Fake booze surge

The Local Government Association has warned that if plans to introduce a minimum price on alcohol go ahead there could be a surge in counterfeit wine and spirits. The proposal is to have a 40p minimum price per unit in England and Wales; however, it's feared if the government's plan goes ahead then cheap fake brands could contain dangerous chemicals such as anti-freeze. Experts from the Health Select Committee say the lever of price can change behaviour. In response to concern over whether minimum pricing will encourage responsible drinking, the proposal is one of the many ideas in the new alcohol strategy, which has been designed to encourage responsible drinking and help local areas tackle alcohol-related problems.

Fresh tips

Nova Southeastern University College of Dental Medicine student Deborah Luis has created and patented a single-use, on-the-go miniature toothbrush and breath freshener. The idea for the latest and new product, which is called Fresh-Tips, was devised after Deborah saw a ball with rubber extensions. Fresh-Tips has soft rubber bristles that clean the user’s teeth, gums and tongue and contains anti-cavity xylitol mint gummies and tongue cleanser rubber extensions. Fresh-Tips was designed to encourage responsible drinking and help local areas tackle alcohol-related problems.

“A double take

F
ollowing recent events surrounding the merger of CODE and DPA, a new twist in the association’s future development has occurred. According to statements released by CODE and the DPA, the proposed CODE DPA merger has been cancelled.

In a statement released by CODE, the ‘rescue plan’, which had been offered by GDPA Ltd with CODE’s support as a long-term solution for the financial stability of DPA, has been turned down by DPA members: “The members decided to keep the DPA as a mutual, primarily interested in their chosen rescue solution and not approve the rescue proposal from GDPA Ltd and that they would like the Association to continue to be independent.”

During the meeting members accepted that despite the draft figures showing losses in 2011 and the current balance sheet deficit, “they still wanted the association to continue to be independent.”

In an email to members, Mr Short stated: “Members have indicated in a survey and by other means that they would not approve the rescue proposal from GDPA Ltd and that they would like the Association Management Agreement (AMA) to be cancelled. As we are represented members’ wishes I received, and I look forward to receiving more.”

Paul Mendllosohn, CODE CE said: “I found the concept of successfully developing a sister association, as I have done with CODE, very exciting. I am not politically inclined myself, but it would have been fascinating to build a new political party that could continue to make an impact in dentistry, and to be the alternative choice for dental professionals.”

Following the wishes of DPA members the DPA Council cancelled the Association Management Agreement (AMA) and further withdrew the Transfer Agreement, two days before the Special General Meeting in April.

Although the AMA had been cancelled, acting Chairman Reginald Short went ahead with the Special General Meet-}

Out of the frying pan...

... and into the fire, as agreement is cancelled between DPA and CODE; DPA now looking at rescue options

Enjoyed the challenges of running the DPA for eight weeks under the management agreement, it is the members’ wishes that come first. My personal wish is to see the DPA thrive in the coming years and watch its story unfold.”

The DPA Council has invited alternative rescue bids and one has already been received. The deadline for this is the 14th June. A new date for the AGM has also been arranged, and will be held July 7th. Interested parties should send their proposals to Reg Short by email before the 14th June. Members will be able to vote on their chosen rescue solution at the AGM.

GDPA Ltd will respect the wishes of members and not make a new rescue offer.

For further information or to send a DPA rescue proposal email: rwj.short@virgin.net.

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Dr Armin Sedgat examines the principles of Champions

When I first met Dr Armin Sedgat in 2008, I was amazed to see how the same scenario could easily have occurred that could easily have turned out very differently, if only they had been able to anticipate the likely consequences of some seemingly insignificant decision or external event.

Nilesh Parmar discusses dental implants

Speaking on the recent development, Mr Mendllosohn said: “I accept the DPA members’ choice, and whilst I have
Vitality Show visitors tell DCS their views on dental professionals

A snapshot survey carried out by the Dental Complaints Service (DCS) at the Vitality Show in London has revealed insights into the way patients view their dental professionals.

Staff from the Service, which helps resolve complaints about private treatment, were at the show to remind patients that the first step if a problem arises is to talk to their dental professional.

Nearly 500 people took part in the short survey over the four days of the show and of that number there was a fairly even split between NHS (49.8 per cent) and private dental patients (40.8 per cent).

Although just under a quarter (23.5 per cent) of the survey’s respondents said they had had problems with their dental treatment, DCS staff were encouraged that the vast majority (84 per cent) said they would feel confident asking their dentist about their treatment.

Head of the DCS, Hazel Adams said: “Good communication between patients and professionals can make a difference to the way people perceive complaints and how they resolve any concerns, before seeking our help. I was pleased to see that of the people that took part in our survey, 77.5 per cent said they would feel confident enough to speak to their dentists if they had a problem with their treatment.”

The DCS has a leaflet ‘Making a complaint about private dental treatment’ which helps resolve complaints and can be ordered online at www.dcs-uk.org

There are four key principles to the work of the DCS, which is funded by the General Dental Council:

• The service is free
• It is independent of the NHS
• It will treat people fairly, whatever their background or circumstances
• It does not take sides

For more details about the service and what it can help with log on to the website www.dentalcomplaints.org.uk

Study warns of killer bugs

In the past studies have highlighted how thin layers of bacteria can cover the surface of dentures, making them potentially harmful. However, a team of scientists have suggested that by putting false teeth in a microwave oven for three minutes can in make them safe.

The research was carried out by a team of scientists from Brazil, who also identified that by soaking dentures in a germicidal mouthwash solution of two per cent chlorhexidine gluconate for 10 minutes could also make them safe.

According to the study led by Karen Tereza Altiere, a dentist at the Araquara Dental School at the Universidade Estadual Paulista in Sao Paulo, either method is “sufficient to disinfect dentures coated with the toughest MRSA biofilms for up to a week.”

“To our knowledge, we are the first investigators to report the effectiveness of this method in killing MRSA,” she said in a report.

Scientists have suggested that simply leaving dentures in a glass overnight may not be enough to keep them clean.

MRSA, full name Meticillin Resistant Staphylocococcus Aureus, is a bacteria resistant to some antibiotics and according to scientists usually found on false teeth, scientists said.

According to reports, the new method of cleaning has already been adopted by experts in the US.

The study has been published in the Journal of the American Dental Association.

Dentists’ confidence dips in Lloyds TSB commercial healthcare confidence index

Business confidence among both NHS and private practice dentists has taken a downward turn as they prepare for the prospects of a new NHS contract and continued economic uncertainties, according to new research.

The latest twice-yearly Lloyds TSB Commercial Healthcare Confidence Index shows that the short term confidence of dentists has fallen 20 points, since the first survey in October 2011.

Once again, the outlook of GPs was the least positive of the three primary healthcare providers researched, followed by pharmacists and then dentists, whose previously positive score suffered the biggest fall in confidence.

The findings are based on a combined ‘Confidence Index’ drawn from responses to a number of questions, canvassing primary healthcare providers opinions on overall business confidence and outlook for the future profitability of their businesses.

Where any figure greater than zero represents a positive outlook, figures below indicate a negative one (the maximum value achievable is plus 100 and minimum value achievable is minus 100), GPs registered minus 62, an overall shift of minus 1 to an even less confident position.

This compared to minus 42 for pharmacists - an eight point uplift - and a 12 point fall of minus 58 for dentists, indicating that GPs are still by far the most uncertain of the likely impact of forthcoming NHS reforms, while pharmacists are the only group heading towards a more positive outlook.

Dentists’ collective long term confidence (looking ahead over the next five years) fell three points to minus 67 since the last survey.

Dentists were split on whether NHS practices would remain the most profitable with 46 per cent saying they would, 35 per cent saying not and 41 per cent unsure. A surprising 47 per cent of those undertaking NHS work said they had experienced some ‘clawback’ in the last year and over half (55 per cent) expressed doubt that the new contract will be adequately funded. Only 29 per cent of dentists believe their NHS contract in ten years’ time.

Ian Crompton, head of healthcare banking services for Lloyds TSB Commercial, said: “Pharmacist confidence has improved to a degree, GPs have maintained the most uncertain but dentists really seem to have lost confidence since our first survey in October 2011. “Back then, they stood out as the only group among their healthcare peers who had any positivity about the short term future of the profession.”

“The Health & Social Bill may now have passed but the debate has clearly unsettled NHS dentists who are facing their own contract changes in 2014 and private dentists are still feeling the impact of the economic downturn.”

More than 50 per cent of private dentists who responded to the survey admitted that they may be encouraged to take on NHS work, having had an increasing number of requests from their private patients. Despite this, when asked outright if they would take on NHS work, 69 per cent said that they would not.

Plymouth council bids to stop Peninsula medical school split

According to recent reports, proposals which would see a Devon dental and medical school divided are being fought by Plymouth City Council.

Earlier this year Plymouth and Exeter universities announced that they wished to separate the Peninsula College of Medicine and Dentistry to allocate more places for students; however, the plan has met much criticism and according to reports, Plymouth’s councillors have voted unanimously to ask for the plans be put on hold for a 12-week consultation.

Councillor Lynda Bower said in a report that the health and adult social care overview and scrutiny panel had been concerned about the lack of consultation, both with major stakeholders and the public.

“We also have concerns about the long-term viability of two separate schools of medicine within 40 miles of each other,” the panel’s chair told BBC News.

The separation proposals, which would see a medical and dental school in Plymouth and a medical school in Exeter, have already been criticised by the Devon Local Medical Committee and have been deemed as a potential “disaster”.

Before any move could go ahead, the proposals will have to be approved by the General Medical and Dental Councils, the Higher Education Funding Council for England and the NHS.
Editorial comment

Last week saw this year’s BDA conference and Exhibition occur in Manchester. From a networking perspective, it was a great opportunity to meet up with colleagues across the profession and catch up with the latest happenings in dentistry; in addition to some great speakers. My favourite lecture was the presentation entitled Fighting the Tide of Communicable Disease and Avoiding Infection – Experiences from the Cruise Industry by Medical Director for Carnival UK (Cunard and P&O) Kate Bunyan. Anyone who was there I’m sure will never forget the thought of people counting how many toilet rolls are used in cabins to keep an eye out for spikes in usage!

One ‘highlight’ was the speech by Parliamentary Under Secretary of State for Quality (Department of Health) Earl Howe, outlining the changes in dentistry and what is to come over the next few years. He discussed many issues surrounding piloting and the analysis of the first tranche of data from the pilots as well as the commitment to reducing the inequalities in child oral health across the country. It was very much the kind of thing we have heard before, but I’ll tell you what he was a lot easier to listen to the Mr Lansley!!

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For more information visit www.bridge2aid.org/b2a/

Small change = big change

Just knowing that 70 per cent of the world’s population has no access to the simplest of relief from oral pain; leaving millions of people to suffer daily from preventable pain; leaves many of us feeling we want to do something about it – but what? How can we make a difference to such a terrifying statistic?

Bridge2Aid believes that together everyone can make a difference – just £1 at a time. They are asking practices to offer their patients a chance to add £1 to their bill. For every £120 you raise, you will have given access to emergency dental care to a whole village – allowing people to live pain-free, and, for many, giving them the chance to return to work to support their families. As the money will be put towards training local East African health workers, you know that your fundraising is making a long-term difference, and is not just a quick-fix.

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For more information visit www.bridge2aid.org/b2a/
**Parents are biggest providers of alcohol to kids, reveals Drinkaware**

Children as young as 10 say their parents are who they would turn to first for advice about alcohol, and the most common source of alcohol itself, according to new research published by alcohol education charity Drinkaware. Unique research, which polled parents (who were social grades ABC1) of 10-17 year olds and their children, highlights that 72 per cent of the 10-17 year olds questioned say their parents are the first people they would approach with questions about alcohol, while half (50 per cent) of those who have had a drink report it was their parents who supplied them with the alcohol the last time they drank.

The research also shows that while 85 per cent of parents agree it is important to talk to their kids about alcohol, a third (32 per cent) admit that there are many things they do not know about the effects of alcohol on children. Many parents allow their children to drink from an early age - with data showing that the average age at which the child had drunk alcohol, the average age at which parents first allowed their child to have a drink was 11.8 years old. Of the 10-17 year olds polled who had drunk an alcoholic drink, the majority (55 per cent) had been with their parents the last time they drank alcohol.

Additional findings from the research include:
- 45 per cent of parents worry that their child's friends have a greater influence on their child’s drinking behaviour than they do
- More than two thirds (67 per cent) of 10-17 year olds say they have never felt encouraged to drink alcohol.

Based on the outcomes of this new research, and drawing on their collective expertise and experience, the Mumtank will produce a practical and thought-provoking set of resources for parents, which will seek to involve them in the debate and offer advice and guidance on children and alcohol.

This resource will form the centrepiece of Drinkaware’s parenting campaign this year, which offers advice and tips to parents on how and when to talk to their children about alcohol, in an age appropriate way, between the ages of 8 -17. Further advice can be found at drinkaware.co.uk/parents

**Outstanding achievement award for BADN Chief Exec**

Badn is proud to announce that the Dental Awards 2012 Outstanding Achievement Award was presented to Chief Executive Pam Swain at the black tie Dental Awards dinner held at the Lancaster London Hotel in 20 April, hosted by comedian Mitch Benn.

The Dental Awards, now in its 14th year, is organised by Purple Media Solutions Ltd and is sponsored by The Dental Web, Dentistry, Software of Excellence, Waterpik, Wrigley, Beverley Hills Formula and Practice Plan. Each of the winners of the 18 awards received a beautiful, specially designed glass trophy.

Pam was born in Fleetwood in 1958 and later attended Fleetwood Grammar School and Blackpool & Fylde College. In 1976 she spent one year in Vienna, as an au pair and part time student at Vienna University studying “Deutsch für Ausländer”. She worked briefly for the Home Office Research Unit in London and moved to Brussels in 1979, working for CPE Europe Ltd and at Hilton International’s European Office, in Personnel and then in Marketing. From 1981 to 1987 she worked at the NATO Headquarters in Brussels, both for the International Staff in the Electronic Warfare section and the International Military Staff in the Operations Division.

Pam moved to Bermuda in 1987 where she worked in the Investment Department of the Bank of Bermuda, completing three quarters of the American Institute of Banking exams and evening courses in investment banking, effectiveness training and small business management.

In 1990 she took a year’s sabbatical in the US, training as a holistic therapist at the Massage Institute of New England in Boston, and obtaining the American Massage Therapy Association’s qualification. Upon her return to the UK in 1991, Pam ran her own part time therapy business until her Association workload made that no longer possible.

More recently, she obtained a Master’s in Business Administration (MBA) from the Open University and a Licentiate in Management from City & Guilds (LGCI). She is also a Fellow of the Institute of Association Management (IAM) and a Member of the Chartered Management Institute (MCMI).

As well as Chief Executive of Badn, Pam is Editor of the “British Dental Nurses’ Journal” and was Registrar of the Voluntary National Register until it closed in 2005. She has worked for the Association for 20 years this summer and has been instrumental in both raising the profile of dental nurses and the Association and in obtaining professional status for dental nurses and recognition of their vital role in the dental team. Pam became President of Blackpool & District Soroptimists in April 2012. “I am delighted and extremely honoured to receive the Outstanding Achievement Award” said Pam. “It has become something of a cliché, at times like this, to accept an award on behalf of a team - but BADN is very much a team. Not just the head office staff, or Council, but also the dental nurses throughout the country who support their profession through BADN member ship. Twenty years ago, when I started working for ABDSA (as the Association was then called), dental surgery assistants were very much the Cinderellas of the dental team; today, dental nurses are registered dental professionals and their vital role in the delivery of dental care is widely recognised. We may still have some way to go, but we’ve come a long way in the last 20 years and I’m looking forward to the next 20!”

**Expert calls for tax on unhealthy foods**

Director of the University of Oxford’s health promotion research group, Dr Mike Rayner, is urging the government to introduce a tax on unhealthy foods and drinks to encourage people to eat more healthily.

Dr Rayner believes that a “fat tax” (as it has been referred to), could help tackle obesity and help raise funds. He told the BBC that obesity was costing the NHS billions of pounds every year and that a 12p tax on soft drinks could prevent several thousand deaths each year.

“There’s evidence to show that manipulating food prices can encourage healthy eating. So why are we so reluctant to change the way we tax food?” Dr Rayner was quoted in one report. “I don’t care whether it’s hot or cold, whether you got it from a takeaway or a shop - I’d like us to tax all unhealthy foods, and sell the proceeds as a tax on biscuits. And in doing so we can tackle a problem that will only keep expanding.”

A film produced by Dr Rayner was shown to MPs Steve Webb and Angela Eagle to see what their thoughts were on the subject.

According to a report, Mr Webb said that the idea of a tax was “worth looking at”, while Ms Eagle claimed that although tax could have a role in tackling obesity, it was not an easy way or a shop - I’d like us to tax all unhealthy foods, and sell the proceeds as a tax on biscuits. And in doing so we can tackle a problem that will only keep expanding.”
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CWRU researchers find joint failures potentially linked to oral bacteria

De Nahil Bissada, chair of the Department of Periodontics at the dental school, said the objective of the study, “Identifi-
cation of Oral Bacterial DNA in Synovial Fluid of Patients with Arthritis with Native and Failed Prosthetic Joints” was to see if the
nucleum and Serratia pro-
teamaculans found in patients
with gum disease were present in
the fluid.

The researchers recruited and studied 36 patients seeking
care at the University Hospitals Case Medical Center for os-
teoarthritis (the wearing of the joints) and rheumatoid arthritis
(an autoimmune disease).

These study participants had both natural and artificial joints.
Researchers extracted samples of their synovial fluid, which is
much like oil that keeps a door from squeaking. These patients
also had signs of periodontitis or gum disease and underwent ex-
ams where dental plaque was obtained for the study.

Plaque build-up from the bacteria, associated with gum
disease, breaks down the walls of the pockets around the teeth.
The inflammation process from the bacteria acts like a gate that
gives bacteria access to the blood stream. Once in the blood, the
oral bacteria have induced in-
flammation in remote sites where
the bacteria has been linked to
heart, kidney and cancer dis-
ease and premature births and
fetal deaths.

Because these bacteria cannot be found with routine lab-
tests, detection of bacteria in the plaque and fluid was done through a process called poly-
merase chain reactions and DNA sequence analysis of specific genes (16S-rRNA).
This is a sophisticated DNA track-
ing procedure.

Five of the 36 patients (14 per cent) showed direct DNA links between the bacteria in the fluid and plaque from the mouth. The
breakdown in patients was: one from a rheumatoid arthritis (RA) patient with a failed natural joint and one RA patient with a failed replacement joint; two osteoar-
thritis (OA) patients with failed artificial joints and one OA pa-
tient with a failed natural joint.

Bissada said researchers will continue exploring the oral
health link in a larger study.

Transforming care for people with dementia

Health and care leaders have come together to drive improvements in dementia services and deliver on key ambitions set out in the Prime
Minister’s dementia challenge.

The Champion Group brings together representatives from the health sector, social care, lo-
cal government and charities.
They will be tasked with driving work on the ground to ensure that health and social care services get to grips with improving services for both people with dementia and their carers.

Last month the Prime Minis-
ter announced plans to make
the UK a world leader on dementia.
The programme aims to deliver major improvements in demen-
tia care, dementia awareness and
dementia research by 2013. Three ‘Champion Groups’ are being es-
tablished to lead the work on each strand.

Actions set out for improving dementia care include increasing diagnosis, rewarding best prac-
tice, and ensuring memory ser-
ves are both established across the country and accredited, giving people with dementia access to
high quality services.

The Demen
tial Health and Care Champion Group, co-chaired by Sarah Pickup, President of the As-
sociation of Directors of Adult So-
cial Services (ADASS) and Sir Ian Carruthers OBE, Chief Executive of NHS South of England, held its first meeting today.

The group will take a broad
approach to tackling the issue of dementia services, with a focus on how social care services, the NHS and local government or-
organisations can work together to
Effect real change.

In addition to the specific ac-
tions set out in the Prime Minis-
ter’s challenge, the group’s ap-
proach will also include:

• Improving end of life care for people with dementia
• Improving housing and social care accommodation – supporting innovative solutions to support people with dementia to continue
to live at home
• Promoting partnership working between primary and secondary health services and local govern-
ment
• Reducing the inappropriate use
of antipsychotic medication for people with dementia.

Care Services Minister Paul Burstow said: “We are deter-
mined to go further and faster in bringing real improvements to the care and support people with dementia and their carers receive
in all settings.

“Early diagnosis is key as it allows people to plan for their future, preventing the need for
nursing home care, premature ad-
mission to hospital care, and this delivers better outcomes for people with dementia, enabling them to
live well.

“But we must also ensure that, once they receive a diagnosis, people have access to the
right information and high quality ser-

BDA welcomes funding reminder in Wales

The British Dental Asso-
ciation (BDA) has wel-
comed a reminder from the
Welsh Government to Local Health Boards (LHBs) that fund-
ing allocated for dentistry must not be diverted to fund any other
type of healthcare.

Minister for Health and So-
cial Services Gethin Jones has written to LHB Chairs to remind them that budgets al-
llocated for spending on general dental services contracts and the
Designed to Smile programme should be used as intended, and
that any underspends on these budgets should not be divert-
ed to shore-up other services.
The letter expresses concerns that some LHBs are not main-
taining improvements to den-
tal services and that access for patients remains problematic in
some areas.

The BDA has also appli-
ced the letter’s confirmation that the dental budget will remain
ringfenced until at least March
2014-15 and the renewal of a
commitment to develop Com-

munity Dental Services in Wales
to help with the aim of ensuring vulnerable patients have access to appropriate care. The letter notes the lack of investment in GDS services in deprived areas and the responsibility LHBs hold providing or securing services for society’s most vulnerable

groups.

Stuart Geddes, BDA Direc-
tor for Wales, said: “We welcome the
Mind the clear statement that
dental budgets designated for
primary care are to be used solely for developing dental ser-

vices in this area. The BDA has
been concerned for some time that some health boards appear to
be sitting on funds earmarked for dentistry, rather than com-
misioning services where they are
urgently needed.

“In a country where some people are struggling to access
dental care and we are fight-
ing oral health inequalities, it is
simply unthinkable that money intended to improve dental ser-

vices should be diverted. Lo-
cal health boards need to sit up
and take notice of this letter and

strive to deliver the care their

populations require.

“The Minister’s letter also provides a timely reminder to the
Boards of the need to invest appropriately in Community Dental Services. As the BDA has
consistently pointed out, vulner-
able patients in Wales need to
be afforded some political priority to ensure that they are getting the care they need. We are de-
lighted to see that our message has been heard and that boards are being reminded of their duty to
invest appropriately in the
care of these patients.”
May 7-13, 2012

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News

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Dentist with a distinguished army career assumes Presidency of BDA

Frank Holloway, (pictured), a retired army dentist based in Surrey, was installed as the 126th President of the British Dental Association (BDA). Dr Holloway, the first armed forces dentist to receive this honour since 2005, was presented with his chain of office and made his inaugural speech as BDA President at the opening of the 2012 British Dental Conference and Exhibition at the Manchester Central Convention Complex.

Dr Holloway gained his Bachelor of Dental Surgery degree from Bristol University in 1969 and his Licence in Dental Surgery from the Royal College of Surgeons in the same year.

After five years in general practice in the UK, he worked for the US Army in Bavaria as a civilian dentist. Three years later he joined the British Army, subsequently working in Germany, Texas, Cyprus, the Outer Hebrides and occasionally in England. Frank achieved the rank of Colonel and completed his regular army service as Commandant of the Royal Army Dental Corps, Commanding Officer of the Defence Dental Services Training Centre and Principal Dental Officer of the Home Counties region. He spent the last five years of his career treating new recruits and recently retired after 53 years in the army.

In 1986/87 he did an MSc in conservative dentistry at the Eastman Dental Institute London, after which he taught and ran a referral service for six years. He was then selected for command posts but maintained his clinical involvement and started a long association of activities with the BDA. Frank has been a member of the BDA’s Armed Forces Committee since 1988 and was elected its chair in 2001, a post he had held for 10 years. He has also been a member of the Representative Body since 2006.

He has represented the BDA nationally on the British Medical Association’s (BMA) Armed Forces Committee since 1998, and is also on the BMA’s Co-ordinating Group.

Dr Holloway said: “It is a great honour to become President of the BDA and I look forward to serving my fellow professionals in this capacity.

“I look forward to being an ambassador for the profession, both in the UK and abroad, during my term of office.”

Married to Carole, he has two daughters. Away from dentistry Frank enjoys hill walking, golfing and gardening.

Genix healthcare to give new smiles for African children

N ational dental corporate charity, Genix Healthcare has announced that it will be donating considerable support to hundreds of African children this year. Genix is flying one of its top dentists to Durban in a bid to assess the dental hygiene situation at two schools and an orphanage. It will subsequently provide the necessary tools to allow them to begin a long term dental care programme.

As a part of its corporate social responsibility agenda Genix has partnered with Lionsraw, a UK based movement which harnesses the passion of football fans, taking them to World Cup events and European championship matches and occasionally in England. This year Genix visits a UK based team which will embark on a mission to support the fantastic efforts of Lionsraw.

In 2010 Lionsraw took more than 150 fans to the World Cup in South Africa and at the same time built an orphanage, sports changing rooms, a pre-school, toilet blocks with more than 50 toilets and ran football schooling for thousands of African children. Since then it has continued the legacy to maintain these facilities and provide critical help for the long term.

This week Genix Healthcare dentist Roberto Gil Marques De Suza will join Lionsraw on its latest mission to Africa. He joins a team of six people on an intensive four-day programme visiting two schools of 200 and 1100 children with an official Zulu chief opening. He will also visit a new orphanage built by Lionsraw and assess the oral care needs of 200 children.

During the trip Roberto intends to formulate a plan of what is needed to facilitate a long term care programme and provide items such as toothbrushes, holders and toothpaste for each child.

Jon Burns, Founder of Lionsraw, said, “This support from Genix Healthcare is truly fantastic and an essential building block in our mission to support a healthy and sustainable community. These children have no understanding about oral hygiene whatsoever and have never even seen a toothbrush. This incredible generosity from Genix Healthcare will start to address vital problems with gum disease in many children who are still growing teeth. Life threatening disease in these areas is very common and so the provision of simple items such as individual holders will help to minimise infection.”

Jon Burns, Founder of Lionsraw, said, “This support from Genix Healthcare is truly fantastic and an essential building block in our mission to support a healthy and sustainable community. These children have no understanding about oral hygiene whatsoever and have never even seen a toothbrush. This incredible generosity from Genix Healthcare will start to address vital problems with gum disease in many children who are still growing teeth. Life threatening disease in these areas is very common and so the provision of simple items such as individual holders will help to minimise infection.”

Anne Nelson-Jones, Clinical Director at Genix Healthcare said, “Genix Healthcare is very committed to supporting the fantastic efforts of Lionsraw. It is extremely humbling to learn what these children have to endure, just to have basic schooling and even running water. Genix has a long standing commitment to support education through football so when we were approached by Lionsraw it was a very appropriate extension to our existing corporate social responsibility agenda. We look forward to learning about Roberto’s trip and how we can formulate a successful support plan for the long term.”

Conversation on CPD continues

T he General Dental Council (GDC) has published a discussion document as part of a big conversation on Continuing Professional Development (CPD) in dentistry. The document, which is called “Maintaining Quality and Impact of CPD in Dentistry”, sets out some key issues being considered as part of the on-going CPD review by the GDC.

These include the potential to:

• introduce a learning outcomes element to future CPD requirements
• embed personal development planning into a future scheme
• introduce mandatory CPD declarations every year

The document was launched at the recent (17 April 2012) National Conference on CPD hosted by the GDC and attended by more than 80 dental stakeholder representatives. The event was addressed by almost 20 key players in the world of dentistry and CPD, including the Chief Dental Officers for England and Northern Ireland and representatives from various Postgraduate Dental Deanseries and professional associations.

Registrants and other key stakeholders are invited to enter into the conversation on the future of CPD through discussing the issues contained in the document with their teams, peers and colleagues.

These views can then be shared with the GDC via its dedicated CPD Review email inbox CPDReview@gdc-uk.org

The document is for discussion purposes only and does not necessarily represent GDC policy.

The GDC’s current CPD requirements can be found on the website www.gdc-uk.org

The GDC has published a discussion document regarding CPD.

Unit supports doctors and dentists to retirement

T he London Deanery has launched a new unit to support the professional development of doctors and dentists at all career stages and specialities working in the capital.

The Professional Support Unit, led by London Deanery, Provider Services, offers an expert shared service of resources, separate from employing organisations to support the professional development of the medical and dental workforce in London.

It will support clinicians develop as professionals and individuals. It will help doctors and dentists throughout their careers, whether this is enabling to meet the challenges offered by new roles to accessing coaching and personal development planning, to support with clinical placements and return to practice schemes.

London Deanery launched the unit in response to the need for better support for clinicians throughout their careers, to enable them to realise and sustain their potential, manage their talents and maximise their contribution to quality healthcare delivery. It is hoped the unit will be able to give support to responsible officers to meet the medical revalidation challenges that are due to take place later this year.

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