

Meeting Minutes

Title of Meeting	Somerset Local Dental Committee (LDC), Quarterly Meeting, March 2015
Date	Tuesday 3 March 2015
Time	19.30 – 21.40
Venue	The Hankridge Arms, Taunton, Somerset, TA1 2LR

Somerset Local Dental Committee Members Present:

Dr Geoff Worrall, Chairman, South Somerset Constituency Representative (GW)
 Dr Andre Louw, Secretary, Somerset Coast Constituency Representative (AL)
 Dr Mike Biccard, Treasurer, Taunton Deane Constituency Representative (MB)
 Dr Peter Hollins, Taunton Deane Constituency Representative (PH)
 Dr Richard Leworthy, Mendip Constituency Representative (RL)
 Dr Jane Foggin, Taunton Deane Constituency Representative (JF)
 Dr Bob Gordon, Somerset Coast Constituency Representative (BG)
 Dr Gary Irvine, South Somerset Constituency Representative (GI)
 Dr Lucy Silk, Mendip Constituency Representative (LS)
 Dr John Smalley, Somerset Coast Constituency Representative (JS)
 Dr Andy Sprod, Primary Dental Care Services (non-elected Somerset LDC member) (AS)

In Attendance:

Miss Emma Childs, Secretarial Support (EC)

Apologies:

Dr Simon Albiston, South Somerset Constituency Representative (SA)
 Dr Vinay Shah, Mendip Constituency Representative (co-opted from Somerset Coast) (VS)
 Dr Matthew Clover, Member of the General Dental Practice Committee (GDPC) (non-elected Somerset LDC member) (MC)
 Dr Martin Fulford, Professional Dental Lead, NHS England BNSSSG Area Team (non-elected Somerset LDC member) (MF)

Item	Item Description and Action	Action
1	Welcome and Introductions	
1.1	GW welcomed everyone to the meeting.	
2	Apologies for Absence	
2.1	Apologies were noted for those listed above.	
3	Matters Arising / Minutes from the Previous Meeting, 11 November 2014	
3.1	The LDC reviewed the minutes from the previous meeting, and the following 'Matters Arising' items were raised:	
3.2	(1) Item 10.4 'Primary Care Dental Services (PCDS) Updates (AS) – Dental Nurse Training Programme: AS advised that the Primary Care Dental Services are currently setting up a Dental Nurse Training Program, which is to be based in Southwood House, Bridgwater. The course start date is envisaged for January 2016, and there have already been expressions of interest from local Dental Practices. AS agreed to keep the LDC updated regarding Dental Nurse Training Programme.	AS

<p>3.2.1</p> <p>3.2.2</p> <p>3.2.3</p> <p>3.3</p> <p>3.4</p>	<p>(1) Item 10.4 'Primary Care Dental Services (PCDS) Updates (AS) – Tendering: Somerset Partnership recently won a contract via a competitive tendering process to deliver PCDS services in West Dorset, Dorset and Isle of Wight commencing 1 April 2015. AS explained that Staff currently working within the other geographical areas are transferring to Somerset Partnership, with the Staff reporting to AS.</p> <p>GW queried what are the benefits of Somerset Partnership expanding into other regions. AS advised that this has allowed all areas to work in collaboration with their counterparts, rather than in isolation. In addition, as there are now two hundred members of Staff within Somerset Partnership, this has enabled the team to review quality indicators (including clinical governance, vital signs and KPI's). AS also explained that there has been engagement with the Isle of Wight LDC (following a query raised from GW). AS agreed to keep the LDC up to date regarding the new PCDS services.</p> <p>(1) Item 10.4 'Primary Care Dental Services (PCDS) Updates (AS) – Epidemiology Program, 5 year-olds: The data collection is almost finished but there will not be a survey next year.</p> <p>(1) Item 10.4 'Primary Care Dental Services (PCDS) Updates (AS) – Wait Times: The wait times from referral for first assessment is six to eight weeks, and for GA is four weeks. However, AS advised that there has been in secondary care a bed shortage over the winter period, and consequently PCDS have had to cancel four GA's list, but assured that PCDS are rectifying the situation.</p> <p>(2) Item 5.4 'Occupational Health' (AL): AL complimented Occupational Health following a needle stick injury at AL's Dental Practice. Occupational Health is now 'Work and Wellbeing'. GI suggested for an email to be circulated around to all Dental Practices in Somerset regarding the Work and Wellbeing Services. JS agreed to circulate an email to all Dental Practices. The LDC also agreed there should also be link on their website to 'Work and Wellbeing'. EC agreed to set up the link on the LDC website.</p> <p>The LDC agreed the minutes from the previous LDC meeting to be an accurate record.</p>	<p>AS</p> <p>JS EC</p>
<p>5</p> <p>5.1</p>	<p>Dental Lead Update</p> <p>MF was absent from the LDC Meeting, and therefore his meeting item was deferred.</p>	
<p>6</p> <p>6.1</p> <p>6.2</p>	<p>Somerset/Avon LDC Levy</p> <p>Over the past year the Somerset LDC has had numerous discussions on agreeing an appropriate levy collection figure with their colleagues in Avon LDC.</p> <p>GW/AL informed the LDC that prior to the Area Team Liaison Meeting, December 2014, a meeting was held with John Cantwell (Avon LDC representative) to agree the collection levy figure (Avon LDC have historically collected a higher levy figure compared to the Somerset LDC).</p> <p>The outcome of the meeting was inconclusive as the Avon LDC covers</p>	

6.3 6.4	<p>two areas, which includes Wiltshire and Gloucester. In addition, John Cantwell sent an email to GW, which explained that Wiltshire and Gloucester are developing a levy collection template, which is to be incorporated into BNSSSG. It is the intention for the Area Team's to implement this system as a single operating model across BNSSSG.</p> <p>JF raised concerns that as BNSSSG is to merge with Devon and Cornwall will the Somerset LDC have to agree a levy collection figure with their LDC's as well. The LDC debated this issue, and it was the view of the Treasurer, as nationally the levy collection is becoming a problem, the Somerset LDC should wait for further clarification.</p> <p>The Somerset LDC agreed to temporarily refrain from undertaking additional work whilst there is limited clarity from the Area Team. This is to be discussed further at the next LDC Meeting.</p>	LDC
7 7.1	<p>Treasurer Update</p> <p>MB advised the LDC that the current financial position has not changed. At the moment, without the statutory levy collection there are limited credits into the LDC bank account. In contrast, the volume of debits has increased there resulting from the LDC funding Connecting with Colleagues, Clinical Governance Events, meetings etc. The LDC agreed that the levy needs to be collected, but until there is clarification from the Area Team this cannot be taken forward.</p>	
8 8.1 8.2 8.3 8.4 8.5	<p>Somerset/Avon LDC and Area Team Liaison Meeting, 3 December 2014</p> <p>GW and AL attended the Somerset/Avon LDC and Team Liaison Meeting on 3 December 2014, which was held at The Hankridge Arms, Taunton.</p> <p>GW stated that all parties who attended the meeting found it beneficial, and the next liaison meeting is to be held in a fortnight.</p> <p>GW and AL gave the LDC an update following the meeting:</p> <ul style="list-style-type: none"> • The majority of the discussion covered the levy collection. • The Area Team are currently undergoing the contract monitoring process on a quarterly basis. The Area Team have advised they are comparing all Practices against one another, and any clinical indicators which appear to be an outlier will be flagged, and shall result in a letter seeking justification. • Any Practices who appear to be outliers would have already received a letter from the Area Team. • The areas that the Area Team are reviewing in terms of clinical/non-clinical indicators include three-month patient recall intervals, radiographs, continuations, free/replacements etc. <p>The LDC agreed it is inappropriate to benchmark a Practice against each other, as each Practice has different cohort of patients/demographics, which will affect the quarterly statistics. AL advised the LDC to check on the NHS portal their vital signs against the national averages.</p> <p>LS explained that the LPN informed all members that the Practice's statistics will be up online for patients to review individual Practices performances. Therefore, LS stressed that a letter of concern or feedback should be sent to the Area Team to change the terminology within the outcome letters, as it demoralises the Practitioner. The LDC agreed. GW sought the views from the LDC of their concerns/views they wish to</p>	

	<p>be raised at the next Area Team Liaison Meeting. The following was raised:</p> <ul style="list-style-type: none"> • LS requested for the Area Team to change the terminology of the contract-monitoring letter from 'worse than the national average' to 'different to', and then provide the Area Team with justification. • RL stated it is unacceptable for the Area Team within their letters to Practitioners to write accusations without the full facts, and should treat Dentists like professionals. • The LDC also believed the Area Team also needs to communicate more effectively with the Dentists, and cannot provide less than a few weeks notice for a Dentist to be to attend a meeting. <p>GW and AL agreed to feed all the LDC's views during the next Liaison Meeting. The Liaison's meeting is to be held on a quarterly basis.</p>	<p>GW AL</p>
8.6	<p>JS suggested that there should be a few LDC members who can be a point of contact for Dentists after receiving letters from the Area Team. The LDC members can act as support for the Somerset Dentists, and explain/clarify the clinical indicators. The letters can have an adverse effect on the Dentists self-esteem and performance. This could possibly be promoted via email or the LDC website. The LDC agreed this would be beneficial, and is to be investigated further.</p>	<p>LDC</p>
8.7	<p>GI asked if there would be a possibility for reviewing the current numbers of Dentists who are using the Somerset LDC website. EC agreed to look into this further.</p>	<p>EC</p>
8.8	<p>GW asked all LDC members that if there are other agenda items that need raising with the Area Team to send an email prior to the next Liaison Meeting. This was agreed.</p>	<p>LDC</p>
9	<p>Friends and Family Test (FFT)– NHS England</p>	
9.1	<p>The LDC raised the discussion of the Friends and Family Test (FFT) in which patients are asked if they would recommend their services to other patients. The FFT is used by NHS England to highlight both good and poor patient experience. The system is to be rolled out for Dental Practices with effect from 1 April 2015. The LDC were unsure whether all Dental Practices have been made aware of the system, and agreed to include information on the LDC website.</p> <p>http://www.england.nhs.uk/ourwork/pe/fft/</p>	<p>LDC</p>
10	<p>Connecting with Colleagues Forum Update, 28 January 2015</p>	
10.1	<p>The last Connecting with Colleagues forum was held on 28 January 2015. As LS was unable to attend, AL facilitated on LS's behalf and updated the LDC:</p> <ul style="list-style-type: none"> • Another successful forum, and the Speaker was Stuart Arnold, a Dental Financial Advisor. Stuart Arnold covered tax, clawback, credit/debit management, divorce, pensions and associate issues. • The forum was originally catered for thirteen attendees; eventually sixteen dentists attended the forum. • The forum was rated primarily four and five's (good and excellent). • The forum being held at The Hankridge Arms was an ideal facility and allowed the session to be more interactive. 	

10.2	MB advised that it was the first time he had attended the Connecting with Colleagues forum, and he thought it was beneficial, and a good opportunity to have a variety of Dentists together/engage with their colleagues.	
10.3	The LDC agreed to commission another Connecting with Colleagues Forum for this year. The date is to be confirmed in due course.	
11	Pearls of Wisdom (POW)	
11.1	Prior to the LDC meeting, LS circulated a proposal around to all LDC members regarding a scheme aimed at preventing professional isolation amongst Dentists in Somerset.	
11.2	During previous LDC meetings, there have been discussions of a mentoring program to support Dentists who are struggling clinically in Practice. The LDC have commissioned several Connecting with Colleagues Forum which have proven successful in bringing together Dental Professionals in Somerset to discuss any concerns, and learn from one another in an interactive environment. LS stated that the Pearls of Wisdom scheme would be able to go one step further from Connecting with Colleagues.	
11.3	LS explained the proposal to the LDC and whether they would agree to commission the scheme as a pilot. The Pearls of Wisdom is a non-mentoring scheme, which would be open to all Dentists in Somerset to participate. Dentists would be randomly paired with another Dentist (not from the same Practice), it would be completely confidential, and the benefit would be each Dentist would have a contact to discuss any aspect of their working life within Practice. As a pilot the Dentists would only initially have to make contact with one another three-four times a year, as a form of peer support.	
11.4	LS also explained that it would be cost effective, Dentists are allowed to leave the scheme at anytime, and the scheme could be promoted via email, website and at the next Clinical Governance Event.	
11.5	The LDC discussed the proposal and agreed it is an excellent idea. GI and MB suggested whether three-four times a year is enough, and if a pairing does not work what would be the next step. BG proposed if there were a few nominated LDC members to oversee the scheme, and if any pairings are not suitable then the Dentists can inform the facilitators in confidence. The LDC agreed this would be appropriate. In addition, initially as a pilot the LDC would suggest three-four times a year, but if the paired Dentists wish to contact one another more often then that would be their decision.	
11.6	RL asked how the LDC would be able to obtain a list of Dentists who are new to the area in Somerset to advise them of the pilot. Contact will be made with the Area Team, and any new Dentists are to contact GW and AL.	LDC
11.7	The LDC supported the idea and agreed to commission the pilot. LS, RL, JF and BG agreed to work as a task and finish group to develop Pearls of Wisdom, and report back at the next LDC meeting. In addition, the pilot is also to be promoted at the next Clinical Governance Event.	LS RL JF BG
11.8	LS also noted that MC (who sent apologies for being unable to attend the	

	meeting) is in the process of setting up a cycling club at the weekends for Dentists (non-CPD), but purely a social club. MC agreed to keep the LDC updated.	MC
12	Success LS advised that the Success at the moment is quiet, but believes this is the beneficial result of the Connecting with Colleagues forums.	
13	Somerset LDC Mentors, and Update from Mentoring Training Course, London, December 2014 / PAG Meetings	
13.1	RL and JF attended the Mentoring Course in London and commented that the course was well run by NCAS. Following the training course it was unclear as to where the LDC positions itself in regards to mentoring..	GW
13.2	RL asked GW to raise with the Area Team what are they specifically after regarding a Mentoring Program. During previous LDC meetings, there was a high level of interest from the Area Team in members of the LDC becoming a mentor. If Area Team are no longer interested in a mentoring scheme, then the LDC will cease to investigate mentoring. GW agreed to take this issue forward with the Area Team.	
13.3	It was agreed in a previous LDC meeting, for a representative from the Somerset LDC to attend an Area Team's Professional Advisory Group (PAG) meeting to provide an experienced dental clinical view. JF has recently attended the PAG meetings, and explained the following: <ul style="list-style-type: none"> • All PAG meeting dates are given a year in advance. • There is to be a Southwest PAG. • Any issues clinical or non-clinical with a Dental Practitioner will be discussed during the PAG meetings. • Area Team mentioned that there has been limited representation from Avon LDC, but the Somerset LDC appreciates that the locations of the meetings may not be demographically suitable for Avon. • The complaints system is changing again. • Any non-EU graduates will have a mentor in Practice for the first six months, in conjunction with any Deanery approved courses. There will also be audits undertaken by the mentor concerning clinical notes, radiographs etc to ensure the candidates are fit for purpose. • EU graduates will have conditions imposed for their first six months in Practice. • It is beneficial for an LDC member to attend the PAG, and the Dentists are actively involved in the discussions regarding their clinical opinions. <p>The LDC agreed to continue to actively participate in the PAG meetings.</p>	
14	LDC Officials Day Report	
14.1	GW attended the LDC Officials day in December 2014, and reported a full day of updates on contract reform and NHS commissioning. The highlight of the morning session was the unanimous support for the motion "this conference believes the GDC has failed in its role as the regulator for Dentistry in its current model, and demands a reformation of the GDC that will protect patients and re-establish the support of the dental profession"	
14.2	The Current issues with NHS contracting indicated improved oral hygiene, fewer complaints and no access problems but reducing interest with contract reform possibly related to the hiatus caused by the forthcoming	

	election. Prototype trials for a reformed contract are due to go live by November 2015. "Evolutionary change" and "blended approach" were the buzzwords. Multi clinic practices are the future but with no more money available.	
14.3	NHS Commissioning for dental specialties - oral surgery, special care, orthodontic and restorative. Each of the presentations each came to the same conclusion 'rushed', 'breakneck speed' and 'a lack of clarity'. However, the "colleges" are enthusiastic as it means additional courses and training. It appears since December that the message has got through, and the process is slowing down to a sensible speed. It is likely that oral surgery will progress first.	
14.4	GI raised concerns that if there is a patient that needs to be referred to see a tier 3 Consultant but there is no access to that particular tiering this could be problematic. GI agreed to raise this further.	GI
14.5	There were also presentations from the British Dental Guild, Dentists' Health Support Trust, and BDA Benevolent Fund asking for financial support from LDCs. Some LDC's give generous support to these organisations and others not at all.	
14.6	GW also related a discussion about VT trainers who were more recently qualified and had mainly worked under the 2006 contract. They may have the relevant qualifications to be a trainer but might be missing the wider range of experience to be a good trainer that comes from working under a less restricted system.	
15	Any Other Business	
15.1	<u>Clinical Audits (JF)</u> JF informed the LDC that Devon and Cornwall have copies of their old clinical audit templates that were used in Somerset. JF suggested that for the Somerset LDC to obtain examples of clinical audits which can be uploaded onto the LDC website. AS believes that PCDS have access to the clinical audits, and will forward this to AS.	AS
15.2	<u>Proposed Clinical Governance Event, 2015</u> The LDC agreed to commission another Clinical Governance Event, June 2015. The current proposed date is Wednesday 17 June 2015 at to be held at The Holiday Inn, Taunton.	
15.2.1	It was agreed that this event will purely be for dentists, and Dentists will be advised of the inappropriateness of DNA the event.	
15.2.2	The LDC discussed proposed event topics, JS suggested a presentation she recently attended regarding valpast which was informative as a clinical topic. JS agreed to send the contact details for the Technical Director to EC. The second clinical topic was paediatric dentistry, and LS agreed to send the contact details for the Specialist to EC.	JS LS
15.3	<u>Items raised from Somerset Dentists (JS)</u> Prior to all LDC meetings, JS circulates an email to all Dentists in Somerset enquiring whether they wish any issues to raise at the LDC meetings.	
15.3.1	JS advised an email had been received from a Dental Practice regarding limited Safeguarding Training Courses in Somerset and that online CPD is not beneficial. LS advised that an offer has been made to buy a core CPD	

	<p>package, and that previous CPD Safeguarding Training has been provided at the Deanery. LS advised that the Dental Practice have been referred to the appropriate individuals regarding safeguarding.</p>	
15.4	<p><u>LDC Conference, 12 June 2015 (AL)</u> AL advised that the next LDC conference is to be held on 12 June 2015, and normally two delegates are sent from the LDC. RL and BG agreed to attend the conference.</p>	<p>RL BG</p>
15.5	<p><u>LPN Update</u> There are no further updates from the LPN, but LS advised that as the Area Team's are merging all future LPN meetings are currently disbanded. A new LPN Chair has been appointed.</p>	
15.6	<p><u>Referrals to Secondary Care</u> GI raised a question of a patient referred to Secondary Care, the patient could not attend placed on a cancellation list, cancelled again and then was advised that the Dentist will have to re-refer the patient. GI queried if the LDC members had a similar situation. The LDC explained they believe it is two referrals, GI agreed to contact the hospital to confirm what the standard referral procedure is at the hospital.</p>	<p>GI</p>
15.7	<p><u>Referral Management Centre</u> GI raised concerns of turnaround time of referral forms at the referral management centre taking around four to six weeks. AS agreed to look into this as the triage should be no more than forty-eight hours. AS will report the findings back to the LDC Chairman.</p>	<p>AS</p>
16	<p><u>Date of the Next Somerset LDC Meeting</u> The Somerset LDC meeting is to be Tuesday 9 June 2015, 19.30 and to be held at The Hankridge Arms, Taunton.</p>	