Dental Tribune

The World's Dental Newspaper · United Kingdom Edition

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£70m NHS dental fraud claim

The government has announced that under the current dental contract system an estimated £70m was wasted on dental fraud in a year

Figures published by NHS Protect, the lead on tackling and identifying crime across the health service in England, show dental fraud may have cost the NHS £73.1 million in 2009-10.

The Government has committed to introducing a new dental contract system that will focus on improving the quality of care patients receive, increase the availability of NHS dental care and promote good oral health. Part of this process will include reducing the risks of dental fraud before it becomes a problem and proactively analysing data on dental contract claims to spot irregular or suspect claim activity.

The government will work with NHS Protect to tackle the current problem of contract fraud by:

- changing how some dental treatments are recorded to prevent fraud
- undertaking further analysis of dental fraud to help identify weaknesses in the system
- developing an awareness programme of dental fraud risks, including workshops with local anti-fraud staff to help spot dental fraud activity
- moving to a new single way of working for managing all NHS dentistry services

Health Minister Lord Howe said: "This shows the current dental contract system is not fit for purpose and needs to change to ensure NHS funds are protected and used to benefit patients.

"It is totally unacceptable that some NHS dentists have abused the system for personal gain. Fraud of any kind will not be tolerated and any allegation of fraud is taken seriously.

"We believe dentists should get paid for the quality of care they provide rather than simply for the number of treatments. That is why we are currently piloting this approach with dental practices ahead of the introduction of a new dental contract to make sure we get things right and minimise the risks of fraud."

Barry Cockcroft, Chief Dental Officer said: "The vast majority of dentists behave ethically and provide high quality dental care to their patients. Action needs to be taken against the small minority who behave dishonestly and submit fraudulent claims. We are working closely with NHS Protect to raise awareness of fraud risks to help prevent and deter fraudulent activity.

"I would also urge colleagues in the profession and patients to report any suspicions of fraud or corruption to NHS Protect on their confidential fraud and corruption reporting line or to their PCT."

Dermid McCausland, NHS Protect Managing Director, said: "NHS Protect will continue to ensure that public funds are not lost to a dishonest minority of dentists. Action will be taken against those who attempt to take valuableNHS resources for personal gain.

"As the lead organisation in tackling NHS fraud, NHS Protect will effectively coordinate investigative and intelligence resources and take swift action where suspicions of fraud are found. We will also seek the recovery of any NHS funds lost through the actions of fraudsters."

Under the current contract the most common types of fraud include submitting false claims for patients who did not exist, claiming for patients who did not visit the dentist and submitting claims for more expensive treatment than was actually delivered.

To view the NHS Protect report visit www.nhsbsa.nhs.uk/3630.aspx DT

News in Brief

Food labelling consultation
Keeping track of what you eat and choosing healthier foods could be made easier thanks to a UK-wide consultation launched by Health Secretary Andrew Lansley. UK health ministers want to see all food manufacturers and retailers use the same system to show – on the front of packs – how much fat, salt and sugar, and how many calories is in their products. Around 80 per cent of food products sold in the UK already have some form of front-of-pack-labelling. But different retailers and manufacturers use different ways of labelling which can be confusing for consumers. If the biggest seven supermarkets used the same labelling for their own brand foods, it would cover around 50 per cent of the food sold in the UK and encourage others to adopt the scheme. Health Secretary Andrew Lansley said: "Being overweight and having an unhealthy diet can lead to serious illnesses such as cancer and type 2 diabetes. We must do everything we can to help people make healthier choices. Offering a single nutrition labelling system makes common sense, it would help us all to make healthier choices and keep track of what we eat."

New Chair of CCDAS
Deborah White, associate professor and director of education at the School of Dentistry at Birmingham, has been elected as the new Chair of the British Dental Association's Central Committee for Dental Academic Staff (CCDAS) for the 2012/14 triennium. She was Vice Chair of CCDAS in the last triennium. Deborah joined the University of Birmingham in 1993 as a part-time researcher and joined the staff full time in 1999. She completed her PhD in 2000 and, as head of dental public health, has research interests in dental epidemiology and health services. She undertakes clinical teaching and clinical work in the salaried services in Birmingham. Deborah has been a BDA accredited trade union representative, firstly for the salaried services and more recently for university staff. In her spare time she enjoys walking, gardening and swimming. The Chair of CCDAS will be supported by Jeff Wilson, the newly-elected Vice Chair. Jeff is a senior clinical lecturer in restorative dentistry at Cardiff University Dental School.

All smiles at National Smile Month launch

Guests at the launch of National Smile Month

It was all smiles in the House of Commons on 15 May, when national charity the British Dental Health Foundation launched the UK's largest annual oral health campaign.

National Smile Month, taking place from 20 May to 20 June 2012, is the focal point for thousands of dental and health professionals to co-ordinate events and activities across the UK to improve oral health.

Community groups, businesses, schools, and members of the public are also getting involved by organising activities such as fun days, talks, sponsored events, displays, open days and competitions.

This year sees the launch of the National Smile Month 'Smiley'– a big smile on a stick. Participants are being encouraged to have their photographs taken with the Smiley and then upload them on to the National Smile Month Facebook and Twitter sites.

Many leading figures from the world of dentistry attended the launch of the campaign, which is dedicated to highlighting the importance of oral health. The launch was hosted by Parliamentary sponsor the Rt Hon Sir Paul Beresford MP, himself a dentist, and included speeches from some of dentistry's leading experts including the Foundation's Chief Executive Dr Nigel Carter and President John Siebert.

Dr Carter said: "Getting people to talk and think about their teeth and dental habits is vital to our goal of improving the state of oral health not only in the UK but worldwide.

"The impact of poor oral hygiene is often underestimated and someone's poor oral health can be a pre-cursor to a number of serious health issues such as stroke, coronary heart disease, diabetes and low birth weight babies. National Smile Month is about encouraging people to take better care of their smile and ultimately their general health.

"We have had a tremendous response to the campaign. So far thousands of organisations have registered and will be spreading the messages and joining in the fun."

National Smile Month is sponsored by headline sponsors Listerine, Oral-B, Wrigley and Steradent. The campaign is also being supported by Aldi, Argos, Bupa, Dencover, Denplan, Lloyds Pharmacy, Save WaterSaveMoney, SleepRight, Smile-on and Wilkinson.

National Smile Month has three key messages:

• Brush teeth for two minutes twice a day with a fluoride toothpaste

• Cut down on how often you have sugary foods and drinks

• Visit your dentist regularly, as often as they recommend

To register for free 'Smileys', or for more information about the campaign, visit www.smilemonth.org DT

BADN campaign for tax relief on CPD costs

The British Association of Dental Nurses (BADN) are lobbying HMRC for tax relief on CPD costs - following correspondence between BADN Chief Exec Pam Swain and Exchequer Secretary to the Treasury, David Gaulke MP, in which Mr Gaulke states that:

"HMRC do not accept that all training expenses incurred by the employee will now qualify for tax relief. ..... expenses must be incurred exclusively as an intrinsic part of the performance of duties..... On the basis of the information provided (BADN briefing note to Mr Gaulke)..... the CPD training referred to does not have the characteristics mentioned above ..... No deduction is due for the costs of continuing professional education. That is so even if participation in such activities is compulsory, and failure to do so may lead to the employee losing his or her professional qualifications, and/or their job."

"Dentists, hygienists, therapists and technicians who are self-employed or business owners are allowed tax relief on their CPD costs. However, HMRC is refusing to acknowledge that CPD expenses for dental nurse employees are in fact 'incurred exclusively as an intrinsic part of the performance of duties'" said BADN President Nicola Docherty. "This is blatantly unfair, as tax relief on CPD costs is denied to those most in need of it. BADN are calling on other dental professional associations and the GDC to support this campaign in order that tax relief on CPD costs is afforded to all registered dental professionals."

Dental nurses (and other members of the dental team) are encouraged to visit the BADN website www.badn.org.uk, download the form letter together with supporting documents, and send it to both Mr Gaulke and their local MP. DT

Transition risk register will not be published

The Department of Health's Transition Risk Register from November 2010, which was a statement of potential risks of NHS changes, will not be published, following Cabinet agreement and a final decision made by the Secretary of State for Health.

The Secretary of State for Health sought the Cabinet's views on the exercise of the Ministerial Veto in relation to the Information Tribunal's ruling that the Transition Risk Register should be released. He did so as part of a full commitment to act in accordance with the provisions of the Freedom of Information Act, which makes specific provision for the exercise of such a veto.

The Coalition Government is committed to the *Freedom of Information Act* and has extended it to all academy schools through the *Academies Act*; and to the Association of Chief Police Officers, Financial Ombudsman Service, and the Universities and Colleges Admissions Services through secondary legislation. In addition, the Protection of Freedoms Act, which gained Royal Assent on 1 May, provides for the extension of the FOI Act to over 100 companies wholly owned by public authorities.

Risk Registers are a vital part of Government policy development. Ministers and officials should be able to deliberate sensitive policy formulation, in expectation that their views are not published at a time when it would prejudice the development and delivery of policies. If such risk registers were regularly disclosed, it is likely their form and content would change, and they would no longer be the effective internal management tools they are intended to be.

In light of the interest in this case, and in line with the Government's commitment to be more transparent by opening up Government information, the Department of Health has published a document that sets out key information relating to the areas of risks in the original Risk Register. It also sets out the mitigating actions that have taken place since November 2010 and which are planned in the future. But it protects the language and form of the Risk Register.

The Department of Health will also publish a Scheme for Publication, which will set out proposals for reviewing and releasing material relating to the transition programme in the future. Both these documents will be published on the Department's website. DT

DH Department of Health

Editorial comment

Last week saw the launch of this year's National Smile Month Campaign at the Houses of Parliament.

This year's campaign is different in that instead of having a specific theme, such as 'two minutes twice a day', the British Dental Health Foundation have launched the 'smiley'; a smile on a stick that has had dental professionals all over the country having their picture taken and uploaded to various social media sites to show support and raise awareness for the campaign.

The launch saw members of the dental sector brandishing their smileys and showing their support for Smile Month, now in its 36th year. Parliamentary sponsor Sir Paul Beresford opened the launch; and there were short presentations by BDHF President John Siebert and Chief Exec Nigel Carter; as well as representatives of the campaign's platinum sponsors Listerine, Proctor & Gamble and Wrigley.

Let's all support the campaign and get our smileys out there! DT

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?

If so don't hesitate to write to:
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New award for young dentists

The Harley Street Centre for Endodontics is launching the Young Dentist Endodontic Award 2012. Marking the 10th Anniversary of the centre, the award is open to any young dentist who graduated in the last three years, whether they are in their Foundation Year or just starting out on their career. Applicants are invited to submit a case report of their best endodontic treatment so far. An application form can be downloaded from: www.roottreatmentuk.com.

Julian Webber, founder of the Harley Street Centre for Endodontics, said: "We hope this award will inspire and encourage young dentists to develop skills in one of the most complex of primary care procedures. While endodontics is taught at dental school and practised by new graduates during their Foundation training, acquiring the confidence to carry out the procedure as well as managing patients is challenging."

In addition to national recognition, there are five outstanding prizes. First prize is the new WaveOne Endodontic Motor, handpiece and accessories kit, from Dentsply UK and the second prize is a Morita Root ZX apex locator from Quality Endodontic Distributors(QED). Three further runners up will win a pair of endo-benders from SybronEndo.

The winner's case report will be written up in a UK dental publication and all successful applicants will be offered the opportunity to spend a day at the Harley Street Centre for Endodontics.

The award will be presented at an event at the Royal Society of Medicine in October this year to celebrate the 10th anniversary year of the Harley Street Centre for Endodontics. The judging panel includes Dr Julian Webber and Dr Trevor Lamb, endodontists at the Centre, and Prof Andrew Eder of the UCL Eastman Dental Institute. No names will be on the case reports so the judging can be undertaken anonymously.

The application process is simple – dentists are asked to submit details of one endodontic case which showcases their ability. The deadline for applications is 2 September 2012. DT

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1 Marinho et al. (2002); Cochrane Database Syst. Rev. no3. 2 Delivering Better Oral Health - An evidence-based toolkit for prevention, Second Edition, Department of Health, July 2009.

www.colgateprofessional.co.uk

Dentists raise money for children's cancer ward

In December 2005, 13-year old Robbie Anderson set up a Trust to improve the quality of life for young people spending long periods of time on the children's cancer ward, where he too was a patient.

As explained on The Robbie Anderson Cancer Trust website: "Robbie knew his cancer was terminal, but even that knowledge didn't deter him. Facing his second (and last) Christmas in hospital, he set about fundraising for a large plasma TV screen for his ward. He wanted the children on the oncology ward to be able to do what everyone else was doing - playing games and watching Christmas films with their families, something many of us can take for granted. On December 24th it was fixed to the wall in the Day Room. Sadly, 10 weeks later, Robbie passed away."

Cancer is a battle that must be fought on all fronts - the psychological fight is in many ways as important as the physical care and Robbie's time in hospital was made so much worse by the lack of any facilities for his age group.

"The focus was on much younger children, down to infant-sized tables and chairs in the day room and not much else but Disney DVDs to watch. While his life hung in the balance he was placed in either a room with Mr Men mobiles hanging from the ceiling or in a crowded six bedded ward decorated with cartoon characters. The old fashioned TV's on tables battled for space with life-saving blood products and chemotherapy machinery. There was no privacy for parents or their children; this, coupled with the sense of being in a nursery situation, Robbie found hard to bear."

It was then that Robbie decided to set up a trust to improve the quality of life for young people fighting cancer.

His Trust, which continues to support the Children's Oncology Ward at Leicester Royal Infirmary, aims to work towards providing a facility where all children are treated in age-appropriate surroundings, with a particular focus on teenagers. The proposed unit will cost £1.4 million to build, but will be a centre of excellence with clearly defined spaces for each age group.

And this is where you, the reader, come in. In July, Robbie's parents and members of the dental profession will be setting off on an epic journey to the exotic principality of Monte Carlo to raise funds and awareness of the needs of children and young adults suffering with cancer. The trip, however, will also be carrying out one of Robbie's wishes, which was to go to Monte Carlo and place a bet on the number eight on a roulette table! All the participants are self-funding the drive and all money raised will go towards funding the age appropriate cancer facility at Leicester Royal Infirmary.

Donations and sponsorship are desperately needed for the facility to become a reality. The Robbie Anderson Cancer Trust is proud to be supporting University Hospitals Leicester in their campaign to provide a unit in Leicester that will make a significant difference to the lives of all young people fighting cancer.

For those of you wishing to make a donation to this worthwhile fund or to find out more information visit www.robbieanderson.org.uk/index.php/donations-contact-us or www.robbieanderson.org.uk/index.php. DT

Energy drinks responsible for irreversible damage to teeth

Sports drnks are causing enamel damage

A recent study published in the May/June 2012 issue of *General Dentistry*, the peer-reviewed clinical journal of the Academy of General Dentistry, found that an alarming increase in the consumption of sports and energy drinks, especially among adolescents, is causing irreversible damage to teeth—specifically, the high acidity levels in the drinks erode tooth enamel.

"Young adults consume these drinks assuming that they will improve their sports performance and energy levels and that they are 'better' for them than soda," said Poonam Jain, BDS, MS, MPH, lead author of the study. "Most of these patients are shocked to learn that these drinks are essentially bathing their teeth with acid."

Researchers examined the acidity levels in 13 sports drinks and nine energy drinks. They found that the acidity levels can vary between brands of beverages and flavours of the same brand. To test the effect of the acidity levels, the researchers immersed samples of human tooth enamel in each beverage for 15 minutes, followed by immersion in artificial saliva for two hours. This cycle was repeated four times a day for five days, and the samples were stored in fresh artificial saliva at all other times.

"This type of testing simulates the same exposure that a large proportion of American teens and young adults are subjecting their teeth to on a regular basis when they drink one of these beverages every few hours," said Dr Jain.

The researchers found that damage to enamel was evident after only five days of exposure to sports or energy drinks, although energy drinks showed a significantly greater potential to damage teeth than sports drinks. In fact, the authors found that energy drinks cause twice as much damage to teeth as sports drinks.

One of the researchers, Dr Bone, recommends that her patients minimise their intake of sports and energy drinks. She also advises them to chew sugar-free gum or rinse the mouth with water following consumption of the drinks. "Both tactics increase saliva flow, which naturally helps to return the acidity levels in the mouth to normal," she said.

Also, patients should wait at least an hour to brush their teeth after consuming sports and energy drinks. Otherwise, says Dr Bone, they will be spreading acid onto the tooth surfaces, increasing the erosive action. DT

Source: www.agd.org

iNSkills – a pathway to a brighter future

As unemployment of the under 24s surpasses the 1m mark, Neil Sikka, of Barbican Dental Care, has created an initiative that will provide training and real job prospects.

Working in conjunction with Tower Hamlets, the local college and other practices in the City and Canary Wharf, Neil's iNSkills initiative will provide disaffected youth of Tower Hamlets and Newham the opportunity to learn and work within the dental world. After an 18-month period, candidates will graduate with an NVQ Level 3 qualification in Dental Nursing.

Neil Sikka states: "Within the Square Mile there are some of the most successful businesses and the richest people. But just outside, is Tower Hamlets and Newham, the poorest borough in the Capital. We wanted to create a scheme where we could offer people the chance of training, work and, more importantly, career development."

In the pilot scheme, launched in January 2012, trainees will be recruited from the borough of Tower Hamlets. Depending on the success of the initiative, it could go national.

Tower Hamlet Council's Skillsmatch – the outreach team with established links in the community - will be responsible for sourcing, screening and mentoring the trainees throughout the duration of the course. Tower Hamlets College will provide the training on a day-release basis and students will gain work experience and valuable on-the-job training in selected for the other four days. Students will benefit from a mentoring scheme to ensure their performance is maintained.

Neil has been responsible for recruiting other practices to the scheme. The Dental Surgery in the Corn Exchange and Smile Impressions in Canary Wharf have both agreed to involved in the inaugural launch. Each practice will take on a minimum of two trainees. The initiative includes a 'earn as you learn' element, where students will be paid for their working and college time.

Neil concludes: "We are very excited about iNSkills. Initial interviews are being arranged and soon we will have our shortlist of candidates. We are very committed to recruiting, developing and empowering our students and we are confident iNSkills will be a success." DT

Leaflet and poster on NHS dental services and charges now available

Details of NHS dental services and new charges are outlined in a new leaflet and poster. The leaflet describes how NHS dental services in England work, including how to find an NHS dentist, what treatment to expect and how much it will cost. The poster shows the charges to pay from April 2012 depending on the treatment needed.

The NHS dental services in England (340K) leaflet includes information on: http://www.dh.gov.uk/health/files/2012/04/2900136-Dental-Flyer-V1_Tagged.pdf

- Free NHS dental treatment or help with health costs
- Treatments provided under the NHS
- NHS dental charges
- How to find an NHS dentist
- How often to visit the dentist
- Dental appliances
- Urgent NHS dental treatment and care out of hours

The NHS dental charges from 1 April 2012 (640K) poster includes details of: www.dh.gov.uk/health/files/2012/04/2900096-Dental-Poster-v1_TAGGED.pdf

- Charges for each complete course of treatment
- Charges for referral for a course of treatment
- Treatments that are free
- Where to find information on free dental treatment or help with health costs DT

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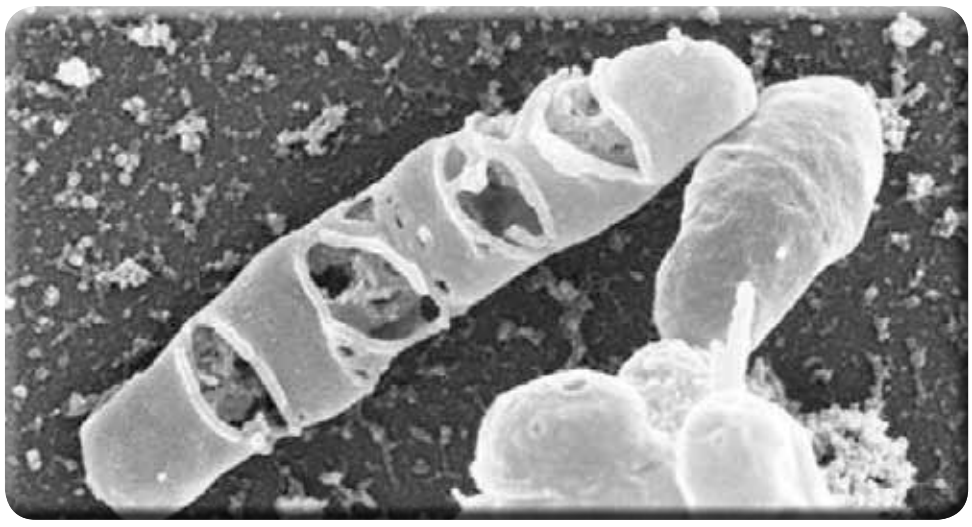

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References: 1. Barnett ML. *JADA* 2006; 137: 16S-21S. **2.** Data on file, FCLGBP0023+28, McNeil PPC. **3.** Fine DH, et al. *J Clin Periodontol* 2005; 32: 335-40. **4.** Sharma N, et al. *JADA* 2004; 135: 496-504.

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King's hosts first conjoint in Orthodontics under the Royal College of Surgeons of Edinburgh

(Back row from left to right) David Tewson, Alan Jones, Fraser McDonald, Dirk Bister, Jeremy Breckon, and Nigel Taylor (front row from left to right); Samantha Hodges, Anna Gibilaro, Margaret Collins, Robert Evans.

King's College London Dental Institute hosted the first conjoint in Orthodontics on 23-26 April 2012 under the auspices of the Royal College of Surgeons of Edinburgh.

Previous successful arrangements had been in place for the previous four years allowing a conjoint MClinDent and MRD examination in the restorative specialties. This conjoint, in the era of major governance frameworks, was one of the new style conjoint arrangements. In the Orthodontic specialty, the Membership in Orthodontics is assessments were closely intertwined with the assessment for the Master of Science in Orthodontics. The conjoint arrangement offers major advantages for all those involved, exposing candidates to a rigorous and robust assessment process yet supporting the candidate experience.

The examiners represented both organisations and had a broad experience in examination of all aspects of specialist knowledge. They all adapted well to the combined process with major positive outcomes from this unique integration.

The examinations were organised by Fraser McDonald, Professor of Orthodontics at the Dental Institute. He said: 'In the days of professional leave restrictions and constraints in health service financial rewards in all employing authorities, this seems the only way forwards to ensure objective specialist evaluation. It can only help support the basis of having independent bodies approving specialist knowledge'.

The examiners included (shown in the picture, back row from left to right) David Tewson, Alan Jones, Fraser McDonald, Dirk Bister, Jeremy Breckon, and Nigel Taylor (front row from left to right); Samantha Hodges, Anna Gibilaro, Margaret Collins, Robert Evans.

Lindsay Winchester and Martyn Cobourne (not shown) also supported the combined process with their experience in aspects of the examinations. The process was observed by Simon Camilleri and Kevin Mulligan from the University of Malta. DT

A P McCoy OBE joins Bridge2Aid as new patron

Bridge2Aid are delighted to announce that A P McCoy OBE joins us as a new Patron. A P McCoy won BBC Sports Personality of the year in 2010 and has been British Jump Racing Champion Jockey every year since 1995/96.

The previous winner of the Cheltenham Gold Cup, Champion Hurdle, King George VI Chase and the Grand National had this to say of his involvement with Bridge2Aid: "I am delighted to be a patron of Bridge2Aid as I have been aware for some time of the invaluable work the charity does. My dentist has been involved with Bridge2Aid for several years, and we have tried over the years to support him and his practice with their fundraising efforts.

"Bridge2Aid provides support which is not built on one-off aid, but on a sustainable approach to the communities they serve. I admire the passion and dedication the charity's staff and volunteers bring to their work; qualities which are not out of place in National Hunt racing, of course; as well as their commitment to training and long-term investment in people.

"I really do feel that together we can make a real difference to people's lives in one of the poorer parts of the world and urge you to support them in whatever way you can".

Shaenna Loughnane, Bridge2Aids UK Manager said: "We are really pleased that A.P has agreed to become a patron. He has been a supporter of our work for many years now, showing an interest in the work that we do and helping raise much needed funds for Bridge2Aid." DT

Donated materials save teeth in rural Uganda

Dentsply donates materials to Teeth for Life project

Patients in rural Uganda have potentially avoided extractions and kept more of their own teeth thanks to DENTSPLY glass ionomer materials. The company donated materials to the Teeth for Life project organised by DENTAID and Christian Relief Uganda.

Project leader Barbara Koffman, who has been visiting Uganda since 1996 to run free dental pain relief clinics, says donations make a big difference to people with little or no access to dental care.

"When I first went to Uganda, I found a government clinic with very little in it, just two or three forceps and a mouth mirror without a handle," says Barbara.

She developed a mobile clinic, staffed by volunteer dentists, hygienists and nurses to give hygiene instruction alongside clinical care.

On the most recent trip, in February and March, a small drill and the DENTSPLY GI material made a big difference. "Rather than take painful teeth out, we were able to restore them," says Barbara. "We are very grateful for any help we are given."

The next visits to Uganda will be leaving on 1st June and 6th September. Any qualified staff wishing to volunteer to help – with partners attending as helpers – can find out more at www.dentaid.org DT

CEO of DPA takes legal action over unfair dismissal

Leeds-based solicitors Cohen Cramer has been instructed by Derek Watson, former CEO of the Dental Professionals Association (DPA), in his unfair dismissal claim following the proposed transfer of DPA assets.

After taking independent legal advice on behalf of the members, Derek Watson advised the DPA's Council that the transfer was unlawful, requiring a majority vote of DPA members. The proposed transfer went ahead and shortly afterwards, Derek was suspended for gross misconduct and subsequently dismissed despite having an exemplary employment record.

Derek Watson said "I am devastated, having worked for the DPA and its members for seven years, by Council's decision to instantly dismiss me following my advice on their legal obligations regarding the transfer of DPA assets. I am still hoping for, and working towards, a positive solution for the Association and its members."

Cohen Cramer, specialist lawyers to the dental profession, have submitted a claim to the Employment Tribunal. "No employee should have to tolerate the kind of treatment described by Mr Watson. We are pursuing a number of claims with both the DPA and CODE to address this situation", says Sarah Leyland, Head of Dental Employment Law. DT

Derek Watson

Taking the plunge

Ken Harris takes the first steps towards gaining an MSc

Is there really no time for relaxing?

Along with the news of my upcoming 30-year reunion came the realisation that I am actually in the twilight of my career, much to my children's glee, and their regular quips about my advancing years (and receding hairline) seem all the more appropriate these days. Should I go gently into that good night or should I try to raise the enthusiasm to rage a little more against the dying of the light?

One thing I've learned after 30 years in dentistry is everyone's an expert. The advent of the evidence-based dentistry movement, possibly driven by government and perhaps fuelled by dry-fingered academics (OK, I'm prepared to concede moist) has often been given short shrift by the army of general practitioners such as myself who is working in the ultimate "in vivo" laboratory. After all, we've all been there and done that, even if for many of us the T-shirt no longer fits.

It is a truth universally acknowledged (at least by wet fingered dentists) that an academic dental colleague in possession of a "learned" opinion must be in need of a soap box. Equally, when the strident views of general dentists, often determined by hard-won personal experience in years of practice, are voiced (who mentioned soap box?) the cry of "show me the evidence" is equally valid when our academic colleagues choose to cross swords with us.

I have always been suspicious of dogma from either side and have an infinite capacity for doubt; I blame my Irish-Catholic Liverpool background, but my long-suffering family just call me a grumpy old man. However, I'm still passionate about my profession, and I'm always looking for new knowledge I can use. But who can we trust? I was once told the half-life of a dental fact is five years, and how many of these dental facts are driven by commercial interests?

I'm currently on holiday, and when I boarded the plane I was bombarded by posters from a well-known high street bank, (and we think we have an image problem) urging the public to consider the world of opportunity out there. Using an example about Holland exports (although I'm lost as to what relevance the fact that Holland exports more soy sauce than Japan has), one piece of advice caught my eye. Tucked away at the bottom of the poster was the suggestion that we need to invest in education in order to be ready for the new opportunities coming our way. Hmmmmm…

Hallowed path

My academic career was stopped in its tracks back in 1982 when my application for a house job at Newcastle Dental Hospital was unceremoniously rejected, and I went straight into practice instead. There was no vocational training in those days. I had given up any thoughts I would ever tread the hallowed academic path when I discovered a whole load of "interesting" stuff on the internet and it seemed that post graduate education was available online. I have never seen the attractions of technology for technology's sake, preferring the more intellectual pursuits of a good book or a stimulating conversation (or so I tell myself) and my usual scepticism held me back. But I soon discovered that you could sign up for an MSc in almost any branch of dentistry with guaranteed success if you had both a pulse and a credit card (with the latter being most important).

> *'One thing I've learned after 30 years in dentistry is everyone's an expert'*

Two years ago I first noticed the MSc in restorative and aesthetic dentistry at the University of Manchester; a highly renowned establishment. I was looking for a course with serious aspiration and the confidence in itself to challenge its delegates; I was also looking for a university with the courage to set the bar high enough to gain respect within the academic community at large! After a recommendation from my old friend Elaine Halley, who had signed up at the outset two years ago, I decided to take the plunge.

I thought people would praise me for my open mind and the willingness to take up a new challenge, yet when I told my family, my friends, and even my patients, they could scarcely disguise their amusement! Only one of my friends, who actually has 37 watches (almost as many as Nigel Saynor) said he recognised a kindred impulsive spirit, and congratulated me on my decisiveness.

Consequently, I now find myself reading about the influence of air abrasion on Zirconia ceramic bonding; unusual, I'm sure you'll agree, but it's more unusual given that I'm sitting on an exercise bike at the very swanky Biltmore Hotel in Miami, while everyone else is relaxing by the pool! This MSc thing is starting to take over my life I'm afraid… maybe I should be very afraid? DT

About the author

Ken Harris graduated from the dental school of the University of Newcastle upon Tyne in 1982 and passed MFGDP(UK) in 1996. He maintains a fully private practice with branches in Sunderland and Newcastle upon Tyne specialising in complex dental reconstruction cases based upon sound treatment planning protocols. He is one of only two Accredited Fellows of BACD, holds full membership of BAAD and remains a sustaining member of AACD. He is currently UK Clinical Director for the California Center for Advanced Dental Studies and the only UK Graduate and Mentor of the Kois Center in Seattle.

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The importance of a professional advisor

Alun Rees provides his top 10 tips to finding and working with an accountant

One of the phrases that I find myself using when I write analysis reports for my clients goes along the lines of: "Practice ownership can be a lonely place; being a medical professional has unique innate pressures, having to make immediate decisions with patients that are awake and where you have a finite time to complete procedures produces even more pressure."

Being the owner and main producer of a small business is lonely too. Dentists, in common with a lot of solopreneurs, are notoriously poor leaders; they have problems separating management from leadership. They find it difficult to keep themselves in a position where they are able to make decisions about their businesses in a dispassionate way.

I then encourage them to read (and re-read) *'The E-Myth Revisited'* by Michael Gerber. That said, I don't offer any easy solutions; I encourage practice owners to try to ensure there is balance in their lives (that's another article). I request that they get away from their surgeries and go home at a reasonable hour and, in the words that Roy Higson taught me, "mentally wipe their feet on leaving their surgery".

In recent weeks I have come to realise once again how important it is to have a support network of straightforward and thoroughly professional advisers. By these I mean accountants, solicitors, bank managers and IFAs (and business consultants). The need for a business owner to be able to share the non-clinical problems of their practice is vital. Too many principals march (or should that be trudge?) on, day after day, knowing that they have significant challenges that they have neither the training nor the natural aptitude to handle.

The lesson I have learned is to ensure that all my clients have advisers in place rather than to presume. It's vital for them to know exactly what they are able to assist them so they have to understand the breadth and depth of the adviser's talents. In turn the adviser, like all professionals, need to have a network of back up people who can be relied upon when and if the problems become really complex.

So let's start with the money and Rees's Top Ten Tips to finding and working with an accountant.

Get used to the idea that you have to have an accountant and that you are going to have to pay them for what they do; any accountant worth their salt will save you more money than they cost and will also prevent premature grey hair!

1 Find the most successful dentists working in a similar manner to how you wish to work and ask them who they use. Research three or so and be prepared to interview them (and vice versa).

2 Ensure the accountant is fully qualified; anyone can set up a business and call themselves an accountant without so much as a GCSE in maths. You're looking for a chartered or certified accountant, check that they are what they are say they are by visiting their professional body's website.

3 Get to meet them, and ensure

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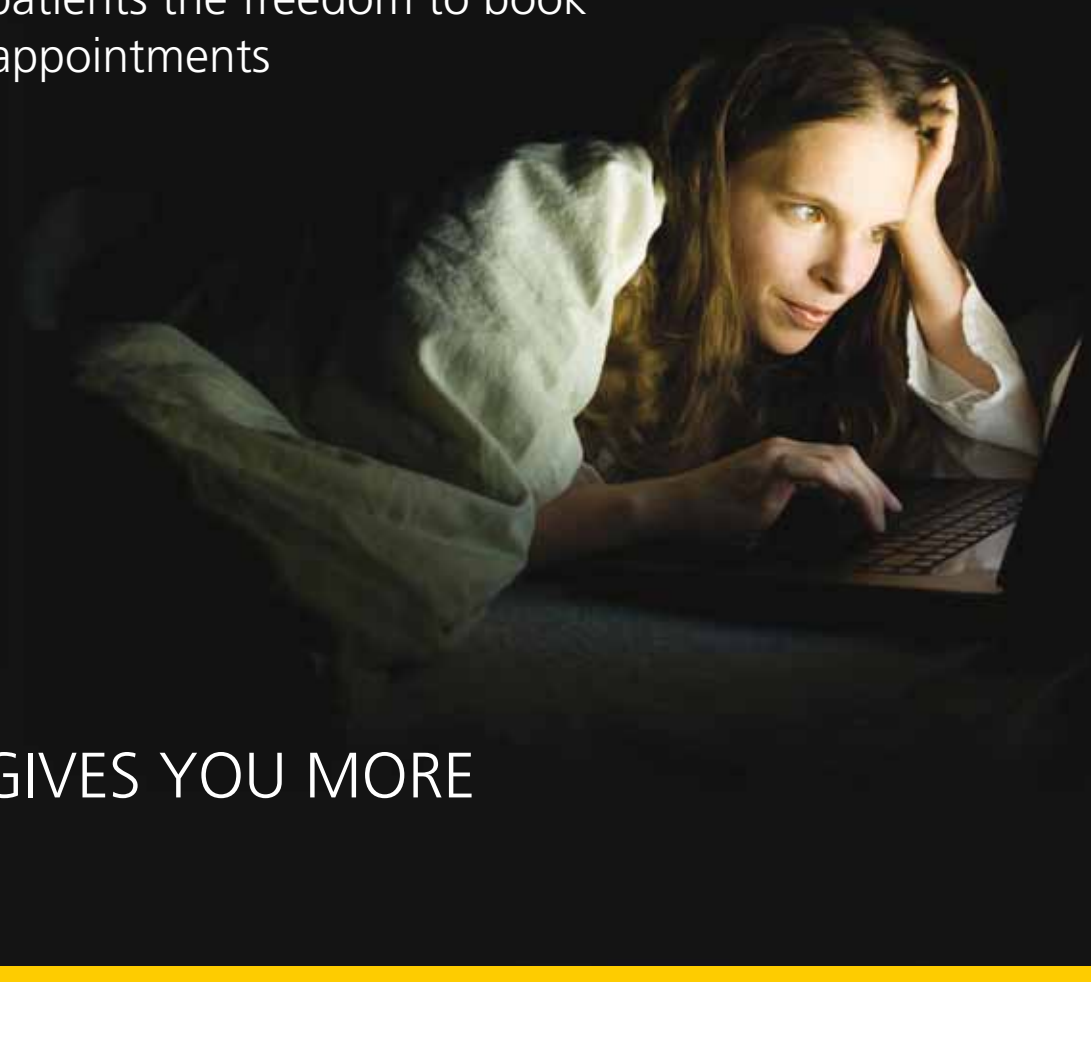

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that you respect the way they operate that you feel some empathy with them and that you know you can trust them. There's more to this than a brass plate and a firm handshake. In spite of their reputation they do have personalities.

4 **Sort** out your questions before you meet your prospective accountant, take as many as you can and ensure that they are welcomed - you're the client, they are the ones with the knowledge and expertise and should welcome your input.

5 **Do** they understand your business? They don't have to be "specialist" dental accountants but they must know and understand the background economy in which you are working and appreciate the changes that will affect your business.

6 **Make** sure that you are 100 per cent open with them and that you can be trusted too. If there are any skeletons in your cupboard, or even if you think there might be, make sure they know so that there are no surprises down the track. You wouldn't want to operate in the dark, why should they?

7 **Sort** out their fees. Cheap is not always good. How do they operate, fixed fee or hourly rate? Some accountants can't and won't give you a quote up front - they simply tell you what the hourly rate for whichever member(s) of staff will be involved in preparing your accounts and roughly how many hours will be involved. They'll know soon enough if you're short of cash to pay them and will probably be proactive in helping you spread the cost, perhaps on a monthly standing order. Don't haggle - unless you're the sort of dentist who happily knocks their own fees down (and if you are then give me a call and I'll put you right) then ask yourself how well disposed you are towards haggling patients.

8 **Can** they do everything that you will want of them? Are they happy to do your tax returns? Can they do payroll? Will they produce monthly management accounts for you and the bank if required? Will they advise on incorporation and handle the process without fuss? Will they advise you regularly on changes in legislation that will affect you?

9 **How** can you help them? How do they want the information from you? Will they send a bookkeeper to show you and your business manager exactly what records to keep, how they should be kept and when they should be submitted? Will they help train you? Will they show you how to prepare budgets? Remember the less work that you have to give them the better all round and the lower the bills. Files of invoices in date order and numbered to correspond with bank statements, cheque books make an accountants heart glow and helps them feel far better disposed towards you than a cardboard box full of paper in no particular order.

10 **Timing**. My own particular bugbear. If your year-end is (for instance) the end of October then your records ought to be with the accountant within a fortnight of the year-end. They, for their part should have written and let you know that your books are expected, that there is time put aside for the work and who from the firm will be dealing with it. You need to know your tax bill well in advance to be prepared.

It's not what you earn that matters, it's what you keep that counts, and for that a good accountant is essential. DT

About the author

Alun Rees trained at Newcastle University and started his career as an oral surgery resident, before working as an associate in a range of different practices. With this solid foundation, Alun went on to launch two practices in the space of just 15 months, a challenge in the toughest economic conditions. After years of hard work Alun finally sold his award-winning business in 2005. Alun's background and experience give him a strong understanding of what others go through to build a successful practice. He has seen many different approaches and learned his own lessons in the real world. Alun now runs Dental Business Partners to offer specific and specialised support for dentists, by dentists. He has served as a media representative for both the BDA and BDHF and is an authority consulted by the media and has featured on BBC2, Sky TV and various radio stations.
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