

Report on Joint Welsh Council Meeting and WGDPC meeting Friday 21st October 2016

This started with a talk from Lisa Howells on behalf of the new CDO Collette Bridgman.

Lisa was a lot more vague than she normally is but said that the new CDO has a lot of ideas that she wants to implement and the cabinet secretary has given Collette a 'licence to act' – apparently these are the exact words he used!

The initial priorities are –

First 1000 days – the first 1000 days of a child's life are vitally important. With the success of design to smile they want to redesign it to catch this part of a child's life i.e. 0-5 years.

She also wants to act to maybe provide free x-rays for 18-25 year olds.

She is keen on looking into the flexibility in the current contract to use the UDA system in different ways while the new contract is evaluated. – this was met by apprehension because if of the risk of a new contract being side lined if the UDA's are just tweaked. Apparently she did some work in Manchester around the UDA system although we couldn't get any details about how this had worked. But she is keen to discuss the possibilities that are available with the LHB's to try and get them on board.

She has already shown the cabinet secretary the discrepancy between average UDA rates in Wales and England – there may be an effort to close this gap....

She wants value for money out of any system and this may be monitored by collecting dmft data.

She wants to move forward the e-referral project and maybe cut the losses and move to a web based off the shelf model – in particularly a site used in various parts of England – www.dental-referrals.org which is apparently quite straight forward.

HIW and deanery are going to look into IRMER and practice feedback and the deanery is going to try and get some CPD and guidance on both.

They are also keeping a close eye on 111 service and trying to ascertain what constitutes an urgent dental problem and what questions need to be asked to ensure that the services are being used correctly.

Stuart Geddes was awarded a life membership of the BDA.

Dental public health are looking into trying to provide feedback on antibiotic prescribing patters to dentists. Scotland are already doing this..

North Wales counter fraud have been questioning check-up's on under 1's – this seems to go completely against the D2S stance of targeting younger children – they were challenged and have hopefully backed down!

There were thoughts that if tooth brushing could be included in the national curriculum then this would free up D2S to target the younger children and care homes.

The BDA have submitted a document to the DDRB – but they are not overly optimistic.

The BDA is trying to move towards electronic voting for future elections.

Christine Owens is starting work at the BDA Wales office and will replace Hannah.
BDA Wales will be moving to smaller premises next September – possibly further north.

The HIW report was discussed and it was felt that the newspaper reporting of it was very negative. It was felt that HIW had given a press release that was just printed in several papers and the report was not shared with the BDA prior to publication. Apparently CQC had shared their report with the BDA and they were able to comment. This was felt to be a missed opportunity as the BDA were unable to comment and put a positive perspective on things. It was decided to try and get a stakeholder meeting prior to next year's report.

Nigel Monaghan suggested that there may be some funds available at the end of this financial year across Wales to fit bariatric chairs in practices.

Bro taff have advised their practices that if any urgent referrals are bounced back they should be reported as a significant incident.

In Gwent there has been some confusion about what are appropriate referrals for bisphosphonate patients. – there were no answers.

Dyfed – Powys – dentists are being remunerated by LHB for attending clusters.

North Wales are having practice inspections to check on accuracy of QAS reporting – but so far this hasn't produced any inaccuracies.

I brought up Hep B and HIW – the general feeling was that this isn't happening across HIW and was probably an issue with one inspector.

It was felt that the issues with the statutory levy would probably be balanced out at the end of year – just might fluctuate during the year.

It was felt that the problems of access in ABMU were felt throughout Wales and the contract is the problem and that maybe we shouldn't be bending over to help the LHB with this issue – more likely to get new contract sooner if current contract not working...

Anwen Hopkins
Morgannwg LDC Representative on WGDPC