## Morgannwg LDC Zoom Meeting Thursday 16th July 19.00

### Welcome from LDC Chair

The Chair welcomed everyone to the meeting.

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

- The Chief Executive SBUHB Tracy Myhill, had announced her plans to retire in six months.
- Morriston Hospital had seen an increase in suspected Covid + patients. The reason for increase was being investigated.
- TTP was rolling forward, a dental practice in Cardiff had to close last week with staff isolating for fourteen days.
- The importance of correct use of PPE and social distancing was reinforced.
- Any spikes in Covid infections would now be dealt with locally as opposed to nationally.

#### PPE

- Re usable masks were proving to be topical this week, IPC do not like the use but will support if necessary and if compliance with decontamination is observed and recorded. The correct decontamination process needs to be adhered to and a log kept if using these masks.
- The process for PPE top ups remains the same and will be cross referenced with FDS data.
- Standard PPE will be provided (Type IIR masks, visors, aprons, gloves) to all practices will continue but always subject to availability.
- Enhanced PPE will be provided (FFP3 masks, gowns, visors) to all practices receiving 90- 95% ACV and providing AGPs – again subject to availability through Shared Services.
- Practices are advised to source their own sustainable supplier alongside Shared Service's supplies to ensure business continuity if supplies become a problem.

## **AGP Going Forward**

- The HB had received the completed guidance document checklists from all dental practices and DPAs were currently in the process of working through. Any practices identified as needing support would be contacted.
- The expected date for practices to be providing AGPs is 17<sup>th</sup> August, if this was not going to be the case practices are advised to contact their DPA ASAP for support and guidance.
- The main concern is the inability to source fit testing for the practice staff. Due to limited resources the HB were not able to help with this. Other HBs were in a similar position but most practices appear to have resolved the issue or had plans in place to do so.
- UDC Network practices would receive fit testing support from HB.

 Practices who feel they are compliant and ready to start treating AGP patients were able to start if all SOPs and Risk Assessments are in place and adhered to and the HB and HIW were informed.

#### HIW

Now starting to reactivate but prioritising, unlikely routine practice visits will take
place until next year but targeted visits will take place if issues identified. HIW also
looking at remote communication methods.

#### **LPGs**

HB is keen to embed networks going forward as they have proved an excellent means of communication.

#### OOH

- New OOH model was to be set up with increased funding, 111 triages will resume from this weekend going forward.
- RMC was now returning to Pre-Covid position.

## **De-escalation Plan for Dentistry**

- Had been emailed to all and sets out the WG expectations going forward
- This is definitely not a mass move into contract reform as this was currently suspended but an offer during the recovery phase.
- If any practices were struggling to work within the amber phase the HB is happy to support as appropriate and provide help. Any struggling practice is advised to contact DPAs for advice.

## **DTU Baglan**

- The DTU was now in the process of seeking to return to normal activity, this would involve patients who had been referred there for AGP being transferred to network sites to ease the pressure going forward. As all practices delivered AGP then the need for UDCs will reduce significantly.
- There were between 20 30 referrals being received daily; this has greatly increased in the last two weeks. 111 are triaging between 60 80 patients per day.

#### **Orthodontics**

- It would appear that UOAs are suspended
- SOP for Orthodontics had been completed, now awaiting sign off by WG and dispersal.
- SCDP awaiting a paper re fallow time etc, this was imminent.

## Parkway Clinic / Cambria

- MOS was aiming to restart 1<sup>st</sup> August
- Phased approach over the next few weeks to reduce MOS patients attending DTU and redirect to Parkway/Cambria for treatment.

- Activity levels cannot be at pre Covid rate, therefore referrals will need to be prioritised by PWC and Cambria. Patients would be accepted on clinical need and not because they may require AGP.
- There was a minimal backlog of GAs as all patients had been managed by CDS and referring dentists had been explaining to parents that a GA might not be necessary after assessment by CDS.

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

## **Update from LDC**

- Cambria now had a waiting list of approx. 1800 patients, it was expected only 5
  patients a day would be able to be treated with AGP due to fallow time. Due to the
  nature of the service it cannot be assumed patients would not need AGP.
- Contract reform had now been paused, concern was raised due to a large part of it is centred on access did the HB have anything in place for these patients? It was felt access was going to become a huge issue, patients experiencing pain should become priority.
- The Health Board emailed all GDPs looking to potentially increase the number of In Hours Access sessions that are provided each week (Mon-Fri) – during the Amber phase – to cope with the current demand. Practices to contact HB if able to offer sessions.
- The question was asked if GDPs should apply the same criteria to patients receiving treatment in their own practices as at UDC. It was felt there was room for more flexibility and professional judgement. The ability to justify the way of working was of the utmost importance.
- A new portfolio for DFs, Therapists and Dental Core Training was imminent.

Further Updates – there were none.

Next meeting Thursday 30th July 2020