Dental Protection voices concern regarding Fitness to Practise procedures

On the front cover of the latest issue of Riskwise you will find an article that takes a close look at the GDC’s Fitness to Practise procedures which are currently operating at a level never before seen in the UK.

On a purely statistical basis, UK registrants are at least twice as likely as their colleagues in the USA and Australia (for example) to find themselves under some kind of challenge from their professional regulator, and they are several times more likely to do so than their colleagues in many other parts of the developed world, including Europe.

The article details aspects of the current GDC procedure which give rise to concern as well as offering support for the Council’s intention to review some of their procedures.

Speaking from their Edinburgh offices, Kevin Lewis, Director of Dental Protection said: “DPL has always taken an active role by working at the heart of the profession on behalf of the 70 per cent of dental registrants who are also DPL members. In addition to high-regarding, excessive regulation of the dental profession, we look forward to contributing to the GDC’s recently announced review of its existing guidance documents, with a view to producing new guidance in early 2012, in the hope that the concerns we raised in Riskwise will be addressed.”

“It would be very easy for Dental Protection to criticise from the side-lines, but we feel that it is more constructive and in the interests of our members to maintain a dialogue with the GDC and this is precisely what we are doing. However our members have a right to know what our position is on these important matters and the reasons for it.”

Fluoride debate

Resident Geraldine Milner is taking legal action to challenge the decision made in 2009 by the South Central Strategic Health Authority (SCSHA) to illegally force the fluoridation of Southampton’s water.

Southampton’s water, the High Court has heard.

The SCSHA, which believes the move will improve dental health, gave the go-ahead despite a public consultation showing 72 per cent opposed the idea.

According to reports, Ms Milner’s counsel David Wolfe told a judge that, if the scheme goes ahead, the mother of three teenagers would be left “with no choice but to drink water to which fluoride has been added”. As opponents of fluoridation demonstrated outside the Royal Courts of Justice in London, Mr Wolfe said approximately 195,000 people in Southampton and parts of south-west Hampshire “would have fluoride added to their water whether they liked it or not”.

He told Mr Justice Holman this was contrary to government policy that no new fluoridation schemes should be introduced unless it could be shown that the local population was in favour.

The SCSHA reportedly used statutory powers to instruct the local water supplier Southern Water to go ahead with fluoridation in February 2009 to improve dental health, even though 72 per cent of the public who responded to the public consultation opposed the idea.

However, the High Court also heard that an opinion poll commissioned by the SCSHA showed that 58 per cent were against the scheme, 52 per cent were in favour and the remaining 29 per cent were “don’t knows”, the court heard.

Reports said that Mr Wolfe accused the SCSHA of failing in its legal obligation to properly assess the cogency of the arguments for and against mass fluoridation. He added that the application for judicial review was not about the actual merits and health arguments over fluoridation. It was about the legality of the compulsory scheme, the first of its kind in the UK for 20 years.

Mr Wolfe said: “Four out of five local authorities and three out of four local MPs expressed their opposition within the consultation process”.

The hearing continues.

Maximising quality through competition

Health Secretary Andrew Lansley has outlined how the NHS must embrace value-based competition if it is to meet the future needs of the public it serves.

Speaking at the Maximising Quality, Minimising Cost conference, held by Monitor, the future economic regulator, and UCL Partners, the Health Secretary outlined how competition must be based on the quality of results for patients and not cost alone. Under the plans to modernise the Health Service, providers that deliver excellence will benefit from more patients choosing their service. Those that do not will have a strong incentive to change and improve.

A recent report from the European Association for Cardiotoracic Surgery showed that survival rates of heart surgery in England had improved as a result of the publication of outcome data by cardiac surgeons themselves. This drove competition and cooperation and forced up standards dramatically, delivering benefits for patients. This is an example of value-based competition.

Responding to concerns that competition leads to variation and divergence across the country, the Health Secretary said: “Despite the best efforts of the centre, variation already exists. The difference will be that future variation will be because local communities have chosen that variation. It will be the very opposite of the postcode lottery.”

Carlyle Group acquires dental service

Global alternative asset manager The Carlyle Group (Carlyle) has announced that it has signed a binding agreement to acquire Integrated Dental Holdings (IDH), from Bank of America Merrill Lynch Capital Partners (BAMLLCP), and subsequently refinance the associated Dental Practices (ADP) in partnership with private equity firm Palamon Capital Partners (Palamon). Carlyle will hold a majority of the newly combined entity and Palamon will share joint governance. BAMLLCP is fully exiting its stake in IDH. The proposed merger of IDH and ADP is subject to relevant regulatory approval. Financial details were not disclosed.

IDH and ADP are two leading providers of dental care in the UK, primarily focused on NHS dentistry, with close to 450 practices treating more than 3.5 million patients per year. Carlyle and Palamon will invest to enhance the quality of patient care and grow dental services.

Furthermore, this investment will facilitate the company’s diversification into other primary care services and cosmetic treatments. New equity for this transaction comes from Carlyle Europe Partners III (CEP III), a 5.4 billion euro buyout fund focused on investment opportunities in Europe.

Palamon Capital Partners had invested in ADP through its first fund, Palamon European Equity II, a mid-market pan-European fund focused on growth services businesses. In 2010 Palamon’s portfolio company profits grew by an average of 58 per cent; at the same time the Firm concluded six realisations generating almost 450 million euros of proceeds.
Editorial comment

Online training – the future

A n interesting piece of research has been published by the British Dental Trade Association (BDTA), looking at how dental practices are adopting new technologies within their surgeries.

The topics looked at included the adoption of computers and their use within the practice, imaging software and the move to digital and the influencing factors for product choices (good to see that editorial review is holding steady or I could be out of a job!).

The main topic of interest for me however, is the increasing acceptance of online education for dental professionals looking for options for CPD. Sixty per cent of respondents to the survey said that they were planning to participate in online training in 2011. Forty-three per cent state that they are looking to increase their online training provision; a further 45 per cent will maintain their online training at its current level.

These are by no means figures to be sneezed at. With the emphasis on quality and value for money these days, the convenience of webinars, online courses varying from short courses to full MSc degree programs, the ability to complete and store your core CPD remotely and securely and the ability to train not just yourself but the whole of your team using the power of the practice computer is a big advantage for hard-pressed principals and practice managers.

This is also good news for providers of online educations such as Smile-on Ltd. Subjects for this type of training also provided some interesting reading. Restorative topped the charts by a long way, with aesthetics/cosmetics second and endo third.

I am a big believer in online training; having watched webinars from both sides of the fence and seen the interactivity and knowledge used and gained by both lecturers and delegates. Distance learning is not new, but the level of interactivity and connectivity that online education can now give to students of all levels cannot be underestimated.

Online learning – it’s the future, and it’s here.

I am a big believer in online training

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Online training is the future
BDTA Donates to Bridge2Aid

The BDTA is pleased to announce the donation of nearly £1,000 to Bridge2Aid following the submission of completed membership questionnaires and technology surveys sent out last year. In order to assess how well the Association is meeting the needs of its members, questionnaires were sent out to each member company, and the BDTA offered to donate £5 to the Bridge2Aid charity for every questionnaire returned.

Executive Director of the BDTA, Tony Reed, stated: “It is important for us to understand the needs of our members in order to continue to serve them effectively and introduce new benefits. It is vital for our members to understand how the dental team respond to new technologies and the mix of training preferred. We were extremely pleased with the response achieved from the questionnaires and to be able to donate funds to Bridge2Aid made the research worthwhile on a number of levels. Thank you to all those who participated.”

Mark Topley, Chief Executive of Bridge2Aid, commented: “The BDTA has been a great support to us over the past 6 years and helped us to achieve so much – created tens of thousands of smiles and changing many lives in Tanzania. This donation will go a long way to helping us relieve the pain of thousands more people in the coming year and extend our work to new areas desperately basic dental services and training. Our thanks go to the BDTA for thinking of us in this way, and to all the members of the dental industry for completing their questionnaires”.

For further information on the BDTA visit www.bdt.org.uk

The LED smile

Forget Kanye West and his diamond teeth, Japanese schoolgirls could be the driving force behind a new era of fashionable teeth accessories. Instead of diamonds taking the limelight, these “fronts” contain bright multi-coloured glowing LED lights that simply fit in your mouth – minus the tooth loss.

Japanese schoolgirls have pounced on the product - which is being advertised as a ‘party in your mouth’ - and demand has gone through the roof.

This latest craze that is spreading across Japan works in two ways: firstly, the lights can be a variety of different colours, which can be changed wirelessly on a PC, and secondly they can be activated when you smile! You can even get a wireless hand-held computer which by which to control the contraption, making your teeth change colour - from a lurid green to demonic-looking red – or even blink. Of course they work best in the dark!

The new fashion accessories, which are quickly becoming a sort after accessory, were originally created as an experiment by two Japanese designers; however they are now being used in a commercial advertising a winter sale at a Japanese clothing store, Laforet Harajuku.

Reports have said that Mo-to Ishibashi, one of the designers involved in the project, explained in a blog post that the original idea for the LED smiles came after he saw a video last year of LED Throwies, which are little lights that can be affixed to a magnet and thrown on metal surfaces. They are like lighted graffiti.

Mr. Ishibashi and Daito Manabe, the other designer and technologist on the project, are reportedly offering workshops in Japan showing people how to build their own LED smiles.

Dental property firm acquires first assets

Dental Property Holdings (DPH), a new niche commercial property investment firm, has completed £1.2m in property acquisitions from one of the UK’s leading dental operators. The five sites, purchased on a sale and leaseback basis, are located in Chelmsford, Wigan, Leicester, Milnthorpe (Cumbria) and Llandeli, and represent the initial assets purchased by DPH in an ambitious programme of investment which aims to acquire £10m of new properties in this year. This follows recent changes in UK legislation allowing dental practices to be sold as leasehold, allowing corporate dental groups undertaking aggressive acquisition strategies resulting in rapid consolidation, increased revenues and higher margins.

Co-founder of DPH, Patrick Ryan, explains: “Dental practices now provide attractive investment opportunities for large, private equity-backed dental groups. However, their aim is to operate and profit from dental businesses, not from property and property management and so our offering allows for simultaneous acquisition of the operating business by the dental group and the purchase of the property asset by DPH. This saves dental groups between five per cent and 10 per cent of acquisition and onward disposal costs as well as significant management time. DPH source, appraise and manage the properties which, due to our portfolio approach, benefit from cost and management efficiencies.”
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Missed dental appointments costs patient care

Patients failing to attend NHS dental appointments in England could be denying significant numbers of other people the chance to access care, according to a survey by the British Dental Association (BDA). The survey suggests that committed NHS dentists in England each lose the equivalent of almost two weeks a year because patients fail to turn up for appointments. The BDA believes that the research highlights a problem of a significant scale and that the option to charge a fee for missed appointments, abolished as part of the widely-criticised 2006 reforms to dentistry, should be reinstated.

If the experiences of the dentists surveyed by the BDA reflect those of predominantly NHS dental practices across England, the research would indicate more than three-and-a-half million dental appointments were missed last year. Responses to the BDA research suggest that the problem is more prevalent among new patients than those who have been visiting a practice for many years. They also suggest that the problem has become more acute since dental practices’ ability to charge patients for missed appointments was abolished in 2006.

John Milne, Chair of the BDA’s General Dental Practice Committee, said: “Sometimes there are genuine reasons why it’s just not possible for a patient to keep an appointment with their dentist and everybody understands that, but the results of this research suggest that the scale of this problem is significant.

“Dental surgeries use letters, telephone calls and even text messages to remind patients of forthcoming appointments, so it’s really disappointing to see that so many people appear prepared to deny others access to care by failing to show up. This not only wastes dentists’ time, but also taxpayers’ money. With many people still failing to secure the dental appointments they want, and the public purse under pressure, that’s simply unacceptable. This problem needs to be tackled and the BDA believes that the Government should consider reintroducing a fee for patients who miss appointments to deter them from doing so.”

GDC event in Birmingham proves popular

Registrants are being urged to book early for the General Dental Council’s events in Edinburgh and Cardiff after all the available spaces were quickly snapped up in Birmingham.

As the UK’s dental regulator, the GDC wants to meet its registrants face to face in a bid to help dental professionals learn more about how its work affects them, help shape its review of its Standards guidance, take the role of a GDC Investigating Committee and get the answers to questions they want to ask.

The GDC has arranged four free events across the UK that can count as two hours of verifiable CPD. The Birmingham event on 17 February 2011 has been fully booked well in advance of the event.

Booking is now open for two further events in Edinburgh on 23 March and in Cardiff on 25 May at www.gdc-uk.org.

Patients are missing out on care