GDC to review its Standards and Scope of Practice

The General Dental Council (GDC) has begun a review of its ‘Standards Guidance’ and ‘Scope of Practice’. It has been five years since the GDC published its ‘Standards Guidance’ and replaced its previous guidance document, ‘Maintaining Standards’. The move to ethical principles was a significant change in direction at the time, however, in the last five years the landscape of the regulatory world, and the GDC itself, has changed.

The GDC now registers the entire dental team – dentists, dental nurses, orthodontic therapists, dental hygienists, dental therapists, dental technicians and clinical dental technicians – and has more than 92,000 dental professionals on its registers.

The aim of the Standards Review is to go back to square one. The GDC will be asking registrants, patients and other stakeholders what level of detail they would find helpful, what they think of the current standards, what works, what doesn’t and what’s missing. The review will take place throughout 2011 and will include consultations, focus groups, a working group and GDC staff attending events across the UK to hear directly from those affected.

Anyone who wishes to make any comments directly to the GDC on the current guidance can do so here (standards@gdc-uk.org).

A call for feedback on ‘Scope of Practice’ will be launched at the end of January 2011 and will be available on the GDC website www.gdc-uk.org. The forum will ask registrants to give their views on the document, stating whether they think the dental team work together more effectively; they can also lead feedback on what skills may need to be added or amended for each of the seven registrant groups.

Dental technician David Smith, Chair of the Standards Committee, said: “The reviews of both of these documents could result in a radical re-design of the GDC’s guidance for registrants and it’s therefore extremely important that we hear from everyone who will be affected and make the right changes. The standards are the main ethical guide that we expect dental professionals to apply to their everyday work. This is a significant piece of work for the GDC and one that we anticipate will have a positive impact on dental professionals and therefore on patients.”

Oral health study wins SGH funding

A grant of more than £500,000 has been awarded to a study that will investigate the effect of social deprivation on oral health in outer north-east London. The project, which beat off competition from eleven other proposers to secure funding from the Shirley Gillespie Hughes Trust Fund, will investigate whether people living in deprived communities define oral health differently from their peers living in less deprived areas. It will also assess whether individuals’ concepts of oral health affect the way that they care for themselves and what barriers exist to the way that they care for them.

The study will consider the population of Redbridge, Waltham Forest and Barking and Dagenham, and use patient concepts of oral health to ask whether deprivation can explain why some individuals engage in behaviours such as smoking, excessive alcohol consumption and irregular visits to a dentist, which increase their risk of oral diseases.

It will assess the strengths and shortcomings of the way oral health services are provided, providing evidence on how to adapt existing structures and develop new services and interventions that overcome barriers to care. It will also provide evidence to underpin models of commissioning care.

Professor Liz Kay, Chair of the Trustees of the Fund, said: “Despite an overall improvement in the oral health of the UK over the past four decades, a persistent and unacceptable chasm between those with the best and worst oral health persists. Understanding why we have this gap is crucial to addressing this situation. The trustees hope that this piece of work can make a significant contribution to expanding that understanding and helping to develop practical tools to address it.”

The project will be led by Dr Russ Ladwa (pictured), Dean of the Faculty of General Dental Practice at the Royal College of Surgeons of England in London. It will be hosted by the Institute of Dentistry at Barts and The London School of Medicine and Dentistry.

Thanking the trustees, Dr Ladwa said: “The award of this grant represents a great boost to research in primary care. The FGDP(UK) will work in collaboration with the host institution, Barts and The London SMD, Queen Mary University of London, which has a tradition of research in health inequalities. Both the Institutions are delighted to be given the opportunity to carry out research that will provide evidence to develop cost effective models of delivering prevention and treatment in primary dental care.”

EAO announces the winners of its 2010 Research Competitions

The winners of two coveted research prizes, awarded annually by the European Association for Osseointegration (EAO), have been announced.

The EAO Clinical Research Prize for 2010 has been awarded to Maurizio Tonetti from Italy and his team, the EAO Basic Research Prize to Pascale Habre-Hallah from Lebanon and Ulircke Kuchler from Austria.

All three winners were chosen from eight finalists. A total of 500 abstracts submitted to the EAO Congress in November 6-9 October 2010. Each winner received a Diploma from the EAO and a prize of 2,000. The 18 finalists had earlier been selected from nearly 500 abstracts submitted to the EAO Congress.

Maurizio Tonetti and his team won the EAO Clinical Research Prize for their study: “Immedi- ate vs delayed implant placement in anterior: The TIMING randomised controlled clinical trial”. The multi-centre study, which compared the benefits and disadvantages of immediate and delayed implant placement, was chosen from eight finalists.

Pascale Hahre-Hallah won her prize for a study entitled “IMRI shows cortical activation following mechanical stimulation of oral implants”; and Ulircke Kuchler for a study entitled “Intermittent PTH fails to stimulate osseointegration in diabetic rats”.

Smile 4 Life in Lancashire

Health minister Lord Howe said that Smile4Life has launched in Lancashire to new scheme aimed at improving the oral health of young children. The project, which is a partnership between the local authority and the NHS, has been established to tackle the oral health issue, and I hope others will follow suit.”

A number of new dental practices have recently opened in Lancashire to reduce the number of people on waiting lists for an NHS dentist.

Janice Nicholson, head of dental commissioning at NHS Central Lancashire, recently announced that dentists in Leyland and west Lancashire are now opening their doors to patients who are prepared to travel from central Lancashire in a further attempt to improve access.

"Tooth decay in children is a serious problem," he revealed. "It can cause a great deal of pain and distress to children and treating it is very costly for the NHS.

"Focusing on prevention is not only better for the children, but is also a better use of NHS resources. I'm delighted to see the local authority and the NHS taking innovative action to address this very important local health issue, and I hope others will follow suit.”

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Editorial comment

So it’s finally here... after what seems the longest time, dental profession-als can finally have their official say on the Care Quality Commission (CQC) registration fees now that the consultation documentation has been released.

The most cynical of you will be no doubt thinking it’s no bl**dy use anyway.

Now, the most cynical of you will be no doubt thinking ‘no bl**dy use anyway, they’ll do what they want no matter what we say’ but a public consultation does have the advantage of being just that, public.

I am well aware of the strength of feeling against the CQC and the confusion and re-sentiment that has been created, and I am also aware of how some quarters are using their right to protest by canvassing their MPs to investigate the necessity of extra regulation.

All stakeholders should have their say and at least make their sentiments known, if only to be able to say to yourself that you have. Who knows, someone may even be listening.

Snap-On Smile

In recent years, the number of people opting for cosmetic surgery has increased and continues to be popular with people who desire to improve the aesthetic appearance of their smile. Now, for those who fear needles and worry about drilling, a new treatment is available in the UK: The Snap-On Smile

The Snap-On Smile does exactly what its name suggests; it fits onto the original teeth, much like false nails are placed over the top of nails.

Fitting over the teeth, the Snap-On Smile gives the illusion of a perfect smile, without the need for surgery. Patients who opt for this treatment can select a colour shade and choose the shape of the teeth.

For those who are worried about drilling and needles, and don’t want to pay hundreds or even thousands of pounds for treatments, such as veneers or dental implants, the Snap-On Smile would seem like a perfect option.

To make the Snap-On Smile photos and impressions are made of the patients’ teeth and in about four weeks the Snap-On Smile lab creates the smile.

Images courtesy of Pearl Dental Clinic

Contact us on 020 7400 8967 quoting DTUK10 to get your early booking discount

Already confirmed to speak are:

Tif Qureshi, James Russell, Nasser Barghi, Wyman Chan, Raj Rayan, Trevor Burke, Raj Rattan, Julian Satterthwaite, Wolfgang Richter

Before

After

Images courtesy of Pearl Dental Clinic

The AOG and Smile-on in association with The Dental Directory bring you

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Friday 6th and Saturday 7th May 2011
The Royal College of Physicians,
Regent’s Park, London

Contact us on 020 7400 8967 quoting DTUK10 to get your early booking discount

Before

After

Images courtesy of Pearl Dental Clinic

Do you have an opinion or something to say on any Dental Tribune UK article? Or would you like to write your own opinion for our guest comment page?

If so don’t hesitate to write to:
The Editor,
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19-21 Hatton Garden,
London, EC1 8BA

Or email: lisa@dentaltribuneuk.com
W ith Mouth Cancer Ac-
ction Month in full
swing, the national
press is full of news related to
head and neck cancer, highlight-
ing the condition to the general
public. Here is just a taster of the latest
news...

MCF benefits from new
restaurant
The Mouth Cancer Foundation,
will be reaping the rewards of a
new restaurant, Indus, in
Twickenham. Restaurant own-
ers Sunny and Kammi Dhown
could think of no other charity
that they would prefer to support
when their restaurant opens as
they know first-hand how awful
mouth cancer can be.

Sunny and Kammi’s mother,
Indu, died of mouth cancer in
January this year. To mark her
death, the couple have created a
venue which provides people with
fine food and excellent service, whilst making
a difference.

Sunny said “I have decided to
support the Mouth Cancer
Foundation simply because of the horrific experience my fam-
ily and I went through. The feel-
ing of being helpless, as Mum fought mouth cancer, was truly
awful. Therefore, if I can be of
help in terms of helping to raise
awareness or fundraising, then I
am only too happy to help. The
experience has left a deep scar on my family and we want to try and make something posi-
tive of this awful situation. It
only seemed right to name the
restaurant after my mother, who
was not only an inspiration to me
but to everyone who met her”.

Long term, Indus’s plans to
make annual financial contribu-
tions to the Mouth Cancer
Foundation and also plans to raise
funds through the restaurant.

Key breakthrough in HPV-
related mouth cancer
New research has shown that
cancer patients with the Human
Papilloma Virus (HPV) have a greater chance of survival from
mouth cancer than those whose cancer is HPV negative.

The new study found that monitoring cancer tu-
mours for the HPV can help health experts predict a pa-
tient’s survival chances.

Conducted by Dr Angela
Hong from the University of Syd-
ney, the research monitored 198
patients suffering from mouth
cancer after they had surgery
or radiotherapy.

Dr Angela Hong said: “Our
study shows that the group of patients with advanced
oropharyngeal cancer, found that those with cancer caused
by HPV had a significantly better
chance of survival than cancer
which was not caused by HPV.
And this beneficial HPV effect
was seen regardless of the type
of treatment they had.”

Following the patients for a
period of two years, it was found
that those with HPV positive can-
cer were four times less likely
to die than those who were HPV
negative.

Another discovery was that
cancer was three times less likely
to develop at a primary site in
patients with HPV positive cancer.

Social inequalities pose
mouth cancer risk
New research has revealed that
an individual’s social back-
ground could heighten their risk
of mouth cancer.

Speaking at the launch of
Mouth Cancer Action Month
2010, at the House of Commons
this week, clinical senior lectur-
er in dental public health at the
University of Glasgow, Dr David
Conway, highlighted that those
with a “low social economic sta-
tus” were faced with significant-
ly increased risks of developing
the disease.

Drawing on his recent, award
winning research, ‘Socioecon-
omic Risk Factors Associated with
Upper Aerodigestive Tract Can-
cer’, Dr Conway explained that
socio-economic inequalities had
proven to be an independent risk
factor.

The study measured socio-
economic groups by education,
occupation and income, and
found that those with lower lev-
els of formal education, lower
incomes and unemployment his-
tory were more at risk.

Dr Conway emphasised that
when these figures were
adjusted to consider smoking,
alcohol and poor diet, all in-
creases were diminished except
for education. This increase
may be explained as low education
influence positions within
society and social networks,
in which turn can impact on ac-
cess to health care and determine
decision making behaviours.

Addressing a room full of
oral health professionals, MPs,
members of the House of Lords
and past mouth cancer patients,
Dr Conway called for a change
to be made and urged govern-
ment bodies to help the disadvan-
taged who are at a greater risk of
mouth cancer.

Concluding with a quote
from George Orwell’s ‘The Road
to Wigan Pier’, Dr Conway said:
“Economic injustice will stop the
moment we want it to stop and
no sooner, and if we genuinely
want it to stop the method adopt-
ed hardly matters.”

Dental experts warn against
home whitening treatments
Dental experts have
warned against home
whitening treatments, which have be-
coming increasingly popular in
recent years.

Experts have urged mem-
bers of the public to avoid home
whitening treatments, which are often recommended by people
with no dental training on in-
ternet sites. Many sites suggest
using home treatments contain-
ing ingredients such as hydrogen
peroxide, ash and baking soda.

Some sites also recommend
methods including brushing the
 Ramadan, Edward, ‘Economic
inequalities pose mouth cancer risk’. T
(www.justgiving.com/

A call to action
Seema Sharma calls on
Dental Tribune read-
ers to support her as
she walks 60 miles for char-
ity... from Baroda to Bharruch!

“At the end of this month
I will be packing my walking
shoes to walk 60 miles of the
241 mile British Indian Friend-
ship Walk for charity, led by
Jill Beckingham (wife of the
British deputy high commis-
sioner to India).” Peter
Beckingham.

Jill is retracing the steps of
Mahatma Gandhi’s
Salt March of 1930 to raise
fund and awareness of one of
which have a British In-
dian connection. She is am look-
ing to raise funds for the three
charities already supported by
her Foundation:

• Apnalya - An NGO founded
in 1972 to help children living
in slums towards a better life,
Apnalya strives to achieve this
through urban community de-
velopment projects in Mumbai.
Its role is one of empowerment:
of encouraging ordinary men
and women to believe in them-
selves and in their abilities to
change their lives for the better.

• Door Step School - is an NGO
established in Mumbai, India
in 1988 and later expanded to
Pune in 1989. It started with
the aim of addressing lit-
eracy amongst the marginalised
sections of society. Door Step
School provides education and
support to the often-for gotten
children of pavement dwellers,
slum dwellers, construction site
workers, the three that you wish to sup-
port, please say so in your spon-
sorship note... all remaining
funds will be divided equal-
ly between Apnalya, Door
Step School and Toybank.

“I am writing to ask all read-
ers and supporters of Dental
Tribune to sponsor me and help
make a difference.

Please visit my JustGiv-
ing page (www.justgiving.com/
seemasharma-britishindia-
friendshipwalk) to find out
more and donate. If you have
aparticular charity amongst
the three that you wish to sup-
port, please say so in your spon-
sorship note... all remaining
funds will be divided equal-
ly between Apnalya, Door
Step School and Toybank.

“I hope you, your teams and
your patients will get involved
and ‘Light up a Smile’ on the
faces of those who hope for a
better future.”

Seema Sharma in India on a charity expedition
The CMA system is very simple and straightforward to use, producing consistently good results. The files are strong and stable and I have not had one fracture yet.

In these days of single-use files, the CMA system provides good value for money without compromising the need for well-instrumented root canals.

Dr Graeme Fisher BDS, Preston

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Dr Graeme Fisher BDS, Preston
Regarding Revalidation

Dentist Denis Toppin is on the Council of the GDC and is also Chair of its Revalidation Working Group. Most of you will probably be familiar with the term revalidation by now, although it’s likely you hear most about it in relation to doctors and the General Medical Council. The General Medical Council has recently confirmed medical revalidation in the UK is expected to start from late 2012, after numerous delays. Although the GDC doesn’t plan to introduce revalidation for dentists until 2014, and at a later date still for DCs, the GDC has just launched a 12 week consultation on the issue and is encouraging as many of its registrants as possible to have their say. The consultation can be found on the GDC website at www.gdc-uk.org.

For those of you who are less familiar with revalidation and what it will mean for dentists, I’d like to take this opportunity to explain a little bit more about it. Revalidation will provide, for the very first time, a way of checking that dentists carry on meeting the GDC’s standards after they have first joined its registers. The GDC’s Fitness to Practise proceedings are reactive rather than proactive; they assume that dental professionals meet its standards unless the regulator receives information which suggests otherwise. With patient protection in mind, this is no longer good enough. Our research has shown that patients believe and expect that dental professionals’ compliance with standards is already checked by the GDC regularly. Dentists must meet the GDC’s standards or those of other dental service regulators under the Care Quality Commission and are encouraged to show that they are meeting quality standards. For example through NHS practice inspections or performance appraisals.

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The framework will also set out the evidence which will be acceptable to demonstrate compliance with each standard. Dentists will gather this evidence over five years, and revalidate at the end of each cycle. We are proposing a three-stage process at the end of each cycle:

Stage 1 - compliance check, which will apply to all dentists
Stage 2 - remediation phase, which will provide an opportunity to dentists who do not pass Stage 1 to remedy deficiencies
Stage 3 - in-depth assessment, which will apply to dentists who fail to demonstrate their compliance at the end of the remediation phase.

The proposals aim to avoid over-regulation by making as much use of existing and developing quality systems within dentistry as possible. Dentists will, in many cases, already be required to show that they are meeting quality standards. For example through NHS practice inspections or performance appraisals. Our approach is designed so that dentists can meet all our requirements and those of other dental service regulators under one umbrella.

The areas the DBG assesses are:
- Your premises including access, safety, security, fire precautions, third parties and business continuity plans.
- Information governance including Freedom of Information Act, manual and computerised records, Data Protection and security.
- Training, documentation and certificates.
- Radiography including IRR99 and IR(ME)R2000 compliance.
- Cross infection and decontamination including HTM 01-05 compliance and surgery audits.
- Medical emergencies including resuscitation, drugs, equipment and protocols.
- Training, documentation and certificates.
- Waste disposal and documentation and storage.
- Practice policies and written procedures.
- Clinical audit and patient outcomes including quality measures.

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Judging panel announced

A team of leading dentistry experts has been revealed as the judging panel for the SM ESPE Student Dentistry Awards 2010-2011.

This panel of influential industry figures and esteemed academics will select the UK and Ireland's most innovative students and award them with funding to support their studies.

The awards panel includes Dr Amarjit Gill, President of the British Dental Association; Edward Atttenborough, President of the British Dental Trade Association; Professor Trevor Burke, from the University of Birmingham and Professor Nairn Wilson, Dean and Head of King's College London Dental Institute.

There are three categories in the SM ESPE Student Dentistry Awards 2010-2011 – the Award for Innovation, the National Award for Innovation and the Award for Interrelated Studies. Funding ranging from £500 (554 EUR) to a bursary worth £3500 (4130 EUR) is available to be won.

Speaking about the announcement of the judges, SM ESPE’s commercial manager Steve Foster said: “We are delighted to have such a strong panel judging our awards programme which supports the future of UK and Irish dentistry.

“As leading industry figures, the judges’ shared experience will ensure that the very best dental students are recognised for their abilities.”

On his appointment to the panel, Dr Amarjit Gill said: “An awards programme such as this offers real support to talented young dental students.

“I am very much looking forward to reading the entries and meeting the winners.”

For more details on the awards programme, visit SM ESPE’s new dedicated student website at www.3mespe.co.uk/dentalstudents.

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DENPLAN: The UK’s leading dental plan

Denplan is extremely proud and excited to have been voted ‘Best Dental Plan Provider’ at this year’s Health Insurance awards.

The glittering awards ceremony took place at the Grosvenor House Hotel in London on the 21st October. Denplan were thrilled to accept the award - especially as it’s the first time this category has been featured.

Dental payment plans not only promote the regular dental attendance that’s so important in preventive care, but people lucky enough to have access to a dental benefit through their employer are also far less likely to cancel or delay their appointments. Companies understand this and 90 per cent of companies agree that good dental health supports the overall wellbeing of their staff.

Gary continued: “Denplan has been at the heart of dental care for nearly 25 years and is dedicated to preventive care. That’s why we tailor our corporate products to suit both companies and employees to ensure that both get the very best value and service, and we’re delighted that our efforts have been recognised in this area.”

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