

DERBYSHIRE COUNTY LOCAL DENTAL COMMITTEE	
Draft minutes of an ordinary meeting	
Date:	3 rd December 2013
Venue:	Higham Farm Hotel, Higham
Members:	Drs: JD Al Damouk, H Alzoubi, H Hammond, A Hannah, R Khatib, P Moore, A North (Vice Chair), N Preston, Y Nsamba, J Ward (Treasurer), A Watts
	Co-opted: Drs:
	In attendance: Dr D Hannah, Observing
1.	<p>Presentation by DR Chris Locke on Proposed LDC Buying Group.</p> <p>Dr Moore introduced Dr Locke to the meeting, to deliver a presentation about a proposed LDC Buying Group. Dr Moore had circulated a paper and given a brief outline of the proposal at the previous LDC meeting.</p> <p>Dr Locke commenced by briefly outlining the purpose of the presentation. This was to:</p> <ul style="list-style-type: none"> • Make the LDC aware of what Nottingham LMC had achieved through its buying group; • Explain the benefits that could be available to dental practices if the proposal was accepted; • Answer any questions LDC members may have about the proposal. <p>Dr Locke then provided a background to the inception of the LMC Buying group.</p> <ul style="list-style-type: none"> • The Nottinghamshire LMC buying group was established in 1998, with membership being extended to Derbyshire and Lincolnshire in 2001 covering 405 practices in total. • Responsibility was transferred to its subsidiary, PSS Ltd., in 2007 and the services of Burns Associates were engaged. • The first of its associate buying groups was established in the south of England in 2008 and after the creation of the London wide LMCs Buying Group in 2009, the LMC Buying Federation was formed, comprising of 39 LMCs and over 5000 GP practices. <p>Dr Locke then gave an explanation of how the buying group worked.</p> <ul style="list-style-type: none"> • The Group evaluates competing offers before identifying a sole approved provider for each commodity/service being sought. • Whilst the Group negotiates the price of goods and terms of contract to members to ensure the best value/quality of service, the contracts are between individual practices and suppliers. • The Group polices agreements with suppliers, investigates complaints, monitors pricing and performance and market tests the contracts at regular intervals.

- Membership is free to practices – being promoted as an ‘added value’ service offered by LMCs to their constituents.
- Practices can join, but are not obligated to buy from the approved suppliers.
- The Federation is run by Nottinghamshire LMC/PSS, helped by Burns associates.
- The cost of administration is met by a small commission on turnover of business enjoyed by the approved suppliers.
- The prime motivation was to save money for the members.

Dr Locke then outlined the benefits that practices get from membership. These included:

- Significant savings on goods/services bought regularly
- Freedom from having to shop around to get value for money.
- Information from the Group and its suppliers to help in making purchasing decisions, but with no obligation to buy from those suppliers.
- Offer of a free, bespoke, practice price comparison analysis provided by Burns Associates to demonstrate savings.

The benefits to suppliers from being ‘Buying Group’ approved included:

- The Group advertises and promotes suppliers directly and via the LMC to practice members through a variety of means.
- Suppliers have access to practice contact details allowing them to circulate promotional information. There is also a separate website which is membership only/password protected which has information of prices etc.
- Suppliers offer their best price in return for anticipated increased business,

What LMCs get out of this:

- The ability to give something back to constituents which is tangible and savings usually far exceed levy to LMC.
- The potential to receive a commission after 2-years of trading, which is usually sufficient to fund some educational meetings/conferences.
- The LMCs don’t actually have to do much except endorse the Group.

What services are offered that might interest dental practices?

- Office supplies
- Medical consumables and equipment
- Testing and calibration services
- Utilities brokerage
- Insurance
- Telecoms
- Staff uniforms
- Confidential waste shredding
- Emergency oxygen
- Magazine subscriptions
- Website design.

Potential savings?

The typical savings demonstrated from price analysis by Burns Associates across associated groups for a small-medium sized practices:

- Office supplies - £900 - £3,000 pa
- Medical Consumables - £1,000 - £4,750 pa
- Utilities - £400 - £2,500 pa
- Insurance - £500 - £5,000 pa

What is the proposal?

- To work with East Midlands LDCs to set up an LDC Buying Group.
- Offer deals to local dental practices with LDC support and participation.
- Demonstrate potential value of the Buying Group to dental practices – priority areas are dental consumables and clinical waste collection

How this is being taken forward?

The regional LDCs agreed to the following:

- To support the creation of a single LDC Buying Group that all LDCs might eventually be invited to join.
- For practices represented by the LDCs to be 'opted-in' as members, but with freedom to opt-out at any time.
- Sharing of further information with LDCs including copies of the standard documentation.
- With LDC agreement, Burns Associates would undertake further practice price comparison analyses of selected dental practices and share the results with LDCs to demonstrate potential savings.
- Set up a required working group of LDC secretaries to help oversee the establishment of the group with a view to launching in by April 2014.

Further information could be obtained by visiting the website: www.lmcbuyinggroup.co.uk or by e-mailing Helen.shuker@lmcbuyinggroup.co.uk

Questions were invited.

It was queried if this was not replicating something that already existed with the DBG – Dental Buying Group, but the committee members were informed that the DGB was not really operating as a buying group anymore.

Dr Al Damouk asked what expertise was possessed by the individuals investigating products etc. Dr Locke acknowledged that currently there was very little, but they were currently talking to some practices and analysing what was being bought and why to get pricing across a range of products. They were also happy to work with LDCs in identifying good products/services. It was not in the best interests of the group to promote goods/services of an inferior quality simply because they were cheaper.

Dr Watts asked if it was possible to go direct to manufacturers rather than suppliers. Dr Locke said that this might be a possibility, but sometimes manufacturers were reluctant to upset their relationship with major suppliers.

Dr Locke was asked if the commission was fixed. He said that nominally it was 5%, but there were some areas where it was different as certain contracts were negotiated differently.

	<p>Dr Locke said that they didn't bother with services where they couldn't demonstrate value for money eg legal services.</p> <p>Dr Khatib asked what would happen if uptake was poor. Dr Locke said that the suppliers were still tied in for the life of the contract. It was accepted that it could take a while to get the concept established and get practices on-board; however, there was no obligation to the LDC if the idea didn't take off. It was possible that the dental market would be very different from the medical market and there were no guarantees of it being successful.</p> <p>Dr Ward asked about delivery times, as these could be crucial. Dr Locke said that there had been few problems, but they asked practices to be sensible and not order small amounts so that companies were delivering constantly, but urgent needs would be met.</p> <p>Dr. Locke was thanked for his presentation.</p> <p>After Dr Locke had left discussion ensued.</p> <p>Overall, it was felt that it had the potential to be beneficial for dental practices. There were, however, concerns expressed that all practices would be 'opted-in' and it was suggested that the LDC should contact all practices to make them aware that they could opt-out. It was also raised if the LDC could remove its support if they felt the group was not what it was purported to be. Again, it was suggested that if this were the case the LDC would just contact all practices and inform them that it was removing support. There were also concerns around the distribution network, although it was suggested that if it was working for GPs, there was no reason to think it wouldn't work for GDPs.</p> <p>The committee voted unanimously that it agreed in principle to the idea, but they would like to see a copy of the agreement and seek advice, if required, about it.</p>
<p>2.</p>	<p>Apologies for Absence</p> <p>Drs: H Kshitij, D Monaghan, N Rodick</p>
<p>3.</p>	<p>Minutes of last Meeting</p> <p>The minutes of the meeting of the 22nd October 2013 were agreed as an accurate record.</p>
<p>4.</p>	<p>Matters Arising</p> <p>There were no matters arising.</p>
<p>5.</p>	<p>Correspondence</p> <p>An e-mail had been received from Dr Rodick as he was unable to attend.</p> <ul style="list-style-type: none"> • Dr Rodick who had attended the LPN meeting on 19th November. The meeting had been well-attended, with a full agenda, discussing numerous topics including bariatric dentistry and out of hours service. One topic, the revival of the 'Peer-review' type of learning, and Dr Rodick had stated that he would discuss this in more detail at the next LDC meeting. • Dr Rodick had provisionally booked John Tiernan from MPS to talk at the next AGM.

	<ul style="list-style-type: none"> Drs Ward and Rodick were due to attend the LDC Official's day on 5th December and would report back at the next LDC meeting. <p>There was no further correspondence.</p>
6.	<p>LDC Dinner</p> <p>This was to take place on February 28th 2014, at the Red Lion at Stonedge, near Chesterfield.</p> <p>Action: Dr Ward to book.</p>
7.	<p>Website</p> <p>EW-W reported that John Geddes had made a start on adapting the website so that it was open but due to personal reasons was unable to continue at this time. She would update the group at the next meeting.</p>
8.	<p>Treasurer's Report</p> <p>The LDC continued to be on a sound financial basis.</p>
9.	<p>Reports</p>
	<p>a) <u>Local Professional Networks (LPN)</u></p> <p>This had been covered previously.</p>
	<p>b) <u>Trent Liaison</u></p> <p>There was no update at this time.</p>
	<p>c) <u>FGDP and FD</u></p> <p>FGDP: There was nothing to report at this time.</p> <p>FD: Dr North gave an update on the recruitment of the new Dean. Interviews had taken place and whilst Dr North was able to state that he had not been appointed, the actual appointment was not yet ratified and therefore could not be made public. The appointment was only for 4-years.</p> <p>In other Deaneries, there had been a number where all the programme directors had been sacked and a smaller number of super-programme directors had been appointed with a team of administrators to run the programme.</p>
	<p>d) <u>BDA</u></p> <p>No report received</p>
	<p>e) <u>NCB</u></p> <p>No report received</p>

	f)	<p><u>NHS England</u></p> <p>No report received.</p>
11.		<p><u>AOB</u></p> <ul style="list-style-type: none"> • Dr Khatib reported that the individual responsible for adding new performers had been off for 2-months and there was no-one else who was able to add people onto the list. This meant that where a practice had a new performer they were unable to claim. He had spoken to Laura Burns who said that she would look into it, but as of yet, nothing had happened. <p>Dr North suggested that a letter be sent from the LDC raising concerns about this matter.</p> <p>Action: Dr Moore to send a letter from the LDC registering the committee's concern that new performers were unable to be claimed for as no-one else was able to add them to a practice's list.</p> <ul style="list-style-type: none"> • EW-W informed the committee that elections were due in 2014 and she would have a list of those who's term was coming to an end for the next meeting.
12.		<p>Date, Time & Venue of Next Meetings</p> <p><u>Unless stated all meetings commence at 7.30pm, at Santos, Higham Farm, Higham.</u></p> <p>2014</p> <p>7th January 11th March</p> <p>AGM 20th May</p>