Clinical photography course

The learning resources provider, Smile-on, is now offering dental practices training in how to take high-quality clinical photographs.

Its Clinical Photography Course by Chris Orr, is available on-line or as a CD-ROM, so it can be easily incorporated into and around the working day. The course introduces the role of clinical photography in effective risk management and explores straightforward solutions to treatment monitoring and how to benefit from robust medico-legal protection.

It provides two hours of Continuing Professional Development and shows dental professionals how to keep patients fully informed using high-quality images, and how to support comprehensive clinical audits.

The course explores how to get great image results, focusing on eight key clinical areas, and participants receive non-obligatory advice on digital cameras and the latest in digital imaging.

A spokeswoman for Smile-on said: ‘With excellent clinical photography skills, participants will be able to accurately record treatment progress and development, create ‘baseline’ records of pre-existing conditions, enjoy a higher standard of referral correspondence and use the images to support professional development.’

For more information call 020 7400 8989 or email info@smile-on.com

New dean for FGDP

Mr Ladwa wants to continue the Faculty’s work to improve standards of patient care through education and training of the whole dental team.

He said: ‘I am honoured to be called upon to serve this Faculty which has done so much to raise the profile of general practice and to serve the profession that has been so kind to me.’

Mr Ladwa has been involved with the Faculty of General Dental Practice (FGDP) since its early days and became a board member in 1984. In the intervening years, he has taken on the roles of examiner and assessor of several of the FGDP(UK)’s diplomas, and acted as deputy director of the Leadership and Management Certificate programme.

Mr Ladwa has twice been vice dean and has chaired the FGDP(UK)’s examinations and education committees, and its international working party.

Richard Hayward said: ‘Russe brings a wealth of experience and a depth of knowledge to this role. He is dedicated to the FGDP(UK)’s mission and I wish him well for the next three years.’

Mr Ladwa will be supported by vice deans Vernon Holt and Charles Ormond.

Professor calls for more prevention

The head of an inquiry into dentistry has criticised the new NHS dental contract for not producing more preventative dental care.

One of the aims of the new contract introduced in 2006, was to free up time for dentists so they could spend more time with patients promoting oral health.

However, Professor Chris Drinkwater, who is carrying out a review for the British Dental Association, is concerned that in many areas this is not happening.

Professor Drinkwater, who is president of the NHS Alliance, which represents NHS staff working in the community, said: ‘It seems reasonably clear that the contract is not allowing a more proactive approach to preventative dental health.’

He believes it could be because of the way the contract is being implemented and may also be an issue with funding.

He added that clinician engagement is also problematic and it is something that needs addressing.

The inquiry was set up after the publication of a critical report by the House of Commons’ Health Committee last year.

However the government, which is also carrying out its own review, claims preventative health care has ‘increased substantially’.

Chief Dental Officer Barry Cockcroft said: ‘Prescription of high concentration fluoride toothpaste rose by 153 per cent in 2006-7 and sales of topical fluoride varnishes have increased dramatically.’

The review was set up last month as an independent commission into NHS dentistry and is expected to produce a final report in September this year.

It is expected to concentrate on four major areas of work including innovative and flexible commissioning, integrated primary care services, developing oral health in SHAs and PCT strategies and incorporating patient experience including access into commissioning.

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