

The South East Wales Regional Committee

Minutes (SWCRC-01-06)

Meeting date: Friday 10 March 2006

Meeting time: 10:00 am – 12.30pm

Meeting venue: The Memorial Hall, Gladstone Road, Barry.

Assembly Members in Attendance

Assembly Member	Constituency
Leighton Andrews	Rhonnda
Lorraine Barrett	Cardiff South and Penarth
Christine Chapman	Cynon Valley
Sue Essex	Cardiff North
Jane Hutt	Vale of Glamorgan
David Melding	South Wales Central
Jonathan Morgan	South Wales Central
Jenny Randerson	Cardiff Central
Owen John Thomas	South Wales Central

Others in Attendance

Name	Representing (if applicable)	Agenda item (s)
Professor Malcolm Jones	Dean and General Manager, Dental Services Group, Cardiff and Vale NHS Trust	2
Philip Barry	Assistant General Manager, Dental Services Group, Cardiff and Vale NHS Trust	2
Menna Lloyd	Dental Services Group, Cardiff and Vale NHS Trust	2

Liz Treasure	Dental Services Group, Cardiff and Vale NHS Trust	2
David Thomas	Consultant in Dental Public Health, National Public Health Service	2
Peter Beynon	Dental Practitioner, Dental Practitioners Association	2
Brian Lux	Chair, Dental Practitioners Association	2
Chris Wills Wood	Chairman, Dental Practitioners Committee	2

Committee Service

Name	Job title
Vaughan Watkin	Committee Clerk
Karl Gomila	Committee Support

Item 1: Introduction, Welcome, Apologies, Substitutions and Declarations of Interest

1.1 The Chair welcomed the Members and the public to the Memorial Hall, Barry. He indicated that the theme of the meeting was "Dental Services in the South Wales Central Region" and said that all views received would be recorded and sent to Brian Gibbon, the Minister for Health

1.2 Apologies for absence had been received from Rhodri Morgan and Leanne Wood.

1.3 There were no declarations of Interest.

1.4 The Chair informed the Public that they should turn off all mobile phones and other electronic equipment. Headsets were available for translation from Welsh to English and in the event of the need to evacuate the building, that they should follow the instructions from the Ushers and the Police and assemble outside the building.

1.5 The Chair advised the public that presenters would be invited to make their presentations and Members of the public would have the opportunity to ask questions throughout the meeting rather than at the end. There would be a designated break during the meeting where refreshments would be available for both the Committee and Members of the Public.

1.6 The Chair then invited Jane Hutt AM, the local constituency Assembly Member to say a few words of welcome to the Vale of Glamorgan. Jane Hutt said she was pleased that the Committee had chosen to

meet in Barry in the Vale of Glamorgan. The Memorial Hall had a distinguished history and had been built with the support of the people of Barry. It was now a major venue for events and a focal point for the community for various public and private events. Jane welcomed everyone to Barry and hoped that the committee would meet again in the Vale of Glamorgan in the not to distant future.

Item 2: Dental Services in the South Wales Central Region

2.1 The Chair welcomed Professor Malcolm Jones the Dean and General Manager, Cardiff and Vale NHS Trust and Philip Barry, Assistant General Manager, Cardiff and Vale NHS Trust to the Meeting and asked them to make the presentation. A copy of the presentation can be found at Annex 1.

2.2 The Chair welcomed David Thomas, Consultant, National Public Health Service to the meeting and invited him to make his presentation. A copy of the presentation can be found at Annex 2

2.3 The Chair welcomed Peter Beynon and David Lux from the Dental Practitioners Association to the Meeting and invited them to make their presentation. Peter Beynon indicated that many NHS Dentists would leave the NHS and go into private practice because of the new contract especially since costs had risen. Brian Lux indicated that he felt that the current contract being offered to practitioners had been imposed rather than negotiated. A copy of the presentation can be found at Annex 3.

2.4 The Chair welcomed Chris Wills Woods, Chair, Dental Practitioners Committee to the meeting and invited him to make his presentation. He indicated that in his view the new contract had been imposed on dental practitioners rather than negotiated as in the past. He felt there was a crisis in Wales in respect of Dental services provided through the NHS. Many dentists would refuse to sign the new contract. He believed that up to 70% of dentists would reduce their level of NHS work because of the new contract which would probably lead to children being given priority over others. Children and the handicapped should be given priority which was currently not the case. There was concern that many practitioners had no idea what their budgets would be. There should be a level playing field in respect of grants to expand practices and when dentists moved to private practice it would be difficult for many patients to receive treatment at all because of the costs involved. Those practitioners who were trained through vocational training schemes found that no contracts were available to enable them to practice within the NHS.. Agreeing to sign the new contract was in his opinion a gamble and the contracts would be imposed on those who wished to stay in the NHS. In many areas all patients would be taken off existing lists and passed over to the Local Health Boards who would have to deal with any problems that arose.

2.5 The Chair thanked them for their interesting presentations and invited Members to discuss the issues raised.

Assembly Members and public's questions to the Panel

2.4 The Members said they had found all the presentations extremely interesting and thought provoking. Members and individuals put the following points to the panel:

- Concern that some dentists had a policy of removing children's baby teeth why was this being done when children would eventually lose these teeth anyway;
- It was suggested that over 33 percent of dentists wished to decrease the number of patients treated - did the survey carried out confirm this aspect;
- The survey carried out had been useful and it would be interesting to see the survey continue as the new contract had not allayed dental practitioners fears and concerns;
- Concerns that level 2 qualifications cost students up to £900 in Wales whereas in England there was no cost for students to obtain this qualification;
- There was a need for many more trained dentists;
- Preventative element of dentistry should be more focussed as there was concern in this area and Local Health Boards should be more flexible in their approach;
- The Welsh dental initiative should be expanded;
- Concern that many dentists would chose to do only private work, where could the public find information of where to find NHS Dentists;
- Concerns that people with learning disabilities had difficulty in obtaining treatment;
- The new contract should ensure that treatment would be available for everyone ;
- Concern that 50 percent of the adult population were not registered with a dental practice;
- There should be a fuller commitment to the introduction of fluoride into the water supplies in Wales;
- Was the retention of academic staff difficult for the dental schools in Wales;
- Were the dental school finding it difficult attract students to train in Wales;
- It was suggested that doctors had a higher standing with patients than dental practitioners;
- Many dentists insisted on a patients entering into a contract with them for dental care. This involved patients paying on a regular basis each month for any treatment they may receive. This was acceptable in many cases but what would happen to those patients who cannot afford to pay.
- Concerns that funding to Local Health Board's would not be available until 15 March but practitioners were expected to sign their contracts by the 31 March.
- Concern that many practitioners would move from the NHS to corporate practices where the contract terms were better.
- Would the British Dental Association like any future contract that emerged to be specific to Wales;

2.5 The Panel and Members offered the following responses:

- David Thomas said that the removal of baby teeth could cause problems but dental practitioners only removed them if they were actually causing pain. There were innovative schemes in place in Nursery schools to check dental hygiene in children and identify problems at an early stage. One of the problems was ensuring parents were properly educated in dental hygiene issues in order that they could pass good practice on to their children. The recent survey carried out did ask practitioners what their commitment would be under the new contract and if there was likely to be a reduction in the service provided. The Local Health Board's allocation of funding was based on a reference period between September and October last year. There were no allowances for

preventative work to be carried out on patients and if problems did arise this would have to be addressed. The Local Health Board's had flexibility on how they approached this issue and it was up to them to give advice to the public on the scope of NHS treatment. There was also a NHS Helpline for people to access via the internet which gave details of what was available to the public via the NHS. Currently over £94 million had been invested in NHS Dentistry by the Welsh Assembly Government.

- David Beynon said that many practitioners did not treat NHS patients because it was not cost effective to do so. In some practices the income received from private work enabled practitioners to continue treating NHS patients. He felt that many practitioners would follow the private path because costs had risen and he felt that the NHS dentistry service would only be for children and old age pensioners in the future. He was concerned about the new contract that he was expected to sign. It had only been received yesterday there were no cost for work in the draft contract and the contract was for three years. To expect practitioners to sign up was unworkable based on what was contained in the contract and it could prove detrimental for patients in the future. The suggestion that there should be a specific contract for Wales was appealing but the current contract was being imposed on dentists across Wales.
- Professor Jones indicated that the state of dental health had improved and people were retaining their teeth. There had been a change in the work force with an increase of the number of women delivering dental care. More students should be trained to meet demand levels for dental care. He indicated that there were several ways of accessing fluoride for those patients who wished to use. Fluoride had been placed in the water supplies in many areas of England but this was not the case in Wales. There was an issue of in respect of retirement of dentists and the uncertainty of NHS Dental Provision. More funding was needed to ensure that the requirement in dental practitioners was met. The Health Schools were being disadvantaged in Wales and there was a need to match academic training and research initiatives of those currently in place in England or staff would be lost. If there were problems in respect of waiting lists for appointments patients should write explaining their problems which the hospital would try to redress.
- Jenny Randerson said that the NPHS Survey was extremely interesting and would like to see it progress. The new contract however had not allayed practitioner's fears and suggested that the Local Health Board's should have been given more direction. There was concern over the lack of dentists and there was a requirement for more trained dentists in Wales. Grant issues should be examined as the cost of Level 2 Qualification in Dentistry was funded in England but not in Wales. She also had concerns about the issues around prevention of tooth decay.
- Jane Hutt AM said that the Local Health Board's were there to deal with all dental issues. In the Vale of Glamorgan seven new practices had opened taking on up to eight thousand new registrations in the area. There was also a Dental Oral Health Campaign which provided funding for a "Fissure Sealant Programme" which had proved to be very successful in schools in the Vale of Glamorgan. Concerns were also raised in respect of the Community Dental Service. She felt that the proposed new contract created a fundamental change in the dental service as the previous contract was flawed and inaccurate. Considerable funding had been provided through the Welsh Assembly Government and the new contract was reaching a critical point but Local Health Board's had the power to deal with the issues which would be clarified in the coming weeks. The Community Dental Service was the key to success but the Welsh Assembly Government should

explain the position for the public as there was some confusion as to what services would be available.

- Menna Lloyd agreed that the "Fissure Sealant Programme" had proved to very successful in schools. Preventative programmes were in place and information received was that in many cases no toothpaste was being used by either parents or children in respect of dental hygiene. There was a proposal for a personal dental service bid at the hospital at Barry and this was currently being considered by the Welsh Assembly Government. An answer in respect of the funding was expected within the next two weeks. If the bid was not successful it could impact on seven practices within the area.
- David Lux indicated that the new contract did not allow preventative work to be carried out and this was a negative approach. He also suggested that said that in his view far too much was being spent on administration within the dental service in respect of increased pay rises for those in charge of the service. He advocated children should receive priority treatment as the current decay rate in children's dental hygiene was a disgrace. He suggested that a possible way forward was the use of fluoride rinses in schools which would benefit the dental hygiene of schoolchildren and could be reasonably easy to administer.
- Liz Treasure agreed that the Fissure Sealant Programme was very effective but it was essential to get fluoride into contact with teeth and decisions on how this could be best achieved should be considered. The use of fluoride rinses was a way forward but this was not as effective as getting toothpaste in contact with children's teeth. The retention of academics was a concern and research into dental health provision needed to be carried out as this was a worrying issue for many dental teaching hospitals.
- Chris Wills Wood indicated that many dental practitioners could not do a full years work under the terms of the NHS Contract which created problems. Most practitioners in Wales wished the Welsh Dental Initiative to be left in place. He thought that not many dentists would have signed the new contract by the first of April and many would sign it still in dispute with the terms during April and May. The idea of developing a specific Welsh contract was appealing and he thought many practitioners would like to take that route but that option had not been offered.

2.6 The Chair thanked everyone for taking part in what had been an interesting and though provoking session.

Item 3: Date and Location of the next meeting

3.1 The Chair indicated that the no decision had been made in respect of the venue or date of the next meeting of the Committee but venues and subjects to be discussed will be publicised in due course and this information placed on the on the Assembly website.

Closing Remarks

4.1 The Chair thanked all the presenters and Members together with the audience for their contribution to the meeting. He also thanked the staff of the Memorial Hall, Barry for all their help and assistance.

Committee Service
March 2006