reported that they had to seek guidance for treating Ukrainian refugees. Currently a GDP needs to be aware that they cannot refer patients unless they have start treatment details that show the patient would meet the necessary NHS criteria. If they do not have these details they are not allowed to continue this treatment, if at time of assessing, the patient is IOTN 3.6 or higher. In the case of refugees they could not be expected to visit their orthodontist to request copies of dental records. They therefore have to complete a questionnaire. [Secs note: This problem has now been recognised by NHSE and there have been changes to the National Protocol to facilitate appropriate ongoing care]
Dr Elder reported that there were lots of problems with dentists evidently not understanding the referral process and his receptionists frequently take calls. He said that letters do go into Rego but everyone is too busy to look at them. Dr Winstone said that there needed to be a process whereby the referrals are looked at on a regular basis by the reception team. It is not acceptable to say that you did not see it in the inbox. It was felt that you needed a hard copy of the letter attached to the referral. Dr Sheridan said that her tabs are different and would like a tab for completed referrals. **Action:** Dr Winstone will ask if this is possible.
(ii)(c) Oral Health Improvement MCN ~{Attached Report} - Dr Hogan thanked Dr Wood for her report. There was nothing further to add.
(ii)(d) Restorative MCN – There had been no meeting recently and therefore nothing specific to report.
(ii)(e) Routine Dental Care MCN ~ {Attached Report} – Dr Hogan thanked Dr Smith for her

report. There was nothing specific to add.
(ii)(f) Urgent Care; Special Care & Oral Surgery MCNs – Dr M Patel advised that the recently planned oral surgery network meeting had been cancelled. It seems other areas have brief weekly meetings to discuss what is happening. Dr Unter advised that there was nothing specific to report regarding Urgent and Special Care.
(ii)(g) KSS Antimicrobial Prescribing Network (KSSAPN) – Dr Hogan advised that he had not prepared a report. He advised that he has been invited to take part in a research project at Portsmouth University led by Professor Chris Louca.
(iii) Dental Electronic Referral Service (DERS) – Dr Winstone said that he had nothing to add. He was asked to do an audit on oral surgery but does not have the workforce to undertake this currently.
(iv) KSS Performance Advisory Group (PAG) – Dr Unter reported that his most recent meeting had been cancelled at short notice.
(v) KSS Performance List Decision Panel (PLDP) – Dr Hogan advised that another colleague attended the most recent Decision Panel meeting.
(vi) LDC Liaison Group ~ {Attached Report} - This meeting was attended by Drs Hogan and Unter. The attached report presented by Dr Unter showed a significant amount of contract information in the SE region including details of practice contracts which have been terminated for various reasons. The next meeting is on Tuesday 12th There has been ongoing agenda discussion amongst the member LDCs before the meeting with NHSE SE.
(vii) SE Coast LDCs (Channel Group) ~{Attached Report}– Dr Unter's report was attached of the virtual meeting held on Tuesday, 17th He high-lighted that discussions regarding recruitment and retention of colleagues and staff seems to be a national problem and that there appears to be more flexible commissioning occurring in other areas. He commented that there would be an increase in (dental) money from clawback and therefore technically there should be more funds available for dentistry – however usually this unspent funding disappeared into the NHS "black hole". Dr Elder's understanding was that community specialists will be managed by more localised commissioners in the new ICBs. **Action**: Dr Hogan said that he would write to Kate Langford who had been appointed as Chief Medical Officer for Kent & Medway Integrated Care Board (ICB) from the 1st July 2022 to seek a meeting.

(b) DentaLine ~ (Attached Report} – Dr Davies was not present therefore there was nothing further to add to her report. Dr Unter commented that Dr Davies had asked him to draw attention to members if they knew of anyone who would like to join the DentaLine team and to please let her know.

(c) Dental Practice Advisors Reports – Dr Shivji said that he had been involved in triaging, complaints, dental contracts and PLVE.
Dr Winstone advised that he had been involved in practice inspections, training, review complaints, case assessments, advice on DERS and recruitment.
Dr Hamill was not present at the meeting and therefore there was no report.

8. PASS – PRACTITIONER ADVICE & SUPPORT SCHEME - There were currently no cases to report.

9. HOSPITAL REPRESENTATIVE REPORT ~ {Attached Report}

Dr Elder reported that they now have two new maxillofacial consultants and he mentioned that the clinical skills laboratory in the postgraduate department in Kent and Canterbury

Hospital was officially opened by Mr Peter Briggs, Regional Postgraduate Dean. This now has the most up to date equipment with 17 workstations.

10. SALARIED DENTAL SERVICES

(a) East Kent - Dr Willis-Lake reported that the paediatric waiting list is now at 26 weeks and they are unable to reduce it to the desired 18 weeks. The adult list now stands at 40 weeks. She said that it required the MCN Special Care and Paediatrics to work together to try and reduce the list. They were having a meeting the following day with clinicians. She said that they continue to support the Foundation Dentists.

(b) West Kent ~ {Attached Report} – Dr Davies was not present at tonight's meeting but her report was attached.

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

https://kldc.org.uk/gdpc-reports (see website) Dr Wood advised that there had been a meeting last week on contract reform. The discussions were currently under embargo.

12. LMC REPORT

(a) LMC Report ~ {Attached Report} – Dr Hogan's report was attached. There had been two meetings - he had attended one and Dr Winstone the other. Dr Winstone advised that Kent is split into four: Medway, East Kent, West Kent, Dartford and Gravesham. There was lots of concern over document management; GPs have delicate safeguarding records which are shared with local hospitals and they do not want some of these sensitive records to be shared. Dentists have their own software which may not be fully compatible. Dr Hogan added that there was a lot of interest in urgent care procurement.

(b) LMC/LDC/LPC Officials Meeting ~ {Attached Report} – Dr Unter drew attention to the various topics discussed at this very useful meeting of the committees.

13. KLDC WEBSITE [https://kldc.org.uk]

Dr Unter is keeping the website updated regularly. There were various links to webinars and useful information on what is going on in Kent. The website is available to anyone to view i.e. public / profession etc.. There are new anterior tooth trauma guidelines published by Dental Trauma UK available for access. **Action:** Drs Elder and Bhatti to view and give feedback to the committee on the new guidelines before the KLDC considers adding the link to the website.

14. EDUCATION AND TRAINING

(a) Dental Foundation Training ~ {Attached Report} - Dr Mauthe said that the new DFT training site recruitment this year focused on areas of deprivation i.e. Kent and deprived areas in London. He added that he was keen to hear from local practitioners on suggestions of courses they would like him to run at the new skills Lab at the Kent & Canterbury Hospital. Please send suggestions to Peter.mauthe@hee.nhs.uk . He thanked Dr Shivji for his many years of service to DFT in LKSS as he moves on to a post at HEE Thames Valley.

(b) Kent Dental Mentorship & Study Group ~ {Attached Report} – Dr Bhatti discussed a new mentoring group which will be run by experienced mentors at the Harvey Hall post-graduate centre in the Kent & Canterbury Hospital for dentists to gain valuable mentoring from experienced peers. This will be chaired by himself alongside Drs Power (Co-Chair), Gray (Secretary) and Watts (Treasurer). In the beginning this will be run for free. They asked for the LDC to spread the word through their well-connected various fields of work.

It was **agreed** that the information together with the courses would be put on the KLDC website. **Action:** Dr Bhatti to submit the information in publishable format to Dr Unter.

15. DATE OF NEXT MEETING:

Wednesday, 5th October 2022 – Bridgewood Manor Hotel, Walderslade Woods Road, ME5 9AX and by Zoom.

16. ANY OTHER BUSINESS

Dr Hogan advised that it was to be Dr Barham's last KLDC meeting as she was moving to North Yorkshire. He thanked her on behalf of the KLDC for her many years as a proactive and fantastic member and wished her the best of luck.

FUTURE DATES:

Wednesday, 11th January 2023
Wednesday, 5th April 2023
Wednesday, 5th July 2023 and
Wednesday, 4th October 2023

Meeting closed at 8.35 pm.