York Local Involvement Network
Dental Services Report
March 2011
Supporting your right to the best health and social services in England
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Introduction

We are pleased to introduce York LINk’s report on dental services.

The LINk Steering Group decided to hold a Public Awareness and Consultation Event (PACE) about dental services (see appendix 1) because from April the Care Quality Commission (CQC) will register all dentists and also during the existence of York LINk many people have reported problems around being seen by a dentist.

We would like to thank Constance Pillar, a Specialist Contract Manager, NHS North Yorkshire and York for her presentation at the PACE and in particular for providing answers to questions from members of the public.

We would also like to thank the members of the public who participated in the PACE day, the people who contacted the LINk office with information about their experiences and those who completed questionnaire forms. The information given by the public provides tangible evidence of issues and concerns.

We hope this report will be accepted in the spirit of improving services.

York LINk Steering Group, March 2011
Information about the dental contract

Prior to 2006, NHS funding for dental services was held centrally with the Department of Health (DH). Dentists were allowed to open a new surgery anywhere if planning permission was given by the Local Authority, whether there was a need for additional dental services or not.

Dentists received payment for every aspect of treatment they carried out, there were 400 different treatments. This meant that if they carried out a check up on a patient they received a payment. Then, if the patient required additional work such as several fillings, or root canal work, they would receive a payment for each filling and the root canal work. This led to some people believing that their dentist was providing unnecessary treatment in order to increase their income.

In April 2006, funding for dental services was transferred to Primary Care Trusts (PCTs) and each dentist was offered a contract based on the amount of work they carried out during the previous two years. Funding for the 400 different treatments was reduced to 3 bands called Units of Dental Activity (UDA) and patients who were not actively receiving treatment at that time were required to re-register with their dentist. However many dentists still viewed their existing patients as being registered with them.

The LINk was informed by two dentists that there was a general belief among dentists that they would lose money by agreeing to the new NHS contract. Some then chose to provide private dental services only. This meant that their patients had to choose whether to remain with the practice and pay for private treatment or move to an alternative NHS dentist. Also, there was confusion around which patients needed to re-register. A combination of people not wanting to pay for private treatment, and others not being aware that they needed to re-register with another NHS dentist, resulted in a great number of people being left without access to an NHS dentist.
Commissioning new dental services

During 2006-2007 the Selby and York PCT commissioned dental services in the York area. Since then North Yorkshire and York PCT has had this responsibility. Prior to the changes, dentists could unilaterally decide to set up business in a given area. Following the introduction of the new contract, PCT commissioners now look for the following indicators that show areas of need before commissioning a new service:

- Areas of deprivation as defined by Local Authority indicators;
- The number of decayed, missing and filled teeth in 5-12 year olds, and;
- The number of Units of Dental Activity currently provided against the number of people living in the area.

Commissioners also take into consideration that some people prefer to use private dental services and also that others choose not to visit a dentist at all.

NHS North Yorkshire and York dental service Commissioners agreed at the start of contracting for services that Scarborough had the highest area of deprivation and chose to focus on that area first. They then focused on other areas of North Yorkshire.

The number of 5 year olds who have decayed, missing or filled teeth in York is fewer than the number in areas in the rest of North Yorkshire. However the number of 12 year olds who have decayed, missing or filled teeth is slightly higher. Because York has fewer number of children with decayed, missing and filled teeth, it has been the last area to be considered by Commissioners.

The school dental service which treated pupils in schools ceased over 30 years ago and a dental screening service was established instead. A national review of dental screening services was carried out in 2007, which showed that that only half the number of parents informed of their child’s need for dental treatment actually took their child to a dentist. It was also discovered that only a quarter of these children received appropriate treatment. The researchers also stated that these parents would take their children to dentists anyway - with or without a notice from schools. The review recommended that the screening service should be discontinued and the money diverted to other preventative strategies such as adding fluoride to drinking water. However the PCT in this area has not implemented the recommendations of the report and children’s teeth in York are still
screened in schools. Parents are then informed if their child needs to visit a dentist. At present, due to the lack of NHS dentists described above, it can be difficult for parents to see a dentist who will provide free NHS treatment for their children. The LINk was informed by a parent that her private dentist agreed to examine her daughter's teeth for £25.

The Commissioners also need to consider the need for new services based on the number of UDA’s compared to the number of people in the area. A high number of UDAs may be identified because many people in an area visit their dentist every six months. However, this time-frame is no longer recommended. The National Institute for Clinical Excellence (NICE) guidance recommends that the time between treatments should be determined by the dentist based on the oral health of the patient, which, in some cases, could be up to every two years.

The total population of York in June 2010 was estimated by the PCT to be 198,800 people. The total number of UDAs carried out for the year was 316,101. These numbers are deceptive and could indicate that everyone in York has been treated by a dentist. However, the number of people in the York area on the waiting list wishing to be allocated a dentist in December 2010 was 6,100. At the LINk PACE meeting, the PCT Commissioner stated that an average of 230 people on the list are assigned a dentist every month, which suggests that 1,380 had been allocated since the beginning of the year, meaning that the waiting list probably started with 7,480 people.

In order to assist patients to register with a dentist, the PCT established a dental database. Potential patients can write, email or phone to register (see appendix 2). Over 16,700 people have been allocated a dentist since 2008. However, there were still was still a substantial and challenging number of people on the list in December 2010.
Summary of LINk questionnaire

Of the total of 117 people who responded to the questionnaire, 110 indicated that they were patients, 6 were carers and one person was employed in a dental surgery.

Of the respondents, 114 were permanent residents in York and 3 were students at a York University.

When asked if they felt they had a good choice of NHS dentists locally, 26 reported they did have a good choice, 23 were unsure and 67 reported they did not have a good choice.

Of the people who took part in the questionnaire 108 currently have a dentist and only 7 were on the waiting list. Of those who were on the waiting list 2 had been on the list for over 1 year, 3 had been waiting for between 7-12 months and 3 for between 0-6 months.

When asked if they knew what care is available on the NHS 40 responded that they knew, 53 responded that they did not know and 14 were unsure.

When asked if they knew about NHS charges for dental care 56 people responded that they knew about charges, 48 responded they did not know and 12 were unsure.

When asked about who qualified for free dental services 92 people responded that they knew, 10 responded that they did not know and 12 were unsure.

When asked if they knew how to find out about free dental services 46 people reported they knew how to find out, 46 reported they did not know and 11 were unsure.

A total of 73 people reported that they currently use an NHS dentist and 33 reported they did not. When asked why they did not use an NHS dentist, 5 reported that their dentist changed from NHS to private, 4 reported that they can’t find/don’t know how to get an NHS dentist, 4 reported that they had dropped off the waiting list and 4 reported that they need things not available on the NHS, such as flexible dentures.

When the 108 people who reported that they had a dentist were asked if the location of their current dentist was convenient, 59 reported that it was convenient and 19 report that it was not. The main reason for
inconvenience was reported by 9 people as their poor mobility or lack of public transport. Two people reported that their dentist had moved location and they chose to follow them and 7 people reported that they were allocated from the waiting list to an inconvenient location.

A total of 65 people reported that they are happy with the service they receive from their dentist with only 8 people reporting that they were dissatisfied because the following reasons:

- ‘The dentist does not provide domiciliary visits to immobile residents’;
- ‘There appears to be no hygienist so no cleaning is done or offered’;
- ‘It is difficult to get appointment at short notice’;
- ‘The previously dentist ignored a problem which led to a bad infection’, and,
- ‘There is no continuity of dentist’.

When asked if information about dental charges was displayed in their surgery 33 people reported yes, 3 people reported no and 25 people did not know.

When asked about how they felt about the waiting time for an appointment at their dentist; 35 people reported they get an appointment as soon as necessary, 15 reported they waited a short time and 3 reported they waited a long time.

In total 30 people reported that they would like to book dental appointments in person, 50 people preferred to do this by phone and 15 would like to use the internet.

Most people (33) receive reminders about appointments they have booked from their dental surgery but 25 people reported that no reminder was sent.

When asked to rank the importance of various aspects of dental services most respondents reported hygiene and cleanliness, followed by information on charges and treatment, and 10 reported disabled access. The following other aspects were also highlighted:

- Price (reported by 2 people)
- Skill of dentist/ well trained (reported by 5 people)
- Welcoming friendly atmosphere/ staff (reported by 10 people)
• Facilities, e.g. toilets, provision for children, privacy at reception, background music (reported by 4 people)
• English speaking dentist (reported by 2 people)
• Domiciliary visits (reported by 2 people)
• Opportunity for more time with dentist
• Confidence in dentist re skill and charges (reported by 3 people)
• Having same dentist at surgery (reported by 2 people)
• Being able to sit in a wheelchair while having a check up
• Disabled access (downstairs treatment rooms)
• Not being kept waiting when attending appointments/ timing
• Equal treatment, outcomes, respect for all patients regardless of NHS or private

When asked how the quality of NHS dental services could be improved the following views were given:

**Dental costs**
• The cost of dental services is too high and should be reduced especially for families and people who are not on benefits;
• Some treatments are expensive for pensioners and should be free for those over 75 and students;
• The charging structure should be displayed;
• The standard contract should be more conducive to dentists doing NHS work;
• Options for keeping teeth should be prioritised rather than the cheapest option.

**Location**
• More dentists are needed in the city centre and the suburbs;
• People should not need to change buses to get to a dentist, and it should be easier to be allocated a dentist nearer to home

**Services**
• Emergency dental treatment should be available 24/7;
• Children should have easier and faster access to orthodontic treatment;
• Everyone should have access to the services of a dental hygienist;
• Some people would like to be offered treatment at the same as they attend for a checkup if necessary;
• It should be mandatory that all private dentists carry out NHS work;
• There needs to be more advertising on how to find a dentists;
• Dentists should stop 6 monthly checkups, so new NHS patients
can get appointments;
- Dentists should provide a wider range of products such as crowns and fillings;
- People should have a choice on which dentist to see;
- All dentists should be able to speak clear English;
- Dentists should have better training;
- There should be regular checks on dentists and audits on charges/and patient’s experiences;
- There should be clear information on NHS services e.g. hygienists;
- Dentists should have all the necessary equipment (‘I had to go to hospital for an X ray’).

**Appointments**
- There should be better emergency services and short notice appointments;
- There should be more time allocated per patient;
- School dental inspections should be reinstated.

The following other comments were made about dental services:

- ‘I have back pain and can’t lie down – I have to take cushions’
- ‘Some dentists trained at public expenses do little if any NHS work - the quota of NHS patients should be 80%’
- ‘I had to go private when my dentist went private. I later found out he was taking NHS patients but I was not told’
- ‘There should be an easy way of finding NHS dentists, and applications should be acknowledged’
- ‘More information about costs is necessary and what is available free of charge’
- ‘The waiting list does not take into account how close a dentist is to you or whether they are accessible by public transport’
- ‘Private dentists seem to have more modern equipment’
- ‘There is a need for an NHS dental surgery on St John’s campus and in Acomb’

Some dentists were singled out for praise: Mr Dobson at Lawrence St and Clock House in Heworth. However, Clock House in Heworth was also heavily criticised for problems associated with charges for treatment.

**Conclusions**

The LINk used information from 20 people who attended the Dental PACE event, 12 people who contacted the office to give information
about dental services and 117 who completed the dental questionnaire to produce this report. The main problems discovered in the investigation are as follows:

- It is clear those dentists who decided not to treat NHS patients since 2006 caused problems for a great number of people. Some people who had been patients for many years at a surgery felt obliged to remain as private patients, and many of them are still unaware that they are entitled to NHS treatment. Many others could not or would not pay for private treatment so did not receive dental treatment for a time until they found a new dentist or decided not to have dental treatment at all. The LINk was informed by a dentist that more dentists are now taking on NHS patients as they have discovered that they are not losing funding, and also that there are fewer people willing to pay for private treatment.

- Problems also arose from confusion around who was required to re-register for dental treatment and as a result several people who were unaware of the changes, or did not receive a reminder to make an appointment, found themselves without a dentist.

- In addition, problems have developed as a result of the system NHS North Yorkshire and York adopted for patients to register for dentists. When people contact the PCT to register they are simply added to a list. When a dentist indicates that they are willing to take on NHS patients (or a new surgery is opened) the names at the top of the list are then allocated to them. Whether people are able or willing to travel to another area in York for treatment is not considered. This is why some people have been allocated a dentist on the other side of York to their home. The LINk discovered that some people have accepted this and make the journey via car, bus or even taxi. However, others are unable to travel due to mobility or disability problems and have no option but to re-register on the PCT list.

- Another problem is that the PCT does not inform people that they have been allocated a dentist. If the surgery does not contact the patient and ask them to make an appointment patients are unaware that they have been allocated a place, and they become frustrated with the length of time they are on the waiting list. It follows that the actual numbers on the list may not be correct.

- Problems resulting from the changes to the school dental service were seen as storing up problems for the future.
People felt that although some parents would take their children to a dentist if necessary, others would not bother. The child's teeth would then continue to deteriorate leading to possible major problems in later years.

- A problem with access to dental surgeries for disabled people was highlighted and it was suggested that at least one or two dentists should have facilities for all types of disabilities. It was recommended that resources should be given to the surgeries from the PCT for this purpose.

- There is a problem for people whose lack of mobility means they are unable to attend dental surgeries. A mobile dental service for people who are confined to their homes or residents in nursing homes should be available.

- A number of dentists do not display the pricing bands for UDAs in their surgeries and the LINk has received reports that some patients have paid for the lowest band for a checkup and also been charged the full amount for the second band for subsequent treatment. This should not happen as the cost of treatments should mirror the relevant UDA. For example a checkup should cost £16.50 and this fee can be paid after the treatment. However, if further treatment such as a filling is required the second band of payment will be charged £45.60 minus the £16.50 already been paid i.e. £29.10, at the end of the treatment (see appendix 3).

- Some people felt aggrieved that training for all dentists IS provided via public funding. However, when a dentist receives full accreditation to practice they are not required to undertake NHS work and can opt to only provide private services. It was suggested that either a timescale should be given to dentists following accreditation when they should undertake NHS work only, or they should be obliged to provide a percentage of NHS work during the time they are practicing. This was likened to the sale of Local Authority Housing when tenants had to sign to say they would remain in the house for at least three years following the agreement to buy.
Dental charges
The LINk found problems with dental charges. Despite several people reporting that they knew how much dental services cost and who could receive free/reduced rates, it is clear from other statements such as ‘treatment should be free for people on benefits and those over 75, that many people are unsure.

Free NHS dental treatment is available for people who meet the following criteria when their treatment starts:

- Young people under 18 or those who are over 18 and in full-time education. Students who have low income and a student loan need to submit an HC1 form (available from dentists, pharmacies etc) to apply for an HC2 certificate;
- Women who are pregnant or had a baby in the 12 months before the treatment starts;
- People who are NHS inpatients if the hospital dentist carries out the treatment;
- People who are out-patients at an NHS Hospital Dental Service (although there may be a charge for dentures and dental bridges).

Free NHS dental treatment is also available for people who receive the following benefits:

- People or their partner (including civil partners) who get Income Support, Income-based Jobseeker's Allowance, Income-related Employment and Support Allowance or Pension Credit Guarantee Credit;
- People who are entitled to an NHS tax credit exemption certificate;
- People who are entitled to an HC2 certificate.

People who are named on a HC3 certificate may also get some help towards the cost of NHS dental treatment. HC2 and HC3 certificates are related to the NHS Low Income Scheme.

NHS Low Income Scheme

People who have a low income and have savings of less than £16,000 (or £23,000 if they live permanently in a care home), may be entitled to receive help with dental costs. Following an application on an HC1 form, each person’s circumstances is assessed and a decision is made on how much, if anything, they should pay. Depending on the outcome of the assessment, people
may qualify for:

- a full help HC2 certificate which entitles them to free dental treatment;
- a limited help HC3 certificate that entitles them to some help with dental treatment. The certificate tells them how much they will have to pay.

All certificates are valid for between six months to five years, depending on the circumstances. Dentists can also ask for proof of entitlement when presented with HC2 and HC3 certificates such as:

- an official document with the person’s name and date of birth, such as a birth certificate, NHS card or passport
- a current Child Benefit award notice;
- a letter from a school, college, university or local education authority to prove that they are in full-time education;
- a MatB1 certificate or NHS prescription maternity exemption certificate;
- a letter from a Jobcentre Plus office;
- an award notice from the Pension Centre;
- a valid NHS tax credit exemption certificate.
Dental consultation event
Thursday 27 January, Team Talk, Rougier Street, York

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<th>Time</th>
<th>Session</th>
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<tr>
<td>10.00 – 10.30</td>
<td>Coffee and registration</td>
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| 10.30 – 11.00 | Introduction & background to the consultation  
Lesley Pratt, Chair York LINk |
| 11.00 – 11.30 | Provision of Dental services in York  
Constance Pillar, Specialist Contract Manager, NHS North Yorkshire & York |
| 11.30 – 12.00 | Question and answer time                                                                     |
| 12.00 - 12.15 | The way forward                                                                             |

York LINk reserves the right to alter the programme
York LINk Dental Services questionnaire

1. Please tell us your postcode: 

2. Are you a:

<table>
<thead>
<tr>
<th>Patient?</th>
<th>Dentist or staff?</th>
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<td>Carer?</td>
<td>PCT staff?</td>
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<tr>
<td>Other? (please specify)</td>
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3. Are you a temporary/short term resident?

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<th>No</th>
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<tr>
<td>Yes – student at the University of York</td>
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<td>Yes – student at St Johns University</td>
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<td>Yes – armed forces</td>
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<td>Yes - other</td>
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4. Do you feel you have a good choice of NHS dentists locally?

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<tr>
<th>Yes</th>
<th>No</th>
<th>Don’t know</th>
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5. Are you on the waiting list for an NHS dentist?

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<th>Yes</th>
<th>No</th>
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5a. If yes, how long have you been on the waiting list?

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6. Do you know what dental care is available on the NHS?

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<th>Yes</th>
<th>No</th>
<th>Don’t know</th>
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7. Do you understand the NHS charges for dental care?
8. Did you know that NHS dental services are free for some people, e.g. under 18s, pregnant women, people who receive income support.

| Yes | No | Don’t know |

9. Do you know how to find out who can receive free dental services?

| Yes | No | Don’t know |

10. Do you currently use an NHS dentist?

| Yes | No |

If no, please explain why:

11. Is the location of your dentist convenient for you?

| Yes | No |

If no, please explain why:

If you are currently using a local NHS dentist, please answer questions 11-17. If not, please go to question 18.

11. Is the location of your dentist convenient for you?
12. Are you happy with the service you receive at your dental practice?

Yes  
No  
If no, please explain why (continue on a separate sheet if necessary):

13. Is information about charges for NHS dentistry displayed at the surgery?

Yes  No  Don’t know

14. How do you feel about the length of time it usually takes to get an appointment with your dentist?

I get an appointment as soon as necessary  I have to wait a short time  
I have to wait a long time

Other comments:

15. How would you like to be able to book your appointments? (please tick all that apply)

In person  By phone  On the internet

Other, please specify:
16. Does your dentist send appointment reminders?

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<td>No</td>
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<td>Yes – by post</td>
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<td>Yes – by phone message</td>
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<td>Yes – by text message</td>
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17. How important are the following in your dental practice?
Please mark each area on a scale of 1-10 (1 being the least important and 10 being very important)

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<tr>
<td>Hygiene and cleanliness</td>
<td>Information on charges</td>
</tr>
<tr>
<td>Disabled access</td>
<td>Information on treatment</td>
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What else is important to you in your dental practice?

18. How do you think the quality of NHS dental services could be improved?

(continue on a separate sheet if necessary)

19. Do you have any other comments about dental services or access to NHS dentists in York?

(continue on a separate sheet if necessary)

Please return your completed form to the following address by **Friday 18th February**.

**Freepost RSJX-CGEE-TEEE**
**North Yorkshire & York LINk**
**Holgate Villa**
**22 Holgate Road**
**York YO24 4AB**
**Appendix 3**
NHS Dental treatment

There are three NHS charge bands as follows:

- **Band 1: £16.50.** This charge includes an examination, diagnosis and preventive advice. If necessary, it also includes X-rays and scale and polish;
- **Band 2: £45.60.** This charge includes all the necessary treatment covered by the £16.50 charge, plus additional treatment, such as fillings, root canal treatment or extractions;
- **Band 3: £198.** This charge includes all the necessary treatment that is covered by the £16.50 and £45.60 charges, plus more complex procedures, such as crowns, dentures and bridges.

**Dental costs explained**

If, within two months of completing a course of treatment, you require further treatment within the same charge band or a lower charge band, e.g. an additional filling, you don't have to pay anything extra.

However, if you need further dental treatment after two months of completing an earlier course of treatment, you will have to pay an additional charge.

If your initial treatment is classed as urgent treatment, it may not be included in any subsequent course of treatment that you require. However, for urgent treatment (including out-of-hours treatment), you will have to pay a separate charge of £16.50.

You will not have to pay for:

- denture repairs
- the removal of stitches, or
- if your dentist has to stop blood loss.

There is also no charge if your dentist only has to write out a prescription. However, if you pay for prescriptions, you will have to pay the usual prescription charge when you collect your medicines from the pharmacist.

**Personal dental treatment plan**

Before carrying out any band two or three dental treatment, your dentist should give you a personal dental treatment plan. You will be asked to read and sign the plan, which provides details of the dental work that your dentist is going to do, and the amount that you will have to pay.
If you have discussed having private treatment with your dentist, the details and costs of this treatment will be listed separately on your treatment plan. Before having dental treatment, talk to your dentist about the benefits of the treatment, and any risks that are involved.

**Paying for treatment**
Your dentist is entitled to ask for your payment at any stage of your treatment. As payment policies vary between practices, ask your dentist about when you will have to make your payment.

**Referral to another dentist**
If you’re referred to another dentist to complete the treatment, you will still only pay one charge. For NHS dentistry, this will be £16.50, £45.60, or £198. You will pay the full amount to the dentist who refers you.

If you are referred to a private dentist (and you accept this option) you will:

- pay the appropriate NHS band charge to the dentist who referred you, and
- pay a fee for the dental work that is carried out by the private dentist who you are referred to.
Appendix 4

York LINk staff biographies

A small staff team provides day to day support to the Steering Group and other members of York LINk with administration, research, training, communication, organising events and publicity. The staff team is employed by the host organisation, North Bank Forum.

Annie Thompson, Partnership Co-ordinator

Annie’s experience and qualifications include:

- A nursing career spanning 30 years
- An MSc in the Care of Elderly People (Gerontology)
- Post Graduate Certificate in Education and a
- Diploma in Neurological Care
- A past member of UNISON’s National Nursing committee to scrutinise and advise on the effect of Government policy on the ability of nurses to deliver effective patient care
- A past member of UNISON’s National Women’s Committee charged with promoting equality in all aspects of life for women
- Working for Help the Aged to develop Older People’s Forums
- Working for Epilepsy Action establishing and developing local branches (support groups)
- Management qualifications and experience of managing staff and volunteers
- Project management
- Grants assessment / awarding and budget holding

Helen Patching, Project Support Officer

Helen’s experience and qualifications include:

- An honours degree in History and Sociology
- Working for a variety of public and private sector organisations
- Organising museum educational visits
- Writing educational resources/sessions
- Grant applications
- Maintaining budgets and restricted funds
- Database management
• Handling enquiries
• Training as a Family Matters parenting facilitator

**Carol Pack, Research and Information Officer**

Carol’s experience and qualifications include:

• An honours degree in Education
• Teaching students (16+) and adults, including designing and developing training materials
• An MSc in Information Processing
• 14 years local government experience in North Yorkshire and York
• Managing and recruiting staff
• Project and budget management
• Marketing and PR experience, including email marketing and promotional stands at exhibitions
• Research and development of business opportunities for public and private sector organisations
• Writing reports for elected council members and senior council staff

**Barbara Hilton, Membership Development Officer**

Barbara’s experience and qualifications include:

• An honours degree in Zoology
• Working as a biologist in the water industry
• Leading a number of Government and industry funded research projects
• Writing specialist reports, papers and guidelines
• Recruiting farmers and landowners to grow biomass fuel crops
• Lecturing under and post graduate university students
• Organising and running promotional stands at exhibitions and conferences
• Publicity and website management
• Writing feasibility studies for utility companies, power generators, local authorities and businesses
York’s Local Involvement Network

Holgate Villa
22 Holgate Road
York
YO24 4AB

Tel: 01904 621631

E mail: admin@yorklink.org.uk
Web: www.yorklink.org.uk

York LINk is a project hosted by North Bank Forum. The North Bank Forum is registered in England and Wales as a Private Company Limited by Guarantee No. 5206464 and a Registered Charity No. 1107013.