

The BDJ News section accepts items that include general news, latest research and diary events that interest our readers. Press releases or articles may be edited, and should include a colour photograph if possible.

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BDA TO CHALLENGE DEPARTMENT OF HEALTH'S APPEAL OVER NOTICE CLAUSE

The BDA is to challenge the Department of Health's appeal against a High Court ruling that a termination clause in a dentist's contract was unlawful.

In February, after a two-day hearing at the High Court, to which the BDA made a written submission, Mr Justice Collins ruled that South Birmingham PCT had acted beyond its powers in specifying that the contract with dentist Eddie Crouch could be terminated at any time. But in June the Department of Health announced it would appeal against this decision. The appeal is scheduled for November 25 or 26.

Last month the BDA lodged papers with the Court of Appeal, arguing that such clauses are unlawful and unreasonable.

Peter Ward, chief executive of the BDA, said: 'We are very disappointed that the Department of Health has sought to challenge the decision of the High Court. Effectively the Department is saying that a PCT should be able to say to a dentist "your contract will come to an end tomorrow, just because we feel like it".

'This is totally unreasonable and would destroy the viability of family dental practices. How can dentists plan for the future if they have no security? A success

for the Department of Health would be bad for dentists, bad for patients and disastrous for the health of the nation.'

If the present ruling was overturned at appeal it would mean new clauses would have to be inserted in PDS contracts allowing termination without cause. This would mean that PCTs could, for example, terminate a dentist's contract because they decided they no longer wanted a service in a particular area.

Dr Eddie Crouch said he was very relieved the BDA would be fighting the appeal with him. 'If the Department of Health wins this it is bad news for all of us,' he said.

More background from the case is available on the BDA website - www.bda.org.

FOUR YEAR STUDY WILL EXAMINE EFFECTIVENESS OF RECALL INTERVALS

A four year study into the effectiveness of different recall intervals for check-ups is due to launch in October.

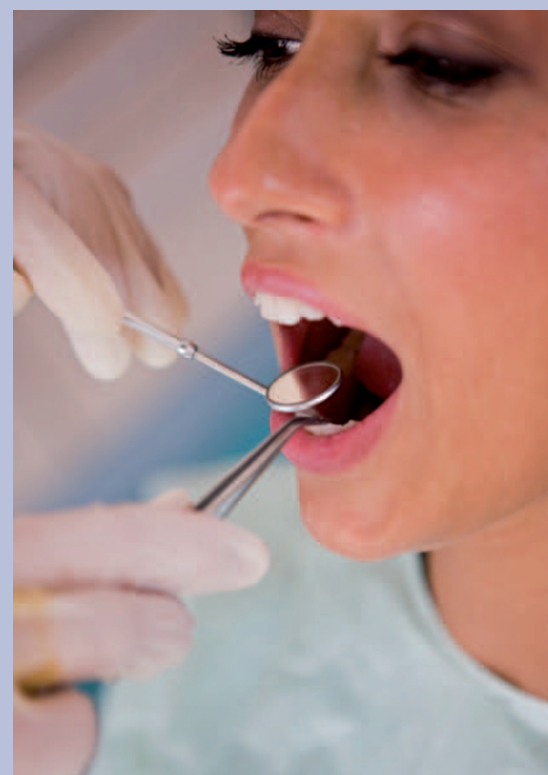
The randomised controlled trial, to be based at the Dental Health Services Research Unit (DHSRU) at Dundee University, is backed by a grant of £596,000 from Health Technology Assessment. It will compare three groups: check-ups at variable intervals determined according to individual risk, as recommended by the current NICE guidance; six monthly check-ups; and recalls at 24 months.

Subject to the success of an 18-month feasibility study, the research will be based in 10 general dental practices across the UK, operating in a range of settings including urban, rural, fluoridated and non-

fluoridated and middle and low-income communities.

The study population will be dentate adults who have attended their dental practice at least once in the previous two-years for check-ups. The research will look at the psychological impact of the various check-up intervals as well as the incidence of caries and periodontal disease.

The study will be led by Professor Nigel Pitts, director of the DHSRU, who chaired the group which produced the NICE guidelines on recall, published in October 2004. These recommend that the interval between check-ups should be determined specifically for each patient. For adults the guidelines recommend that check-up should be between three and 24 months.



INVESTMENT OF £75M FOR DENTISTRY IN SCOTLAND

Scottish health boards will receive £75 million over the next two years to provide new premises for general dental practitioners and better decontamination, Scottish health secretary Nicola Sturgeon has announced.

Announcing the funding Ms Sturgeon (pictured right) said: 'The government is strongly committed to improving dental services, particularly in areas where registration rates are currently unacceptably low. Too many people in Scotland still don't have access to an NHS dentist and we are determined to reverse years of neglect.'

Health boards will be asked to submit proposals for spending their allocations (see table) by the beginning of October. Priorities will be new dental centres for GDPs working in the NHS, upgrading of decontamination facilities in GDP premises and the development of outreach training for dental undergraduates.

The latest figures, released last month, show that 53.1% of adults and 73.8% of children in Scotland are registered with an NHS dentist.

Andrew Lamb, the BDA's Scotland director, welcomed the funding announcement and its emphasis on high street dentistry. 'However, giving NHS boards only two months to prepare detailed proposals gives us cause for concern,' he said. 'The BDA calls



on NHS boards to take their steer from Ms Sturgeon and prioritise support for independent dental practices.'

The announcement of the national funding (August 5) coincided with Grampian Health Board approving a four-year development plan for dentistry, to include the recruitment of 70 new dentists. Under a third of adults in Grampian are registered with an NHS dentist.

The health board will aim to register a further 25,000 children by 2010 and 99,000 more adults by 2012.

Ray Watkins, consultant in dental public health for Grampian Health Board, said 'The next four years will see increasing numbers of dental students graduating in Scotland and recruitment to Grampian is predicted to rise sharply. Meanwhile local private dental practitioners continue to move more patients to the private sector and the NHS waiting list continues to increase.'

DAMNING INQUIRY REPORT CALLS FOR TRAINING IN LEARNING DISABILITIES TO BE MADE MANDATORY

Training in healthcare for people with learning disabilities should be made a mandatory part of clinical undergraduate courses, an official inquiry has recommended.

The report of the inquiry into access to healthcare for people with learning disabilities, chaired by Sir John Michael, found their needs were going largely unmet. 'There is evidence of a significant level of avoidable suffering and a high likelihood that there are deaths occurring which could be avoided,' the report noted.

'Education and training for staff is severely limited. Staff without training tend to stereotype people with learning disabilities; they are less likely to listen, or to believe that a life lived with learning disability, could be a life worth living.'

People with learning disabilities and their carers should be involved in training of clinical staff at undergraduate and postgraduate level, the report urged. 'Although there are examples of good practices, witnesses described some appalling examples of discrimination, abuse and neglect across a range of health services,' it said.

Launching the report last month, Sir John Michael, consultant physician and former chief executive of Guy's and St Thomas' NHS Trust, said 'reasonable adjustments to make services easily accessible to people with learning disabilities are not particularly difficult to make.'

The Department of Health has announced the appointment of a national director for learning disabilities. Anne Williams, currently director for community health and social care at Salford Council, will take up the post in October.

Mrs Williams, an immediate past president of the Association of Directors of Social Services, was chosen by a panel which included a person with a learning disability and a family carer. She said she wanted those with profound disabilities to have equal access to services.

Health board	Allocation for 2009 10 (£millions)	Allocation for 2010 11 (£millions)
Ayr and Arran	2.22	2.53
Borders	0.63	0.72
Dumfries and Galloway	0.94	1.07
Fife	1.87	2.14
Forth Valley	1.52	1.73
Grampian	3.09	3.53
Greater Glasgow	10.03	11.47
Highland	1.93	2.21
Lanarkshire	3.02	3.45
Lothian	5.33	6.09
Orkney	0.63	0.72
Shetland	0.63	0.72
Tayside	2.54	2.9
Western Isles	0.63	0.72
Total	35.00	40.00

MORE THAN A QUARTER OF THE POPULATION NOT SEEING A DENTIST, NATIONAL SURVEY REVEALS

Patients want easier access to NHS dentistry, according to the latest survey by the Healthcare Commission.

The survey of 69,000 people in England, carried out between January and April, showed 26% did not see any dentist, either NHS or private, 'regularly', which the survey defined as at least once every two years.

Fifty per cent of respondents visited an NHS dentist and 24% received private treatment. But access varied between areas.

Among the 10 strategic health authorities (SHAs), access to NHS dentistry was highest in the North West SHA and Yorkshire and Humber SHA – 54% in each. It was lowest in South Central SHA (42%) and London (43%).

The survey has published results by primary care trust (PCT) for the first time this year. Access appeared to be easiest in Great Yarmouth and Waveney PCT, where 73% of respondents said they saw an NHS dentist every two years. South Tyneside PCT scored 67%,



Doncaster 62% and South Gloucestershire 61%.

Access was lowest in Gloucestershire PCT (31%), Kensington and Chelsea and Westminster PCTs (both 33%), and Kingston and Camden (both 34%). Of London's 31 PCTs only five – Enfield, Harrow, Havering, Hounslow and Redbridge – had half or more of respondents accessing NHS dentistry.

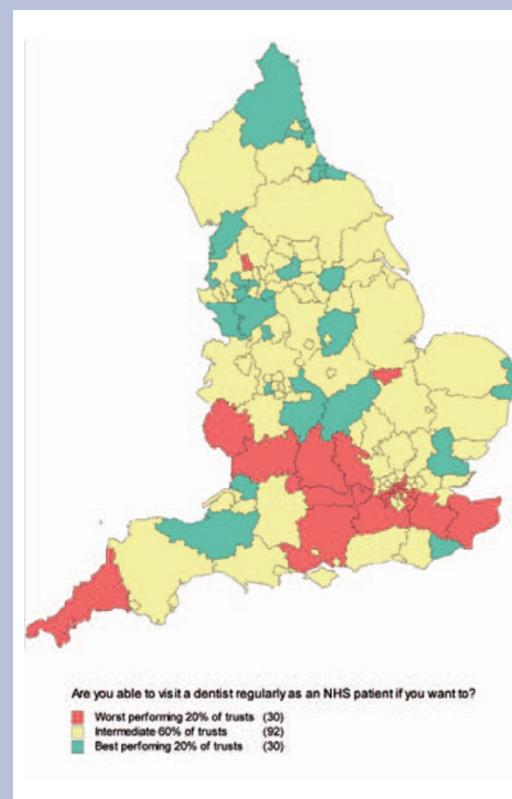
In three London PCTs – Barking and Dagenham, Southwark and Tower Hamlets – 43% of respondents said they were not visiting a dentist. Seventy-nine per cent of those who did not receive NHS dentistry said they would like to be able to do so.

Anna Walker, chief executive of the Healthcare Commission, (pictured left) said: 'Access to NHS dental care is a continuing concern and this survey shows where people are most worried around the country.'

'Regular dental treatment is important for maintaining good oral hygiene. If a large proportion of people do not receive treatment regularly, we could be facing a significant national health problem in years to come,' she added. 'We recognise the national concerns about dental care and we will be highlighting the gaps where they occur,' she said.

Susie Sanderson, chair of the BDA's executive board, welcomed the report as 'another powerful message about the state of NHS dentistry'.

'The concern highlighted by the Healthcare Commission is that real problems could be being stored up for the future. It is vital urgent action is



taken to tackle the flaws in the current NHS arrangements for dentistry.'

Ms Sanderson, who works in a mixed family practice in Sheffield, added: 'We also need to start looking carefully at what is meant by access to an NHS dentist, and recognising the importance of continuity of care.'

Speaking at the BDA's annual conference in Manchester in May, chief dental officer, Barry Cockcroft said the 20 PCTs providing the worst access to NHS dentistry were being kept under review. But he suggested that problems with access were being exaggerated, and new centres were not being publicised. 'The biggest problem with access is perception,' he told the conference. 'There is no shortage of dentists wanting NHS contracts.'

'A key driver of demand going forward is likely to come from reduced dental care services for children on the NHS as many predict the end of "children-only" contracts with dentists that offer only private care to adults,' the report predicts.

Denplan already offers capitation plans for independent schools and DPAS has introduced a capitation plan for under-18s, it says.

ENDING OF CHILDREN-ONLY CONTRACTS WILL DRIVE UP DEMAND FOR DENTAL COVER, SAY MARKET ANALYSTS

The predicted scrapping of children-only NHS contracts and continuing access difficulties will drive up demand for dental insurance, according to *Health care and cover*, a report from market analysts Laing & Buisson.

Some 5% of the UK population are

covered by dental plans, following a 10% per cent increase last year, and 'the scope for growth is sizeable', says the report. Chief Dental Officer Barry Cockcroft told this year's BDA conference that children-only contracts were likely to be phased out (*BDJ* 2008; 204: 547).

DIARY

SEPTEMBER

Overview of current employment law and how to avoid pitfalls

Date: September 2 2008
Venue: Medical Biology Centre,
97 Lisburn Road, Belfast
Tel: 02890 682223

Association for Dental Education in Europe 34th Annual Meeting Career development in dental education

Date: September 3-5 2008
Venue: Zagreb University
www.adee2008.org

American Academy of Periodontology Annual Meeting

Date: September 6-9 2008
Venue: Seattle, Washington
Email: meg@perio.org

Infection Control for the Whole Dental Team

Date: September 18 2008
Venue: Charles Hastings Centre,
Worcestershire Royal Hospital
Tel: 0121 237 2834
Email: d.hammond@bham.ac.uk

FDI World Dental Federation Annual Congress

Date: September 24-27 2008
Venue: Stockholm, Sweden
Email: congress@fdiworldental.org
www.fdiworldental.org

BDA Hospitals Group Annual Scientific Meeting

Date: September 25-26 2008
Venue: Magdalene College, Cambridge
Tel: 020 7563 4590
Email: events@bda.org

The British Society of Dental and Maxillofacial Radiology Golden Anniversary Meeting

Date: September 25-26 2008
Venue: Natural History Museum, London
www.bsdmfr.org.uk

OCTOBER

Dental Tutors Conference

Date: October 3-4 2008
Venue: Old Ship Hotel, Brighton
Tel: 020 7415 3676
Email: lcapple@kssdeanery.ac.uk

CLINICAL FELLOW WINS PHD FUNDING FOR PROTEIN RESEARCH

Helen Petersen, a Walport academic clinical fellow in the Department of Oral and Dental Science, Bristol University, has been awarded a Wellcome Trust fellowship worth £132,000 to fund her PhD studies.

A graduate of Bristol Dental School, she will be researching the structure and function of a newly discovered protein that is found on the surface of bacteria that live in the mouth. The protein interacts with and activates blood platelets, leading to blood clots, and may be important in initiating



infectious cardiovascular disease. Helen is one of the first academic clinical fellows to receive such an award.

SCHOOL MILK FLUORIDATION PIONEER HONOURED

Michael Lennon, professor at Sheffield Dental School, was honoured for his pioneering work on the dental health of children at last month's meeting of the International Association of Dental Research in Toronto.

In 1993, when he was head of dental services at Liverpool University, Professor Lennon established the first UK public health programme of fluoridation of school milk in St Helen's, Merseyside. The programme has since been expanded to cover 15 PCTs and 42,000 children aged 3-11.

Professor Lennon, now chairman of the Fluoridation Society and programme manager for the dental outreach programme at Sheffield Uni-



versity, is pictured left with Deborah Greenspan, Professor of Oral Medicine at San Francisco's School of Dentistry and President of the IADR. He received the EW Borrow award for achievements in oral health promotion and research on the oral health of children.

Other researchers honoured at this year's IADR meeting included Professor Jimmy Steele and Dr Philip Preshaw (above), both of Newcastle Dental School, who received distinguished scientist awards. Professor Steele's award was in recognition of his work in geriatric oral health and Dr Preshaw received the young investigator prize for his work in periodontal research.

