



Kent Local Dental Committee

MINUTES OF THE FORTY- FORTH MEETING OF THE KENT LOCAL DENTAL COMMITTEE HELD ON WEDNESDAY, 8TH JANUARY 2014 AT 6.00 PM AT THE HOLIDAY INN, MAIDSTONE ROAD, ROCHESTER, KENT ME5 9SF.

Present: Drs Allen, Adesanya, Ahmad, Bishop, Elder, Hammond, Hogan (Chair), Hymas, Kulkarni, Lynch, Newell, Nugent, O'Sullivan, Mahesh Patel, Nash Patel, Ujwal Patel, Manoj Patel, Sheridan, Shivji, Trivedi, Unter (Secretary), Walia, Watts and Winstone (Treasurer).

Observers: Mary Henderson and Sandeep Walia.

1. APOLOGIES FOR ABSENCE

Apologies were received from Drs Chopra, Clarke and Johnstone.

2. LAST MEETING - WEDNESDAY, 2ND OCTOBER 2013

(a) Confirmation of Minutes – A few minor amendments were made to the minutes, otherwise they were **agreed**. **Action:** Clerk to email the corrected minutes to the chairperson to upload onto the KLDC.

(b) Matters Arising – Indemnity cover for KLDC representatives on the PLDP¹ & PSG² committees of the Area Team had been mentioned at the previous meeting (2nd October 2013). A clear letter has now been received regarding this from Dr Geddes which confirms that all members of such panels are indemnified by NHS England for their role on these panels.

3. NOTICE OF ANY OTHER BUSINESS

(i) East Kent Vacancy coming up in April.

(ii) DentaLine cover over the Christmas period. (To be discussed under DentaLine item (6)(c).

4. SECRETARY

(a) Correspondence Received and Written – Dr Unter requested permission to report on this items as they appears on the agenda.

(b) Report of Meetings – Once again Dr Unter requested permission to report under the relevant items. He requested that an LMC Local Representative Committees meeting he had attended be discussed under item 6(b)(i) Local Update.

(c) Annual Report – Dr Unter reported that he would present a draft copy of the Annual Report at the next meeting. He requested that if any members had any items they wished to submit to please email him.

(d) Notice of KLDC AGM (Wednesday, 9th April 2014). Any members wishing to be considered to stand at the next election for subcommittee membership were requested to please advise the Chair and/or Secretary in advance of the next

¹ PLDP – Performance List Decision Panel

² PSG – Performance Screening Group

meeting if they were not able to be present at the meeting. If there were more members wishing to stand than places, members would be requested to give a short election address. Therefore, it would be advisable to prepare this in advance of the meeting.

- (e) LDC Official's Day - A report was attached outlining the events of the day which was held on December 6th 2013. John Milne reported the contract reforms must deliver improved patient outcomes and fair remuneration as well as proving current benefits for practitioners, allowing the transfer of the value of a practice's goodwill and ensuring financial stability during the transition period. Drs Unter/Hogan discussed running a road show (Contract Reform Event) facilitated by the GDPC of the BDA. The BDA will make no charge for providing a speaker for the event which is designed to update practitioners on the latest findings of the current pilot sites for the new dental contract. It was discussed and felt by members that this was a good idea. Some of the venues suggested were The Russell Hotel and The Hilton Hotel (Maidstone). Dr Unter would request a current list from the KPCA for all the individual performer & provider dentists in Kent and attempt to contact all practitioners to advise of the event and gauge interest. The suggested date for this event is 25th February. This event has already proved to be a success in other parts of the country.

Secretary's note: Subsequent to today's meeting, the BDA advised delaying the planned event until after Easter as they had not been in receipt of information they had hoped to receive from the Dept of Health when expected and felt it would therefore be beneficial to practitioner to delay the meeting.

5. TREASURER

- (a) Dr Winstone produced a report which was tabled at the meeting.
The NHS Staff Council has agreed a new system for mileage allowances for staff. Therefore, mileage rate forms have been amended to reflect this. There are sufficient funds in the LDC account for this. Dr Winstone suggested to members they only submit expense forms four times a year. Claim forms received between KLDC meetings would be held over until the next meeting. (Where a member is unable to attend forms can either be posted to himself or to the clerk). This was **agreed**.
- (b) Statutory Levy – Each year the LDC make payments to various organisations. It was **proposed** by Dr Bishop and **seconded** by Dr Unter that we make a payment of £17, 000 to the British Dental Guild, and; £6,000 to the Dentists Health Support Trust.
- (c) Voluntary Levy – It was **proposed** by Dr Bishop and **seconded** by Dr Unter that we make a payment of £3,500 to the Dentists Benevolent fund.

6. NHS ENGLAND AREA TEAM MATTERS

- (a) NHS England – Dr Unter advised that he did not have anything specific to report under this item.
- (b) Kent and Medway Area Team
- (i) Dr Unter reported on the LMC Liaison Meeting – Although Dr Nugent usually attends full committee meetings of the LMC, the LMC now hosts a biannual informal meeting between themselves, the LDC, LOC and LPC. This proves very useful in the transfer of information between the representatives and committees and how they individually deal with the new Kent and Medway Area Team. The most recent meeting discussed issues surrounding the Performers List and the PLDPs Committee (Item

69b)(iv) refers). Other items discussed were NHS England's plans for updating for the Performers List Policies and Regulations due in April 2014; potential concerns tracking dentists who move from one area to another and the current GP referral schemes.

- (ii) Local Professional Network (DLPN) – The last meeting was on 4th December. The Committee is chaired by Christopher Allen. The Kent and Medway NHS England Area Team have used this previous group to form the Dental Professional Network. Christopher Allen has published a detailed discussion document proposing the structure of the LPN in Kent. The group will work differently to the current DLPN. It will draw on the membership of the present dental network to ensure a range of clinical skills and experience across dentistry as well as public health, education and commissioning. Issues will be rationally discussed and recommendations made to the Directors of the Kent and Medway NHS England Area Team. Members will need to understand the directions resulting from the work of the core team and for the good of dentistry as a whole and not their individual service interests. No deputies will be allowed if any member is unable to attend. A decision is still required whether core group members should be nominated or go through an interview process. Dr Allen advised that this position would be up for discussion at the AGM and that he would have some say in who should be appointed. He is currently writing the terms of reference. In other areas people have applied for this position through advertisements. Currently Dr Unter is attending the meeting on behalf of the KLDC and has been invited to attend the “core” Executive committee of the DLPN as an individual (rather than a representative of the KLDC). Dr Unter discussed these two roles as he is currently funded by the KLDC to attend. Continuity was important but he would bring nomination or re-nomination for attendance at the DLPN to the AGM for confirmation.
- (iii) Kent Area Team performance Screening Group (PSG) – Dr Unter advised that the next meeting was in two weeks' time. He confirmed that the meetings were usually conducted very well and the content was inevitably confidential.
- (iv) Kent Area Team Performers List Decision Panel (PLDP) – Mahesh Patel attended this meeting (deputy is Dr Hogan). He felt that this panel usually worked very well, and cases were not unusual. He felt that the views of the dentist were very much taken into account.
- (v) SE Coast LDCs (Channel Group) – Dr Unter reported the next meeting was in March. It was a very useful meeting which was very open in the sharing of information with LDCs from Surrey and Sussex.
- (c) DentaLine – Dr Clarke was unable to attend but had attached a report. DentaLine posters have been updated recently and can be printed off for patient display areas from the website. With regards to the Canterbury site, an alternative site is being looked at and negotiations slowly continue. Recent meetings with commissioners of the service have included discussion of shared joint anxieties and re-enforced the need to identify and explore all available appropriate and workable options as a matter of urgency.

DentaLine over Christmas (Item (3)(ii) refers) was discussed under this item. Dr Trivedi reported that two of his patients had encountered problems getting hold of DentaLine on Christmas day. One of the patients actually came into his practice

to discuss the problem. It raised concerns as to why there was no "ring back" service and also how the service could be improved. **Action:** Dr Unter will write to Dr Clarke to raise the patients' concerns and also find out what is happening with regards to the Canterbury site as members were anxious to see if the process could be sped up.

(d) Dental Practice Advisors – Reports

- (i) East Kent - Dr Hymas reported that inspections are still going on as usual.
- (ii) Medway and West Kent (North) – Dr Winstone reported much the same and did not have anything different to add to this.
- (iii) West Kent (South) – Dr Bishop reported much the same. There was a proposal with new inspections to send a document ahead of physical inspection seeking confirmation that the various policies and documentation expected to be available was present. The concern as evidenced (apparently) in optical inspections carried out elsewhere, was that practices were ticking all the boxes, regardless of whether they have the reports, certificates etc.

7. REPORT FROM CONSULTANT IN DENTAL PUBLIC HEALTH

Dr Allen reported that Brett Duane starts his new Consultant Post on 4th February. Locally there has been an Occupational Health audit by OHWorks. EPP (Exposure Prone Procedures) workers (dentists, therapists & hygienists) should be screened for blood born viruses. OH Works have suggested they set up screening and immunisations to make sure that providers and performers are compliant with NHS regulations. There were discussions at the LPN over who should pick up the cost for this (estimated at £60k). Area Teams are not happy as existing EPP workers do not think they should pay for this. Christopher Allen suggested a compromise that the AT should subsidise this programme but EPP workers would mainly have to pay for themselves. Talks also took place on what dentists should do if they were found to have Hepatitis B and C. It was felt that something should be put in place in the form of counselling for these dentists, especially because if they are found to have Hep C they would be unable to work. In Scotland they do have a counselling services already in place.

8. KLDC WEBSITE

Dr Hogan requested as usual for members to please advise of any items they would like uploaded onto the website in addition to those already hosted.

9. SALARIED DENTAL SERVICES

- (a) East Kent – Dr Johnstone was unable to attend but his report was attached. Kent Community Health NHS Trust is moving positively towards Foundation Trust Status; a new Dental Officer has recently been employed who will focus on prison dentistry. Two dental therapists have undertaken training in sedation to support the work they do with special care patients and children; a new Consultant, Charlotte Curl has been appointed to replace Graham Manley; waiting times for GA are at 8-10 weeks and referrals are prioritised making some waits even shorter; As from January 2014 a GP referral will be required confirming the patient requires a domiciliary visit due to a medical condition.
- (b) West Kent – Dr Clarke was unable to attend but her report was attached. Positive feedback continues to be received on the updated electronic referral form. All referrals to the service should now be made using this form; the survey examinations are underway across Kent and should be completed by the end of

January; a survey of children with special needs is being organised by the British association for the Study of Community Dentists (BASCD). The children will be examined within the school sites.

10. LMC REPORT – There was a meeting on 10th October. Doctors reported on a reduction in morale in the past year. There was an article in the Times relating to alleged schemes to avoid VAT, this applied mainly to locums. There were discussions over duty of care regarding patients finding out their test results and that it should be a joint responsibility between the Hospital and the GP. A national survey showed that 22% of GPs were over 55 and 20% of nurses were over 55. There could be a potential issue regarding workload. By the year 2021 there would be a £30 billion shortfall in health care funding. The next meeting is 13th February

11. HOSPITAL REPRESENTATIVE REPORT

Dr Andrew Elder was introduced to members and welcomed to the meeting. Dr Elder will give a report under this item in future meetings. He asked members to advise him of any hospital related issues they would like him to discuss.

12. ORTHODONTIC REPORT

Dr Sheridan discussed the five indicator targets and felt that whilst it was a good idea in principle to have indicator targets, these needed to be achievable and at the moment most were not. She was experiencing problems with some of her patients who had already started their treatment but essentially it was costing them too much in travel costs to stay under treatment at her practice. Patients are not allowed to move from one practice to another once treatment has commenced. She referred some of her new patients to Dr Newell as it was closer for them. Dr Newell reported that he would be attending a meeting with Annie Godden very soon and one of the things he will be discussing is abandoned patients. Overall it was felt that waiting lists are getting better.

13. GENERAL DENTAL PRACTICE COMMITTEE: REPORT OF KENT REPRESENTATIVES

There was a lot of discussion regarding associate's pay scales. It was agreed Dr Manoj Patel will email a recent paper to Dr Unter that he has received on this. There was also discussion regarding BDA finances and the three tier membership. It was felt that people were opting out and the number of members were dropping.

14. KENT DENTAL ADVISORY COMMITTEE (KDAC)

There was a report attached from Dr Allen from a meeting held on 4th December 2013. In the future Dr Henderson would be reporting under this item. Dr Henderson is now Chair of this committee with Dr Bishop continuing as Vice Chair. It was mentioned that the demand on restorative dentistry is increasing but there is no funding to expand the service. The new endodontic referral forms have been discussed and advice has been given to DentaLine regarding posters.

15. EDUCATION AND TRAINING:DENTAL FOUNDATION TRAINING

The interviews for trainers is in Mid-February and they will be meeting the new trainees towards the end of March. The HEKSS base will be moving to Crawley which may cause a problem with staffing as many staff live in and around London.

16. DATE OF NEXT MEETING

Wednesday, 9th April 2014 (AGM)

Secretary's note: This meeting has now been moved a week earlier to Wednesday 2nd April – members were advised by email on Monday 27th January 2014

17. ANY OTHER BUSINESS

(i) East Kent Vacancy coming up in Kent [from 3 (i).]

Dr Hogan announced that Dr Zophya Hammond would be retiring after having served for fifteen years on the Committee. He thanked her on behalf of the committee for all her hard work in this position and her five/six addresses in Conference. She will be sadly missed. Dr Hammond thanked all of the committee for all their support over those years.

Dr Hogan **proposed** and Dr Unter **seconded** that the committee co-opt Dr Andrew Elder onto the committee as Hospital Representative.

FUTURE DATES: Wednesday, 25th June 2014
 Wednesday, 8th October 2014

The meeting closed at 8.30 pm.