**LDCs applaud ‘quality’ initiative**

Meeting of regional Local Dental Committees (LDCs) up and down the country has discovered an innovative initiative from a Northern PCT bringing the quality back into dentistry.

In contrast to many PCTs which tend to look for the cheapest bid when tendering contracts, Bradford PCT has put its money where its mouth is, by banning bids below a certain level.

The PCT is determined to put more emphasis into encouraging quality in dentistry, as well as hitting targets.

Under the new 2006 contract, quality is not incorporated into the Units of Dental Activity, (UDAs) which are allocated to dental practices.

But 40 per cent of the money allocated for three Bradford dental practices is earmarked for the quality of dental work carried out, with 60 per cent of the cash set aside for standard UDAs.

This means that if they fail to complete their UDA targets, the newly commissioned tenders will still qualify for a large proportion of the cash.

Eddie Crouch, from Birmingham Local Dental Committee, who spoke at the recent national LDC meeting in London, said the move to encourage quality control in dentistry was very welcome. He said: ‘There is no UDA criteria relating to the importance of ongoing monitoring of the quality of dental work, so it is good news that in Bradford’s case, if evidence of qualitative patient care is produced, even if the dental targets are not completely reached, the practices will still get a large proportion paid.’

Bradford PCT has commissioned three new practices, with each given a subsidy for equipment to be bought or provided by the PCT, two of which are corporates.

Mr Crouch added: ‘Bradford has also innovated new time-limited General Dental Service contracts, which were previously open-ended. When the new contract was set in place in 2006, GDS contracts were always open-ended, but Personal Dental Contracts (PDCs) were limited from three to five years. This new style of time-limited GDS contract could be worrying if a dental practice buys equipment and premises and then ends up without a contract after five years.’

But he added that the positive side of a time-limited GDS was that it could provide more flexibility and it was unlikely a contract would be terminated after five years without a very good reason.

Mr Crouch said it was vital that there was an amendment for quality to be incorporated into the contract. He said the need for quality to be incorporated in the new contract, would be backed up by the Department of Health’s (DoH) response to the Health Select Committee’s report, which was coming up in the next few weeks.

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**Sainsbury’s dentist**

The UK’s first supermarket dentist has opened in Sainsbury’s. The dental surgery in the branch of Sainsbury’s in Sale, Greater Manchester, opened earlier this month. It is open every day and check-ups are virtually the same as those of an NHS dentist. Patients can get two for the price of one by nipping into the dentist after stock up their shopping trolley.

Dental practitioner, Dr Lance Knight, the brainchild behind the surgery’s novel location, plans to create more dental surgeries in supermarkets, if the pilot scheme turns up trumps.

Patients are welcome to just drop in or they can book an appointment in advance.

The dental surgery follows hot on the heels of the first GP surgery, which was opened several months ago at a nearby Sainsbury’s branch.

**Free tickets**

The BDTA Dental Showcase 2008 takes place from Thursday, October 2 to Saturday, October 4 at ExCel London.

To reserve your complimentary ticket, log onto www.dentalshowcase.com, telephone the registration hotline on 01494 729959 or text your name, address, occupation and GDC no. to 07786 206 276. Advance registration closes on September 7786 206 276. Advance registration closes on September 07.

For advice and information on the event, telephone the registration hotline on 01423 525577, quoting BDTA Dental Showcase.

**Eastern Europe**

About 35,000 people living in Eastern Europe are beginning to show an interest in the quality of care. Bradford PCT has committed three new practices, with each given a subsidy for equipment to be bought or provided by the PCT, two of which are corporates.

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**Money matters**

He continued: ‘Other PCTs still commission dentistry at the cheapest UDA level and some show no interest at all in new ways of commissioning.

‘I think it is very positive that PCTs are beginning to show an interest in the quality of care.

‘Bradford PCT is ahead of the game.’

He hopes this move will spearhead other PCTs to develop a similar approach.

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**DDU advises the expert witnesses**

The Dental Defence Union (DDU), the specialist dental division of the Medical Defence Union (MDU), has issued advice to dentists who write expert reports or give evidence in court to help them avoid common pitfalls. Common allegations against expert witnesses are failure to be impartial, not examining papers or patients properly, giving misleading advice and not declaring conflicts of interest.

The DDU’s advice to dental professionals who act as expert witnesses is that:

- to ensure they remain impartial;
- to declare any conflicts of interest;
- not to accept instructions, or act in the interests of, any person other than their patient;
- not to be paid for writing reports or giving evidence in court.

Expert dentists can be faced with the profession’s distinct problems in court. The DDU’s Nick Ledingham, the Morris & Co partner responsible for dental accountancy, said: ‘We are all looking at better ways to improve dental treatment and take the fear factor out of the patient experience for good.

Professor Jennifer Kirkham, research director of Leeds Dental Institute, said the laboratory was looking for safe new ways to control plaque and to improve dental treatment and access to care by linking the laboratory activity and practice.

Another research project being carried out by linking the laboratory activity and practice was looking at better ways to improve dental treatment and take the fear factor out of the patient experience for good.

Professor Kirkham explained: ‘The principle of working from bench to clinic is to work with a circle of constant improvement. We have branded it as a service and it is this partnership with patients which ensures research has a impact.’

Another research project could transform the approach to filling teeth forever, Professor Kirkham explained.

‘We have developed a method for Filling without Drilling, which uses a low viscosity polymer based fluid which is painted onto the teeth where it infiltrates into the pores. Once inside the pores, the fluid solidifies, to become a gel which then converts calcium to the tooth mineral, bringing about a natural repair, without the pain or discomfort usually associated with a traditional drilling procedure.’

A £1.5 million investment by the University of Leeds is set to bring the new Centre of Excellence and Translational Research Unit to the forefront of global research and development in oral health by linking the laboratory activity directly to the needs of patients treated in the clinic.

The flagship centre for world class dental research and clinical practice, the first of its kind in the UK, opens at the Leeds Dental Institute in January 2009.