**GDPUK Roundup**

Tony Jacobs discusses this month’s hot topics

GDPUK is busier than ever in the autumn, with over 9,000 different colleagues visiting the site during the month. Colleagues reading the forum are also looking forward to the upcoming GDPUK Conference in Manchester see [www.gdpuk.com](http://www.gdpuk.com)/Conference2010. Concerns about the CQC and HTM0105 continue to dominate discussions; these are clearly the topics at the top of the agenda for all dentists.

The enhanced Criminal Record Bureau check for dentists demanded by the CQC has raised ire amongst forum members, for many reasons. CQC spokes-

ers have always stressed that the role of the registration was to protect the public with regard to the premises – are they safe for the public and are processes and procedures correct? In other words, regulating the provider. The GDC remains responsible for making sure the public is treated and cared for by suitably qualified professionals, the performers. So why the CQC needs to make all dentists have a further CRB check is questioned. All the forms necessary for this must be taken personally, by every single dentist, together with passport photos and further proof of identity to a Crown Post Office. There are only 27 of these Post Offices in England, and many dentists will have to spend time traveling and queuing at that office, possibly a full day. For example, for the whole of Yorkshire, about two thousand dentists, there is one such Crown Office, in Leeds. Imagine the queues if all 2,000 visited on one day! As one senior, notable colleague wrote in the forum “what sort of moron sits in their glass palace in Westminster and thinks up ideas like this?”

Back to the HTM 0105 document that continues to dog the profession: One concern has been that washer disinfectors, in their final heat cycle, bake proteins onto stainless steel instruments. The top of the agenda for all dentists. DII are now rebutting this, hav-

ing commissioned research at the University of London. This research will be published in due course. Some GDPUK correspondents still believe that it is best not to buy or use one of those machines, and that it is not need-
ed to reach “essential requirements” but required to reach “best practice”.

In the same vein, a dentist wrote (in a dental discussion in another dental publication) that after 55 years in practice the latest wave of regulations, paper-

work and interference were too much, and retirement beckoned - even though the dentist insist-
ed he enjoys his daily work, and finds helping patients daily to be rewarding. I found it uncomfort-
able to read that so many agreed with his sentiments.

Creating new documents for consent to various procedures have been discussed, and will be shared in the files section of GD-

PUK. Apparently, when questions about this are put to lawyers, these days, they insist that risk of death is placed as the number one risk at the start of all these documents. Patients could have a reaction to local anaesthetic, and this reaction could ultimately be fatal, so perhaps this warning should be to all dental consent documents? Would you be comfortable warning every patient of this? That is a sobering thought for us all.

---

**About the author**

Tony Jacobs, 52, is a GDP in the sub-
turfs of Manchester, in practice with partner Steve Laza-
ners at 406Dental (www.406dental.co.uk). Nowadays, he concentrates on GDPUK, the web group for UK den-
tists to discuss their profession online, [www.gdpuk.com](http://www.gdpuk.com).

Tony founded this group in 1997 which now has around 7,000 unique visitors per month, who make 15,000 visits and generate more than a million pages on the site per month. Tony is also GDPUK.com in the liveliest and most topical UK dental website.