

## New call for dental examiners

The Adult Oral Health Survey (AOHS) 2023 is an epidemiological study of the dental health of the adult population, and has been run approximately every ten years since 1968. The National Centre for Social Research (NatCen), in collaboration with the University of Birmingham, King's College London, University College London and Newcastle University, have been asked by the Office of Health Improvement and Disparities, part of the Department of Health and Social Care, to carry out this survey.

The AOHS Consortium are looking to recruit further dentists and dental therapists in 46 postcode areas, to undertake the fieldwork between January and March 2024.

To register your interest, please download the application form from the following site: <https://natcen.ac.uk/call-dental-examiners>. Details about the study, training, materials, remuneration, key requirements and your role can all be found on the application form.

The deadline for submitting applications is Friday 15 December 2023.



## BDA encourages dentists to complete new workforce survey

With the General Dental Council's (GDC's) annual renewal process for dentists now open, the British Dental Association (BDA) has encouraged registrants to take part in the voluntary collection of workforce data, to help provide a clear picture of the crisis facing NHS dentistry.

Dentists will need to renew their registration by 31 December. As part of this year's renewal, the GDC is for the first time asking registrants to complete, on a voluntary basis, a small number of additional questions about the work they undertake as a registered dental professional.

The BDA believes this process has scope to give the clearest impression of the challenges facing the dental workforce, UK wide. The regulator has given reassurances that the data will not be used to identify individuals and data will be published anonymously. Dental care professional (DCP) data collection will coincide with their registration cycle in July.

BDA Chair Eddie Crouch said: 'We have long argued that there should be better workforce data given the wholesale inadequacy of the information currently available. The GDC is the logical organisation to undertake this work given its regular interaction with all registrants.

'This is purely voluntary, and we've received explicit assurances that all responses will be anonymised.

'At present Ministers can't tell where the real "dental deserts" are. We would encourage all dentists to participate, so we can provide the clearest of picture of the crisis this service faces.'



## Boredom

Shaun Sellars continues his series on ethical dilemmas in dentistry which appears in every second issue of the *BDJ*.



Few things make a GDP's heart sink more than a day of back-to-back examinations. It's not just the monotony of repeating the same words and actions for hours, but the knowledge that, if boredom sets in, it's easier to make a mistake and miss something important. To err is human, as they say, and we shouldn't expect ourselves or our colleagues to be infallible. However, it's important to design our working systems to reduce the likelihood of errors occurring and minimise any that slip through the net.

Human factors, the catch-all term for the study of how we relate to our working equipment and environment, takes its lead from the aviation industry, where there is a culture less inclined to blame individuals for errors and more interested in learning from mistakes. Healthcare, including dentistry, has started to take this on board over recent years, but there is still work to do.

There are many barriers we can place in the way of mishaps, including ones we can take from the airline industry itself. For example, when I travel by plane, I'm reassured that the pilot and co-pilot have completed a walkaround of the aircraft before take-off. Items have been ticked off from the pre-flight checklist to ensure the safety of myself and other passengers. Given the set routine of many dental procedures, shouldn't we use appropriate checklists to guarantee we don't miss anything and reassure patients of the quality of their treatment? And for any particularly complicated treatment, we can draw up a 'flightplan' at the start of an appointment and tick stages off as we go along. Not only does this reduce the likelihood of errors, but it also helps to keep everyone in the surgery motivated.

Of course, none of these barriers are foolproof, so we end up with a 'Swiss cheese' model of disaster avoidance, but to my mind, a change in the culture surrounding dentistry is essential.

Culture in healthcare is a complex mishmash of beliefs and values, which we can sum up as 'how and why we do things.' Shifting culture is complex and unpredictable but always comes via action from the top, whether in surgery, practice, teams, or regulators. Dentistry must move towards a no-blame, or at least lesser-blame, culture recognising that mistakes are inevitable. At the very top of the profession, we now have an excellent opportunity to kickstart this cultural shift, with the GDC announcing the imminent departure of their Chief Executive and Registrar, Ian Brack. The new Chief Executive takes over the day-to-day running of the Council and will uniquely influence how the profession develops in the future.

Many have written about a culture of fear in dentistry thanks to the GDC, affecting dentists from their student days. The new Registrar needs to understand the pressures on our profession and be willing to listen to practitioners and patients when considering regulatory reform. We must replace fear with openness and learning, which can only come from actions speaking louder than words.

