CQC announces regulatory fees update

Regulator decreases fees for some location bands

Following two consecutive consultations on the fees that it charges to health and social care providers, the Care Quality Commission (CQC) has announced changes to its fee structure and the amounts that certain providers have to pay under the Health and Social Care Act 2008. These have been approved by the Secretary of State for Health.

The fees reflect government guidance to CQC that it must recover the costs of regulation from providers.

The responses received to both consultations have led to the following changes in the fees that CQC charges providers. These included:

- Bringing providers of out-of-hours services, who will be registered from 1 April 2012, into the scheme using the same bandings and fees scale as for “Dental and Independent Ambulance Services” providers

- Reducing the lowest banding for the category “Adult Social Care providers without a commodation” from £1,000 to £720

- Reducing the charges for the third and fourth bandings for the category “Dental and Independent Ambulance Services” providers

Later this year the CQC will be launching another consultation about its longer-term fees strategy from 2015/16, which will include specific proposals for fees for 2015/14.

These proposals will be for providers of NHS general practice and other primary medical services who will be registered with CQC from 1 April 2013, as well as potential changes to fees for independent healthcare providers.

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CQC chief executive Cynthia Bower said: “Our approach to fees is based on fairness and on raising only as much income as we need to cover the costs of regulation. We have listened to what providers have told us during both these consultation and have made changes to address concerns and make the fees that we charge transparent and as proportionate as possible.”

www.dental-tribune.co.uk
The government has announced up to £4m of funding for businesses to develop ideas to address some of the biggest health problems of our time.

The Department of Health has opened two new competitions worth up to £2 million of funding each to develop technological and innovative solutions that can:

• Improve the number of patients taking their medication as prescribed

• Reduce obesity and alcohol related diseases and patients not taking their medication as prescribed or major health challenges. Alcohol and obesity related diseases cost the NHS over £7bn each year and between 6-10 per cent of all hospital admissions could be preventable if prescription medication was taken correctly.

Businesses are invited to come up with innovative solutions to these challenges. This could be anything from a device which helps people monitor what they eat or drink or a personalisation care package to help people take their medication as prescribed.

Health Minister, Lord Howe said: "Technology and innovation have an important role to play in helping to address the healthcare challenges facing the NHS. That is why we are investing £20 million in new and innovative products and projects which can make a difference to patients' lives.

"Today's competitions provide an opportunity to develop innovative solutions for some of the biggest health problems of our time and we look forward to seeing the results."

Sir David Nicholson, Chief Executive of the NHS said: "Investing in innovation is vital for a modern and efficient NHS - it will benefit the patient, the taxpayer and UK plc. The Small Business Research Initiative (SBRI) is a key part of the Innovation, Health and Wealth agenda, which aims to spread innovation throughout the NHS.

"These competitions provide vital funding for businesses to explore and test new technology before it becomes commercially available. Organisations are invited to submit their ideas which could have a real impact on patients and the NHS."

The competitions will be run through the Small Business Research Initiative (SBRI) process and are open to all organisations not just those in the health sector.
Editorial comment

Time really does fly when you are having fun! Here we are, mid April already and conference season is rapidly approaching. I will basically be living from a suitcase over the next few weeks as trips to Manchester et al beckons.

A bit closer to home, 18-19th May sees the much anticipated Clinical Innovations Conference, held at the fabulous Millennium Gloucester Hotel in London. With a top line-up of speakers such as Nasser Barghi and DT contributor Mhari Coxon, attendees are assured of a lively thought-provoking conference and plenty of networking opportunities.

Of course no self respecting conference would be complete without a party, and the Clinical Innovations Conference is no exception! The organisers have teamed up with charitable association the AOG to present a charity ball with all the glitz and glamour you’d expect. Proceeds from the event go towards the AOG Chitrakout Project, providing dental care to families in the Indian village of Chitrakout and its surrounds.

For more about the Clinical Innovations Conference, go to www.clinicalinnovations.co.uk or call 02074008989.

Cradle to grave

The 2nd John McLean Honorary Symposium has been organised in order to increase the funding of The John McLean Fellowship, which was formed in May 2010 to not only fund academic and clinical research, but also to honour John for his contribution to dentistry.

During his lifetime John achieved international renown as a highly regarded dental practitioner, scientist, author and keynote lecturer. His work was underpinned by a passion for science and astute insight of trends in dentistry and it is without doubt that his contribution to his fields of special interest and expertise in dentistry cannot be underestimated.

The theme of this year’s meeting is “Dental Health; Cradle to Grave” and will be held in the new seminar suite at Castle View Dental in Windsor on Friday May 4, 2012. The suite can seat a maximum of 55 delegates so early booking is advised to avoid disappointment.

Speakers include Edwina Kidd; Jim Page; Cheryl Butz; Ian Needleman; Tim Watson; Mike Wise; John Besford and David Winkler.

The goal is to raise a minimum of £15,000 for the McLean Fellowship.

A minimum donation of £500 to the John McLean Fellowship is suggested to secure your place for this unique event. Your donation will help promote and nurture student research in dental materials and enhance the opportunities available to those beginning their career in this vital aspect of dentistry.

Contact David Winkler at david@castleviewdental.net for more details.

Two ingredients that make Colgate Total one of a kind.

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www.colgateprofessional.co.uk
Researchers find bacteria on dental bib holders

The sterilisation protocol for dental bib holders is inconsistent and can result in the presence of bacteria such as pseudomonas and micro-organisms, researchers from Germany have proved. In a study, they found bacteria on more than two-thirds of reusable bib holders.

The researchers at the Witten/Herdecke University in Witten, Germany, examined 50 metal and plastic bib holders.

“The analyses of the bacterial load showed that 70 per cent of all reusable bib holders were contaminated with bacteria. The predominant colony types identified were staphylococci and streptococci. On several bib chains, we also found various bacterial rods, pseudomonas, fungi and other types of cocci,” said Prof Stefan Zimmer, lead investigator of the study and scientific director at the Witten/Herdecke University. “Although the bacteria found in this study were all non-pathogenic, in principle reusable bib holders can cross-contaminate dental patients.”

The bacteria found on the bib holders do not usually cause disease in healthy people, but can be a threat to immunosuppressed patients, as well as young children and the elderly, who often have compromised immune systems. Bacteria from an unsterilised bib holder can enter the body when a patient touches the bib holder or neck after a dental visit and then rubs an eye or touches the mouth.

Cross-contamination can also occur when a bib chain is splattered with saliva, plaque, blood and spray from the mouth, when it catches as children onto hair and accumulates the wearer’s sweat, make-up or discharge from neck acne, and if the dental worker applies a dirty bib chain with gloved hands before the examination or cleaning.

Several other studies have found similar results. Three US studies found unacceptable levels of microbial contamination on dental bib holders, including pseudomonas, E. coli and S. aureus, the most common cause of staph infection.

Alcohol industry sheds a billion units

Health Secretary Andrew Lansley announced recently that a billion units of alcohol will be shed by the alcohol industry through an ambitious plan to help customers drink within guidelines.

The initiative, which is part of the Responsibility Deal, is being spearheaded by 34 leading companies behind brands such as Echo Falls, First Cape and Heineken and will see a greater choice of lower strength alcohol products and smaller measures by 2015.

Market intelligence suggests consumers are increasingly looking for lower strength wines. In the past year, demand for lower and non-alcoholic beer has soared by 40 per cent across all retailers.

Key commitments include new and lighter products, innovating through existing brands and removing products from sale. They include:

• Sainsbury’s have pledged to double the sales of lighter alcoholic wine and reduce the average alcohol content of own brand wine and beer by 2020
• 25 million units will be gradually removed from Accolade Wines including Echo Falls Rosé and Echo Falls White Zinfandel
• Brand Phoenix - have committed to taking 50 million units of alcohol out of their wines - by reducing 0.8 per cent ABV on all First Cape full strength red wines
• Molson Coors, the UK’s largest brewer, has committed to remove 50 million units by December 2015
• 100 million units will be removed by Heineken
• Own brand super-strength lager will be removed from sale by wholesaler Makro
• Tesco, the leading retailer for low alcohol drinks, will reduce the alcohol content of its own-label beer and cider and expand its range of lower alcohol wines and beers, already the biggest selling range in the UK.

Health Secretary Andrew Lansley said: “The Responsibility Deal shows what can be achieved for individuals and families when we work together with industry. We know it is an ambitious challenge to work in this way but our successes so far show it can be done. We will work hard to engage even more businesses and get bigger results.

“Cutting alcohol by a billion units will help more people drink sensibly and within the guidelines. This pledge forms a key part of the shared responsibility we will encourage as part of the alcohol strategy.”

Estimate suggest that in a decade, removing one billion units of sales would result in almost 1,000 fewer alcohol related deaths per year, thousands of fewer hospital admissions and alcohol related crimes, as well as substantial savings to health services and crime costs each year.

Chief Medical Officer Professor Dame Sally Davies said: “Drinking too much is a major public health issue. By cutting out units from many of our best-known brands, this initiative will help people to continue to enjoy a sensible drink while lowering their unit consumption.”

All aboard the Smile Train

A kind hearted dentist is going the extra mile for a children’s charity. Dr Greg Pysden, ( pictured), who runs two dental practices - one in North Manchester and another in Salford - has set his sights on running the Wmilsow Half Marathon in a bid to raise money for Smile Train.

Formed in 1999, Smile Train is the world’s leading cleft charity providing free cleft lip and palate surgery to children in developing countries. It also provides free cleft-related training for doctors and medical professionals. To date, it has helped more than 725,000 individuals across more than 80 of the world’s poorest nations.

Speaking of his efforts to raise funds that will help Smile Train in its invaluable work, Dr Pysden said: “A lot of children affected by clefts are considered outliers by society. This can mean they are excluded from education and overlooked for job opportunities. In worse case scenarios, some are even killed or abandoned at birth.

“It’s hard to believe that children are being treated in this way over something that isn’t their fault and can be fixed so easily. By running the Wmilsow Half Marathon I hope to gain as much support as possible and bring a smile to a child’s face.”

To contribute visit: www.justgiving.com/GregPysden

Calories to be capped and cut

The country’s biggest supermarket chains, food manufacturers, caterers and food outlets are joining forces to help cut five billion calories from the nation’s daily diet, the Health Secretary Andrew Lansley recently announced.

Auda, Marks & Spencer, Morrisons, Sainsbury’s, Tesco, Waitrose, Coca-Cola Great Britain, Kerry Foods, Kraft, Mars, Nestle, PepsiCo, Premier Foods, Unilever, Beekeeper ( Whitbread), Subway and contract caterer Compass have all joined the fight against obesity and are leading the way in signing up to the Responsibility Deal’s calorie reduction pledge.

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Health Secretary, Andrew Lansley said: “Eating and drinking too many calories is at the heart of the nation’s obesity problem.

“We all have a role to play - from individuals to public, private and non-governmental organisations – if we are going to cut five billion calories from our national diet. It is an ambitious challenge but the Responsibility Deal has made a great start.”

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The regime that shows plaque bacteria no mercy

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

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So recommend LISTERINE® as the final step in your patient’s daily regime, to finish the job started by mechanical cleaning.
Planmeca appoints South West distributor

S&S Dental Services has been awarded sole south west-based distributor status for Planmeca dental equipment.

The Planmeca tie-up means S&S Dental is now the only dealer based in Devon, Cornwall, Dorset and Somerset who can deal directly with the Planmeca factory to get the best prices for these award-winning pieces of equipment.

Paul Sutcliffe, owner S&S Dental Services said: “We are delighted to be an official distributor for Planmeca. We’re a great match as they specialise in the design and manufacture of high tech dental equipment and we are known for our excellent service and extensive product knowledge.

“Dentists chose Planmeca products because they are cutting edge, not only in terms of technology, but also in terms of design. Gone are the days when surgeries look sparse and somewhat frightening. Planmeca products are very stylish and play a key role in helping to make visiting and working in the practice a more enjoyable experience for patient and dentists.”

Plymouth-based S&S Dental Services provides a one-stop sales and service shop to more than 1000 practices throughout the south west. They have been awarded the Planmeca contract because of its established reputation in the dental field. The south west enjoys a high concentration of dental surgeries using Planmeca, so S&S Dental will be able to provide a local service to these dental clinics and practices using, as well as introduce these fantastic high-tech products to those who are looking to invest in new equipment.

For more information about S&S Dental and Planmeca, call 0844 272 4561.

Profits down, costs up in NASDAL stats for 2010-2011

The annual benchmarking statistics just issued by NASDAL reflect the wider economy in 2010-2011, the most recent year for which figures are available. Fee income is down for both NHS and private practices. To fit in either category, you must have a greater than 80 per cent commitment. In NHS practices, fee income has fallen by three per cent, whilst profits fell by nearly 10 per cent compared to the previous year and are now back down to 2005/6 levels.

Private practice fee income has remained static but rising costs have led to a seven per cent drop in net profit. The average UDA rate paid to practices appears to have remained static at around £25 over the last three years. While the highest UDA rate paid to a practice was £44, the highest to an associate was £35.50.

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He added: “NASDAL clients will benefit hugely from the statistics as their accountants will be able to benchmark their results and work with them to ensure they are well placed to maximise their potential.”

The Planmeca Sovereign, just one of a range of Planmeca products available from S&S Dental Services.