

**MINUTES OF THE FIFTY-FIRST MEETING OF THE KENT LOCAL DENTAL
COMMITTEE HELD ON WEDNESDAY, 14TH OCTOBER 2015**

AT 6.00 PM AT

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

Present: Drs Adesanya, Barham, Bhatti, Davies, Hogan, Hartle, Hogan, Nugent, O'Sullivan, Mahesh Patel, N Patel, U Patel, Shivji, Unter, Watts and Wood

Observers: Drs Mary Henderson, June Willis-Lake, Bishop

It was noted that the following members appear not to have attended **or** tendered their apologies for this meeting: Drs Ahmad, Elder, Kulkarni, Trivedi

1. APOLOGIES FOR ABSENCE:

Apologies were received from Drs Banvir, Chopra, Duane, Hymas, Johnstone, Lynch, Myint, Newell, Manoj Patel, V Patel, Sheridan and Winstone.

Dr Hogan opened the meeting by welcoming observer Julie Willis-Lake and he requested members to give their completed expenses claim forms to the clerk in Dr Winstone's absence.

2. LAST MEETING – WEDNESDAY, 8th JULY 2015

(a) Confirmation of Minutes – a few minor amendments were made to the minutes but otherwise they were approved. **Action:** Clerk as usual to email to John Noakes to upload onto the KLDC website.

(b) Matters arising – Item 1 of the previous minutes: Apologies - Dr Unter advised that he had included a copy of the termination clause in the minutes regarding non-attendance by elected members at consecutive meetings of the KLDC as previously raised.

Item 2(b) Dental Referee. Dr Unter reported that this has been updated and put onto the KLDC website. Safeguarding contacts had been fully updated and members reminded that this information should routinely be available in practices.

Item 10(b) West Kent salaried referral form – no copy had been received from Sarah Davies. (Page 4). **Action:** Dr Davies will sort this out.

3. NOTICE OF ANY OTHER BUSINESS

There was no other business to discuss.

4. SECRETARY

(a) CORRESPONDENCE RECEIVED AND WRITTEN

As usual Dr Unter requested permission to report items as they appear on the agenda.

(b) REPORT OF MEETINGS

Again Dr Unter advised that he would report on items as they appear on the agenda.

5. TREASURER

Dr Winstone sent his apologies to the meeting. He sent a report via Dr Unter who read this out at the meeting. He was unable to make the meeting as he had already committed to attend the HEKSS Challenges Conference before the change of date to tonight's meeting. He advised that we continue to hold funds for the Older Persons project for HEKSS. The Statutory and voluntary levy income is being paid into the LDC account as usual. He reminded members to make sure that their expense claim forms were fully completed and legible. All previous payments to members are up to date.

6. NHS ENGLAND MATTERS

(a) NHS England – The new commissioning guides have been published for oral surgery, oral medicine, orthodontics, special care dentistry and an introduction for commissioning dental specialities. All documents are available on the KLDC website.

- (b) NHS England South (South East) *previously* Kent & Medway Area Team – they no longer refer to themselves as the LAT (Local Area Team), they are now the Local Office. Dr Unter discussed the DERS – Dental Electronic Referral System which came into use on the 1st October to replace the manual system for oral surgery referrals which was previously run by the Primary Care Booking Service in Maidstone. Eventually the system will include orthodontic referrals and will roll out to Sussex and Surrey.

Dr Unter commented that he had been made aware that where practitioners wish to provide care which was not usually allowed i.e. 2nd courses or orthodontics, referral for endodontics on molar teeth classified as non-essential, practitioners can make an individual funding request (IFR). He advised such requests are always reviewed by a dentally qualified person and not simply a non-clinically qualified officer from the local office. A reply is awaited.

Practice inspections – despite numerous emails the issue of “bagged items” has still not been resolved. Hopefully progress will be made before the next meeting.

Dr Unter advised that he had received a copy from Dr Hartle of a PowerPoint presentation “Remuneration Mechanisms for Dental Contract Reform Prototypes” that she would raise in her report (Item 11 refers).

- (i) Kent Local Professional Network (DLPN) – the core LPN and full LPN continue to meet regularly. Christopher Allen who usually chairs the meeting is retiring in December. The post will be advertised shortly for both the Kent and the Surrey/Sussex LPN as the chair for Surrey/Sussex recently resigned.

The most recent full LPN was on 16th September. Topics discussed were the introduction of a new DCP member (Maggie Nash); The new DERS; difficulties arranging IMOS performer performance appraisals; Health Education KSS sustainability program with dentistry – Dr Winstone to be the lead for the LPN as he already has a role within the Deanery; The Chancellor and Chief Secretary to the Treasury - Efficiency challenge and how we could generate savings within dentistry; A review of the work completed by the MCN's, (special needs, oral health promotion, orthodontic and oral surgery); Also discussed were Public Health England, the new CDO Sara Hurley and the salaried service, DentaLine, DPAs, Health Watch, HEKSS and the Challenges Conference.

- (ii) Kent Performance Advice Group (PAG) – the LDC now attend PAG with observer status. Meetings are held every other month in either Horley or Tonbridge. Attendance is shared between East and West Sussex. The meeting in September was very well run and views from the LDC observer were actively sought by panel members before decisions were made.

- (iii) KSS Performers List Decision Panel (PLDP) – Dr Hogan reported there are 3 meetings left this year, there are 12 next year. The cases are from Kent, Surrey and Sussex. The panel consists of four people which includes one dentist. There is emphasis on what the dentist thinks.

Dr Bishop reported that the GDC are running a pilot. They are trying to deal with some cases more locally for one year at PAG. A report will be sent back to the GDC. By dealing with issues at PAG level this will cut down on workload. This is being trialled for one year.

- (iv) DCQAP – Dental Contracts & Quality Assurance Panel – Dr Unter attended a meeting in July and Dr Hogan attended a meeting in September. The panel meets to discuss contractual issues. Dr Unter reported on a meeting where he was called in to assist a very anxious colleague who had been requested to explain his contract and performance. He was impressed with how the local office contract lead was discussing their findings and resolving the problems.

- (v) SE Coast LDCs (Channel Group) – Dr Unter reported that he attended a meeting on Monday this week which was attended by all four LDCs and Annie Godden and Alison Cross. There was a lot of discussion about the orthodontic contract; the introduction of DERS in Kent and the eventual roll out to Surrey, East and West Sussex; the replacement of the Surrey and Sussex LPN chair due to the sudden departure of the existing chair, Brett Duane covering in the

interim; the loss of both DPH consultants in KSS – Public Health England and that they are working to recruit in the meantime. It was felt that it was a good meeting.

- (c) DentaLine – Dr Davies reported that they have now moved from MCH house however, the whole process has not been very smooth. They are still seeking premises for Canterbury DentaLine. Practices have written expressing interest and these options are currently being explored. The PDS contract will continue until 2017.

(d) Dental Practice Advisors – Reports

- (i) East Kent – Dr Hymas was not present therefore there was nothing to report. However, he has agreed to take on Dr Bishop's inspections but Dr Winstone cannot take on any more.

- (ii) Medway & West Kent (North) – Dr Winstone sent a report which was read out to the members by the Secretary. He reported that the work they do for NHS England South (South East) is now clearly defined in two separate areas and funding streams. Dental Contracts/commissioning including dental practice inspections and advice on contracts/commissioning. This team is based at Wharf House and the senior manager is Annie Godden. The other area is Performance which includes complaints advice/reviews and performance interviews etc. This team is based at York House, Horley under Karen Crossland reporting to Alison Taylor (deputy medical director) and James Thallon (medical director). Dr Winstone feels the new structure is working well and the aim is to improve efficiency whilst decreasing costs. The only problem is any one from Kent who has to attend a performance hearing will find that this is in Horley so may have to travel a long way.

Kent is the first area to go live on DERS and Dr Winstone is the only person currently triaging the endodontic referrals. He is working with the director of Vantage Diagnostics to highlight areas for development and refinement of this. These systems have been set up to enable non-patient costs to be minimised and enable the NHS to achieve the best value. As such he hopes the LDC can offer constructive comments so we can advise NHS England on the areas where there is a consensus that improvements would be welcomed.

Dr Winstone noted that Dr Bishop had handed in his resignation and said that both he and Dr Hymas would miss him. At the moment there is a lot of uncertainty with what the future workload may be.

- (iii) West Kent – there was no additional report. The chair thanked Dr Bishop on behalf of the committee for all his valued work over the years and wished him all the best for the future.

7. REPORT FROM CONSULTANT IN DENTAL PUBLIC HEALTH (ENGLAND) Dr Duane was not present therefore there was nothing to report.

8. ORTHODONTIC REPORT

Dr Sheridan sent her apologies along with a report which was read by Dr Unter. She advised that their contracts were being extended until April 2018. She advised that she was not able to attend the last orthodontic clinical network meeting and has not received any minutes. She said she was not sure what other specialists were doing in terms of referrals but in Longfield they have decided to see every referral to assess whether they qualify for NHS treatment. No claim will be submitted unless they are starting treatment or need referral to secondary care.

9. SALARIED DENTAL SERVICES

- (a) East Kent – Dr Johnstone was unable to attend but his report was attached. He reported that they had recently expanded their oral health promotion by winning a tender to provide services in Redbridge. They currently provide in Tower Hamlets and Newnham; 1600 children have been recruited into the Bart's trial and they have reached midpoint on the three year trial; RECUR portfolio study – recruitment started in both Kent and in London; they are working with KSS Elderly Care Package which is part of Kings College and HEKSS Deanery; they are introducing

CSSD in the prison dental clinics following agreement with prison Governors and security; infection control /IPS - IPS audits (DH and IPS) undertaken 6 monthly at all sites; StR post paediatric Dentistry (Kent) – the successful candidate will start in Trust Induction on December 14th.

- (b) West Kent – Dr Davies reported that they are continuing to provide Community dental services to the population of Medway, Swale and West Kent. Their preferred source of referral is via the online form available on the Medway Community Healthcare website or the link via the LDC website. If this cannot be used then the old hard copy referral form is also available on the LDC website and this is currently being updated to reflect the data required on the electronic form. They continue to improve/relocate the Canterbury centre and are exploring all options available.

10. HOSPITAL REPRESENTATIVE REPORT

Dr Elder was not present and Dr Unter **agreed** that he would write to him to see if he wanted to attend future meetings.

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

Dr Hartle reported on a recent meeting she had attended and advised that a copy of this report would be forwarded to members along with a presentation. Some points made were that patients who received private care within an NHS course of treatment will have to sign their agreement for this information to be shared anonymously with the NHS otherwise the patient cannot receive NHS care. There are lots of concerns over X-rays used for non-clinical purposes; All prototype practices will be expected to deliver all necessary care to each capitated patient on their list – if more treatment than the minimum level is required, practices will be expected to deliver this within their overall contract value; The DH accepted that the payment system seemed complicated but stated that they had to achieve a balance between simplicity, fairness and accuracy. When asked about the difficulty practices may find in recruiting new patients, particularly those with static populations or those in rural areas, the response was that surveys tell us that there are still patients wanting to find an NHS dentist.

- 12. ORAL HEALTH PROMOTION NETWORK (OHPN) Dr Henderson will be retiring and the chair thanked her on behalf of the KLDC for all her hard work. Dr Davies has kindly offered to take over chairing this meeting.

13. LMC REPORT

Dr Nugent reported that the October meeting was brought forward to August. It was predominantly about co-commissioning. The main issue was that there are lots of GPs retiring.

14. KLDC WEBSITE

Dr Unter reported that this continues to be a good source of information and more recently contains information on commissioning, safeguarding policies and the dental referee. As usual he asked if anyone had anything they would like uploaded to please email him.

15. EDUCATION AND TRAINING – DENTAL FOUNDATION TRAINING

Dr Shivji reported on the Challenges Conference. Competencies have been changed. There are plans to do ratings on practices which is not in the patients' interest. There is a big problem with wasted drugs and 10% is thought to be from dentistry with some possibly from DentaLine.

Dr Winstone's report advised that they are working well alongside London Dental Education and Training (LDET). The structure of the professional workforce has different remits and the study days are organised differently. They are trying to align these where possible. He has recently attended two seminars for dentists wanting to be trainers and the application process is about to close. They have previously reported running a pilot year to test the processes which will enable them to demonstrate satisfactory completion of DFT. This has meant a new electronic portfolio and also new

monitoring, evaluation and reporting mechanisms for trainers (now referred to as educational supervisors), programme directors and himself as Associate Dean. For Overseas Dentists accessing the performers list there has also been much change as a result of the “Framework for Managing Performer Concerns”, introduced last year. He has been working together with Christine Osborne, Tony Fallowfield and Sheryl Yearwood with the Medical Directorate at NHS England to ensure they have robust processes.

16. DATE OF NEXT MEETING

Wednesday, 13th January 2016

17. ANY OTHER BUSINESS

There was no other business

FUTURE DATES:

Wednesday, 6th April 2016

Wednesday, 6th July 2016 and

Wednesday, 12th October 2016