Food labelling consultation

Keeping track of what you eat and choosing healthier foods could be made easier thanks to a UK-wide consultation. The government has announced that under the current dental contract system an estimated £70m was wasted on dental fraud in a year.

The government has committed to introducing a new dental contract system that will focus on improving the quality of care patients receive, increase the availability of NHS dental care and promote good oral health. Part of this process will include reducing the risks of dental fraud before it becomes a problem and proactively analysing data on dental contract claims to spot irregular or suspect claim activity.

The government will work with NHS Protect to tackle the current problem of contract fraud by:

- changing how some dental treatments are recorded to prevent fraud
- undertaking a further analysis of dental fraud to help identify weaknesses in the system
- developing an awareness programme of dental fraud risks, including workshops with local anti-fraud staff to help spot dental fraud activity
- moving to a new single way of working for managing all NHS dentistry services
- involving better patients.

“IT is totally unacceptable that some NHS dentists have abused the system for personal gain. Fraud of any kind will not be tolerated and any allegation of fraud is taken seriously. We believe dentists should get paid for the quality of care they provide rather than simply for the number of treatments. That is why we are currently piloting this approach with dental practices ahead of introducing a new dental contract to make sure we get things right and minimise the risks of fraud.”

Barry Cockcroft, Chief Dental Officer said; “The vast majority of dentists behave ethically and provide high quality dental care to their patients. Action needs to be taken against the small minority who behave dishonestly and submit fraudulent claims. We are working closely with NHS Protect to raise awareness of fraud risks to help prevent and deter fraudulent activity. "I would also urge colleagues in the profession and patients to report any suspicions of fraud or corruption to NHS Protect on their confidential dental fraud and corruption reporting line or to their PCT.”

Reducing the problems associated with dental fraud is a key priority for NHS Protect. The team is working closely with NHS Protect Managing Director, Dermid McCausland, NHS Protect Managing Director, said; “NHS Protect will continue to ensure that public funds are not lost to a dishonest minority of dentists. Action will be taken against those who attempt to take valuable NHS resources for personal gain. “As the lead organisation in tackling NHS fraud, NHS Protect will effectively coordinate investigative and intelligence resources and take swift action where suspicions of fraud are found. We will also seek the recovery of any NHS funds lost through the actions of fraudsters.”

Under the current contract the most common types of fraud include submitting false claims for patients who did not exist, claiming for treatments that never existed, claiming for treatments that were not actually delivered.

To view the NHS Protect report visit www.nhbsa.nhs.uk/3630.aspx

Nick Simon looks at the options for details.
All smiles at National Smile Month launch

Guests at the launch of National Smile Month

It was all smiles in the House of Commons on 15 May, when national charity the British Dental Health Foundation launched the UK’s largest annual oral health campaign.

The Secretary of State for Health, Mr Gaulek states that: “HMRC do not accept that all training expenses incurred by the employee will now qualify for tax relief. ………… expenses must be incurred exclusively as an intrinsic part of the performance of duties……… On the basis of the information provided (BADN briefing note to Mr Gaulek)…… the CPD training referred to does not have the characteristics mentioned above……… No deduction is due for the costs of continuing professional education. That is so even if participation in such activities is compulsory, and failure to do so may lead to the employee losing his or her professional qualifications, and/or their job.”

“Dentists, hygienists, therapists and technicians who are self-employed or business owners are allowed tax relief on their CPD costs. However, HMRC is refusing to acknowledge that CPD expenses for dental nurse employees are in fact incurred exclusively as an intrinsic part of the performance of duties” said BADN President Nicola Doherty. “This is blatantly unfair, as tax relief on CPD costs is denied to those in most need of it. BADN are calling on other dental professional associations and the GDC to support this campaign in order that tax relief on CPD costs is afforded to all registered dental professionals.”

Dental nurses (and other members of the dental team) are encouraged to visit the BADN website www.badn.org.uk, download the form letter together with support documents, and send it to both Mr Gaulek and their local MP.

BADN campaign for tax relief on CPD costs

The British Association of Dental Nurses (BADN) are lobbying HMRC for tax relief on CPD costs - following correspondence between BADN Chief Exec Pam Swain and Exchequer Secretary to the Treasury, David Gaulek MP, in which Mr Gaulek states that:

The Department of Health’s Transition Risk Register from November 2010, which was a statement of potential risks of NHS changes, will not be published, following Cabinet agreement and a final decision made by the Secretary of State for Health.

The Department of Health will also publish a Scheme for Publication, which will set out proposals for reviewing and releasing material relating to the transition programme in the future. Both these documents will be published on the Department’s website.

Transition risk register will not be published

The Department of Health is committed to the Freedom of Information Act and has extended it to all academic schools through the Academies Act; and to the Association of Chief Police Officers, Financial Ombudsman Service, and the Universities and Colleges Admissions Service through secondary legislation. In addition, the Protection of Freedoms Act, which gained Royal Assent on 1 May, provides for the extension of the FOI Act to over 100 companies wholly owned by public authorities.

RISK Registers are a vital part of Government policy development. Ministers and officials should be able to deliberate sensitive policy formulation, in expectation that their views are not published at a time when it would preclude the development and delivery of policies. If such risk registers were regularly disclosed, it is likely their form and content would change, and they would no longer be the effective internal management tools they are intended to be.

In light of the interest in this case, and in line with the Government’s commitment to be more transparent by opening up Government information, the Department of Health has published a document that sets out key information relating to the areas of risks in the original Risk Register. It also sets out the mitigating actions that have taken place since November 2010 and which are planned in the future. But it protects the language and form of the Risk Register.
New award for young dentists

The Harley Street Centre for Endodontics is launching the Young Dentist Endodontic Award 2012. Marking the 10th Anniversary of the centre, the award is open to any young dentist who graduated in the last three years, whether they are in their Foundation Year or just starting out on their career. Applicants are invited to submit a case report or write up in a UK dental publication and all successful applicants will be invited to submit a case report to the centre. Those shortlisted will be invited to submit a full case report and the winner’s case report will be written up in a UK dental publication. The winner will be presented with a £500 prize and the runners up will win a pair of endo-binders from SybronEndo.

The winner’s case report will be written up in a UK dental publication and all successful applicants will be offered the opportunity to spend a day at the Harley Street Centre for Endodontics. In addition to national recognition, there are five outstanding prizes. First prize is the new WaveOne Endodontic Motor, handpiece and accessories kit, from Dentsply UK and the second prize is a Merita Boot ZA apex locator from Quality Endodontic Distributors (QED). Three further runners up will win a pair of endo-binders from SybronEndo.

The winner’s case report will be written up in a UK dental publication and all successful applicants will be offered the opportunity to spend a day at the Harley Street Centre for Endodontics. In addition to national recognition, there are five outstanding prizes. First prize is the new WaveOne Endodontic Motor, handpiece and accessories kit, from Dentsply UK and the second prize is a Merita Boot ZA apex locator from Quality Endodontic Distributors (QED). Three further runners up will win a pair of endo-binders from SybronEndo.

The winner’s case report will be written up in a UK dental publication and all successful applicants will be offered the opportunity to spend a day at the Harley Street Centre for Endodontics. In addition to national recognition, there are five outstanding prizes. First prize is the new WaveOne Endodontic Motor, handpiece and accessories kit, from Dentsply UK and the second prize is a Merita Boot ZA apex locator from Quality Endodontic Distributors (QED). Three further runners up will win a pair of endo-binders from SybronEndo.

The award will be presented at an event at the Royal Society of Medicine in October this year as a part of the 10th Anniversary of the centre, and the award will be sold as a part of the event, attracting the attention of dental professionals all over the country having their support for Smile Month in 2012. Parliamentary sponsor Sir Paul Beresford opened the launch; and there were short presentations by BDHF President John Siebert and Chief Exec Nigel Carter, as well as representatives of the campaign’s platinum sponsors Listerine, Precior & Gamble and Wrigley.

Let’s all support the campaign and get our smileys out there! 

---

Editorial comment

Last week saw the launch of this year’s National Smile Month Campaign at the Houses of Parliament.

This year’s campaign is different in that instead of having a specific theme, such as ‘two minutes twice a day’, the British Dental Health Foundation have launched the ‘smiley’, a smile on a stick that has had dental professionals all over the country having their picture taken and uploaded to various social media sites to show support and raise awareness for the campaign.

The launch saw members of the dental sector brandishing their smileys and showing their support for Smile Month, now in its 10th year.

For caries prevention

• Clinically proven caries efficacy^1
  – 33% reduction in dmfs
  – 46% reduction in DMFT

• Quick and easy application

• Temporary light tint for visual control

Applying fluoride varnish containing 22,600ppm F is a recommended intervention in ‘Delivering Better Oral Health – An evidence-based toolkit for prevention’^2

---

1 Marinho et al. (2002); Cochrane Database Syst. Rev. no3.
2 Delivering Better Oral Health – An evidence-based toolkit for prevention
Energy drinks responsible for irreversible damage to teeth

A recent study published in the May/June 2012 issue of General Dentistry, the peer-reviewed clinical journal of the Academy of General Dentistry, found that an alarming increase in the consumption of sports and energy drinks, especially among adolescents, is causing irreversible damage to teeth—specifically, the high acidity levels in the drinks erode tooth enamel.

“Young adults consume these drinks assuming they will improve their sports performance and energy levels and that they are ‘better’ for them than soda,” said Poonam Bone, BDS, MS, MPH, lead author of the study. “Most of these patients are shocked to learn that these drinks are essentially bathing their teeth with acid.”

Researchers examined the acidity levels in 15 sports drinks and nine energy drinks. They found that the acidity levels can vary between brands of beverages and flavours of the same brand. To test the effect of the acidity levels, the researchers immersed artificial saliva for two hours. There was no privacy machinery. There was no privacy

Dentists raise money for children’s cancer ward

I n December 2003, 15-year-old Robbie Anderson set up a Trust to improve the quality of life for young people spending long periods of time on the children’s cancer ward, where he too was a patient.

As explained on The Robbie Anderson Cancer Trust website: “Robbie knew his cancer was terminal, but even that knowledge didn’t deter him. He continued to attend his last Christmas in hospital, he set about fundraising for a large plasma TV screen for his ward. He wanted the children on the oncology ward to be able to do what everyone else was doing - playing games and watching Christmas films with their families, something many of us can take for granted.

On December 24th it was fixed to the wall in the Day Room. Sadly, 10 weeks later, Robbie passed away.”

Cancer is a battle that must be fought on all fronts - the psychological fight is in many ways as important as the physical care and Robbie’s time in hospital was made so much worse by the lack of any facilities for his age group.

“The focus was on much younger children, down to infant-sized tables and chairs in the day room and not much else but Disney DVDs to watch. While his life hung in the balance he was placed in either a room with Mr Men mobiles hanging from the ceiling or in a crowded six bedded ward decorated with cartoon characters. The old fashioned TV’s on tables battled for space with life-saving blood products and chemotherapy machinery. There was no privacy for parents or their children; this, coupled with the sense of being in a nursing situation, Robbie found hard to bear.”

It was then that Robbie decided to set up a trust to improve the quality of life for young people fighting cancer.

His Trust, which continues to support the Children’s Oncology Ward at Leicester Royal Infirmary, aims to work towards providing a facility where all children are treated in age-appropriate surroundings, with a particular focus on teenagers. The proposed unit will cost £1.1 million to build, but will be a centre of excellence with clearly defined spaces for each age group.

And this is where you, the reader, come in. In July, Rob- bie’s parents and members of the dental profession will be setting off on an epic journey to the exotic principality of Monte Carlo to raise funds and awareness of children and young adults suffering with cancer. The trip, however, will also be carrying out one of Robbie’s wishes, which was to go to Monte Carlo and place a bet on the number eight on a roulette table! All the participants are self-funding the drive and all money raised will go towards funding the age appropriate cancer facility at Leicester Royal Infirmary.

Donations and sponsorship are desperately needed for the facility to become a reality. The Robbie Anderson Cancer Trust is proud to be supporting University Hospitals Leicester in their campaign to provide a unit in Leicester that will make a significant difference to the lives of all young people fighting cancer.

For those of you wishing to make a donation to this worthwhile fund or to find out more information visit www.robbieanderson.org.uk/index.php/donations-contact-us or www.robbieanderson.org.uk/index.php.

Source: www.agd.org

Leaflet and poster on NHS dental services and charges now available

D etails of NHS dental services and new charges are outlined in a new leaflet and poster. The leaflet describes how NHS dental services in England work, including how to find an NHS dentist, what treatment to expect and how much it will cost. The poster shows the charges to pay from April 2012 depending on the treatment needed.

The NHS dental services in England (540k) leaflet includes information on: http://www.dh.gov.uk/health/files/2012/04/2900096-Dental-Poster-v1_TAGGED.pdf

- NHS dental charges
- How to find an NHS dentist
- How often to visit the dentist
- Dental appliances
- Emergency NHS treatment and care out of hours

The NHS dental charges from 1 April 2012 (640k) poster includes details of: www.dh.gov.uk/health/files/2012/04/2900096-Dental-Poster-v1_TAGGED.pdf.

- Charges for each complete course of treatment
- Charges for referral for a course of treatment
- Treatments that are free
- Where to find information on free dental treatment or help with health costs

Source: www.dh.gov.uk
The regime that shows plaque bacteria no mercy

Adding LISTERINE® Total Care to your patients’ daily prevention routine finishes the job started by mechanical cleaning

Communicating the value of a three-step daily prevention process – brush, floss and rinse – to patients in an effective manner will help to keep the message resonating between appointments, improving their commitment to better oral health.

Following mechanical cleaning with a mouthwash that will lower the bacterial burden in the mouth is an important part of achieving the ultimate in oral care at home, and something that patients need to understand is their responsibility. You can help patients do this by promoting a partnership approach that clearly and concisely presents the benefits of combining daily prevention with regular hygiene appointments.

Brushing and flossing/interdental cleaning are pivotal to oral hygiene. They displace and dislodge plaque bacteria that can cause gingivitis and periodontal disease from the tooth surface. But bacteria from other areas of the mouth can recolonize on teeth quickly.

Using LISTERINE® after mechanical cleaning destroys bacteria effectively, killing up to 97% of them in vivo. This lowers the bacterial burden in the mouth and in plaque that reforms. And when used for six months, LISTERINE® can reduce plaque levels by up to 52% more than brushing and flossing alone.

The LISTERINE® Total Care range

The LISTERINE® Total Care range ensures that there is an effective adjunct to help reduce plaque bacteria and manage biofilm in every patient. Plaque biofilm is the main cause of gum disease, and plaque formation begins immediately after brushing. LISTERINE® has broad antibacterial effects against a wide range of species of germs, killing them by destroying their cell walls and inhibiting their ability to multiply.

In addition to containing the LISTERINE® four essential oils – menthol, thymol, methyl salicylate and eucalyptol – which have antibacterial properties and kill plaque bacteria, LISTERINE® Total Care products offer various levels of fluoride and other benefits to suit patients’ needs.

For more information about the LISTERINE® Total Care range of mouthwashes, or for free samples†, please contact Johnson & Johnson Ltd on 0800 328 0750.

†As long as stocks last. Free samples can only be sent to dental practice addresses (no home addresses).

Finish the job. Finish off with Listerine.
King's hosts first conjoint in Orthodontics under the Royal College of Surgeons of Edinburgh

A P McCoy OBE joins Bridge2Aid as new patron

Donated materials save teeth in rural Uganda

CEO of DPA takes legal action over unfair dismissal