The Dental Defence Union (DDU) fear that under the proposals published for consultation by the General Dental Council (GDC), there will still be a risk that patients will not be compensated.

The GDC’s consultation, Requirement for professional indemnity for GDC registrants, closes in March 2009. It proposes two lists of minimum essential requirements for professional indemnity, one for providers of insurance and one for providers of discretionary indemnity.

Rupert Hoppenbrouwers, head of the DDU said: ‘The dual approach taken in the consultation document suggests that insurance and discretion are comparable and minimum requirements can be made for each type of indemnity. This is simply not the case. While we recognise this consultation is for discussion and will not necessarily reflect the direction the GDC will take, there is an inherent contradiction in seeking to establish minimum requirements that can be complied with by insurers and discretionary indemnity providers when the latter cannot agree to anything that would fetter their discretion.

The consultation recognises that there is an issue of ‘enforceability’ with discretion. As a mutual, non-profit making organisation which provides insurance alongside discretionary benefits – a detail missing from the consultation – we agree. In common with other discretionary providers, we cannot agree to any minimum requirements governing our exercise of discretion, because the very nature of discretion means we cannot give any guarantees.’

Mr Hoppenbrouwers called the consultation document ‘fundamentally flawed’ and said: ‘If, in the interests of protecting patients, you set out minimum requirements for one type of provider, to ensure that patients will always receive appropriate compensation you must make consistent requirements of other types of provider. The GDC knows that a discretionary provider cannot agree to requirements that are consistent with those for insurers because to do so would fetter their discretion and they may be considered as holding themselves out to be insurers, which would be illegal.’

The DDU expressed disappointment that the GDC has not attempted to bring dentistry into line with other healthcare providers such as opticians and chiropractors who have to have insurance and that it has not followed the example of regulators in most other EU countries where insurance is either compulsory or recommended.

‘For each dental professional to have a contract of insurance and the certainty that such negligence claims within the policy will be paid is indisputably in the interests of patients and other dental professionals themselves,’ added Mr Hoppenbrouwers.

Suspended prison sentence

A dentist in Merseyside, has been given a suspended jail sentence, for claiming payment from the NHS for patients who didn’t exist.

Robert Nolan, who has run a practice in Bootle, Merseyside, Liverpool, since 1990, made up patients so he could falsely claim money and also claimed paymen for work he never carried out on genuine patients.

Judge Graham Morrow QC told Liverpool Crown Court that it was ‘calculated, blatant and persistent dishonesty’. He agreed to suspend a prison sentence after hearing of Nolan’s personal circumstances and his ‘positive good character’.

Nolan was convicted of 20 offences of obtaining money transfers by deception. Sixteen convictions related to fictitious patients with fake addresses while four related to overpayment for work.

The 56-week sentence was suspended for 18 months and Nolan was placed under supervision. Judge Morrow also ordered him to do 500 hours unpaid work in the community, pay £5,500 in costs and imposed a three-month curfew. Nolan will now appear in front of the General Dental Council conduct committee.

Dental students well benefit from the centre

California, Los Angeles, on aesthetic restorative practice; Nick Opdam, St. Bartholomew’s University Medical Centre, Nijmegen, The Netherlands, on the expanding use of posterior composites in clinical practice; and Mikael Zimmerman, Karolinska Institute, Stockholm, on infection control.

There will also be sessions covering clinical and practical business skills for dental care professionals and a selection of seminars hosted by leading dental organisations.

Also, new at this year’s event will be 50-minute exhibition hall seminars entitling delegates to additional verifiable continuing professional development.

For further information or to register for Dentistry is transforming, the 2009 British Dental Conference and Exhibition, visit www.bda.org/conference or telephone 0870 166 0625. Any other queries about the event can be emailed to events@bda.org or by phone on 020 7565 4380.