

Dear LDC Chair,

With a rapidly changing situation, we wanted to contact you to see how we can work collaboratively to better manage the current situation. Please note that plans may have to change if / when further guidance is issued centrally.

There are three particular elements of our planning that we would like your input on at this point in time.

1. NHSE&I are urgently working with a number of Community Dental Services and Trusts to make arrangements for them to be able to treat patients who are self-isolating and/or have symptoms of Covid-19 and who require urgent dental care. We are also considering ways in which we can support local systems over the coming weeks and months to maintain access to urgent dental care and care which cannot be delayed. This would be for asymptomatic patients. Clearly there would need to be a robust process in place to ensure that patients accessing the service do actually fall into this category and guidance on this has already been shared through the Standard operating procedure for primary dental care settings. We think it is important to maintain segregation of symptomatic or high-risk patients (those who are self-isolating) and asymptomatic patients; we think the latter group would be best cared for by GDPs. We want to hear your views on the definition of 'urgent care' in the context of the current situation and are also keen to hear your thoughts about care that 'cannot be delayed'.

We want your thoughts on how each local system can organise itself to ensure we retain access in each area and what the NHSEI team can do to support this. We know you have a good track record in many instances of working together to manage rotas during holiday periods or where contractors have a problem.

We think NHS EI can add value in the following ways:

- Having a clear system of notification for practice closures due to staffing issues so that we can maintain a dynamic Directory of Services (DOS) and ensure patients can be appropriately signposted to the services that are still open
- Facilitating sharing of staff between practices to support any local arrangements that may be agreed – for example ensuring staff can be promptly added to contracts where necessary
- Sharing advice and best practice – in particular advice on what procedures can and cannot be undertaken or relating to deep cleaning or appropriate use of PPE. We will be engaging separately with the Orthodontic MCNs to share guidance for Orthodontic Practices.

I would very much appreciate your thoughts and/or alternate suggestions. We are very conscious that we need to support practices and dentists to keep both their staff and patients safe and we are aware of some of the issues currently regarding the supply of PPE. Guidance has already been issued through the Standard Operating Procedure for Primary Care Dental Settings about how to check the status of patients seeking to access services.

2. The second issue is in terms of cascade of urgent information – we are currently reviewing our communications cascades – a lot of this is coming out centrally through CAS alerts or via the BSA and other routes. We think it might be helpful to get practices to agree a nominated person and contact number and possibly set up a cascade system to get urgent messaging out if needed in a hurry. This would be

similar to the arrangements operated by some schools to notify school closures. It is important that we can communicate with performers as well as providers because we are repeatedly hearing that performers are unaware of guidance documents we have sent out and in a situation such as this, we need everyone to be kept up to date. Any thoughts on how this might work best would be gratefully received.

Also; we are struggling to triage out the more urgent communications from the large number of emails that are coming in at present from people who are quite rightly concerned about the delay in getting guidance. We will obviously immediately share guidance as soon as we get it, but in the meantime we wondered if you would be able to help us by collating and forwarding on any urgent issues directly – the generic inboxes remain the optimum means of communicating with the team at this time as they are constantly monitored and assigned to the appropriate individual. There is also a process in place for escalation to the Regional Incident Response team.

3. Finally, we would welcome your thoughts regarding whether staff would be available to be deployed, if necessary, to support essential services in the CDS (provided we could sort the relevant permissions and paperwork).

Please could you send any thoughts or suggestions back to me via england.em-pcdental@nhs.net

A quick response would be appreciated as we want to move fast to plan and organise to cope with a rapidly evolving situation.

Finally I would like to address some of the FAQs that the team is currently receiving and reiterate some of the earlier circulated guidance, as always happy to receive thoughts and comments on the below:

Who should I Contact?

Please direct all your queries to your local Public Health England team (East Midlands), who can be contacted via 0344 225 4524. Further details are available via the following link: <https://www.gov.uk/government/collections/phe-east-midlands-advice-support-and-services>.

Due to new guidelines regarding working from home, NHS England and NHS Improvement are unable to answer any landline desk phone numbers. To contact the contracting team, please email the team inbox, and a colleague will contact you back as soon as possible.

The inbox is currently monitored 0800 – 1700, Monday to Friday. The email address is: england.em.pc-dental@nhs.net

Please note, that from 19 March 2020, contractors based in the Derbyshire, Nottinghamshire, Leicestershire, Rutland, Lincolnshire and Northamptonshire areas will be asked to contact the team via the new email address: england.em-pcdental@nhs.net

Post - As all of NHS England and NHS Improvement's office based colleagues will now be working from home, we will not be able to receive any documents posted to us. Post will still be received at the NHS buildings, however this will not be picked up by a member of the team until further notice. If you need to share documents, please email these to the relevant email address above, and a colleague will respond to you as soon as they are able to.

Supplies of Hygiene and PPE Products

Please do not contact the NHS England and NHS Improvement Contracting Team for queries regarding obtaining stock of face masks, sanitiser, hand wash and other hygiene or PPE items, as we are unable to help. Please direct all queries regarding these items to Public Health England via the telephone number above. Stock is being managed accordingly, and there is currently no shortage, however we are encouraging practices to please NOT stockpile, to ensure the supply chain stays mobile.

The current PPE advice (as at 17/03/2020) for Dental teams is:

- Patients who have symptoms should not be attending for dental treatment. Up to date information for the public can be found here: <https://www.nhs.uk/conditions/coronavirus-covid-19/>
- Routine PPE should be used for all patients who arrive for treatment and who are not symptomatic.
- Patients who are symptomatic and/or who have COVID 19 and need urgent dental care that cannot be delayed should be treated with FFP3s respirators etc and full precautions by a service equipped to deal with them. NHSEI are making arrangements for some of the CDS services to be trained and kitted out with FFP3s so that they can take on the urgent treatment of possible/confirmed cases if necessary. Details of those arrangements will be sent out as soon as the pathway is finalised.

What is the protocol for closing the practice? What will happen to dental Emergencies?

Should you feel it is appropriate to close your practice, please contact your local Contracting team via the email addresses above to discuss this further and keep concise records of all unusual activity related to COVID-19 (e.g. Staff self-isolating, patient DNA's etc.). Please also follow your Business Continuity policy to ensure the appropriate procedures are followed and lines of contact are diverted if required.

Information Resources

- For the official NHS England and NHS Improvement advice and guidance for Primary Care on COVID-19, including definition of 'contact', management of suspected cases and advice regarding isolation please see the following link: <https://www.england.nhs.uk/coronavirus/primary-care/>
- For NHS England and NHS Improvement advice specifically for clinicians, please see the following link: <https://www.england.nhs.uk/coronavirus/>
- For the latest Public Health England guidance 'COVID-19: interim guidance for primary care', please see the following link: <https://www.gov.uk/government/publications/wn-cov-guidance-for-primary-care/wn-cov-interim-guidance-for-primary-care>

We appreciate that the guidance may not answer all questions, but we believe that working together we can ensure access for patients is maintained and that any national updates are disseminated as quickly as possible.

Finally I would like to thank all LDC Chairs, members and the profession as a whole for your invaluable support during a most difficult time.

Regards,
Tom.

Tom Bailey
Senior Commissioning Manager
NHS England and NHS Improvement – Midlands