

Action Points: ABMU LHB Clinical Governance Committee for Dentistry: Meeting 18th June 2013 3pm.
Ewart report to LDC meeting.

Agenda Ref	Agenda Item	Action	Lead	Ewart notes for LCD
(AP1) 2i.	Direct Access to DCPs	Monitor the situation CDS to look at their own therapists and future development CR Oral Health Plan for ABMU to include the use of therapists	CR/DD	ABMU aware of a hear post looking to open a clinic in Swansea/ Neath, however aware that this would be a private clinic, and that treatment still requires dentist prescribing if mediation/ la required.
(AP2) 2ii	Health and Safety (Sharps Instruments in Healthcare) Regulations 2013	HB to complete guidance CR to take to LDC next week	HB/CR	
(AP3) 2iii	Regulations and Standards for Domiciliary DC	HB to ask Angharad Truman (DF2) to prepare a piece of work for governance. DD to provide support with his CDS experience	HB/DD/CR	ABMU asked what was the required guidance for Dom visits. Original guidance was sent to practices and ABMU wanted to ensure that this was being followed by providers

(AP4) 2iv	DF2 Occupational Health Project	Find out what policy is available. Chris Wills-wood to be asked to put short paper together for HB to bring to next DCGC meeting(Sept)	HB	No real change/ progress, ABMU are that some staff had followed the referral pathway when receiving sharp injuries but on arrival at A&e , A&e unaware of guidance.
(AP5) 2vi	Learning Disability Pathway - final draft - APRIL-Version 3 (2) – ABMU Compliance for Dental GA patients.	DD to take to DSSPG.	DD	
(AP6) 2viii (AP7)	Conscious Sedation in Dentistry in ABMUHB	DD to update on Conscious Sedation in CDS next meeting. DD to write to KB on lack of awareness and available information on standards in the private sector on sedation	DD DD	ABMU unaware of private providers of sedation, stated that HIW would have an idea, however HIW it was stated were in turmoil
(AP8) 2ix	Dental assessment for patients about to undergo IV bisphosphonate therapy	DD to liaise with AM and David Drake on pathway development and update DCGC before distribution.	DD	Guidance was to be sent out based on David drake paper (to be honest there is no change on original guidance sent to gdps)' but to repeat the exercise was of value.

(AP9)2x	Final Wales Data Collection and Monitoring Analysis for LHBs (04-04-2013)	Record keeping checks to form part of the end of year visiting programme.	CR/RB	ABMU aware that dro report shows that ABMU practitioners performed poorly in comparison to other health board areas, they thought that an audit requirement would be required here, and felt they could request all gdps to undertake an audit in this.
(AP10) 2xi	Welsh Government Response to the Robert Powell Investigation	RB to email group the paper	RB	
(AP 11) 3(ap1)	3(AP1)Membership	KB to highlight this at DSSPG	KB	
(AP 12)3(ap2)	3(AP2)Membership from HD	KB to raise concerns	KB	
(AP13)3(ap7)	3(AP7)Occupational health	To be added to agenda for DSSPG	HB	
(AP14)3(ap10)	3(AP10)Reports from MCNs:	DD to forward to SCD MCN notes to KB	DD	

<p>(AP15)3 (ap12)</p>	<p>3(AP12)Clinical Audit and Peer RV</p>	<p>HB to email contract to CR</p>	<p>HB</p>	<p>I informed the committee on postgrad development of practice quality assurance set up, in line with welsh assembly paper quality assurance in dental practices 2012. 1000lives plus audits would be checked in QAS, and audit may well be a request from ABMU for all performers.</p>
<p>(AP16) 4i</p>	<p>Contract Performer Reports</p>	<p>CR suggested change in agenda topic to reflect more accurately the topic</p>	<p>CR/KB</p>	<p>The poor performers in the area, most issues had now been resolved.</p>