Become a Fellow of the BACD

The deadline is approaching for accredited members wanting to become Fellows of the British Academy of Cosmetic Dentistry (BACD).

The highest and final stage of the BACD’s Career Path in Cosmetic Dentistry, Fellowship is aimed at those working at an advanced level who are also sharing their knowledge with the rest of the profession.

The Fellowship is open to accredited members who have either published a scientific article on a clinical subject related to cosmetic dentistry in a peer-reviewed publication, or have given a postgraduate lecture at a BACD meeting or another national or international conference.

A spokeswoman for the BACD said: “The BACD is committed to promoting clinical excellence through education and professional development.

“For accredited members, achieving BACD Fellowship indicates excellence in interdisciplinary treatment planning and the execution of complex treatments to consistently high standards.”

Tougher action to support medicines supply

A package of tough new actions to ensure that NHS patients can get the medicines they need was agreed at a summit to discuss concerns about current difficulties with the supply of medicines, hosted by Health Secretary Andy Burnham and Health Minister Mike O’Brien yesterday.

The actions that were jointly agreed between the delegates include:

• A more explicit duty for manufacturers and wholesalers to ensure that sufficient stocks of medicines are available to NHS patients;

• A series of targeted inspections by the Medicines and Healthcare Products Regulatory Authority;

• Tougher standards for the issue of licences for medical wholesalers; and

• Development of best practice guidance on how supply difficulties should be dealt with by healthcare professionals, pharmacists, manufacturers and wholesalers.

The targeted inspections mean that manufacturers and wholesalers will risk losing their licences and face prosecution if they breach legal duties on supply of medicines. Pharmacists and doctors risk being called to account by their professional bodies for breaching their ethical obligation to put patients first.

Ministers met with a number of pharmaceutical supply chain stakeholders from across the UK – including the Association of the British Pharmaceutical Industry, the British Association of Pharmaceutical Wholesalers, the National Pharmacy Association, the Pharmaceutical Services Negotiating Committee and the Medicines and Healthcare products Reg-ulatory Agency – to discuss the nature and scale of medicines supply problems and how the issues can be tackled collaboratively.

The issue of medicine shortages was raised publicly last year when some pharmacists and patients found it difficult to get hold of certain drugs, as a result of a number of unscrupulous traders exporting medicines meant for NHS patients to Europe for profit, because of the cheaper pound.

Health Minister Mike O’Brien said: “We have reached agreement on a way to help NHS patients get the medicines they need. Manufacturers, wholesalers, pharmacy bodies, regulators and Government all agreed to work together to resolve the issue.

“The lower value of Sterling has resulted in some medicines destined for NHS patients being sold abroad for extra profit by a small number of unscrupulous speculators. Some pharmacists have had trouble getting hold of certain drugs because of this. For months, I have been seriously concerned about the potential impact of this on patients. It is unacceptable that some people have already had to wait longer than they should have to get their medication. Patients must come before profits.

“This new package of measures will help to ensure that NHS patients do not suffer and get the care they need when they need it.”
GDPUK round-up

The GDPUK online community is always keen to air and share its views, but this month members reveal an anarchic side, says Tony Jacobs

The specter of HTM 01-05 has really made a difference. Colleagues are making all sorts of plans, some with their tongue in cheek, and sometimes wishing for a revolution.

One discussion started with the concept of practising “underground” – could this be done in modern Britain? Only treat a limited number of people you know, ask them to maintain secrecy, de-register from the GDC, the PCT and all the paraphernalia of dental governance, hide from business rates, the taxman, banks, CQC. Cut governance costs, maintain standards, how much would fees reduce? Is it possible, would the snoopers find the dentist and what would happen? Intriguing? Jail?

Thoughts of civil disobedience with regard to the dreaded HTM document are rising. Will dentists march on Parliament? The British Dental Journal editor called for colleagues to create a quiet revolution by telling every patient what this political plan would cost each patient, without spoon-feeding their readers on how to go about this. How much patients’ money will be wasted? Plus the environmental cost is huge, the thought of which alarmed a further group of patients.

A NICE topic

One GDPUK reader reminded us all that it is possible for anyone to suggest topics to NICE for their consideration, using a form on the NICE website. A number of GDPUKers have now done this, and more will be sought to do so. It is simple – there are many reasons why this document is political, and does not lead to a health gain for the patient.

Linked to the odorous HTM, an alarming tale was told by a dentist trying to conform with its regulations. He went to occupational health to have a blood test for Hepatitis B antibody. The nurse explained a number of things, checked for BCG scar, tried to administer MMR vaccine, was rebuffed, then announced she would test for HepB, HepC and HIV. The dentist would then not be allowed to work until the results were in. When a discussion followed, the nurse warned him he could not leave until he had given blood for this purpose. In addition, he had to produce photoID, but was not allowed to leave until this was produced, so his wife had to leave work, and bring a passport from home to the hospital.

Many intelligent readers could not count how many human rights had been trashed in this incident. The dentist has now complained to the chair of the Trust, and no doubt there will be more information to follow. This seems to be a warning as to how occupational health deals with dentists. One the best pieces of advice was to anyone faced with this situation – produce your mobile phone with voice recorder, even if you don’t know how to make this work, remind the threatening nurse that she does not have your consent, and you are recording the conversation.

To find out what happens next... join and read at http://www.gdpuk.com.

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