## JUNIOR DENTISTS JOIN MEDICS IN INDUSTRIAL ACTION

The British Dental Association (BDA) announced on 4 January that hospital dentists would take part in their first ever industrial action on 12 January, joining



their medical colleagues following government failure to address concerns on safe working and unsocial hours.

An overwhelming majority of BDA voters had backed moves to take part in industrial action. Plans were postponed to give negotiations at the conciliation service ACAS a chance.

The BDA then wrote to NHS trusts in England to inform them of the following planned industrial action:

- 8am, Tuesday 12 January to 8am, Wednesday 13 January – emergency care only
- 8am, Tuesday 26 January to 8am, Thursday 28 January emergency care only
- 8am to 5pm, Wednesday 10 February full withdrawal of labour.

BDA Chair Mick Armstrong said: 'We wanted to see real progress towards a contract that could work for patients and practitioners. Regrettably the Department of Health has been unwilling to compromise on the fundamentals, on safe working and unsocial hours.

'Next week will see colleagues take industrial action for the very first time. These hospital dentists form a small but vital part of our NHS, but their dispute matters to every healthcare professional. Dentists and doctors will not stand by and see patients and practitioners put at risk.

'Industrial action is always a last resort, and one we sincerely hoped could have been avoided. We have been left with little choice but to take this step in the face of government intransigence.'

The industrial action planned for 26 January was later suspended in support of the British Medical Association (BMA) as it sought to rekindle talks to resolve the differences over the proposed new contract.

The BDA hoped to take a group of trainees to the Houses of Parliament in London to lobby their MPs in person on 10 February as *BDJ Team* goes to press.

## NEW **NICE GUIDELINES** AIM TO IMPROVE QUALITY OF DENTISTRY PROVISION IN THE UK

The British Dental Health Foundation has welcomed the focus on giving patients the ability to make an informed decision about their care in the new NICE guidelines on oral health promotion in general dental practice.

The guidelines cover how general dental practice teams can communicate advice about oral hygiene, the use of fluoride, as well as how areas such as diet, smoking, smokeless tobacco and alcohol intake affect oral health in order to help patients make informed decisions on their own care and encourage preventive treatments.

Dr Ben Atkins, a dentist and Trustee of the British Dental Health Foundation, was a member of the committee for the NICE guidelines.

Dr Atkins said: 'These guidelines have been developed with the patient firmly in mind; they outline a patient-centred approach to ensure patients who are using the services are actively involved in discussions and able to make informed decisions about their care.

'Throughout the consultation stage it was recognised that interventions need to provide patients with support to help them change their behaviour in order to effectively change how they look after their oral health at all times.

'By focusing on providing staff in dental practices with the means to do this by following these guidelines we are hoping to see the quality of dental provision in the UK improve in the future.'

The NICE guidelines include lots of helpful information for dental professionals to help communicate with patients, such as how they can use appropriate words to discuss the strength of their recommendations.

They also include information about prescribing medicines, professional guidelines, standards and laws (including on consent and mental capacity), and



safeguarding to help improve patient support.

Dr Nigel Carter OBE, Chief Executive of the British Dental Health Foundation, said of the guidelines: 'Although the landscape of oral health in the UK has improved significantly over recent years, there remain significant regional disparities. We welcome the new NICE guidelines, which can help to address these socio-economic variances and inequalities which still exist in oral health.

'Putting the patient front and centre and giving them all the information they need to make an informed decision can educate them and tackle these inequalities.

'By developing a more preventive approach to their treatment dental professionals can help to stop problems before they even exist.

The new guidelines recognise how oral health is vitally important to general health and wellbeing too and acknowledged how it can affect people's ability to eat, speak and socialise normally.

Poor oral health can also lead to absences from school and workplaces as well as affecting the ability of children to learn, thrive and develop.

Read the full NICE guidelines here.

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