

# **Morgannwg LDC Zoom Meeting Thursday 2<sup>nd</sup> July 3pm**

## **Welcome by LDC Chair**

The Chair welcomed everyone to the meeting.

## **Update from Karl Bishop, Dental Director, Primary and Community Delivery Unit, SBUHB**

The CDO had visited SBUHB on Tuesday afternoon; she wanted to give her thanks to all for the significant response and engagement shown by this HB during the pandemic.

There had been a steady decline in confirmed Covid cases within SBUHB. There were currently two Covid+ patients in Acute Hospitals and twenty-four suspected cases. There had been fifty-eight TTP cases in the last week and this programme was progressing.

### **Antibody testing**

An email had been sent today advising HB are now able to offer Covid antibody testing to independent contractors and their staff. This would include GP surgeries, Dental practices, Pharmacy and Optometry. A spread sheet must be completed and returned with staff contact details by Friday 3<sup>rd</sup> July, appointments would then be offered in the Bay Field Hospital Site for blood tests.

### **AGP Going Forward**

SCDP was carrying out a rapid review of literature around aerosol and subsequent fallow time. With their reputation it was felt this was going to be a robust but continually updated document.

The HB had developed a guidance document and checklist in collaboration with the LDC. This would be emailed to all practices within the next few days for completion and return by Friday 10<sup>th</sup> July. This document was to be a support tool that would help practices to resume services in the amber phase.

If practices feel they are compliant and ready to start treating AGP patients the HB are happy for them to go ahead if all appropriate risk assessments are in place. Although the self-assessment tool would still need to be completed and returned. All GDPs are fully aware of the importance of IPC, PPE etc.

Practices who were receiving fit test training were advised to check their trainers were registered with HSE.

### **ACORN**

A piece of work around ACORN was currently taking place i.e. instructions in how to use and upload. HIW were currently quality assessing the document before making it available to all.

There is a You Tube link to a presentation by Ewart Johnstone that gives advice and instruction on the use of ACORN and incorporating into SOE. Ewart is happy to provide an evening session and share the link with GDPs.

ACORN was not required for OOH patients.

### **Attend Anywhere Update**

This has been with WG to implement, it has been a very slow process but was now ready to roll out to pilot sites. It was already up and running within GMS and Hospitals.

## **NHS/GDS Contract**

There was a lot of work being carried out around contracts this week; some details were still to be confirmed. The flexible understanding approach shown by WG through the red/high amber stage so far was becoming more focussed. It was now expected all practices would engage with the Amber phase within the next 4-6 weeks, this was to include providing AGPs and seeing patients face to face.

Practices were now receiving 90% ACV going forward from 1<sup>st</sup> July 2020, if they were not to engage in the new way of working i.e. ACORN/AGP the ACV they would likely revert to 80% and possibly a UDA contract. Working to this contract was optional and is about recovery and access, it is not an automatic entrance into contract reform.

If any practices were struggling with working within the amber phase the HB will be supportive and provide help. If any practice is struggling, they are advised to contact DPAs for advice so that the HB can act appropriately.

## **PPE**

PPE was proving difficult for dental practices to source at a reasonable cost. Therefore, WG were looking at their ability to provide both AGP and non AGP PPE to practices. Again, the importance of robust and accurate data returns were reinforced as this is WG's only form of measuring work being carried out within GDS.

Data around telephone calls and triage over the telephone still needs to be recorded since telephone triage does not require an FP17.

## **AGP**

Sam Page had written to all GDPs asking for expressions of interest to become part of a HB supported network to provide AGP care, and to accept referrals of urgent cases from non-AGP practices. The 4 successful practices would be contacted later today.

## **Parkway Clinic / GA**

There had been an SLT meeting yesterday, they are supportive of the progression of pathways. The go ahead has been given to start putting draft paperwork together; the intention is to reactivate the pathways, but it is in the very early stages as yet.

## **Update from DPAs – under other items**

### **Update from LDC**

There had been an Oral Health, Quality, Safety and Patient Experience Group meeting yesterday, the sad loss of a Dental Nurse to Covid was mentioned.

DFT's portfolio was now back up and running, Dental Core Training was released yesterday some DFs did not have any jobs going forward in September. An update on DF1 jobs was imminent.

There was a lot of useful information on [HEIW website](#) for both GDP and DCPs all are advised to take a look.

Orthodontics was now also in the Amber phase and colleagues were very busy catching up on emergencies. From 13<sup>th</sup> July Neat Teeth were to start repairs and reviews, although they were a very long way off returning to normal.

The Chair informed all that there are local suppliers of PPE who were proving to be very reasonably priced, it was worth shopping around.

It was felt the next nine months were a very good opportunity to trial a non-target driven way of working and learning the principles of ACORN without actually signing up to a new contract. It's a very good opportunity to move away from UDA target driven way of working, especially as the HB were going to provide a lot of support.

As practices were now moving towards a more normal way of working it was suggested meetings were now moved to a Thursday evening going forward. RP to confirm date and time.

RP would look to produce a survey for all dental practice staff, to gain the views of all around current and future issues.

**Further Updates – there were none.**

**Next meeting TBC**