



www.morgannwgldc.org.uk

Chair's Report. 21/01/15

18/11/14 DSSPG Workshop.

This meeting was arranged to have a brainstorming session on the future strategy for dental services.

Representatives from all the different specialty's were invited and to give short presentations outlining their concerns with the present arrangements and suggestions for a way forward.

Groups were then divided up to discuss the possible ways of dealing with e.g. referrals and it was a general consensus that e-referrals could not come soon enough. Management of referrals will result in a system fit for purpose and highlighted the difficulties that all GDP's have at present with the different formats.

The recent incentives to encourage all GDP's to have an IT system in their surgeries was discussed as a high proportion of practices do not have any IT at all.

The delivery of the Local Oral Health Action Plan (LOHP) underpins all the strategy plans of the LHB and as it is an agreed plan with WAG, has to send regular updates on progress. D2S and prevention are always priority subjects and Domiciliary Care is to be another priority. GA pathways for child GA's and DWSP's in Endo are ongoing plans which are being monitored.

Steve Gould for his Ortho presentation made the point that Ortho did not have a mention in the LOHP by the LHB and also informed the group that Ortho MCN meetings would soon recommence. (the MCN meetings have resumed which can only be good for both GDP's and patients.)

Simon Hodder , consultant in Max/ Fax presented interesting statistics regarding Ca referrals etc. As a result your Chair decided to invite Simon to the LDC meeting in January 2015 to speak to the committee.

The next DSSPG meeting should see the strategies develop around the results of the workshop and also the LOHP.

04/12/14 Operative Dentistry Working Group.

I did not attend this meeting but the minutes were supplied very quickly and I can report the outcome of the meeting.

The appointed DWSI in Endo now works one day a week in Morriston. The post will be evaluated and a decision made after a year to see if this is affordable in the future by the LHB.

The RD/Special Care GA list in POW in Bridgend is working well and have received an award for service development.

A clinical care pathway for patients receiving radiotherapy for head and neck and for those taking bisphosphonate infusions for oncology treatment.

In the new development in Morriston, the initial request was for 4 surgeries for Restorative Dentistry which was then reduced to 2 by the Board. There is hope that a compromise for 3 surgeries has been agreed but this has yet to be confirmed.

11/12/14 Clinical Governance Meeting.

This was a long awaited meeting as so many had been cancelled throughout 2014.

There is always a huge agenda and this meeting had much to catch up on.

The referral forms and their need for review was discussed and together with an Oral surgery working group will look at all the forms for O/S and Max Fax to ensure that patients are being seen within an acceptable time frame and at the appropriate location.

A smoking cessation initiative for 3 months for GDP referrals was discussed. A fee of £7 was provided for each referral from a GDP. This is a Public Health Wales initiative and will report on its findings to the meeting.

HIW to be invited to the next meeting to discuss their role in Clinical Governance and maintaining standards in Dentistry.

19/12/14 LHB/ LDC Liaison Meeting.

There was a review of In Hours access which provided interesting statistics regarding the service and on which decisions will be made evidenced by its success and failings.

Discussions took place regarding wasted appointments etc. and the savings made over the pilot period. The LHB are determined to make this as efficient as possible in time spent managing and delivery. A workshop is to take place for all the GDP's involved at present and we will have a discussion at the LDC meeting to find out how GDP's feel about the present service and suggestions regarding any improvements.

An update on the delivery of the LOHP was given and the LHB are progressing with their plans.

Your Chair was concerned at recent commissioning decisions that had been undertaken by the LHB without consultation with the LDC as is required by Statute. An update will be discussed at the LDC meeting in January.

Rhian Paul.