

CHAIRMAN'S REPORT 27TH APRIL 2012

Since my last report I have attended the following meetings on behalf of the LDC.

1. February 2nd the restorative working group
 2. February 10th an out of hours review group (report by Roger)
 3. February 15th the LDC/LHB liaison group (report by Roger)
 4. February 17th the domiciliary sub group
 5. February 24th information portal development meeting
 6. March 2nd a full day of educational sessions at PTRC (report by Tony)
 7. March 7th the oral surgery sub group (report by Rhian)
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1. The meeting of the Operative Working Group (restorative dentistry) was held in Morriston hospital on the 2nd February with Mr James Owen in the chair. An objective of the meeting was to verify acceptance of the revised referral proforma and referral criteria for acceptance of patients into advanced primary and secondary care. The LDC has had the opportunity to consult on these papers in draft and their text has now been accepted as fit for purpose.
A scoping exercise is being carried out to assess the potential for the development of the workforce in restorative dentistry so as to employ specialists and mono-speciality DWSIs within primary care in order that the consultant service can focus on more complex patient needs.
Along with the creation of a clinical network the group is looking at demand on the service and this appears to highlight endodontics and prosthetics as the areas of greatest pressure.
Restorative dentistry is to be developed in a dual centre model at Morriston and the PTRC and this will allow the possible development of a post graduate training facility for developing accredited DWSIs, a function which has already been set in motion by the inauguration of a diploma course in endodontics.
It is envisaged that funding for new restorative specialists and DwSIs would come from the creation of a new restorative enhanced UDA attached to a PDS contract.
The group is also keen to support and help develop the new speciality of Special Care Dentistry and improve the provision of Paediatric Dentistry in ABMU.
 4. The Domiciliary Subgroup meeting was held in NPHS offices in Oldway House Swansea 17th February and Ilona Johnson was in the chair. An interim review of the audit of Domiciliary Care Providers in ABMU was presented to the group and from the results It was evident that there is no consistent policy across ABMU in relation to Domiciliary care . Only a small number of providers have the recommended

equipment to provide domiciliary dental care and the majority do not meet the recommended standards outlined in the guidelines .Although most providers have been trained in managing emergencies , the majority have not received training specific to domiciliary care.

The full ranges of domiciliary care treatments are not available to patients in ABMU. Recommendations from the audit will follow which will include a proposed referral proforma and acceptance criteria and these draft proposals will be put before the committee for discussion.

5. A meeting was arranged at Morriston hospital on February 24th to discuss the development of a Dental Information Portal.

There is without a doubt a need for a facility to support the information needs of GDPs and the proposed portal should be set up to provide relevant information in an easily accessible form with quick retrieval at the point of care. Topics could include CPD courses, clinical information, administrative help, referral criteria and proforma ,real time access to waiting time lengths, audit info etc etc. The Scots already have such a facility but Wales does not. Communication of this quality is of such importance to us that Information communication and its development is going to be an agenda item at our next meeting.

Dave Westcott