



## LDC Conference 2018

### Motions for debate

#### WORKFORCE/RECRUITMENT ISSUES

Motion 1: Norfolk LDC, Nick Stolls

**This conference demands that Commissioners and DHSC fully investigate the reasons for the recruitment crisis in general dental practice and provide appropriate funding to address this looming disaster.**

UK  
Policy

Motion 2: Wakefield LDC, Zoe Connelly

**LDC Conference deplores the fact that Community Dental Services across the United Kingdom are inadequately resourced and face difficulties in recruiting staff in some areas. Morale is often low. These dedicated clinicians deserve better, and conference calls on Commissioners to provide the structure and funding for the Community Dental Services to continue looking after some of the most vulnerable members of society.**

UK

#### CONTRACT REFORM

Motion 3: Wakefield LDC, Zoe Connelly

**LDC conference calls on government to reinvigorate the reform process, enabling adequate care to be available to the public and for practices providing NHS care to be sustainable financially.**

England

Motion 3a: Hants IOW LDC, Keith Percival

**This Conference demands that any reformed contract must not only enhance the quality of care to patients but also enhance the well-being and quality of the working lives of dentists and their teams.**

UK  
Policy

Motion 3b: Durham and Darlington LDC, Siobhan Grant

**This Conference believes that the current dental contract in England disproportionately fails patients in areas of deprivation due to the overwhelming requirements of high needs populations and further widens health inequality.**

England  
Policy

Motion 4: South Humber LDC, Samuel Watson

**This Conference calls for the implementation of an Interim NHS Dental Contract Proposal while GDPC continues to engage with DH in the pursuit of positive Contract Reform - providing a transitional phase aimed at reducing pressures on the NHS dental workforce and improving its morale and improving the quality of patient care - until such time as Contract Reform is ready for national roll-out.**

England

Motion 5: Dyfed Powys LDC, Tom Bysouth

**This conference calls for Welsh contract reform to continue and not settle with the current pilot arrangements to create a truly prevention-based contract to empower dentists to reduce oral health inequalities.**

Wales

Motion 6: Kingston and Richmond LDC, John Sheldon

**This conference deplores the manner in which the government, whilst publicly advocating wider dental access, is covertly reducing treatment availability by diminishing the dental budget through claw back.**

England

Motion 7: Norfolk LDC, Nick Stolls

**Recent events have demonstrated that a target driven and heavily stressed environment for healthcare provision is antipathetic to quality, patient care and safety of registered professionals. Conference demands that Commissioners and DHSC address the causes as a matter of urgency.**

UK

## **PUBLIC HEALTH ISSUES**

Motion 8: Hull and East Riding LDC, Simon Hearnshaw

**This Conference supports the reallocation of the recurrent costs of Water Fluoridation Schemes away from Local Authorities and towards the NHS (the main financial beneficiary) where a Scheme is feasible and the Return on Investment is apparent.**

UK

Motion 9: Kensington, Chelsea & Westminster LDC, Saagar Patel

**This Conference commends the initiative being run by Westminster City Council to tackle the appalling and preventable level of children's tooth decay in the borough and calls on all local authorities to build on the example set by making use of the resources made available by Westminster City Council.**

UK

Motion 9a: Wakefield LDC, John Milne

**LDC conference welcome the initiatives of Dental check by 1 and Starting Well. However, conference urges DHSC and NHS England to make resources available to implement Starting Well across the whole of England.**

England  
Policy

Motion 10: Wakefield LDC, John Milne

**Conference urges the government to commit the NHS to design and commission appropriate care for those in care homes or receiving support to live in their own home.**

UK

Motion 10a: Brent and Harrow LDC, Pratik Patel

**To ensure that patients in residential care settings receive oral health care, this Conference moves that NHS England and Borough Councils ensure that there is adequate provision for every social care provider to access appropriate care and treatment and that social care providers work together with GPs, CDS and Special Needs Departments to meet the needs of patients to be treated on an appropriate care pathway.**

England

Motion 10b: Brent and Harrow LDC, Pratik Patel

**This Conference proposes that the BDA work with the All Party Parliamentary Group on Ageing and Older People (APPG) to hold an event bringing together key stakeholders to highlight the oral health challenges facing older adults in care. This event should lead to clear recommendations and a consensus among all stakeholders taken to the Department of Health, with regular feedback and monitoring of the implementation and effectiveness of the recommendations taken back to the APPG.**

UK

Motion 10c: Lincolnshire LDC, Jason Wong

**This conference calls for Dental practices to be Dementia friendly.**

UK  
Policy

Motion 11: Kensington, Chelsea & Westminster LDC, Saagar Patel

**This Conference calls on the Government to remove spending restrictions on the money raised by the tax on sugary drinks so that a reasonable proportion of it can be used to fund children's oral health initiatives, as determined by local need.**

UK  
Policy

(prev no. 38)

Motion 12: Ealing, Hammersmith & Hounslow LDC, Davinderpal Kooner

**This Conference calls on all local authorities to engage with their LDCs on addressing shisha, smokeless tobacco and betel nut use where this is relevant. Targets should be set in conjunction with NHS England (or the national equivalents) that are measurable and achievable, with annual reports provided to the All Party Parliamentary Group on dentistry and oral health.**

UK

(prev no. 11)

Motion 13: Croydon LDC, Ian Duthie

**This Conference calls for adequate training for GPs and all primary care clinicians on eating disorders, and the development of clear care pathways to ensure that these patients receive timely care in the right setting.**

UK

(prev no. 12)

Motion 14: North Yorkshire LDC, Ian Gordon

**This conference requires that the disposable nature implied by HTM01-05 be reviewed scientifically.**

England

(prev no. 13)

## REGULATION

Motion 15: Norfolk LDC, Nick Stolls

**Given that the GDC's enhanced CPD scheme requires all registrants to have a personal development plan, this conference believes that such plans and any reflective learning must be private to the individual registrant and not available to third parties unless explicit consent has been given.**

UK

(prev no. 14)

Motion 16: West Sussex LDC, Ashkan Pitchforth

**This conference calls for the government to ease the burden of practice management by covering the costs of regulatory bodies such as CQC, RQIA and HIW and professional indemnity.**

UK

(prev no. 15)

Motion 17: Southern LDC, James Kelly

**This conference believes that it is unnecessary over regulation to regulate dental practices in Northern Ireland as independent hospitals.**

Northern Ireland  
Policy

(prev no. 16)

## INDEMNITY

Motion 18: Southern LDC, Seamus Hughes

**This conference believes that indemnity fees are now set at an unsustainable level. We believe there should be a two-year moratorium on fee increases and demand that NHS general dental practitioners across the UK be granted access to an indemnity scheme equivalent to that provided to primary care medical practitioners in England.**

UK

(prev no. 36)

## COMMISSIONING/CONTRACTUAL

Motion 19: Lincolnshire LDC, Roger Bayes

**This conference calls for the equalisation of UDA rates across England.**

England

(prev no. 17)

Motion 20: Northamptonshire LDC, Geraint Evans

**N'Hants LDC call on conference to reject UDAs immediately regardless of contract reform.**

(prev no. 18)

Motion 21: Bexley & Greenwich LDC, Harmail Bassi

**Conference demands that the GPC works with NHS England to improve the procurement process, making sure that it supports the sustainable provision of services for the benefit of patients.**

England (prev no. 19)  
Policy

Motion 22: Hants IOW LDC, Philip Gowers

**This Conference deplores the recent orthodontic procurement and DPS in the South of England and demands that non-time limited contracts are not subjected to unilateral variation that can potentially destroy continuity of quality care to patients based on a postcode lottery.**

England (prev no. 20)  
Policy

Motion 22a: Birmingham LDC, Gillian Cottam

**The current DPS in Orthodontics is not fit for purpose. This conference demands that it should be abandoned and sensible commissioning adopted.**

England (prev no. 20a)  
Policy

Motion 23: Birmingham LDC, Eddie Crouch

**This Conference believes that dialogue with NHS England has produced very little benefit and calls on GPC to investigate all forms of potential industrial action that will assist those of the profession affected by the intransigence, to support via a ballot.**

England (prev no. 21)

Motion 23a: Northamptonshire LDC, Alasdair McKendrick

**N,Hants LDC calls on conference to demand GPC immediately disengage from all negotiations with the DHSC and NHS England**

England (prev no. 21a)

Motion 24 Southern LDC, Seamus Hughes

**This conference believes that the delays in implementation of the pay awards, particularly in Northern Ireland, every year are unacceptable.**

UK (prev no. 22)

Motion 25: Hertfordshire LDC, Peter Tatton

**This conference demands that UDA or UOA are awarded to practitioners to compensate for loss of practice time due to patients failing to attend appointments or cancelling with insufficient time to reallocate the time booked.**

England (prev no. 23)

Motion 26: Northamptonshire LDC, Leah Farrell

**N'Hants LDC call on conference to insist that LDCs are paid to attend the ever-increasing numbers of meetings with NHS England teams.**

England and Wales (prev no. 24)

Motion 27: Hants and IOW, Keith Percival

**This conference deplores the lack of guidance over the contractual arrangements between potential Performer List Validation by Experience (PLVE) candidates and providers and demands NHSE and HEE work with the BDA to develop a more structured approach to such contracts that takes into account the needs and responsibilities of all parties involved under PLVE arrangements.**

England (prev no. 25)

Motion 28: Durham and Darlington LDC, Siobhan Grant

**The Conference opposes the introduction by COPDEND of the new National Charging Structure for England for dentists with conditions imposed, because it is understood that working with these dentists is part of its role and therefore funded already.**

England (prev no. 26)

## **GOVERNMENT POLICY**

Motion 29: Hertfordshire LDC, Smita Rajani

**This conference deplores the 2018 above inflation increase in patient charges that amounts to a tax on the dental health of patients!**

England (prev no. 27)  
Policy

Motion 29a: Norfolk LDC, Nick Stolls

**This conference demands that dentists cease to be tax collectors on behalf of the government and that the Treasury find an alternative mechanism for collecting patient charges.**

UK (prev no. 27a)  
Policy

Motion 30: West Sussex LDC, Agnieszka Tarnowski

**This conference urges NHS England and the BSA to find a solution that prevents the most vulnerable members of our society being unfairly fined when attending dental services.**

England  
Policy

(prev n. 28)

## **LDC/GDPC BUSINESS**

Motion 31: Milton Keynes LDC, Jay Joshi

**This Conference calls for all LDCs to have open meetings. Every dentist working under a GDS contract, normally pays a statutory levy to the LDC and this should entitle them to at least be present at meetings.**

England and Wales

(prev no. 34)

Motion 32: Merton, Sutton & Wandsworth LDC, Tariq Ashraf

**This Conference calls on GDPC to provide monthly updates to LDCs on the core motions passed and what activities are being pursued to achieve them.**

UK

(prev no. 39)

Motion 33: Hillingdon LDC, Ash Paul

**This Conference proposes that LDC Conference switches dates with LDC Officials' Day.**

UK

(prev no. 35)

## **WORKFORCE SUPPORT ISSUES**

Motion 34: Wiltshire LDC, Philippa Riseley-Prichard

**This Conference calls on commissioning bodies to recognise the value of the Practitioner Advice and Support Scheme (PASS). NHSE should work with Local Dental Committees to set up, fund and manage PASS which would provide assurance to the public, politicians and the profession that the issue of performance is being addressed responsibly at a local level.**

England

(prev no. 29)

Motion 34a Lincolnshire LDC, Jason Wong

**This conference calls for the formalisation of the practitioner advice and support schemes in Local Dental Committees across the nation.**

UK

(prev no. 29a)

Motion 35: Bro Taf LDC, Lauren Harrhy

**This conference deplores the high levels of stress amongst the profession and demands access to mental health based occupational health services for GDPs.**

UK  
Policy

(prev no. 30)

Motion 36: Lambeth, Southwark & Lewisham LDC, Jayesh Patel

**This Conference demands that urgent action is taken to ensure that staff providing NHS dental care are protected from violent and abusive patients through support from commissioners and the police when necessary.**

UK  
Policy

(prev no. 31)

## **INFORMATION MANAGEMENT AND TECHNOLOGY**

Motion 37: Norfolk LDC, Nick Stolls

**Since 2006 NHS dentists have experienced a steady decline in income directly associated with additional regulatory demands being unfunded.**

**Conference demands that:**

- **With the potential introduction of a digital coding system for dentistry, adequate funding be forthcoming from the government to support the additional software costs together with the extra time required to complete patients' records**
- **Additional costs associated with GDPR are fully funded**

England  
Policy

(prev no. 32)

## EDUCATION AND TRAINING

Motion 38: Hertfordshire LDC, Marion English

**This conference deplores the initiatives of Advancing Dental Care by HEE/COPDEND to fundamentally change the training of dental students through common entrance.**

England  
Policy

(prev no. 33)

## MISCELLANEOUS

Motion 39: Camden & Islington LDC, Hatim Kapadia

**This Conference applauds Healthwatch England identifying access to NHS dental services as one of its six key priorities and calls on LDCs to work with their Local Healthwatch on ensuring that access to NHS dental services is recognised as a national and local priority.**

England

(prev no 37)

Motion 40: Croydon LDC, Ian Duthie

**This Conference calls on the GDC to work with the BDA to create an agreed patient facing "mythbuster" to safeguard confidence in the profession. Unjustified negative attitudes towards the profession may affect patient trust and therefore access, to patients' detriment.**

UK

## DEVOLUTION

Motion 41: Northern LDC, Richard Graham

**This conference believes we should put the 'national' back into NHS Dentistry.**

UK