

# DENTAL TRIBUNE

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## News in Brief

### Patience is a virtue

New research has shown that men's patience is more likely to snap quicker than women's. When asked how long they would wait before walking off in a strop, five out of ten men would wait up to a minute, but only one in ten women said they would leave this quickly; however, the research also showed that men tend to believe they are more patient than women. On average, Brits' patience lasts just two and a half minutes before they snap. A third of the people surveyed said they often found themselves complaining to complete strangers. Some of the things that made people lose their cool were being put on hold, waiting for people who are late, delayed trains, trying to get an appointment with a dentist or GP, and children repeatedly asking the same question.

### Menopausal tooth loss

New research forecasts that over one in four post-menopausal women are likely to suffer from tooth loss over a five-year period. A study of more than 1,000 post-menopausal women indicates that around one in four are likely to suffer tooth loss over a five year period, and the risk increases to nearly 90 per cent if other risk factors are present, especially diabetes and if they smoke. The American based study found that 295 post-menopausal women out of 1,021 (28.7 per cent) had suffered from tooth loss over the five year study period. Previous studies have potentially linked the menopause to tooth loss because of factors such as bone loss and oestrogen deficiency. The research was published in *Community Dentistry and Oral Epidemiology*.

### Tweeting dental pain

Researchers from the University of California San Francisco (UCSF), Preventive and Restorative Dental Sciences have shown that Twitter can be used to communicate health concerns. The authors of the study, Natalie Heavilin, Barbara Gerbert, Jens Page and Jennifer Gibbs, found that many Twitter users use their account to share their experiences and many seek advice from fellow Tweeters on health concerns. According to a report, the authors of the study studied a random set of 1,000 tweets; the report stated that 85 per cent were tweets tweeting about dental pain; 44 per cent reported seeing a dentist and 14 per cent actively sought advice from the Twitter community.

[www.dental-tribune.co.uk](http://www.dental-tribune.co.uk)

## News



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## Feature



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# It's not all white!

## Whitening salon offer raises registrant issue and patient safety

Following an advertisement placed recently on Groupon by Starsmile, a company who are offering whitening treatments that are performed by non-dental professionals, the question of patient safety has once again been brought into the limelight.

On their site Starsmile claim they "offer the same professional service and treatment as a dentist but at a fraction of the cost;" they also claim to provide a health check of the patients teeth and provide aftercare; however, they are neither dentists nor dental professionals. During the treatment video that is displayed on the Starsmile website, the 'technicians' are constantly in contact with the teeth and mouth; however, although stated as part

of their procedure, there was no 'health check' either before or after treatment.

cosmetic treatment carried out by fully-trained Starsmile technicians." In light of the advertisement the BDA wrote to the General Dental Council (GDC) to ask them to take action to ensure patient safety is upheld.

Stuart Johnson, Chair of the BDA's Representative Body said: "This advert is very concerning in that it encourages the public to get tooth whitening done by non-dental professionals. The GDC's recent campaign sought to warn the public against tooth whitening being conducted illegally by unregulated persons, and highlighted the fact that the procedure should only be undertaken by a dentist.

ered by the European Council Directive on Cosmetic Products 76/68.EEC, their agents are carrying out a cosmetic procedure and not practising dentistry.

A statement from the GDC on non-registrants who carry out tooth whitening stated: *The Council is aware and concerned that tooth whitening is being carried out in a growing number of salons, clinics and shopping centres by non GDC registrants and indeed is being offered to people in their own homes. It is also aware that*

*the standard of treatment being offered is far below that which is required by its registrants. For some time the Council has been exploring different approaches to tackling this problem with a view to ensuring that such procedures are only carried out by regulated individuals and in suitable locations. Given the legal complexities involved, however, this has been a lengthy process.*

Dental Tribune was unable to contact Starsmile for their take on the issue. [DT](#)

*'We are not dentists, our teeth whitening procedure is a cosmetic treatment carried out by fully-trained Starsmile technicians'*

of their procedure, there was no 'health check' either before or after treatment.

In addition to this, Starsmile also claimed how one of the 'highlights' of the treatment was that the procedure and the technology were recommended by the British Dental Association.

Further problems begin to emerge as Starsmile make it clear in the FAQ section of its website that tooth whitening is not provided by GDC registrants, saying: "We are not dentists, our teeth whitening procedure is a

"The BDA wants patients to feel completely safe and know that they are being treated by a registered professional who is fully trained to undertake this procedure. We've called on the GDC to take action on this matter."

The law currently states that under the Dentists Act 1984 it is an offence for non-registrants to practise or be prepared to practise dentistry. However, it has been noted by the GDC that several companies which produce tooth whitening products maintain that: *since tooth whitening products are cov-*

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# Give your views on CQC

The Government is seeking the public's views on a number of proposed changes to regulations for the Care Quality Commission registration.

It has been stated that the first year of the new registration system, which has been operated by the CQC, has highlighted several issues with regards to the regulations. Some regulations have not functioned as initially intended, whilst others have had a lack of clarity or impose an "unjustified burden" on providers. In seeking the views of the public and working bodies, it also asks respondents to identify any further issues that should be taken into consideration as part of a wider review which will begin later this year.

The consultation document, which is available online, states: *The proposals include changes to both the regulation of healthcare and adult social care services that, subject to consultation responses and the Parliamentary process, could be made swiftly and that we plan to start to implement in 2012.*

The 56-page proposal is followed by an eight page questionnaire, which medical professionals and the public alike are encouraged to complete. The consultation closes on 7 October, 2011.

Purpose of the registration regulations review: When the registration regulations were made, a commitment was made to carry out a full review of the operation of the regulations that underpin the registration system within

three years.

The document states how the proposal, which was set out when the registration regulations were introduced, is a first step in its commitment to review the operations of the regulations that underpin the registration system.

The initial review of the regulations aims to:

- (a) Consider the opportunities for streamlining the existing requirements, reducing the burden of regulation
- (b) Consider issues that have emerged with the practical operation of the registration system by CQC
- (c) Correct oversights in the drafting of the regulations and possible unintended interpretations of the regulations that have come to light

- (d) Tackle issues it was not possible to resolve in advance of the regulations being made
- (e) Ensure consistency across the regulatory system
- (f) Ensure that the requirement to register appropriately reflects the risks to those receiving care

The proposal also states that the government has "no desire to limit opportunities to provide health and adult social care or to restrict entry to the market unnecessarily. We therefore propose retaining the requirement for the registered person to be "fit", but to amend the regulations so that where the provider is a partnership, the partnership as a collective body needs to have the relevant skills and experience, rather

than these being held by each individual partner. The proposal will remove a regulatory burden on providers and allow business flexibility."

In direct response to dentistry, the consultation document proposes to make the regulations clearer with regards to the terms Medical and/or dental services. As the proposal states: the regulations are not consistent in the use of the terms "medical" and "dental" and whether or not the term medical includes dental. We propose to amend the regulations to make this clearer.

The consultation document and the questionnaire can be found at [www.dh.gov.uk/en/Consultations/Liveconsultations/DH\\_128222](http://www.dh.gov.uk/en/Consultations/Liveconsultations/DH_128222) DT

## £100,000 helps deprived areas

Twelve organisations have successfully bid for funding from a new charitable fund which will help nearly 20,000 people to improve their oral health.

The British Dental Health Foundation established the 'Oral Health Education Project' earlier this year to support the work of local oral health promotion teams across the UK and the project has been made possible by a generous charitable donation of £100,000 from the 'Wrigley Tooth Fairy Fund'.

The twelve organisations which will receive funding are: NHS Nottingham City will start

a project to develop oral health education materials and guidance for primary school teachers and pupils in Key Stage One.

Buckinghamshire Priority Dental Service (Milton Keynes Primary Care Trust) will begin a project to support elderly and vulnerable in-patients in five Buckinghamshire hospitals whose oral health is affected by their medical conditions such as strokes and head injuries.

NHS East London and the City (Hackney, Newham and Tower Hamlets) project targets parents of children under the age of one to help reduce dental decay and increase the use of dental services.

South Tyneside NHS Foundation Trust will conduct a series of week-long Dental Health Roadshows, funded by the Wrigley Tooth Fairy Fund, for more than 1,000 children, carers, parents, guardians and teachers in special

needs schools across South Tyneside, Gateshead and Sunderland.

Northumbria Healthcare NHS Foundation Trust have devised a community project which helps to improve the oral health, knowledge and skills of families living in North Tyneside with some of the poorest levels of oral health.

North Tees and Hartlepool NHS Foundation Trust project is a partnership which will provide 59 primary schools with teaching resources for key stage two pupils to help integrate oral health into the school curriculum. The project will also help to link all schools to a local dental practice and support students at Teesside University Dental School to gain training and work experience during the project.

Northern Devon Healthcare NHS Trust's project seeks to improve oral health in Ilfracombe, Devon, which has only one NHS

Dental Practice and limited current oral health education and promotion activity.

Peninsula Dental School supported by NHS Plymouth, will train up 24 'Oral Health Ambassadors' to work in children centres across Plymouth.

Heart of England NHS Foundation Trust will begin a project which will help to raise the profile and promote the importance of good oral health in a deprived area of North Solihull called Smiths Wood. The area currently does not have a dental practice, and funding from the Wrigley Tooth Fairy Fund will help to create a regular and sustained presence in the ward by training volunteers, developing resources for Health Visitors and encouraging access to dental services.

The funding will also help NHS Sheffield increase the long-term use of dental services by

children in Sheffield, allowing them to help train up to 40 health visitors and provide resources to help orally assess children at the age of one, two and three. Children in four deprived areas of Sheffield will be provided with vouchers to encourage visits to dentists.

Harrogate and District NHS Foundation Trust have devised a project to establish oral health plans for older people in care homes and help care home staff to provide daily good oral care for their residents.

A community project by Healthy Living Network Leeds and supported by NHS Leeds, will help educate 600 children and their families in Leeds about good oral health. The project is supported by volunteers and the Wrigley Tooth Fairy Fund will enable the organisation to continue their charitable work with 60 children's centres across the city. DT

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## US non-dentists 'illegally blocked from whitening'

According to a recent report, a dental board in North Carolina sent 42 letters instructing non-dentist's to stop providing teeth-whitening services, telling them that they were practising dentistry illegally.

The actions of the Dental Board were taken to court and a decision was made by Chief Administrative Law Judge D Michael Chappell that the North Carolina Board of Dental Examiners had in fact violated the law by trying to block non-dentists in the state from pro-

viding teeth-whitening goods or services.

Teeth whitening services are offered by dentists in offices and also as home kits, whereas non-dentists tend to offer the treatment in salons, shopping centres and retail stores.

In the original complaint, which was made in 2010, it was alleged that there were at least six cases when the Dental Board threatened or discouraged non-dentists who were considering opening teeth-

whitening businesses.

The complaint also alleged that the Dental Board sent at least 11 letters to third-parties - mall owners and property management companies - stating that teeth-whitening services offered in malls are illegal.

One report stated how it was alleged that the Dental Board's actions reduced the availability of teeth-whitening services in North Carolina, and that the Dental Board's conduct constituted an anticompetitive

conspiracy among the dentists on the Dental Board, in violation of federal law.

It was ruled that the Dental Board did not have the authority to order non-dentists to discontinue providing teeth whitening goods or services.

As a result of their actions they have been ordered to send follow-up letters to the non-dentists and barred from engaging in the same anti-competitive conduct in the future. DT

## Editorial comment

It is so hard to believe we are in the summer already!

And yes, although the weather recently makes that statement seem a little amusing, you cannot deny the Gregorian calendar and it is

telling me categorically that it is summer.

With that in mind, *Dental Tribune* will be taking a little break while we kick back, sip a little something cool and tall and watch the kids dip their toes in the clear waters of some golden beach. Ok, I'll be in the Isle of Wight, but I do have a

very vivid imagination!

We will be back in September with some great features lined up, including a look at a man who had a powerful influence on how dentistry in the UK developed, especially in the field of Max-Fac surgery.

In addition, look out for an

interview with award winning author Michael Young about dentistry, writing and our old pal Genghis.

See you in September...

Do you have an opinion or something to say on any Dental Tribune UK article? Or would you like to write your own opinion for our guest comment page?

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Or email: [lisa@dentaltribuneuk.com](mailto:lisa@dentaltribuneuk.com)

## September is Colgate Oral Health Month


At the British Dental Conference and exhibition held in Manchester, Colgate, in partnership with the British Dental Association, announced the 2011 Colgate Oral Health Month initiative. The theme for 2011 is focusing on 'The Importance of a Good Oral Care Regime for a Healthy Mouth'.

Research carried out following Colgate Oral Health Month 2010, showed that 90 per cent of respondents from participating dental practices rated the Colgate Oral Health Month initiative to be very good or quite good. These recipients also considered the Colgate Oral Health Month practice packs to be 'very important' to the overall initiative.

Colgate Oral Health Month 2011 will run throughout the month of September, and Colgate is once again looking to partner with the dental profession by providing Colgate Oral Health Month 2011 practice packs. These practice packs will contain educational materials, motivational stickers, patient samples and materials to help dental teams drive the awareness of the initiative within their own practice through creating practice displays.

'Patients Perception and Understanding of Prevention' will be the theme of the Colgate Oral Health Month 2011 verifiable CPD programme. To participate, visit [www.colgateprofessional.co.uk](http://www.colgateprofessional.co.uk) from 1st September 2011 and download this interactive programme.

### Register Now!

Dental practices who participated during 2010 will automatically receive this year's practice pack by the end of August. If your practice has not participated before, or your practice details have changed, please contact the Colgate Oral Health Month registration line on 0161 665 5881 by 19th August 2011. Please note that one pack per practice will be delivered at the end of August, subject to availability. 



SEPTEMBER IS...



The entire dental team can get involved in the 2011 campaign focusing on 'The Importance of a Good Oral Care Regime for a Healthy Mouth'.

Practice packs contain educational materials, motivational stickers, patient samples and materials to enable dental teams to create their own display to drive awareness of the Colgate Oral Health Month Campaign.

The 2011 CPD programme 'Patients' Perception and Understanding of Prevention' providing verifiable CPD will be available to download by visiting [www.colgateprofessional.co.uk](http://www.colgateprofessional.co.uk) from 1st September 2011.

If your practice has not previously been involved in Colgate Oral Health Month, please call 0161 665 5881 to register by 19th August 2011.

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# Dentist caters for special needs

Public Health Minister Michael Matheson has launched a dental service for children with special needs.

In an attempt to remove any fears children with special needs may have, particularly those with autism, Bridgeton Health Centre's paediatric dental service has been re-designed especially for this purpose. The new design means the centre is calming and child-friendly, and is full of picture books and talking books.

The books play a vital role in the service, as they put the chil-

dren at ease and allow them to become familiar with the staff, surgery and the dental experience.

The Glasgow centre's redeveloped service is the brainchild of two NHS Greater Glasgow and Clyde staff: Lyndsay Ovenstone, senior dental officer, and Debbie Connelly, health improvement senior for oral health.

Mr Matheson said: "During the past decade there has been an increasing trend in the percentage of five year olds in Scotland with no obvious dental decay. However, we must con-

tinue to do more, particularly to accelerate the improvements in more deprived areas and address the barriers to good dental health for children, to enable us to improve the future oral health of the nation.

"That's why I'm delighted to be in Bridgeton, Glasgow to launch this innovative new service. I want to thank everyone involved in this project for bringing it to fruition and for the support of staff and parents for making these changes a reality. Through their efforts we are already seeing great improvements in that trip-to-the-dentist

experience for children with special needs in this part of the city."

Ms Connelly said: "Children with autism have difficulty understanding and relating to other people, as well as taking part in everyday family life. And a trip to the dentist can be terrifying for them.

"Children with this condition like routine and find unfamiliar settings very daunting. And in a new environment they tend to experience a sensory overload as they cannot process the sheer volume of new information. Not only is this upsetting for them it

is also incredibly distressing for their parents too."

With the children solely at the heart of this service, questionnaires are also sent to the parent or carer before the visit, allowing the dental staff to tailor the experience to the children's particular needs.

"For example, if we know in advance what a child's favourite cartoon character we can arrange in advance to have this playing when the child enters the room, providing instant distraction so the child is relaxed," Ms Connelly added. **DT**

# Are computers replacing your memory?

A new study has found that the brain fails to remember information as well if the person knows that the information they wish to remember is saved somewhere on a computer. What the study has suggested is that people tend to remember where the information they require is saved, and not what the information is about.

What isn't yet clear is how these changing memory patterns may change the brain in the long run.

The author of the study, Betsy Sparrow, an assistant professor in the department of psychology at Columbia University in New

York City, was quoted saying: "I think [technology] might hurt the type of memorisation that we usually think about, like remembering the name of an actress, but I think there might be some benefits, too."

"If you take away the mind set of memorisation, it might be that people get more information out of what they are reading, and they might better remember the concept," she explained.

Sparrow and her co-authors point out that the ways people rely on computers for information is countless: "People automatically think of using a search engine and computers and smart

phones to find information they don't know. It's as if we're using those devices as external memory sources, and we wondered if by doing things this way people wouldn't remember as well," said Sparrow.

To conduct the study, the researchers designed four experiments. All of the study volunteers were college students. Experiments consisted of trivia questions, identifying words and evaluating the effect of memory when the participant knew that their answers had been saved or not.

Results of the study were published online in *Science*. **DT**



With current technology are people remembering less if they know the information has been stored on a computer?



Vulnerable patients could be at risk due to cuts

# Dental services deteriorate

An urgent survey of the dentists who treat society's most vulnerable patients has been launched amidst fears that services are being allowed to deteriorate meaning patient care will suffer as a result.

The British Dental Association (BDA) has issued a questionnaire to salaried primary care dentists across England that seeks to gather information on whether cuts are being made to staffing, facilities and services. The survey fol-

lows reports of such cuts from attendees at this year's BDA Accredited Representatives Conference that were echoed at a recent meeting of the BDA's Salaried Dentists Committee (SDC).

Dr Peter Bateman, Chair of SDC, said: "The feedback we're getting paints a picture of dental care for vulnerable people being allowed to falter, with staff and equipment not being replaced and some services and facilities even being allowed to close. If this is an accurate

picture it will be a significant concern. I urge all colleagues in salaried services to respond to this survey so that we can build a fuller, accurate picture of what is happening across the country.

"Salaried primary care dentists treat vulnerable patients who are often unable to speak up for themselves. If promises that front-line patient care will not suffer are being broken then we must speak up on their behalf to ensure their care is protected." **DT**

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# BDA helps to develop next generation

Presidents and Vice Presidents of the Dental Students' Societies from the UK's 16 dental schools last week attended a one-day workshop at the British Dental Association's (BDA's) London headquarters.

The 2011 BDA Annual Council of Presidents Meeting, which took place in July, was designed to hone attendees' leadership

skills, helping to prepare them to take on responsibility in their careers, and develop a professional network of peers from across the UK. It provides practical advice on professional leadership and career development and allows delegates to quiz senior figures from the dental profession about their own professional development and factors influencing dentistry.

Speakers at the event included Dr Simon Gallier, Managing Director of Baxi Partnership Healthcare (and former President of the Manchester Dental Student Society), Dr Janine Brooks MBE of the National Clinical Assessment Service (NCAS), and BDA Chief Executive Peter Ward. BDA Student Committee Chair Martin Nim-

mo and BDSA President Kirpal Benawra also addressed delegates.

Peter Ward said: "It's a huge privilege to attend this day which serves as a reminder of the energy and verve of the cohort of bright young people currently training to become dentists. It's important that the profes-

sion invests in its future by harnessing, developing and encouraging the aspirations and abilities of these individuals and I am proud that the BDA was once again this year able to host this day. Leadership skills are a vital component of a dentist's career development and clinical leadership is becoming increasingly important in the dental profession." [DT](#)

# Is this a turbulent time for the NHS?

The commissioning of NHS dental services is experiencing a turbulent period as it contends with structural change in the NHS, the launch of pilots for a new dental contract and pressures on funding. That's according to the British Dental Association's (BDA's) 2011 Dental Commissioning Survey.

The research reflects a shifting landscape for primary care trusts (PCTs), in which more than a quarter (28 per cent) of those questioned said that their commissioning functions had merged with those of other PCTs. Although a very small proportion of respondents (eight per cent) of those questioned reported that clus-

tering had had a negative impact on their ability to respond to local needs, most did not, reporting no change or a positive impact or saying that they did not know what the effect of clustering had been. Half of those questioned said that clustering had improved their ability to manage contracts.

Pilots for a new dental contract also received a largely positive verdict, with 79 per cent of those surveyed stating they believed a new contract based on capitation and quality would increase the quality of care patients receive. More than half (53 per cent) of respondents also believed that such a contract would improve the oral health of the local populations for which they are responsible.

The survey did uncover concerns about funding issues, however, with 21 per cent of those surveyed reporting cuts of as much as more than four per cent to their budget for salaried primary dental care, and 18 per cent reporting smaller decreases in the budgets for hospital dentistry. Further details of the survey are available at: [www.bda.org/Images/local\\_commissioning\\_pct\\_survey\\_2011.pdf](http://www.bda.org/Images/local_commissioning_pct_survey_2011.pdf) [DT](#)

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## Mouth cancer survivor steps out

Mouth Cancer Survivor Louise Holtaway, 49, a self-employed Mortgage Broker from Bury St Edmunds, is taking part in the 6th annual Mouth Cancer 10km Awareness Walk for the third time this year.

Louise was diagnosed with Mouth Cancer in September 2008. Louise first noticed white patches along the left hand side of her tongue but she like many people just thought it was nothing to worry about. A few months later Louise found that she had got an ulcer in the same area and assumed it was just an everyday ulcer that would go away. However, it did not go away and became more painful. After being pushed into going to see the doctor, the doctor took one look at the problem area and referred her for a biopsy. A month after being diagnosed Louise underwent surgery to remove a part of her tongue as well as a neck dissection to remove lymph nodes.

The Mouth Cancer Foundation 10 KM Awareness Walk takes place at 15:00 on Saturday 17th September 2011, in Hyde Park, London and this year the charity is hoping more than 1,000 people will step out and make a difference.

The walk, which is growing year on year, is designed to increase awareness and through fundraising allows the charity to provide support for

mouth cancer patients and carers. People travel from all over the world to support the walk, which has raised in excess of £154,000 over the last five years. There will be FREE mouth cancer screening on the day, plus prizes available for top individual and team fundraisers.

Louise said: "The Mouth Cancer Foundation has been a saving grace for me! Through their support group I have been able to interact with other people in a similar situation as me. It is great to know that I am not alone and there is help and support out there. The main reason that I am doing this walk is to raise awareness of mouth cancer. I had such a great time last year and can't wait to meet up with people that I met last year.

"I found it unbelievable the amount of people who did not know about Mouth Cancer when I told them about my diagnosis," Louisa added.

The Founder of the Mouth Cancer Foundation Dr Vinod Joshi said: "The Mouth Cancer 10KM Awareness Walk is a great opportunity for mouth cancer survivors, their families and friends, the public and health professionals to come together and stand up against this debilitating disease."

To take part in the FREE Mouth Cancer Foundation 10 KM Awareness Walk visit [www.mouthcancerwalk.org](http://www.mouthcancerwalk.org) [DT](#)



## Dentistry couple bridge the gap

A husband and wife dentistry duo who met at university have hit the books together for a second time 12 years later to bring specialist skills to their practice.

Nigel and Alice Kirk have enrolled onto pioneering post-graduate dental courses at the University of Central Lancashire (UCLan), which will enable them to offer four different specialities of dentistry at Nigel's practice in York upon course completion.

Nigel, who has already gained a Masters in Clinical Restorative Cosmetic Dentistry from UCLan's School of Postgraduate Medical and Dental Education, is now studying for his second Masters degree in Aesthetic Dental Implantology at the University.

His wife Alice is a sedation lead for the Salaried Dental Services across North Yorkshire as well as working in Nigel's practice. She is currently undertaking an MSc in Oral Surgery at UCLan.

The couple first met in 1999 at the University of Birmingham's School of Dentistry where Alice was two years ahead of Nigel in her studies. They finally got together when Alice taught at the

School and Nigel was in his final year.

Alice commented: "We met whilst training to begin our careers and now all these years later we're studying together again. It means we'll have a good range of services to offer to our patients and hopefully stand out as a practice."

Nigel heads up a fully private dental practice in the centre of York and is a member of the joint dental faculties of the Royal College of Surgeons.

He said: "I undertook my first Masters degree in restorative dentistry at UCLan and I liked the set-up of the courses, especially the flexibility of them, which allows me to fit the course into my daily working life.

"Very few people in the country have a Masters degree in both restorative dentistry and dental implantology; two very closely integrated subjects. Consequently I think I will have much more to offer to both my patients and referring dental practitioners."

Alice added: "The profession of dentistry has changed an enormous amount over the last few years. With much more emphasis in the media on the appearance

of peoples' teeth in programmes such as *10 Years Younger*; patients expect more and as a dentist you must have the training to undertake these more complex procedures."

"Because of these changes we have to be able to show that we are committed to moving with the times and are continually developing and expanding our knowledge."

Both Nigel and Alice will graduate in 2012. They say that studying together again has been a positive and beneficial experience.

Alice said: "We both know exactly what the other is going through and when one of us needs to get an assignment done we are respectful of this. Although we are doing different courses, we still can help each other knowing how the University works and can give each other advice."

Nigel added: "My Masters' courses have given me the confidence to undertake much larger and more complex treatments. My practice is now moving away from general dentistry and leaning towards a lot more referrals and treatments that I wouldn't have undertaken without the advanced training I have received." **DT**

## NHS Lanarkshire won finalist award in Athens

A poster featuring NHS Lanarkshire's oral health resource for secondary schools was shortlisted for the Bright Smiles – Bright Futures Award, at the 25th International Congress of the International Association of Paediatric Dentistry (IAPD) held from 15th to 18th June 2011 in Athens. The competition aimed to showcase individual organisation's creativity in implementing a preventive oral health community programme serving children.

Two DVDs were produced for the resource. The first DVD combined interviews, cartoons, quizzes, documentaries and the opinions of the young stars of the DVD on oral health and nutrition. Video clip from the DVD is available from the following website: <http://fpsmedia.org.uk/video-solutions/case-studies/case-study-smile>

The second DVD was adapted for use with pupils that have additional support needs using Makaton – a method of

communication using signs and symbols.

There were also two A4-size colour brochures. One contained teaching materials for three oral health sessions, while the other was a set of worksheets with practical ideas for activities to reinforce the learning.

The resource was launched to all schools in Lanarkshire in October 2009. Special needs establishments were given a Makaton version of the DVD. **DT**

## Tornado blows woman's braces 100 miles away

An interesting discovery has been by a man, who whilst walking along a beach in Massachusetts, found a bag containing some dental aligners that had been blown 100 miles by a tornado!

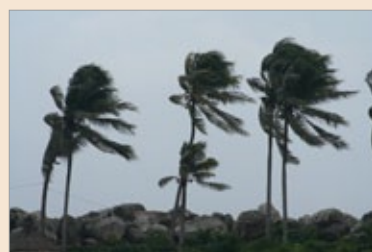
Rick Maurice came across the bag containing the braces whilst he was enjoying a stroll along a beach on Tuckernuck Island, off Nantucket. Fortunately the bag was labelled with the dentist's name, which

meant that Mr Maurice was able to track the owner down.

The owner of the aligners, Tammy Lamy, had originally put the braces in wardrobe of her Brimfield home; however, when a tornado struck on 1st June the bag was blown away and was eventually swept out to sea and found by Mr Maurice over a hundred miles away.

According to a report, Dr Scott Smith, the Springfield

dentist whose name was on the clear bag containing the aligners, said that he was amazed by the journey the aligners had made. **DT**



Tornado blew woman's retainers 100 miles away



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# 15 years and counting

**Dental Tribune speaks with DPAS' Quentin Skinner and Andrew Warren as the company celebrates 15 years of dental plan provision**

**D**PAS was born on a sunny day in the summer of 1996 when Quentin Skinner was looking to establish the next generation in dental payment plan provision. Quen-

tin was no stranger to the plan sector having been MD of another provider for some years. Feeling that there was a gap in the market for practices who wished to keep

their practice identity independent but still be able to avail themselves of the services of a plan provider, Quentin and his friend and former colleague Andrew Warren set

about establishing Dental Payment Administration Services (DPAS).

Quentin explained: "When I founded DPAS I structured it

specifically to be a boring business - when I first set it up it was called Dental Payment and Administration Services Ltd and that was specifically chosen to be particularly descriptive of our role as an administrative sub-contractor for dentistry. Of course, it was also a bit of a mouthful and so it started to be shortened to DPAS; in fact for a long time I was just about the only person who called the company by its full name!"

#### Passionate

Both Quentin and Andrew are passionate about the company being a support to dental practices by maintaining the collection of plan payment as their

*'Although the way we do things has evolved, I like to think that as a company we haven't evolved basically because we remain true to the core values that we set up'*



## Clinical Governance including Patient Quality Measures - Is your practice compliant?

Are you waiting to find out when the **Care Quality Commission\*** inspect your practice?

Have you addressed all **28 CQC** outcomes?

Your compliance with Clinical Governance and Patient Outcomes will be questioned with the introduction of the Care Quality Commission\*; HTM 01-05 and the increase in PCT practice inspections.

Would you like to know how you would fare when your practice is inspected and have the opportunity to take corrective action?

The DBG Clinical Governance Assessment is the all important experience of a practice audit visit rather than the reliance on a self audit which can lead to a false sense of compliance. The assessment is designed to give you reassurance that you have fulfilled your obligations and highlight any potential problems. We will provide help and advice on the latest guidance throughout the visit.

The assessment will take approximately four hours of your Practice Manager's time depending on the number of surgeries and we will require access to all areas of your practice. A report will be despatched to you confirming the results of our assessment. If you have an inspection imminent then we suggest that you arrange your DBG assessment at least one month before the inspection to allow you time to carry out any recommendations if required. Following the assessment you may wish to have access to the DBG Clinical Governance Package with on-line compliance manuals.

For more information and a quote contact the DBG on **0845 00 66 112**

\*England only.

#### The areas the DBG assesses are:

- Your premises including access, facilities, security, fire precautions, third parties and business continuity plans.
- Information governance including Freedom of Information Act, manual and computerised records, Data Protection and security.
- Training, documentation and certificates.
- Radiography including IRR99 and IR(ME)R2000 compliance.
- Cross infection and decontamination including HTM 01-05 compliance and surgery audits.
- Medical emergencies including resuscitation, drugs, equipments and protocols.
- Training, documentation and certificates.
- Waste disposal and documentation and storage.
- Practice policies and written procedures.
- Clinical audit and patient outcomes including quality measures.

core function and not becoming a controlling influence. Quentin said: "The name Dental Payment and Administration Services Ltd was never meant to be directed at the consumer, it was meant to me as an agent to the dentist and it just pushed us apart from any worry or concern that we were trying to muscle in on the dentist-patient relationship.

"So for 15 years I have religiously tried to ensure that we keep our focus on being a payment and collection company... although the way we do things has evolved, I like to think that as a company we haven't evolved basically because we remain true to the core values that we set up."

#### Change as constant

One thing that has remained a constant in the life of DPAS is change. Dentistry has seen many changes - in provision between NHS and private care, in customer spending and expectations as well as in technology and materials that are available to clinicians. They way the company has evolved



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with the market is something that Andrew is proud of: "I am excited by the fact that DPAS is a very black and white business, that we do what we said we were going to do on the tin and we do it well. This we know from our customers telling other customers – that's how we grow. And that's where we've evolved – we've been building up that reputation all the time. We can sit here very relaxed and comfortably: we have great retention, our customers are comfortable to come to us, we're comfortable with our customers, and we go in a very sort of orderly manner.

"We have also evolved in ourselves, for example I've changed the title of our sales force from the words sales to consultancy; we want to grow in a certain way and with the right people. What with changing the title of our sales team away from sales into consultancy, it's enabled us to hopefully dental practices to realise that by booking an appointment with us doesn't mean to say they've got to sign a piece of paper, it means to say that we're going to help them decide whether the NHS is the viable position option for them, and many a day we advise dentists to take a slightly different course of action from what they were going to do. We're not confined and we don't have the problem of constant target making to try and make our business work. And because we don't, we grow faster."

**Location location**

A unique feature of DPAS is their location. Based on a country estate in Tisbury, a small Wiltshire village that dates back to the 8th century, the sleepy rural surroundings hide the driving ambition to deliver for their customers a high quality service. Heavy investment in areas such as print and mailing as well as IT infrastructure and patient registration software keeps the company at the cutting edge of customer service, in tranquil surroundings that

*'We're not confined and we don't have the problem of constant target making to try and make our business work. And because we don't, we grow faster'*

certainly help to keep the stress levels down when the next wave of practice conversions comes in! Yet it is still less than a two-hour train journey into the heart of London. The tranquillity of DPAS's

headquarters was a perfect backdrop to the company's anniversary celebrations; held on a sunny day in July (much like the day Quentin came up with the concept for DPAS). Lord, Ladies, clinicians, friends and colleagues joined DPAS staff for a celebratory lunch on the central lawn of the premises. Andrew welcomed guests, and then paved the way for a presentation by Quentin, who gave a short history of the company,

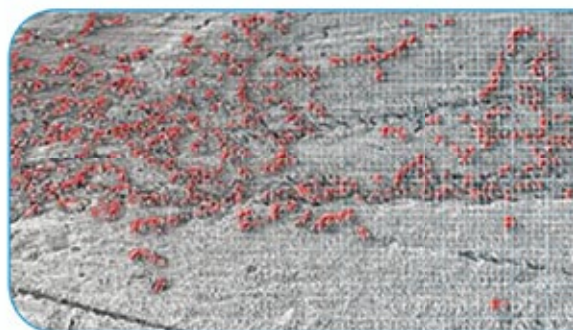
thanking those who have been supportive of the DPAS dream over the years. He also put in to context the current situation in dentistry; piloting, the unstable position of PCTs, UDAs and the ongoing recession. He commented that the 'swing towards private dentistry is still inevitable'; showing that in the next 15 years plan providers such as DPAS will continue to be very busy indeed. [DT](#)

**NEW**

**40% of denture patients are concerned about denture odour<sup>1</sup>**

Yet many denture wearers fail to keep their dentures clean<sup>2</sup>.

That's because brushing dentures with ordinary toothpaste can scratch denture surfaces<sup>3</sup>. And scratched surfaces can lead to bacterial growth<sup>4</sup> leading to denture odour.



Scanning electron microscope (SEM) images at 240 minutes confirm a significantly higher build up of Streptococcus oralis on denture materials previously cleaned with ordinary toothpaste vs. a non abrasive solution<sup>5</sup>

Poligrip denture cleansing tablets effectively remove plaque and tough stains<sup>6</sup> without scratching<sup>3</sup>, to leave dentures clean and fresh. Poligrip Total Care denture cleansing tablets also kill 99.9% of odour causing bacteria.

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**References:** 1. GlaxoSmithKline data on file, 2010. 2. Dikbas I et al, Int J Prosthodont 2006; 19: 294-8. 3. GlaxoSmithKline data on file Study L2630368 2006. 4. Charman KM et al. Lett Appl Microbiol. 2009; 48(4):472-477. 5. GlaxoSmithKline data on file Study NPD/EU/062/07 2008. 6. GlaxoSmithKline data on file Study USNPD 016 and CS5244.

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Chairman Quentin Skinner cutting the DPAS anniversary cake