West Sussex Local Dental Committee

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Meeting to be held on:
Wednesday 12th June at 6.30 pm
at the Roundabout Hotel, West Chiltington

Attendees: Toby Hancock TH, Agi Tarnowski AT, Matt Botha MB, Parul Patel PP, Anitha Diwaker AD, Mark O'Hara MO, Simon Quelch SQ, James Grant JG, Christine Hallworth CH, , Emmanuel Lazanakis EL, Sandra Creasey SC. Ashkan Pitchforth AP,

Apologies:, Mary Green MG, , Roz Walker RW, David Bryan DB, Stephen Walsh SW, George Billis GB, Ellie Taylor ET, Jaina Patel JP, Kellie Downie KD, Jo Clark JC,

Welcome Guests:
Phil McEvoy (BDA Pensions), Trish Markwick (BSA) and Finn Ryan, Jane Harris (Richmond House). Val MacDonald VM, Linn Miller LM , Laura Johnson LJ .Shiralee Patel SP, Jane Harris JH

Minutes of previous meeting agreed with no objections.

Phil McEvoy BDA Pensions & Trish Markwick (BSA)

Summary

BDA - HQ in London - Phil McEvoy - Contact details 0207 563 4161

NHS Pension provision is still the best retirement pension possible.

BDA Pensions help BDA members with pensions but are not financial advisors.

Phil McEvoy background - 20 years experience. Last 2 years working at BDA. Worked with Trade union for dentists. Frequently visits LDC's around the country to discuss their pension.

Mission is to increase appreciation of pensions to dentists.

Quick summary of various pensions: -

State Pension System –

- Paid via National Insurance payments you make throughout your life. 35 years of NI payments gets the full new state pension. Less than 10 years of contributions not eligible for state pension.

- You can pay voluntary NI contributions out of your pocket to ensure you have paid the years in full. Full state pension is £8.5k
- State Pension currently 65 but rising to 66 by Oct 2020, then 67 by 2028, 68 by April 2046.
- Every year there is a rise in the state pension based on inflation, pay rises or 2.5% increase whichever is the highest. This is called the Triple Lock.

Taxation –

- Government want people to have their own retirement savings, so Tax relief is given on contributions to pension plans.
- Money locked away until 55.
- Limits on tax relief on pensions.
- Annual Allowance £40k per year.
- Lifetime Allowance £1.055m.
- ISAs exist.
- NHS Pensions Savings growth letter will be sent out automatically to all the practitioners.

Personal Pensions –

- Savings Account – no guaranteed returns.
- No employer contribution.
- 25% can be drawn tax free.

NHS Pension Scheme –

- Three defined Benefit Pension Arrangements.
- Guaranteed income after retirement.
- Opportunity to have a tax-free lump sum.
- Member contributions tax free up to a limit.
- Employer pays balance of cost of promise.
- No pension pot – unfunded.
- Review of costs every 4 years.
- Based on your Net Pensionable Earnings (NPE).
- Each practice to declare NPE ceiling set at 43.9% of total NHS contract value.

Employer is NHS England who are currently contributing 20.6% into the NHS pension, which was up 14.38% from April 2019.
Structure of NHS Pension Scheme changed over the last few decades, the major changes happened in the following years:- April 1995, April 2008 and April 2015.

The government has been told that their latest pension is up for age discrimination. The government will appeal but they need to find a remedy to fix the age discrimination.
The 2015 changes may not be in existence for much longer.

The presentations slides are available and can be circulated and put up on website.

Trish Markwick (BSA)

COMPASS

Short brief on ARR menu path as some were struggling to find this or work with the system.

- Go to pensions folder
- Contract selection
- Search
- Two columns NPE and ceiling a column for a provider or performer
- Option to reject or accept the value
- All changes are reflected.

Everyone has until the end of June to complete. Only 46.5% completion so far.

Compass feedback was very negative, so over the last few months we are trying to improve the system and take on board all the feedback.
Tutorials on compass website which will help, i.e. 'How to' guides and You Tube videos that everyone will be able to access making each process easier.

Compass is useful to see your net pensionable earnings and will give you every single claim against your name. Encouraging people to go into Compass and look at their statements.
LESS IS MORE put in contract number and use filter to search the results you need.

Information backdated to 2012 so no need to take offline and save as the information will always be kept in Compass.

To contact BSA for help or support:
www.nhsbsa.nhs.uk/nhs-dental-services

email:
nhsbsa.dentalservices@nhsbsa.nhs.uk

or call 0300 330 134

DCQAP report (M O-H)

Normal variations and additions to partnerships

PAG report (M O-H)

20 or more at every meeting and each meeting is once per month, update of on-going cases. Some cases are patient generated cases, some are disagreements, some are Blue-on-blue reporting.

October's Social event (M O-H)
Planned for 12th October at the Gatwick Hilton
Tickets available via BDA by phone
After dinner speaker in Henrik Nielson
Practice encouraged to buy tables

LDC conference and motions (AT)

Matt, George and Agi attended.

Specific requirements	
Access Slots – at least 5 hours per week per 7,000 UDAs contracted.	1 unless MPIG
Extended hours – at least 4 hours outside of normal hours (9.00am to 5.00pm, Monday to Friday) for pre-bookable appointments per 7,000 UDAs contracts.	1

Marco Mazevet spoke about contract reform in France and how the dentist and the public succeeding in negotiating a better deal with government and insurance companies
35 motions were debated the majority carried
Of particular note were Motion 11, which drew attention to catastrophe of procurement and the highlighted the NHS 10 year plan which seeks repeal of procurement requirements.

Motion 29 on reviewing HTM101 with regard to environment sustainability which is likely to be a topic on greater interest.

And the defeated motion 15 on equalisation of UDA rates.
On mental health
The Practitioners Health Program is going to expand Nationally which was welcomed.
https://php.nhs.uk/groups-and-support/
Confidental
A helpline has been launched to support dentists
https://www.confidental-helpline.org/
0333 987 5158

Enclosed in the report are FAQ on contract reform and the dental market which shows that both practice owners and associates gave suffered a huge reduction in taxable income the last ten years (P 47,431 A, 23,555), with expenses going up, investment in dentistry going down and patient charges have almost doubled since 2006. Overall numbers of dentist have actually risen but there are far few practice owner. Associates are now 73% of profession, owner account for 12.5% and salaried dentist are 14%).

The final presentation was from Paul Batchelor, Special Advisor, on other models of state funded dental remuneration within Europe this highlighted how health care systems can be looked at by scope, depth and breadth. Targets groups are very different between countries but generally children are treated differently than adults. Funding is heavily dependent on economy; employment arrangements are changing with more people looking for salaried positions. Fee for service is the most common mechanism of remuneration in Europe. State funded care has considerably reduce everywhere in the last 50 years. This has been done by increasing co-payment, identifying and limiting priority groups or changing the nature of the interventions available. There is a rise in the corporate sector.

Next year's Conference will be in Brighton chaired by Leah Farell in June 2020.

Consultation response to Mandatory Dental Services Procurement (AT)

The document pack was circulated to the LDC the following feedback was acquired from the group specific requirements were discussed and one of four options was voted on , the majority and consensus score was recorded. A response is requested by NHS England by 1st July.

Feedback on Mandatory Service Commissioning Principles

Welcome	deliverable	challenging without additional resource	undeliverable
3	2	1	0

Starting Well Programme – providers will be required to participate in a locally adapted Starting Well programme (not required for 3,500 UDA contract sizes). All providers will be required to promote the Dental Check by 1 programme.	2
Local Care Homes – links with local care homes are to be set up using a named lead to improve access to preventive treatment with carers bringing mobile patients to the practice.	1
Dental chair to treat patients up to 300kg – 21,000 UDA contract will be required to provide facilities for patients weighing up to 300kg. NHS England and NHS Improvement will fund/contribute towards the original purchase price of the dental chair, with the provider responsible for maintenance and replacement.	2 additional resources may be needed
3,500 UDA contracts will not require extended hours, urgent access slots or provide a local variation of the Starting Well programme	3
Equalities Act (EA) Compliance – practices will be required to be EA compliant, with at least one surgery having step free access.	1
HTM01-05 – all practices will be required to be HTM01-05 best practice compliant.	1
Patient Forums – providers will be required to hold patient forums and report back key themes to the Commissioner	2
Patient Referrals – patients must be given a choice of provider when making a referral; choice options are detailed in the Dental Electronic Referral System (DERS). Referrals must be made using DERS.	2
details of proposed marketing of the practice, together with high profile NHS branding.	1
bidders with reduced contracted number of UDAs within the last 3 years will be required to explain their change in circumstances	2 Reasonable
Priority 1: Local Authority areas with low UDAs commissioned per population when accompanied with high deprivation and high closed/reduced contracts.	concerns over how deprivation is calculated in a mixed geography Viability of practices in high need area
Priority 2 Local Authority areas with low UDAs commissioned per population when accompanied with high deprivation and low child attendance in 24 months to January 2018.	
Priority 3 Local Authority areas with low UDAs commissioned per population when accompanied with high deprivation, low child and adult attendance in 24 months to January 2018 and high travel time/distance	
variable uda rate considered that the UDA rate for 7,000 UDA contracts should higher than those for the 3,500 UDA lots but less than 21,000 UDA	
Variable UDA rate Red – these areas are likely to have more patients with high treatment need and would command more than the KSS average UDA rate as the baseline. Amber – these areas are identified with most patients having moderate treatment need and would command the KSS average UDA rate as the baseline. Green – these areas are generally closer to London (but not always) with more patients having lower treatment need, where lower than the KSS average UDA rate would be appropriate as the baseline.	questionable viability @ lower value uda rate
UDA rate calculation lowest value in green area (small contract) Mid-Sussex | Green | 3,500 | £20.00	0 UDA rates below patient charge value
highest value in red are (large contract) Princes ward (Dartford) | Red | 21,000 | £28.00	3

For reference Highest UDA rate for a deprived area i.e. Deptford is £28

Consultation response to Clinic Relocation SCD Lancing

Special care dentistry Chichester, Crawley, Haywards Heath, Horsham
Lancing at present cannot take wheelchair patients. Worthing is 3 miles away from Lancing. Deadline is 23rd August to raise any points to object.

Relocation of Lancing Dental Clinic (PP)

- Remain where we are, making improvements to the existing layout and rooms.
- Find alternative suitable accommodation in the local area.
- Amalgamate services with those already being provided from an alternative, recently refurbished, compliant location in Worthing (3.2 miles away).

If you wish to respond to this consultation paper deadline is 23rd August to raise any points to object: email michelle.asbury1@nhs.net

The committee as a group had no objections to the consolidation of two clinics , however concerns were raised that patient would need to travel further.

Action Point: West Sussex LDC requested to write to SCFT with view.

NHS England South (South East) / Dental Advisor update (MB)

Nothing has really changed,

Procurement is taking up most of everyone's time. Practice inspections to commence with the new ones first. They should perform to contract in the financial year. Glitches in system in terms of the admin. Manual updates are having to be done when someone comes off the list.

Secretary's and MCN/LPN Reports Secretary's and MCN/LPN Reports (AT)

Peer Review and PASS proposal was reviewed and discussed.

West Sussex Peer Practitioner Advice and Support Service Principles:

- Any dentist can ask for support and advice from the LDC.
- Entry maybe suggested by other agencies but is only ever voluntary by the dentist themselves.
- The scheme can offer up to 3 free session to identify a problem of concern, support development of an action plan and its implementation.
- It could also be used to support practitioners not in difficulties with personal development
- The LDC funds the peer.
- The scheme belongs to the LDC.
- There are some issues beyond the scope of the scheme which other agency involvement is necessary.
- Peer can also sign post to other organizations.
- Peers would not give be able to give legally binding advice.
- It should be possible to access an alternative PASS scheme in KSS if there is a problem of trust or a conflict of interest is identified.
- The scheme is evolving and will develop and change with time.

The committee voted to support the scheme to go forward.

Oral Surgery MCN:

- **Oral Surgery MCN chair has been appointed : Paula Scull**
- CT Scan needs to be mandatory for certain patients – Tightened up referral criteria.
- IMOS Providers need to be re-accredited.

Treasurer's Report (MB)

Month behind with finance but will be caught up soon. LEVY payment not addressed.

GDPC 3rd May Meeting

Report on website.

Channel April 15th Meeting update (AT)

Toby will not be able attending the Channel meetings.

Any Other Business

- BDA indemnity was discussed. Face value looks competitive.
- Sustainability – getting rid of disposable plastics going back to re-usable metals.
- ORTHO – Hampshire is fine as they have hardly changed their provider even though they went through the same procurement process.

Date and venue of next meeting
All meetings will be held at the Roundabout Hotel, West Chiltington

LDC Main 6.30 pm
11th September 2019

Important Dates:

CHARITY GALA 12th October 2019

NEXT LDC MEETINGS:

MONTH	DATE	EVENT	VENUE
Sep 2019	**11th at 6:30pm**	Full Committee meeting	The Roundabout Hotel, Monkmead Lane, West Chiltington, RH20 2PF
Nov 2019	**20th at 6:30pm**	Full Committee meeting and AGM	The Roundabout Hotel, Monkmead Lane, West Chiltington, RH20 2PF