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Ombudsman: NHS fails to communicate

Six per cent of complaints made against dental practitioners, complaints service details in new report

A new report published by the Health Service Ombudsman shows a significant rise in the number of complaints where the NHS has failed to provide an adequate remedy or proper apology when things have gone wrong. The report, Listening and Learning, which gives an overview of NHS complaints made to the Ombudsman in 2011/12, includes real-life examples of responses given to people who have complained about the NHS. The Health Service Ombudsman, a free and independent service for anyone who is unhappy with NHS services, is calling on the NHS to improve the way it deals with complaints on the ground.

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New dental education centre opens

A new state-of-the-art dental training centre has been opened at Northwick Park Hospital.

The training centre, which is a joint enterprise between London Draycote, and the North West London Hospitals NHS Trust, was opened November by Barry Cockcroft, Chief Dental Officer at the Department of Health.

The training centre has a clinical suite with 15 phantom head units with operating microscopes, and a medical emergencies simulation suite with a computerised mankin to simulate medical emergencies and a debriefing room to assess performance of dental teams. It also has a decontamination suite, enabling teams to train in the latest decontamination requirements.

The Northwick Park DEC will be available for lectures and hands-on training, and also has facilities for producing educational webinars.

Elizabeth Jones, Dean of Postgraduate Dentistry, said: “This is an exciting initiative for North West London and I am delighted it has come to fruition. It will give dentists and dental care professionals a state-of-the-art environment in which to learn new skills and practice what to do in emergency situations, among other things.”

David McVittie, Chief Executive of North West London Hospitals NHS Trust, said: “We are delighted to have worked closely with the London Draycote on this initiative. We are also delighted to be in at the start of a revolution in dental and oral healthcare, particularly in light of the extreme-ly successful maxillofacial service that we have on site here.”

Thames Valley forms Dental Local Professional Network

PCPs within Berkshire, Oxfordshire and Buckinghamshire have recently begun testing the outline proposals for a Local Professional Network (LPN) across dentistry by forming the Thames Valley Dental LPN. The network, which has been formed to ‘improve oral health in the Thames Valley’ is made up of local clinicians, a medical director, commissioning managers and a consultant

in dental public health.

Dental LPNs are the future for local professional clinical leadership and will have an important role in informing the decisions which commissioners will make regarding all dental services from April 2013.

The Thames Valley Dental LPN is currently engaging with dental clinicians across the region and is encouraging them to attend a forum on either Tuesday 4th December 2012 or Thursday 17th January 2013 in order to learn about the upcoming changes post April 2013 and to share their opinions.

Please email tvd.lpn@nhs.net for more information or to register your interest.

Implant surgical kit released

Dr Nilesh R. Parmar, BDS (Lond) MSc (ProsthDent) Cert.Ortho, has partnered with Hu-Friedy to release his own implant kit for young dentists starting out in implant dentistry. The DR NILESH PARMAR Implant Surgical Kit includes everything needed to expose, retract, place, augment graft and suture almost all implant sites. It comes with two surgical instrument cassettes, designed to fit almost all autoclaves and washer disinfectors.

Dr Parmar said: “When I first started placing implants, I was astonished at the sheer variation in surgical instruments available. It took a few years of experience before I knew which instruments I liked and didn’t need.”

A spokesman for Hu-Friedy added: “We have an excellent global reputation for our periodontal and surgical instruments and part of our focus strategy is to target young dentists who are starting out in implant dentistry. We understand that Nilesh is a well-respected, talented clinician, with exceptional attention to detail – a perfect partner for Hu-Friedy.”

For more information, please contact Atif Ramzan (Clinics and Education Manager UK & Ireland) at Hu-Friedy on aramzan@hu-friedy.com or 07890 762079.

Patient and surgeons responsible for implant success

A study recently published in the Journal of Oral Implantology shows that characteristics of both patient and surgeon can affect the success of dental implants. The 10-year study found that patient risk factors such as grinding teeth or diabetes increase the odds of implant failure, and it also associates higher implant failure rates with surgeons who have less than 5 years of experience.

The study examined failure rates for factors including type of prosthesis, surgeons’ experience level, smoking, diabetes, bruxism, and implant location—maxillary or mandibular. The implant failures in this study appeared to be affected by patient risk factors, such as diabetes, rather than by implant-related factors, such as location and length of implant.

Twenty-nine per cent of patients with a dental history of bruxism in this study experienced implant failure, with more than 28 per cent of patients with diabe tes also suffering implant fail ure.

The number of years and surgeries performed by the oral surgeon also had an impact on the success of the implants, with surgeons who had performed fewer than 50 implants being twice as likely to fail. An implant was considered successful if no implant loss occurred and bone loss was less than 3mm as assessed by peri-apical radiograph.
Editorial comment

Come see us at BACD

This week sees the Dental Tribune team living it up in Manchester for the British Academy of Cosmetic Dentistry (BACD) annual conference. This three-day annual event is now in its ninth year and is one of the best events for all things cosmetic.

I love going to conferences like this; the intimacy of the event means you get chance to meet with people and make new connections in an environment that is not as time-pressured as large-scale events. Also the calibre of speaker is always very high and I am really looking forward to continuing my dental degree by osmosis listening to the likes of Basil Mizrahi, Rafi Romano, David Bloom, Bobbi Anthony and DT regular contributor Mhari Coxon.

The Dental Tribune team will be based from the Healthcare-Learning Smile-on stand (Stand 21) so please come along and say hi! In return you can receive a complimentary copy of one our specialist portfolio of journals covering the implant, cosmetic and endodontic sectors.

The gift that keeps on giving

Stuck for Christmas gift ideas? Bridge2Aid are offering gift cards as the perfect present; continuing to give long after Christmas day has been and gone.

Each denomination results in a specific purchase or covering of costs that will benefit people in the Bridge2Aid community:

- £10 buys one head lamp for a Clinical Officer, who often has to work without electricity.
- £15 pays for kerosene, needed to run the pressure cookers employed to sterilise dental equipment.
- £20 provides oral health education packs for six Clinical Officers, used to raise awareness of good oral health in rural communities.
- £35 purchases training materials and resources for six Clinical Officers, for use before, during and after participation in Bridge2Aid’s practical Dental Training Programme.
- £60 pays for an instrument kit, to be donated to a Clinical Officer once training is completed.
- £125 covers the costs of one post-training visit by a Bridge2Aid team member to a District Dental Officer and a Clinical Officer to ensure that they are working in a safe way.

To purchase a gift card or for further information, please email Kerry Dutton at fundraising@bridge2aid.org.

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, Dental Tribune UK Ltd, 4th Floor, Treasure House, 19-21 Hatton Garden, London, EC1 8BA
Or email: lisa@healthcare-learning.com
The origins of our pretty smile? A long dead fish

It takes both teeth and jaws to make a pretty smile, but the evolutionary origins of these parts of our anatomy have only just been discovered, thanks to a particle accelerator and a long dead fish.

All living jawed vertebrates (animals with backbones, such as humans) have teeth, but it has long been thought that the first jawed vertebrates lacked pearly gnashers, instead capturing prey with gruesome scissor-like jaw bones.

However, new research, led by the University of Bristol and published in Nature, shows that these earliest jawed vertebrates possessed teeth too, indicating that teeth evolved along with, or soon after, the evolution of jaws.

Paleontologists from Bristol, the Natural History Museum and Curtin University, Australia collaborated with physicists from Switzerland to study the jaws of a primitive jawed fish called Compagopiscis.

The origins of our pretty smile? A long dead fish

New Fellowship without Examination launched

A member of the salivary gland
Pancreatic. © Martin Ruecklin, University of Zurich

Gene therapy benefits cancer survivors

Gene therapy can benefit cancer survivors.

While attending to patients in the NIDCR's Dry Mouth Clinic, Bruce Baum, lead author on the study, encountered numerous people with head and neck cancer who had received radiation therapy to shrink their tumours. The radiation, while effective in treating cancer, had inadvertently damaged nearby salivary glands, compromising their ability to secrete saliva into the mouth, and leaving them with a permanent parched sensation in the mouth.

The scientists gave 11 head and neck cancer survivors a single-dose injection of the Aquaporin-1 gene directly into one of their two parotid salivary glands, the largest of the major salivary glands.

The scientists found that five participants had increased levels of saliva secretion, as well as a renewed sense of moisture and lubrication in their mouths, within the study's first 42 days, the period covered in this report.

The six who didn’t benefit from gene therapy, none had serious side effects.

"It is time to evaluate a different vector to deliver the Aquaporin-1 gene, one that will cause only a minimal immune response," said Baum. "But these data will serve as stepping stones for other scientists to improve on this first attempt in the years ahead. The future for applications of gene therapy in the salivary gland is bright."

The international team studied fossils of Compagopiscis using high energy X-rays at the Swiss Light Source at the Paul Scherrer Institute in Switzerland, revealing the structure and development of teeth and bones.

Lead author, Dr Martin Ruecklin of the University of Bristol said: "We were able to visualise every tissue, cell and development of the jaws and teeth. We could then make comparisons with the embryology of living vertebrates, thus demonstrating that pla-coderms possessed teeth."

Co-author, Professor Philip Donoghue of the University of Bristol’s School of Earth Sciences said: "This is solid evidence for the presence of teeth in the earliest jawed vertebrates and solves the debate on the origin of teeth."

New Fellowship without Examination launched

In a move to recognise and support the professional development of Specialty Dental Members of world-wide Royal Surgical Colleges, RCSEd's Faculty of Dental Surgery has announced the launch of a new Dental Fellowship without Examination.

This new route to Fellowship allows dental professionals holding a Specialty Dental Membership an opportunity to access the FDS (RCSEd) without examination through written application. It is a qualification of the highest order which few previously had the opportunity to achieve, and one which no other Royal Surgical Colleges currently offers.

Explaining more about this new Fellowship, Professor Richard Ibehson, Dean of the RCSEd Dental Faculty said: “The Fellowship in Dental Surgery is internationally recognised as the highest College award in dentistry and we are delighted to invite colleagues holding a Specialty Dental Membership from one of the Surgical Royal Colleges worldwide to apply to become a Fellow with us.

“We recognise that currently there are few opportunities for Specialty Members to achieve the Fellowship in Dental Surgery (FDS) and this new initiative is designed to support the professional development of this group of dental professionals – irrespective of their College of affiliation - whilst at the same time, allowing them to become involved with RCSEd activities at the highest level.

“This move is in keeping with RCSEd's dedication to promoting the highest standards of patient care and of professional development and our Faculty of Dental Surgery looks forward to welcoming holders of Specialty Membership qualifications as Fellows in Dental Surgery of this College. We hope this move will allow Specialty Members the opportunity to engage more with us and the future direction of the Faculty."

Applications must be made in writing to the RCSEd Faculty of Dental Surgery, and all details about the criteria and application process can be found at www.rcsed.ac.uk or by emailing l.stuart@rcsed.ac.uk.

Is your dental partnership legal?

NASDAL are advising all dentists to think twice before going into a dental partnership with a family member.

Some smaller practices comprise a partnership between a dentist and their spouse, but if the spouse is not a General Dental Council (GDC) registrant, this may be illegal.

Nick Hancock is a Chartered Accountant and a NASDAL member who was asked for advice by a dentist in partnership with his wife, the practice manager. “I had to inform the dentist that he should dissolve the partnership. Under The Dentists Act 1984 it states “…an individual who is not a registered medical practitioner shall not carry on the business of dentistry…”

Damien Charlton, a member of the NASDAL Lawyers Group says there is an exception. “When the practice holds a General Dental Services (GDS) contract, the National Health Service Act 2006 permits certain non-GDC registrants - including a GDS practice employee - to enter a GDS contract. The Dentists Act states that receiving income under a GDS contract is not deemed, for the purposes of that Act, to be carrying on the business of dentistry.”

He added: “It’s essential that the partnership formed for the purposes of the GDS contract is kept separate from any private work carried out by the practice because it is only receipt of income under a GDS contract that falls within the exception to the definition of ‘the business of dentistry. This means (amongst other things) keeping separate sets of accounts and ensuring that the non-GDC registrant does not receive any income from the non-GDS parts of the practice.”

Dentists in an ‘illegal partnership’ are strongly advised to dissolve it. Once the partnership has been dissolved, the registered dentist can continue to trade in a different format.
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Patients mass tested after blunder

The Centre for Health Protection has been informed by the University of Hong Kong Health Service’s Dental Unit that it treated hundreds of patients with improperly sterilised instruments last week. More than 254 people, including staff and students, are reported to have received dental treatment under these conditions between 30 October and 2 November.

Meanwhile, the university has issued an apology and called in affected patients for blood tests to rule out infection with bacteria or viruses such as Hepatitis B and C and HIV. In addition, follow-up tests will be conducted six months after the incident, it said.

The Centre for Health Protection confirmed last Friday after a nurse enrolled in the unit found that instruments were not marked as having completed the full sterilisation protocol.

More than 38,000 treatments are performed annually at the clinic, a university spokesperson told Dental Tribune Asia Pacific.

Sheffield GDP wins chair of new BDA English Council

Dr Jim Lafferty, a general dental practitioner in Sheffield, has been elected as the inaugural Chair of the British Dental Association’s (BDA’s) new English Council. The Council exists to advise the BDA’s Principal Executive Committee (PEC) on all matters relating to policy in England, and to liaise with BDA’s branches and sections.

Dr Lafferty brings extensive experience of representing the profession, both locally in Yorkshire and at national level, to the role. He is a former member of the General Dental Council and both the BDA’s General Dental Practice Committee and the Representative Body, and chaired the Annual Conference of Local Dental Committees in 2012.

Dr Lafferty said: “The BDA, and the profession it represents, face a challenging period in England. A new contract for general practice is being tested, new commissioning structures are imminent and regulation is in the spotlight. Against this backdrop of upheaval the BDA is also changing, with new representative structures coming into being and the way that members are served being reviewed.

“In joining the BDA Councils for Northern Ireland, Scotland and Wales, the new English Council has a vital role to play in ensuring that the members it represents have a loud and effective voice. I am honoured to have been elected to Chair the Council and will do my utmost to deliver that voice.”

Dr Lafferty will be assisted by Dr Nilesh Patel, who has been elected to serve as Deputy Chair. Dr Patel is a general dental practitioner in Buckinghamshire and a former member of the BDA’s Executive Board, the body that was superseded by the new PEC earlier this year.

New dental association launched

Dental Fusion Organisation (DFO), a new association with the mission to support and represent dental professionals working in primary dental care, improve oral health and provide social and clinical training for members, was launched on 9th November.

The association has no governing body as DFO members vote directly on every major issue through Web and postal voting. If the members approve, one of the first campaigns will be to reverse the demise of the small independent family practice.

“In addition to dental health and business success, training and assistance with compliance will be a major theme of the new association”, says Chief Executive Derek Watson, (pictured) “This will be delivered mainly through a series of webinars which enable dentists to learn at any web-enabled PC, tablet or smartphone.”

So far 15 lunchtime webinars have been organised, including Management Monday, Financial Friday and a course on improving your IT skills. These are open to all, but DFO members are entitled to priority registration and verifiable CPD.

Anti bullying campaign by ortho practice

Research from the Journal of Orthodontics shows that being bullied is significantly associated with orthodontic treatment need, with 15 per cent of adolescents aged 10-14 examining a new commissioning treatment report being bullied.

In light of this, Inline Orthodontics, a specialist orthodontic practice in Stevenage, is conducting an anti-bullying campaign during Anti Bullying Week between 19 and 25 November 2012.

To help coordinate the campaign a meeting was held to discuss ways in which professionals in Stevenage can help young people who are being bullied. Key members of the local community, including local dental professionals, were invited to contribute.

Young people were also asked to contribute to the debate by describing their experiences of bullying whilst their parents will be asked how this affected their children.

Jonathan Alexander-Amb, Principal Orthodontist at Inline Orthodontics commented: “Bullying for whatever reason is deplorable and should never be tolerated. This research shows that a significant number of children are being bullied because of the position and appearance of their teeth. As a specialist orthodontist I feel that it is important to raise awareness of this and reassure young people that there is something we can do to help them”.

For more information about Inline Orthodontics’ Anti Bullying Campaign visit www.inlineortho.co.uk.
With an ever-increasing number of implant solutions available on the market, finding information about the right treatment option has become difficult, particularly for patients considering such treatment. In order to help non-professionals find answers, the EAO will be presenting a new patient information guidebook and website today at its annual scientific congress in Copenhagen.

The 75-page book, to be officially launched during the organisation’s general assembly, aims to provide comprehensive answers to more than 50 questions related to dental implants, such as the general function of these devices, treatment and possible complications like peri-implantitis. It will be published in five languages, including English, French and German, and will be available for purchase to EAO members. The website, which will be an integral part of the EAO’s online platform, will feature additional communication tools and educational materials like videos.

“Throughout the years, the EAO has worked hard to produce work that will improve dental implant treatments,” remarked EAO president Prof. Søren Schou from Denmark. “We are pleased to be able to share our knowledge with patients too.”

The Association of Dental Implantology (ADI) is hosting their biennial Congress from 1 – 3 May 2013 at the Manchester Central Convention Complex, with the focus on complications, risk management and prognosis of implant treatment.

Delegates will be able to participate in lectures from internationally acclaimed speakers, visit the specialist implant exhibition and network with colleagues from the global implant industry.

The presentations will cover the full spectrum of topics relevant to anybody who is involved with dental implantology or is planning to enter the field. The Congress will feature lectures on the complete dental implant process, from consultation, placement and after-care to associated risks and complications. It will also include sessions on many specific aspects involved in the running of a dental implant service, such as legal considerations and managing patient expectations.

For the full programme and to confirm your registration, visit www.adi.org.uk/congress2013