

MINUTES	Date: 21 May 2026	
CED Board Meeting	Four Seasons Hotel, Limassol, Cyprus	
	Time Start: 09:00	Time end: 16:00
Chair	Dr Freddie Sloth-Lisbjerg, CED President	
Participants	See list attached	
Representatives of the Brussels Office	Nikoleta Arnaudova, Clara Luciani, Elif Dincher, Ainhoa Zamacona	

1. Welcome, quorum, and apologies		Rapporteur: Freddie Sloth-Lisbjerg
Working document	• List of participants	
All Board members were present with the exception of Vice President Anna Lella who sent apologies in advance due to national obligations. The quorum was established.		

2. Approval of the agenda		Rapporteur: Freddie Sloth-Lisbjerg
Working document	• CED-B-A-2026-02-E	
The agenda was approved.		

3.Notification of the Minutes of the Board meeting in March		Rapporteur: Freddie Sloth-Lisbjerg
Working document	• CED-B-M-2026-01-E/D/F	
The minutes of the last Board meeting were adopted by email. Board Director Robin Foyle pointed a linguistic discrepancy in the English version of the minutes.		

4. Declaration of conflict of interest		Rapporteur: Freddie Sloth-Lisbjerg
Working document	• Policy on conflict of interest (CED-DOC-2019-001-E-FIN)	
None of the participants declared any conflict of interest.		

5. Report from the President	Rapporteur: Freddie Sloth-Lisbjerg
The President reminded of: • The CED Policy event that took place in the European Parliament on 25 March 2026 • An online meeting on the 27 March with the CED Office and John Tzoutzas to discuss the European project on “Advancing knowledge on the impacts of micro- and nanoplastics on oral health” • His upcoming participation to the Swiss Dental Days (starting on 3 June 2026). • Upcoming visit to the CED office on 3 July, together with the CED Treasurer. • Reminder that the Board Meeting afternoon session will be joined by the Chairs of several of the CED WGs, except for Edoardo Cavalle whose travel schedule did not allow him to join. The President encouraged the Board to discuss the topics above.	
Board	• Discussed the European Parliament event and highlighted the importance of continuation of such events, as well as ensuring outreach to other stakeholders (both EU institutional ones and from the relevant CED and Brussels ecosystem) • Discussed the European project on nanoplastics and was reminded that the topic has been closed in terms of CED participation. Nevertheless, it was underlined that the topic of nanoplastics requires further focus and relevant CED members (e.g. Prof. Dr. Gottfried Schmalz) need to be included in future discussions. It was highlighted that this suggestion is given in cases of consultations, interviews etc. where dental knowledge is required (rather than for this specific project in question). • In relation to the European project, the Board also highlighted that there is not enough staff capacity for tackling such a project.
Decisions	• The Board agreed that upcoming policy events should ensure the targeting of other stakeholders and a continuation/call to action to build up on the momentum from the events. • The Board agreed that the topic of nanoplastics belongs to WG DMMD and could be tackled by it in cases where dental expertise is required for EU policy processes and activities. • The Board agreed that while for the time being becoming fully involved as a lead in an EU project would be difficult, opportunities need to be looked at on a case-by-case basis; in case CED is invited to provide expertise in a limited, clearly defined role, this could be considered based on relevance and benefit of the topic for the dental profession.

CED INTERNAL AFFAIRS		
6. Board agreements		Rapporteur: Freddie Sloth-Lisbjerg
The Board discussed several points: - The idea of considering proxy voting for future CED GMs, in exceptional cases due to external circumstances. The President underlined that this discussion is driven by the ongoing geopolitical insecurities and also due to concerns expressed by members in the run-up to the Cyprus GM. - Update on the Bulgarian Dental association and the decision to deter the payment of their fees for 2025. - Update on the recent informal meeting between CPME, FEDCAR and CED: it had the goal of discussion on article 55 of the Professional Qualifications Directive, and in general, to carry-out exchanges between all three organisations on the situation around health workforce, current concerns and advocacy activities. - Discussion on the use of the EU alert mechanism in Board members' countries, or the existence of any other existing mechanism for the reporting of malpractice.		
Board		• Highlighted the importance of maintaining in-person GMs as crucially important events allowing for exchange among the members, informal discussions, building and maintaining a community and a sense of commitment to the organisation. • It was highlighted that the CED can also organise meetings via teleconferences and the right provisions for that already exist in the CED statutes; hybrid meetings would remain a challenge, both for financial purposes and because it remains a priority to encourage physical presence. • On the topic of proxy voting specifically (namely in case members who confirmed in-person attendance are suddenly prevented from coming and the quorum of the GM is therefore challenged), it was highlighted that in their current form, the CED statutes forbid such possibility. • The President once again underlined that proxy voting, if made possible, would only be provided in exceptional circumstances and will not be offered as the norm. • The Board discussed Art. 55 of the PQD and highlighted that, while it is not currently under amendment, it is to be kept in mind for future legislative developments. • The Board exchanged on the EU alert mechanism and its use in their countries. • On the Bulgarian Dental Association, the President informed the Board that there are no changes since the previous discussion in March 2026.
Decisions		• The Board agreed that the proxy voting discussion should be continued to decide on the way forward and whether such a change is really needed and feasible. It underlined that such consideration would require a proper overview of the Statutes and great clarity of any new suggestions that would require a vote at a future GM. • The Board agreed that if Art.55 is to be discussed and changed, it would be CED and FEDCAR who should cooperate on the matter. The Board agreed that the topic should be explored further for the members' perspective within WG EPQ for next steps and any potential lobbying actions.
7. Finances		Rapporteur: Christof Ruda, Ainhoa Zamacona
Working documents		• CED Budget 2027 (CED-BUDGET-2027) • CED Final Accounts 2025 (CED-ACCOUNTS-2025-01) • Survey results on CED Sponsorship (CED-DOC-2026-026-E)

The Treasurer, Christof Ruda, presented the **2025 Final Accounts**. The result for 2025 was a **surplus of €126 928,93** which shows that big financial efforts are still undertaken. CED income was slightly higher than budgeted due to ERO's contribution for the European Manual. However the unpaid second instalment from Albania is now cancelled. Costs were slightly higher than budgeted in several accounts, including Communications and Translation costs.

On the other side, there were quite remarkable savings in Secretariat costs, meetings (except for the November GM), staff and personnel costs.

Christof Ruda opened a discussion on ways to reduce translation costs. Interpretation costs have already been reduced with the use of remote interpreters during the May GMs and we could look into ways to reduce the translations costs into French and German of non-compulsory documents. He also informed that the Board agenda has not been translated into German and French for this meeting.

The **2027 Budget** is based on a **2% increase in members' fees** and will end with a little surplus of around €1 800. The overall number of dentists has grown, however there are still some countries that have not provided the numbers and we had to use the numbers from previous years.

A proposal for a **new rental contract for our current office** was presented by the Treasurer.

The Treasurer informed that due to the reduced attendance to this year's GM in Limassol, mainly caused by security concerns, the **Cyprus Dental Association** is asking for **extra financial support** on top of the usual refunding of the technical equipment costs.

Christof Ruda shared the **results of the CED Sponsorship Survey** in view of the discussion on the subject that will be opened during the General Meeting. He reminded that there would be financial implications if CED gets sponsorships in the future: larger sums of money received through sponsors must be disclosed in the EU Transparency Register, and CED would be subject to VAT in Belgium, although an exemption can be asked for small sponsorship amounts.

Finally, the Treasurer announced that he will visit the Brussels office with the President on July 3rd to review the bank statements and discuss some financial issues. He also informed that we have received the **payment for the first instalment of the membership fees from most of the countries**. He reminded that Bulgaria, as previously agreed, will have more time to pay his fee this year

Board	• Asked for clarification on translation / interpretation legal requirements and discussed on ways to reduce translation costs in the future. • Asked for clarification on some points of the new rental contract proposed by the landlord. • Agreed that the CDA was very kind to host the May GM in these special circumstances so the CED should support Cyprus. • Discussed about the financial implications of a possible sponsorship and the formulation of the question about sponsorship to be asked to the General Assembly. • Charlotte Heuze suggested assessing the available possibilities of translating Board documents through the use of AI tools.
Decisions	• 2025 Final Accounts will be presented to the General Assembly • The Board agreed to present to the General Assembly the CED Budget 2027, with a 2% increase • The Board decided to stay in the current office after reviewing the current contract to reduce the costs. • The Board agreed to grant extra financial support to the CDA for the Limassol GM given the exceptional circumstances relating to the lower number of participating NDAs on this occasion, partly explained by the current geopolitical situation and limited travel options or complications. • The Board agreed to open a discussion regarding sponsorship during the General Meeting. The General Assembly will be asked to decide whether BTF Sponsorship should continue working on the subject.

The Board was updated on the following points:

- The publication of the latest CED Annual Report 2025.
- CED newsletters
- CED activities on social media
- Latest updates on the European Manual

For the last point, Clara Luciani updated on the status quo of country chapters, overall timeline and the collaboration with ERO.

9. BTF Internal Market

Rapporteur: Elif Dincher

The Rapporteur updated the Board on the following activities of the BTF:

EU Health Workforce Crisis Plan- Own Initiative Report:

At the latest meeting, the Chair provided an update on the 'EU Health Workforce Crisis Plan' Own-Initiative Report, noting that dentistry was not specifically mentioned in the current draft. Regarding the legislative process, it was reported that the file is currently awaiting a committee decision, with the Committees on Employment and Social Affairs (EMPL) and Public Health (SANT) responsible for its review. The final plenary vote was scheduled for May 18, 2026 but is now postponed further into summer.

OECD Health at a Glance 2025

The BTF members were informed that the OECD 'Health at a Glance' report now includes a brief reference to corporate dentistry. It was highlighted that this is a significant development, as it represents the first explicit mention of corporate dentistry in such a major institutional document.

Supportive Courses for Foreign-Trained Dentists

The BTF discussed a proposal from KNMT for the additional training for non-EU dentists to improve their adaptation to national healthcare systems. While the importance of ensuring educational quality was acknowledged, it was emphasized that professional regulation remains a national competency. The group discussed the legal constraints of imposing mandatory requirements on EU dentists, noting that any additional training must remain voluntary and not act as a barrier to the right to practice. Instead, the focus should be on addressing knowledge gaps regarding host countries' financial systems, patient rights, and ethical frameworks.

The consensus was that the CED should focus on sharing best practices and developing voluntary recommendations.

Recognition of non-EU qualifications

During the BTF IM latest meeting, the Chair and Marek Szewczyński provided an update on a non-public European Commission document regarding the recognition of non-EU qualifications. The Commission is assessing three potential policy approaches: enhancing transparency between Member States, streamlining procedures through shared deadlines and "tacit authorization," and potentially introducing automatic recognition for specific professions by accrediting non-EU institutions that meet EU standards. As dentistry is a harmonized profession, it was noted that these proposals could significantly impact the sector.

The BTF raised significant concerns regarding the proposed EU accreditation for non-EU universities, emphasizing potential risks to patient safety and educational quality. While acknowledging the dentist shortage across Europe, the consensus was that maintaining consistent standards must remain the priority. The Chair questioned the feasibility of effective oversight for institutions outside the EU, arguing that a robust and constant monitoring mechanism is essential and that simply listing accredited institutions is insufficient to ensure ongoing compliance with EU standards. The CED will continue to monitor these developments closely.

New publication: CED – ERO collaboration

Following the joint survey conducted with ERO in 2025, the results have been published in an academic article titled 'Corporate Dentistry in the European Union: Legal Frameworks and Structural Characteristics.' This publication provides a comprehensive analysis of the legal and structural impact of corporate actors within the EU dental sector.

The study reveals a significant shift in the European dental market, noting that dental chains are now present in over 80% of surveyed countries. Findings emphasize the urgent need for clear legal frameworks to safeguard patient well-being and maintain high clinical standards against increasing commercialization.

10. Board-only discussion

Rapporteur: Freddie Sloth-Lisbjerg

The Board-only discussion took place.

11. WG Patient Safety, Infection Control and Sustainability

Rapporteurs : Ioannis Tzoutzas

The Chair updated the Board on the following :

Renaming of the WG PSICWM

The Working Group has been renamed to the "Working Group on Patient Safety, Infection Control, and Sustainability." This adjustment reflects the transition from a narrow focus on waste management to a broader, more proactive sustainability mandate. By aligning the WG name with evolving environmental challenges, it aims to better address the dental profession's increasing vulnerability to external scrutiny while ensuring no overlap with other CED working groups.

Respirable crystalline silica (RCS) and BisGMA

- **Respirable Crystalline Silica (RCS):** A meeting was held with RPA Europe regarding the revision of occupational exposure limits. It was clarified that the dental environment is distinct from industrial manufacturing. The efficacy of high-vacuum aspiration and rubber dams was highlighted to demonstrate that dental practices maintain a significantly lower risk profile than industrial sectors.
- **Bis-GMA:** In response to technical inquiries from RPA Prague, and supported by expert input (Prof. Dr.Pala and Prof. Dr. Schmalz), the WG underscored that the GMA moiety within Bis-GMA is not readily released under clinical conditions. The ether linkage remains stable except under extreme laboratory settings, distinguishing its risk profile from pure GMA.

ECDC - Infection control policies among EU countries

The WG was informed of the upcoming initiative to engage with the European Centre for Disease Prevention and Control (ECDC) regarding an update to the "Infection Prevention and Control in Dentistry" section of their website. Originally focused on EU-based information, the ECDC page has expanded its scope to include data from non-EU countries. The objective of this update is to ensure that the resources and data represented for each CED member are current and comprehensive. In line with this, the CED members has been invited to contribute by sharing recent national publications, clinical guidelines, or relevant protocols issued by their respective associations. These contributions are currently gathering, and an official request will be submitted to the ECDC shortly.

ECHA's assessment of Ethanol

The ECHA Biocidal Products Committee has issued a positive opinion supporting the approval of ethanol for hand disinfectants and hygiene products. Notably, no new hazard labels were proposed as no definitive conclusion was reached regarding long-term health risks. The file is moving to the European Commission for a draft regulation, which will establish the legal framework for EU-wide product authorizations.

Water quality in dental clinics

The WG reviewed the status of the Water Directive and the need to continue monitoring water quality standards for clinical use. It was noted that municipal water supplies in some countries do not always meet the levels required for dental practice. Members were asked to share any national initiatives or directives from health authorities related to water safety in dental clinics to support a coordinated response.

While municipal water quality is generally high in many countries, concerns remain regarding bacterial contamination within internal piping systems. At the same time, the WG agreed that any future position paper should take a cautious approach, as

there is currently no statistical evidence indicating a higher risk of waterborne infections in dental practices compared to residential settings.

Members also emphasized the importance of avoiding additional administrative burdens, since existing national standards for dental clinics already ensure baseline compliance with drinking-water quality. Particular attention was drawn to practices in isolated or seasonal locations, where stagnant water in pipes during periods of inactivity may increase risks.

Protection from Ionizing Radiation:

At the latest meeting, the Chair addressed the rapid expansion of Cone Beam Computed Tomography (CBCT) across various dental fields, noting its higher radiation output compared to standard imaging. A discussion followed regarding the necessary qualifications and training required to operate these units. The Chair pointed out the regulatory diversity within Europe, for example, in Greece, a postgraduate degree in oral radiology is mandatory for purchasing and using a CBCT. The WG envisions a questionnaire on this issue to better understand the status quo.

12. WG Oral Health		Rapporteur: Vasileios Stathopoulos
Working documents	- Results from the Survey on Restorative dental materials following Regulation 2024/1849 (CED-DOC-2026-015-E) - Draft White Paper on Oral Health Promotion and Disease Prevention (CED-DOC-2026-027-E)	
The WG Chair, Vasileios Stathopoulos, updated the Board on the following activities and recent updates: Prevention and accessibility of oral healthcare The WG has been advancing the draft CED White Paper on Oral Health Promotion and Oral Disease Prevention in Europe over the last couple of months. A third version of the draft was presented to the WG on the 26 January. It was then shared with the designated expert, Professor William Papaioannou from the University of Athens. The WG received feedback from him on the draft on 16 April. The expert specializes in preventive and community dentistry and therefore provided comments and suggestions relating to the quality of life, common risk factors to associated NCDs, as well as technical input on periodontitis, the need to highlight the promotion of healthy habits. He also provided additional useful resources, included in the paper. Following the Board’s latest decision last 13th March, the WG also integrated into the paper a new draft on sodium fluoride. This paragraph essentially reiterates the CED’s main positions from the consultation feedback we submitted to the European Chemicals Agency in January 2026. After internal discussion, this paper will not be presented for adoption at the General Meeting of May 2026, but at the next GM in November in Brussels. A paragraph was also included on sodium fluoride. Obstructive Sleep Apnea (OSA) Following the Board’s approval of the latest Action Proposal Form regarding the project on obstructive sleep apnea, the WG has initiated its work and is currently drafting a white paper on obstructive sleep apnea. The paper will be shortly circulated for WG feedback. Any mention of chronic respiratory diseases and the role of the dentist in “diagnosing” OSA has been taken out of the proposal. Once the first draft has been finalised, the WG is planning to share it with an expert, Dr. Miche de Meyer, from the European Association of Dental Sleep Medicine based in Brussels, who initially reached out to the CED in November last year. Following the Board’s guidance, the WG will focus on the “supportive role” of dentists within the multidisciplinary team of generalist and specialist healthcare professionals. The coordinator of the draft will highlight three possible lines of intervention carried out by dentists across the management of OSA: this includes providing support with the initial detection of some OSA risk factors in routine dental examinations accompanied by the referral to the appropriate professional as well as the collaboration of the dentist in the treatment plan upon referral from a health professional, for the creation of individual mandibular advancement devices for OSA. For cases specifically needing the involvement, the WG will also briefly mention the role of orthodontists, and oral maxillofacial surgeons, still upon referral from sleep physicians, for carrying-out supportive care and orthodontic treatment for maxillary expansion in cases of severe misalignments. Consultation on EU Cardiovascular Health Checks. The WG also prepared and submitted an opinion to the Public Consultation on the Commission call for evidence for the development of a Council Recommendation for EU Cardiovascular Health Checks. This consultation is part of the three key flagship initiatives planned under the EU Cardiovascular Health Plan of the European Commission (also now named “Safe Heart		

Plan). It plans to develop guidelines for the implementation of cardiovascular screening programmes, including aligned procedures for early screening and diagnosis.

Vaccination

The CED is a member of the Coalition for Vaccination. It participated in the latest Coalition meeting on the 5th February. The Chair and Policy Officer participated in the meeting. The Joint Statement was co-signed and published following the event. The CED published it across its social media and website, and it was also published on an online journal dedicated to vaccinations. The Statement called specifically for an increase of vaccination coverage and stronger measures to address mis- and disinformation across Member States. The WG also closely monitored and followed the European Immunization Week that took place from 19–25 April 2026.

Survey on restorative dental materials

The survey on restorative dental materials (enquiring into alternatives to amalgam), was disseminated in January 2026, receiving 23 responses. The WG held a discussion on the results of the survey, and agreed that the results had limitations, with some biases in the answers and information given, including nuances that did not show up in the data. It was agreed that some questions were open for interpretation and there was further need to contextualize and clarify some points, including existing coverage schemes for types of composite fillings and other materials.

The coordinator explained that the overall objective was to paint a picture of the current situation of public treatment coverage and the barriers and lack of accessibility of patients to restorative treatments and fillings in Member States, including the evolution of the situation after the amalgam ban. A second short follow-up survey is therefore being prepared and will be shared within the WG to start with, to allow a continuation of discussion and a better understanding of the situation in different countries. This survey will be shared with the Board, if it is to be disseminated to the whole CED.

Sodium Fluoride

A submission to the Sodium Fluoride consultation by the European Chemicals Agency (ECHA) was prepared in January, in collaboration with the President and the Chairs of WG PSICS and WG DMMD. The WG will closely monitor the development of this file, but is not expecting a deliberation in 2026: the Agency has until the 4 April 2027 to publish its final opinion on the classification.

AMR

Dr. Alessandra Rossi is stepping in as CED representative to the Commission AMR One Health Network, in place of Harry-Sam Selikowitz.

Tobacco Tax Directive

Update on the advancements and concerns around the negotiations of the Tobacco Tax Directive.

Other topics

Lastly, future topics of work to be undertaken are currently being considered.

Board	• Miguel Pavão recalled the Board’s guidance in March to ensure the CED White Paper on Oral Health Promotion and Oral Disease Prevention in Europe remains a policy and not a scientific paper or a review of the literature. • The Board noted that the feedback to the action proposal on obstructive sleep apnea (OSA) was taken on board, with the paper focusing now on obstructive sleep apnea and not wider respiratory diseases as well as on the supportive role of dentists within a multidisciplinary team of professionals. • Miguel Pavão also raised the need to collect data on the number of dentists in Europe carrying out work relating to OSA. • The Board discussed the internal process of preparing and submitting feedback to EU consultations by CED Working Groups, and possible considerations to improve the efficiency and responsiveness of the CED to meet tight deadlines. Members noted the common short timeframe and notice given by the Commission in the case of some consultations and calls for feedback. • Members suggested focusing on preparing short responses to highlight oral health, in cases where the timeframe is short. • The Board agreed on the preparation of a follow-up questionnaire on Alternative Restorative Dental Materials but cautioned on keeping the questionnaire short and not planning any further work around amalgam.
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13. WG Dental Materials and Medical Devices		Rapporteur: Robin Foyle
Working documents	CED reply to the MDR Consultation (CED-DOC-2026-028-E)	
The Rapporteur updated the Board on the following:		
Medical Devices Regulation (MDR) Proposal		
The Working Group discussed the MDR proposal, focusing primarily on the shift toward indefinite certificate validity (Article 56). While the removal of the 5-year limit was welcomed, concerns were raised regarding the potential for regulatory inconsistency. It was noted that terms such as 'periodic reviews' and 'exceptional cases' remain subjective, granting Notified Bodies excessive discretion. To ensure a predictable framework, the WG called for objective definitions of 'exceptional cases', suggesting they be restricted to Class III devices, and urged for stakeholder consultation to establish reasonable review intervals.		
Regarding clinical evidence and equivalence (Article 61), the WG noted that the proposal offers greater flexibility by facilitating reliance on predicate devices without contractual agreements. While this shift could significantly reduce certification costs for incremental dental innovations, the absence of precise definitions for 'similar materials' and 'technical equivalence' was identified as a significant risk. The WG emphasized that standardized EU definitions for 'technical identity' are essential to prevent divergent interpretations and to maintain a level playing field across the Union.		
The discussion then addressed the horizontal definition of 'Well-Established Technologies' (WET), which aims to apply proportionate requirements to stable, low-risk designs. Despite supporting the move toward a more structured approach, the WG expressed concern over qualitative descriptors such as 'simple' and 'common.' It was argued that without measurable criteria or a clear 'Positive List,' these terms could lead to inconsistent assessments by Notified Bodies, potentially undermining the intended administrative relief for dental manufacturers.		
The WG also reviewed the proposed changes to Classification Rules (Annex VIII), which seek to classify all reusable surgical instruments as Class I. This clarification was deemed vital for the dental sector to avoid supply disruptions and unnecessary cost increases. However, it was also noted that for certain inherently invasive dental tools, a higher risk classification (Class IIa or IIb) might still be appropriate to ensure safety standards remain aligned with other surgical fields.		
Regarding the reprocessing of single-use devices (Article 17), the WG discussed the new requirement for manufacturers to scientifically justify 'single-use' labels. A significant legal point was raised concerning 'refurbishment,' as any entity performing this role assumes full manufacturer-level liability. To protect dental professionals, the WG proposed that reprocessable devices be clearly marked to ensure a definitive distinction between routine sterilization and technical refurbishment. Finally, the WG took note of the efficiency measures in Conformity Assessment Procedures (Article 52), such as representative sampling and remote audits, aimed at reducing the burden on lower-risk devices.		
Lastly, it was agreed that discussions regarding medical devices that may potentially fall under the WET category, considering their specific clinical use and risk profiles, will continue within the Working Group.		
Decisions	The Board agreed to the CED reply to the MDR Consultation.	

14. WG eHealth		Rapporteur: Peter Kukolik
Working documents	• UPDATED CED Resolution on Data Sharing as part of eHealth: Workflow, Prescription Protection and EHDS (CED-DOC-2026-025-E) • CED Reply to the Digital Omnibus Consultation (CED-DOC-2026-024-E)	
The Rapporteur updated the Board on the following :		
Digital Omnibus Consultation: The WG reviewed the Digital Omnibus proposal, noting the 13 March 2026 deadline for feedback. A primary concern was the shift from an objective to a subjective definition of personal data (Article 4). The WG warned that an "entity-specific" approach could allow companies to bypass GDPR via "technical blindness," potentially leading to "data laundering" through		

subsidiaries. Members reaffirmed that patient privacy must be prioritized over commercial interests, noting that big data sharing currently favors large corporations over independent dental practices.

Regarding Article 9 and 88c, the WG expressed skepticism over the "disproportionate effort" loophole, which allows sensitive data to remain in AI models if retraining is too costly. The group argued that AI "black boxes" make it technically impossible to guarantee data deletion. Furthermore, the WG opposed removing protections for "inferred health data" and relaxing the "strictly necessary" threshold for bias detection (Article 10.5). Such changes were identified as a strategic shift toward "general convenience" for developers, risking the commercialization of patient vulnerabilities.

In light of these discussions, the CED submitted its formal contribution to the Digital Omnibus on March 13, with a particular focus on safeguarding health data, classified as a special category of data.

Discussion on Previous CED Resolution Paper (2018) on e-Health:

The WG addressed the update of the 2018 Resolution to ensure alignment with the European Health Data Space (EHDS) framework. The revised draft includes a "Digital Workflow" section tailored to the dental sector and aligns e-Prescription and Data Protection policies with current CED positions. Outdated recommendations were removed while core professional principles were retained for legal clarity.

European Health Data Space (EHDS) – Commission Consultations

The Commission published two consultations regarding the European Health Data Space. In the first consultation feedback, concerning requirements for cross-border data exchange (MyHealth@EU), the CED expressed support for central terminology services while stressing that for specialized fields like dentistry, automated mappings risk losing essential clinical detail. It was highlighted that maintaining interoperability between local systems and the EU infrastructure is vital to ensure clinical accuracy and to prevent legal gray areas regarding professional liability.

In the second consultation on identity management, the CED stated that the privacy and safety of healthcare providers must be prioritized when patients access their access logs. It was emphasized that only the minimum necessary professional data should be disclosed to protect the safety of dentists. Additionally, the CED supported the right of healthcare professionals to request further identification details when necessary to ensure accurate diagnosis and treatment.

Following approval from both the WG and the Board, the two feedback documents were finalized and officially submitted.

Decisions:	• The Board agreed to recommend the updated CED Resolution on Data Sharing for GM adoption.
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15. WG Education and Professional Qualifications		Rapporteur : Katalin Nagy
Working documents	• ADEE and CED Joint Declaration on Undergraduate Dental Training and Clinical Standards (CED-DOC-2026-018-E) • Survey results on the Croatian Dental Chamber’s survey on Dental Workforce and Regulatory Frameworks in EU Member States (CED-DOC-2026-023-E)	
The Chair of the WG updated the Board on on-going work and recent developments relating to: Implementation Report on the Professional Qualifications Directive and Skills Portability Initiative The Board was informed last March of the publication of the long awaited PQD implementation report (for which the WG submitted a CED response to the related consultation in September 2024). The report highlights that the Directive has been playing an important role in the mobility of regulated professions, and in ensuring service quality and public safety. However, it also mentions that there are strong barriers remaining in the automatic recognition of professionals, including complex and time-consuming processes. The CED submitted its opinion to the related public consultation on the Skills Portability initiative last February. The WG will however continue to closely monitor the developments around the Skills Portability Initiative. Publication of a European Commission report on staffing levels The Report mentions, for example, that regarding defining staffing levels, the dental sector prioritizes flexibility and local adaptation. However, this report is limited, as there is very limited data showing the situation for the dental sector.		

ADEE and CED Joint Workshop and adopted Joint Statement

The Chair updated the Board at the last Board meeting of her participation, alongside the President and a policy officer, to the ADEE workshop organised in Copenhagen on Thursday 26 February.

The joint declaration adopted following the event was published on the CED website and social media in April. The WG hopes this is a first step for further collaboration.

EU Workforce Crisis Plan – Update

The Parliament Own-Initiative Report on the EU Health Workforce Crisis plan has seen severe delays in its adoption. The CED submitted alongside FEDCAR a request for amendment on the draft last year.

However, due to ongoing disputes and disagreements between the two committees in charge of discussing and adopting the report regarding the application of the sanitary cordon which prohibits cooperation with right-wing MEPs, as well as an extremely high number of received amendments (600 amendments), the adoption has been delayed.

Board	• The Board commended the adoption of the Joint Statement on Undergraduate Dental Education, in collaboration with ADEE.
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16. Any other business

Dates of next meetings:

- 18 September 2026, Brussels
- 26th November 2026, Brussels
- 5 March 2027, Brussels
- 20 May 2027, Lithuania
- May 2028, (Italy, date and exact place TBC)

PRESIDENT _____

BRUSSELS OFFICE _____