

The BDJ Update 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. Please direct your correspondence to the Liane Voisey, Update Editor, BDJ, 64 Wimpole Street WIG 8YS or by e-mail to bdj@bda-dentistry.org.uk

Shortage of dentists in Armed Forces

A shortage of dentists in the Armed Forces is risking a compromise in operational effectiveness. In its evidence to the Armed Forces Pay Review Body, the British Dental Association (BDA) has warned that the growing staffing crisis within the Defence Medical Services (DMS) could impede the military capability of the UK's Armed Forces.

With a current shortfall of 19% of trained dental officer manpower the oral health of military recruits may remain untreated, thus raising questions over their fitness for operational duties. Poor oral health is a particular problem amongst some service personnel.

The evidence goes on to warn that without the necessary manpower to achieve military dental fitness before recruits complete their training, soldiers, sailors and aircrew could become a liability to their prospective units. In a 2001 BDA Survey, Armed Forces dentists blamed lack of stability and deteriorating career prospects, but particularly poor remuneration as reasons for leaving the Services early.

Brigadier Mike Newell, chair of the BDA Armed Forces Committee has said that unless action is taken to stem the dental staffing crisis afflicting the Defence Medical Services, more and more military Service personnel will be at risk when on active service if their oral health does not come up to the minimum standard.

Relief for migraine

A dentist claims he has discovered a cure for one of the causes of migraine. Professor Phil Lamey, dean of the Royal Victoria Dental School in Belfast, has invented a mouthpiece that he says has been 94 per cent successful in tests. The mouthpiece, made from acrylic resin, restrains the jaw, preventing sufferers from clenching their teeth. Professor Lamey had previously found that clenching causes a build-up in the saliva of a molecule that appears to cause migraine.

Glossup dentists who tackled Kilimanjaro



Glossup dentists Brian Durgan and Timothy Ashworth raised £1242.74 in sponsorship after conquering Mount Kilimanjaro in Tanzania last June. At 5896 metres the mountain is the highest free-standing peak in the world and the biggest in Africa. Brian and Tim decided to divide the money between three charities: The Dentists' Health Support Trust, Oxfam and the Willow Wood Hospice. At the presentation, Brian Durgan commented that the final assault on the summit, which started at midnight, was certainly the hardest walk they were ever likely to do.

Pictured from left to right: Tim Ashworth, James Willis of the Dental Health Support Programme, Jacque Baylis from Oxfam, Brian Durgan, with John Fellowes from the Willow Wood Hospice in Ashton-under-Lyne seated in the chair.

BDHF announces redundancies

The British Dental Health Foundation (BDHF) has announced three redundancies from its headquarters staff. Chief Executive Dr Nigel Carter said that the BDHF have suffered some unexpected losses from bad debts due to the failure of two of the Foundation's accreditation customers, Louis Sanderson and Epac. Accreditation fees contribute an important share of the Foundation's income, but it is highly dependent on movements in the marketplace. Dr Carter said: "New product activity this year

among retailers has been lower than anticipated. It is of course essential that the Foundation budgets in a prudent manner and so we have decided to take early action to protect the rest of its valuable activities. We have been able to make some cost savings across our operations, and through the redundancies of three members of staff. Unfortunate though the redundancies are, they have created a situation where we can take the opportunity to re-evaluate our operations for greater efficiency.'

Fancy dressing up for Dentaïd?

Do you fancy dressing up for a good cause?

On Friday 12th July 2002, Dentaïd is calling on dental practices, companies and organisations across the country to don their glad rags, 'sad' rags, or maybe even outrageous rags, in a bid to help raise much-needed funds.

All you need do to take part in National Dress-up for Dentaïd Day is wear something that you would not normally wear to work. Perhaps you have a dinner suit that rarely sees the light of day or maybe you are brave enough to wear last season's fashion mistake. Alternatively, you may want to adopt a dressing up theme, for example bad taste, 70's or, for the more adventurous, tooth fairies!

Money raised will help to support Dentaïd's ongoing work throughout the developing world where tooth decay is rife, abscesses can cause death and DIY extractions are commonplace.

Your money could help refurbish a surgery destined for a rural hospital, fund a volunteer to provide hands-on dentistry and oral health education, or support our bid to eradicate the Ugandan practice of removing milk teeth buds with sharpened bicycle spokes – a 'cure' for fever that frequently causes septicaemia and death.

So get dressing-up and help us to help those in need.

For more information on National Dress-up for Dentaïd Day or to receive an information pack containing practice poster and fundraising form, contact Natalie Clark (organising the day on Dentaïd's behalf) on: 0117 902 5164 or e-mail natalieclarkpr@blueyonder.co.uk

RESEARCH

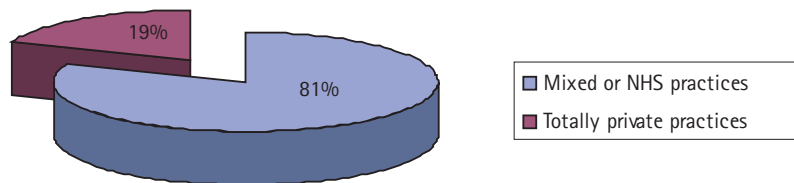


Fig. 1. Proportion of totally private dental practices in the UK by 2007.

Private dentistry on the increase

According to recent survey statistics, 17% of dental practices are in the process, or are planning to become, totally private practices in the not too distant future.

The latest BDA Omnibus Survey, undertaken in September 2001, came up with some very interesting findings on the subject of private dentistry. The survey, based on almost one thousand responses had a 64% response rate.

The results suggest that there are around 11,000 dental practices across the UK and 7% of these may be totally private practices – this equates to around 800 totally private practices. Totally private dental practices seem to be smaller in number (in terms of the number of dentists per practice) and around two-thirds of the practices are based in the south of the country.

A totally private practice was defined as a practice where all the dentists undertake 100% of their work privately. In reality, however, many of the practices that claimed to be totally private did undertake some NHS work.

Many practices that self-classified themselves as totally private practices still offered NHS treatment to exempt adults and children. However, the survey seemed to indicate that some dentists are prepared to offer treatment under the NHS for the children of their private paying adults. In addition, many dentists continue to offer

NHS treatment to exempt adults (and full-time students) who have been regular attendants to the surgery.

The results indicate that if 17% of practices are currently in the process, or are planning to move towards being, totally private practices across the UK, around 1700 dental practices are currently looking to go private.

This sentiment seems to be constant among differing age cohorts – it is not just the earlier qualified dentists that are seeking to make the move towards offering private work only, but it is also more recently qualified dentists.

Across all practices, the average time anticipated to move their practice to a totally private practice is three and a half years. The upper quartile is five years and this suggests that by 2007 there may be a little over 2000 totally private practices in the UK (see Fig. 1 above). This is 19% of the current number of practices in the UK. The two major reasons why practices are looking to become totally private is to decrease the dentists' stress and workload.

Other motivations for a move towards exclusively private work include: creating a happier environment for all patients and staff, improving the quality of the dental work, using higher quality materials, more freedom of choice for the patient and even increased job satisfaction.

It's a VDP first!

Dr Diego Jazanovich has been awarded the 2001/2002 annual Ruby Austin Prize, the first Vocational Dental Practitioner to receive this award for best VDP case presentation.



Diego Jazanovich holding the Ruby Austin Shield.

Dr Ruby Austin MBE, immediate past President of the British Society of General Dental Surgery, presented the award to him.

The presentation for all VDPs and trainers from the Charing Cross and LSL (Lambeth, Southwark & Lewisham) Vocational Training Schemes took place at Selsdon Park Hotel in Croydon.

Well done Ginny!

Virginia Kingsmill, lecturer and specialist registrar in the restorative department at the Royal London Hospital, was the lucky recipient of the new BioArt GKT Articulator as part of a new annual initiative launched between Panadent and the SRRDG (Specialist Registrars in Restorative Dentistry Group). Virginia (pictured below right) took part in the Autumn conference at Loch Lomond during which the lucky draw was made. The BioArt Articulator is now the chosen reference point for undergraduate training at GKT.



Dental Defence Union advocates new National Complaints Authority

The best way to resolve patient complaints about dentists is by in-house procedures, said the Dental Defence Union (DDU) recently.

The comment was made in response to a major feature on dental complaints in Which? Magazine which found that many patients were not satisfied with the current complaints procedures.

This is in distinct contrast to findings by the DDU who carried out an in-depth analysis of complaints reported by dental members. The survey found that no less than 88 per cent were resolved at practice level. The 12 per cent of complaints that were not resolved at local level were dealt with in a variety of ways including independent review, claims for negligence and the GDC's disciplinary procedures.

The current NHS complaints procedures were introduced in 1996 and made it mandatory for a dental practice treating NHS patients to have an in-house complaints procedure and were subsequently endorsed by the GDC for all dentists.

For the first time patient complaints were separated from formal disciplinary procedures. The aim was to satisfy complainants at practice level.

Rupert Hoppenbrouwers from the DDU says that the current local complaints procedure is accessible to patients and their families and in most circumstances

enables them to get an early, detailed and satisfactory response to their complaints. He says that where the current procedures tend to be less effective is when the patient wants to carry things further or is seeking financial compensation. The procedure is not set up to deal with issues of compensation, he says.

'If patients are unhappy with the local resolution stage of the procedure, they can ask for independent review of their complaint and if this is refused, or if they are not satisfied with the review's findings, they can complain to the Ombudsman. Or, if it is a matter that may involve negligence, they can consult a solicitor. Often patients are simply seeking for an independent assessment of the problems they experienced. From assisting our members, we are aware of deficiencies in the current complaints procedure, particularly at the independent review stage.'

The DDU have suggested that many of the problems with the current procedures could be resolved if patients were given better information about the procedures and their purpose and if they had access to specialist advisers who could guide them through the process.

DDU say they advocate the establishment of a National Complaints Authority, which would have responsibility for overseeing the complaints procedures in both the NHS and private sectors.

DIARY

May 2002

British and Irish Dental Associations
Annual Conference
Date: 02.05.02–04.05.02
Venue: Waterfront Hall, Belfast
Contact: Claire Burns, Conference
Manager, British Dental Association,
64 Wimpole Street, London W1G 8YS.
Tel: +44 (0)207 563 4590
Fax: +44 (0)207 563 4591
Website: www.bda-events.org.uk

Dental Sedation Teachers Group Annual
Symposium
Date: 14.05.02
Venue: The Royal College of Physicians,
Regent's Park, London.
Contact: Carole Boyle, Floor 26 Guys
Dental Hospital, London Bridge, London
SE1 9RT.
E-mail: carole.boyle@kcl.ac.uk

British Society of Periodontology Spring
Scientific Meeting
Date: 19.05.02–21.05.02
Venue: The Grand Hotel, Brighton
Contact: Mrs A. Hallows, Administrative
Secretary, 44 Pool Road, Hartley,
Wintney, Hook, Hants RG27 8RD.
Tel: +44 (0)1252 843598
Fax: +44 (0)1252 844018
E-mail: bspadmin@btinternet.com

'Happiness in Dentistry' seminar – how to
run a profitable cosmetic based practice
Date: 20.05.02
Venue: British Dental Association,
London.
Contact: Helena Casbolt, Graffo Script,
8 Selbourne Road, Southgate, London
N14 7DH.
Tel/Fax: +44 (0)20 8882 1226
E-mail: hcasbolt@aol.com

September 2002
BDA/MIDDUS 2002 Scottish Young Dentist
Conference
Date: 06.09.02–07.09.02
Venue: Dunblane Hilton Hydro
Contact: Fiona Angus, Deputy Scottish
Secretary, 4 Atholl Place, Perth PH1 5ND.
Tel: +44 (0)1738 441040
Fax: +44 (0)1738 441042
E-mail: f.angus@bda-dentistry.org.uk

INVESTORS IN PEOPLE

Llangefni Dental Practice awarded for IIP



Llangefni Dental Practice team (above) has recently been recognised as an 'Investor in People'. The award was presented by Albert Owen, the local Labour MP.

The practice has two partners, Rhys Davies, who was principal from 1982 to 1999, when Dylan Thomas joined as a partner. Since Rhys converted the practice to being Den-plan/private for adults in 1993 there have been many positive changes. The reason for conversion were the usual ones, but the principal aim was to improve the service and care offered to the patients.

Rhys comments: 'The Investors' in People programme has made us assess as a practice team what we were doing and where we wanted to be. It has disciplined us to improve the management of the practice and improve our communication within the team and with our patients. We have tried to measure our performance with staff and patient questionnaires, DMF and BPE surveys, so that we have established baselines from which to improve. We want our practice to continue to evolve and improve. Investors has given us a framework on which to build.'

Scottish dental practice rewarded for business excellence

Cherrybank Dental Centre in Perth has succeeded in winning the Bank of Scotland Business Excellence Award hosted by the Perth and Kinross Chamber of Commerce in November 2001 for the second year running. This year, the topic was 'Growing your business with information technology'. The Perth practice won over the panel of judges with their explanations and

demonstrations of how technology and the use of computers are helping them to deliver excellent service and treatment to their patients. The competition was tough, with entrants including photographers, hoteliers and the industrial sector. And the prize was worth winning: a total of £4000 cash and consultancy of £1000.



The team from Cherrybank Dental Practice receiving the award. From left to right: Gail Dow, practice manager, Dr Elaine Halley, practice owner and a Royal Bank of Scotland representative.

The principal dentist Dr Elaine Halley said she was extremely proud of their achievement and would encourage any practice to get involved in awards of this nature. 'The feedback received is excellent benchmarking material, and involvement in these awards raises the profile of dentistry throughout the community.'