

1.	Relationship with ABMU Clinical Governance Committee and Hywel Dda CGCommittee.	<ul style="list-style-type: none"> ▪ Rhian Bond was on HD LHB, now on ABMU . ▪ Have a joint CG Agenda ▪ HD and HD LDC concerned about ABMU centralization. 	It was confirmed that ABMU could not take responsibility for HD CG issues, however if HD want to adopt ABMU policies and use through their own CG process.	
2.	HTM 01-05	<ul style="list-style-type: none"> ▪ ABMU would consider implementation of essential requirements as a GDS contract requirement by April 2012. ▪ ABMU would consider it appropriate that practices have A Best Practice implementation Plan by April 2013, making this a contractual requirement in April 2012. 	HTM 01-05 was fully discussed, and it was felt that past submitted data by GDP s shows that essential requirement implementation would not be an issue. ABMU were aware of the difficulties that certain practices would have in achieving Best practice, in relationship to building design, and financial considerations.	
3.	Medical prescribing.	<ul style="list-style-type: none"> ▪ Performers were issued with individual Rx pads. ▪ DF1 used the same pads as trainers.(similar to GP s) ▪ 1000Lives + audit. ▪ ABMU looked at the SDCEP document, and felt this was the appropriate document for practitioners to follow. 	Scottish Dental Clinical Effectiveness Programme document Drug Prescribing For Dentistry. ABMU would be holding educational study days and this document would be highlighted.	
4.	Clinical Audit	<ul style="list-style-type: none"> ▪ Trusts looking at audit tools much more. ▪ 1000 Lives + 		

		<ul style="list-style-type: none"> ▪ Looking at returning audit as a directly stated contractual obligation. 		
5.	Postgraduate education	<ul style="list-style-type: none"> ▪ Higher Cert. in DNursing- 1 year programme, 1 nurse for 2 days a week . ▪ Endodontic Course ending at Morriston, but becoming a diploma course run by Glamorgan University ▪ Huge changes in DF1 with centralization of the registration process. 	<ul style="list-style-type: none"> ▪ HCert training practices linked to DF1 training. ▪ BOGOF offer at present ▪ The endo course would be a 2 year programme, linking to DwSi status. 	
6.	Access and waiting times	<ul style="list-style-type: none"> ▪ HDS 26 weeks. ▪ Looking at secondary care/ primary care treatment and capacity. ▪ NPT held a small waiting list ▪ Issue of practices holding a waiting list. 	<ul style="list-style-type: none"> ▪ LHBs holding a waiting list becomes a CHC problem, hence phasing out visible waiting lists. 	
7.	LHB run training events	<ul style="list-style-type: none"> ▪ Oral surgery referral guidance. ▪ Dental Pilots. ▪ Protection of vulnerable adults. 	No dates as yet, but T.B.A	