

***Minutes of LDC meeting held at the Holiday Inn Express, Llandarcy  
on Tuesday 27<sup>th</sup> January, 2015.***

***Members Present.***

Rhiain Paul in the Chair, Roger Pratley, Secretary, Anwen Hopkins, Huw Hopkins, Pam Norman, David Jones, James Davies, Mike Spencer-Harty, Ewart Johnstone, Allison Walker, Tesni Metcalf.

***In Attendance.***

Dharminy Martin, Simon Bond, Rhian Jones, Phil Majoe, Sian Majoe, Richard Woods, Chris Woods, Mary Wilson, Keith Silvester, Lindsay Davies, ABMUHB Joint Locality Dental Lead (LD)

***Apologies for Absence.***

Bill Walters, Helen John, Lesley Hicks, Karl Bishop, James Bater, Tony Fodor, Paul Fraser, Rob Elliott, Steve Gould, Mark Harris, Gayathri Kini, Celia Topping, and Barrie David.

***15/01 Presentation by Simon Hodder, Consultant in Oral and Maxillofacial Surgery and Head and Neck Oncology, ABMUHB – USC Referrals.***

Mr Hodder explained that there was a significantly high number of inappropriate referrals being received by the Max Fax dept. in Morriston Hospital.

The data reported that 980 referrals, marked as USC were received in one year. This equates to 19 per week. Out of this total 62 (6%) were positive for cancer. 175 referrals, (20%) received were downgraded.

The aim is to reduce the number of inappropriate referrals without compromising patient care. Previous audits comparing referrals from GMPs and GDPs showed the split to be 60/40. Mr Hodder was critical of the quality of referral letters from some GDP's. A large number of referrals have a tick in the USC box and nothing further in the notes which makes it impossible to assess the appropriateness of the referral.

The lack of use of Urgent Suspected Cancer referral forms along with urgent fax number was discussed. It was suggested that it may not be universally known by all GDP's that a USC referral form exists for fast tracking these patients. It was decided that this form, along with guidelines on the criteria for a USC referral needs to be sent to all GDPs.

Mr Hodder was happy to distribute a document which could also be uploaded to the LDC website. This will be discussed further at LDC/LHB Liaison Group Meeting.

The Chair, on behalf of the committee, thanked Mr Hodder for his presentation.

***15/02 Minutes of the Meeting held on Tuesday, 18<sup>th</sup> November, 2014.***

Minutes of the last meeting were accepted as a true and correct record.

### **15/03 Matters Arising.**

14/62 The referral of dentally fit children to GDS letter was still outstanding. Lindsay Davies to take forward by the LHB.

14/64 Oaktree Park Clinic- a response from the GDC had been received and they were satisfied that a registered dentist was attached to the clinic. Arrangements are being made for a QAS to be sent as private clinics also have to comply with regulations.

14/65 2. In respect of Contract interpretation regarding the splitting of treatments and hygienist recalls etc, there are still no definitions available. The LDC will continue to raise this issue of lack of clarity in meetings with the Health Board.

### **15/04 Secretary's Report.**

An email had been received from Joanne Yeates at NHS Wales Shared Services Partnership. Joanne was concerned regarding the lack of support available to practitioners being investigated for alleged probity offences by the Health Board. The only help available was from the LDC and Defence Associations. The Dentist Health Support Trust has been contacted and would be happy to receive referrals regarding any dentist who may be in need of support. This would be included as a support mechanism in letters sent to dentists in these circumstances.

### **15/05 Chair's Report.**

This had been emailed to all members previously.

The importance of the DSSPG strategy meetings was discussed. There is a restructuring taking place at the Health Board and Darren Griffiths is no longer the Dental lead. These strategy meetings are important as they decide where money will be invested. The Local Oral Health Action Plan sets out the Health Board's aspirations for the next 3 years and is integral to the direction and delivery of the strategy.

### **15/06 Treasurer's Report and LDC Finance.**

In the absence of the treasurer there was no report.

### **15/07 Delegates' Reports.**

#### **Orthodontics**

In the absence of the delegate there was no report although an MCN meeting had been held.

#### **WGDP**

Report emailed to all members previously

Regarding Contract interpretation there is lack of definition around the splitting of treatments together with the lack of clarity and guidance. Nine years into this contract and there are still huge grey areas open to different interpretation.

#### **LDC Officials' Day.**

The main discussion was a new contract and pilots. With pilots due to end in March 2015, prototypes are to run for two years will be started in England. The types of prototypes were

discussed with various percentages of contract value attributed to output and quality measures that will be tested.

In the afternoon a Special Conference of LDCs was convened to discuss the following motion:

*This conference believes that the GDC has failed in its role as the regulator for Dentistry and demands a reformation of the GDC that will protect patients and re-establish the support of the dental profession.*

The GDC had been invited to contribute to the debate but had not sent a representative. The motion was carried unanimously by the Special Conference.

### **Parkway Clinic**

The clinic asked the LDC whether or not it was felt they should be represented at the DSSPG Strategy meetings. Lindsay Davies will take this forward for the Health Board's consideration.

### **15/08 Occupational Health**

The SLA was now in place. All practices were now to be sent an information pack on 16<sup>th</sup> February 2015. There was an apology given for the delay by LD.

The CDO was looking forward to a progress report on the outcome and value for money.

### **15/09 In Hours Access**

This report had been emailed to all members previously.

The following points were made by members on the report sent out:

- The term , 'wasted appointment' should be reworded to 'unused appointment'.
- An assessment of the quality of treatment provided would be a good idea to avoid the issuing of prescription where active intervention would be appropriate..
- The 'tone' of the document overall was considered by participating dentists to be unfriendly and dictatorial.
- A Workshop is taking place next Tuesday to share thoughts and feedback.
- The Dental Services Coordinator, who handles the calls is now a permanent position.

### **15/10 Referrals to the DTU**

This document had been emailed to all members previously

It was felt the drop box system was time consuming and the changing of passwords made this a difficult process if the practice had been logged out. Swansea GDPs had reported difficulty in getting patients to travel to Baglan for treatment. LD to forward DNA rates to the Secretary for information.

### **15/11 Local Commissioning**

At the end of November 2014, the LDC were made aware by a Committee member that a practice in central Swansea had received a large allocation of UDAs.

The LDC had not been informed or consulted regarding this investment by the LHB as is required by Statute. On further investigation it appeared that the LHB had invested 12500 UDA's in Swansea City Centre which had been identified as 'an area of need'. This equated to a value of £280,000.

At an LHB/LDC Liaison meeting on the 18 December 2014, the LDC asked why the LHB had not consulted with the LDC before commencing the commissioning and requested the details of the process that had taken place. A heated discussion took place and the LHB had admitted their failure to consult with the LDC. The LHB went on to disclose that they had also invested UDA's in NPT in the summer of 2014 and had also not consulted with the LDC on that occasion. The LDC did not think that because the LHB had omitted to consult once and got away with it that it was therefore acceptable or right to do so a second time.

This admission of lack of engagement was an indication of the LHB's disregard for due process and abiding by Welsh Government regulations. Many questions were asked regarding the fairness, probity and the apparent disregard by the LHB in not ensuring that the chosen 'few' practices actually received the letter of expression of interest to ensure that the practices chosen had had a fair chance. One practice did not receive the email containing the expression of interest offer. The contract was awarded, in full, to a single handed practitioner in the city centre. The LDC was concerned that this process had not been fair to all the eligible practices in Swansea city centre.

Following this Liaison meeting the Chair made an appointment with the new Strategy Lead and set out the concerns that were raised concerning the commissioning process. The Chair was assured that an initial investigation would be conducted and an update provided for the next LDC meeting.

Lindsay Davies (LD), ABMUHB Joint Locality Dental Lead, representing the LHB, attended the LDC meeting. At the meeting, LD, on behalf of the LHB, owned up to the 'mess up' and apologised for not consulting with the LDC. The committee was informed that this would not happen in the future and that nothing could be done now that the contract had been awarded. LDC members and attending performers and providers questioned why nothing could be done. Since the contract was awarded without following due process and without sufficient probity the majority of committee members thought it should be withdrawn. The members made it clear that none of this flawed process was the fault of the successful practice. Members suggested that if the process was to be reversed, the GDP concerned should be compensated for the monies spent and a new commissioning process undertaken.

Several questions were asked of LD by the members regarding the process.

The Chair informed LD that the Committee had to discuss the way forward following the LHB's actions in this case and that the LDC would inform her of the outcome. She was thanked for attending the meeting.

The Chair then asked the meeting which of the following actions were to be taken:

- Accept the LHB's explanation and do nothing.
- Not accept the LHB's explanation and inform the Chairman of ABMU of the process that had taken place and request an immediate examination of the LHB's actions.

It was decided unanimously, that the Chairman of ABMU HB was to be informed and also to copy in the Internal and External auditors of the Board.

The Chair was to send a letter to include the following concerns :

- The failure to consult with the LDC as required by statute.

- That the commissioning process undertaken was not fair and equitable to all the dental practices in Swansea city centre.
- There was no robust risk assessment conducted before allocating the contract.
- Whether this commissioning process which involved a considerable amount of public money had been spent appropriately and in the patients' best interests

**15/12 Any Other Business.**

A letter was being sent to all practices that had signed up to NHS the network; any questions please contact Mary Wilson.

**15/13 LDC BGM 20<sup>th</sup> April, 2015.**

The preliminary notice and nomination form would be sent out via the post in two weeks. The Chair announced that she will be standing down following the BGM as she will by then have completed over 2 years as Chair.

**15/14 Date and Time of next meeting.**

Tuesday 17<sup>th</sup> March, 2015 at the Holiday Inn Express, Llandarcy.