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British Dental Nurses' JOURNAL®

The Journal of the British Association of Dental Nurses



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Front Cover: BADN President Debra Worthington (left) with Chief Dental Officer, England, Sara Hurley (right) at the House of Commons

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From your President



Dear Colleagues,

What a busy March it has been; face to face meetings are definitely back. I have been out and about attending meetings on behalf of BADN members, including three visits to London.

On 9th March, I headed to London, the first time since lockdown that I have attended a face-to-face meeting in the Capital. The journey was almost thwarted by the snow, but I managed to get there and back with only a slight delay of 15 minutes.

The meeting was the Dental Leadership Network, arranged by the General Dental Council. The purpose for creating the Dental Leadership Network is to encourage collaborative working between the GDC and professional associations, to resolve shared challenges.

There were many speakers during the day, including Stefan Czerniawski, GDC Executive Director of Strategy. His presentation focussed on many issues, such as the current Scope of Practice Consultation. The consultation is now live on the GDC website and closes on 11th May. Please do have a look at the consultation and comment on the future amendments to our scope of practice. For the afternoon session, we were divided into workshops to discuss two topics: these were the Scope of Practice consultation and developing the whole dental team. Feedback was collected and will be disseminated at the next meeting on 6th July.



On 23rd March, I travelled to Excel – along with Adam and Pam from the BADN office – to the BDIA Dental Showcase. I presented the BADN menopause policy, which was well received. A copy of the policy is available on the BADN website.

I will be presenting the menopause policy again at the Dentistry Show

at the NEC in Birmingham in May. I do like meeting you all – please do come along to the BADN stand to say hello.

I was also invited to present the BADN menopause policy to the North West Oral Health Network meeting.

I continue to meet with BADN stakeholders, which include our fellow DCP associations. In the last month, I have met with the presidents of the British Society of Dental Hygiene and Therapy (BSDHT) and the British Association of Dental Therapists (BADT). I recently met with Kate Kerslake, CEO of NEBDN to discuss their recent awarding of Ofqual status, and to discuss future developments, including the apprenticeship model of training.



On 28th March, I headed south to the Capital again. I was invited to represent BADN at the House of Commons. The meeting title was "Tackling the rise of dental deserts and reforming NHS dentistry." It was good to see so many dental stakeholders present. It also gave me the opportunity to meet up with Sara Hurley, Chief Dental Officer of England (as pictured on this issue's front cover), and Yasmin Qureshi MP, who is the chair of the All-Party Parliamentary Group for Dentistry.

I will be speaking at the Dentistry show, at the NEC in Birmingham. BADN will have a stand and coffee area; do come to say hello.

Debra Worthington
BADN President

BADN Dental Nurse Recruitment & Retention Survey

Conducted on behalf of Dr Debbie Reed RDN, former BADN Chair, Fellow of the College of General Dentistry (CGDent), and Director of Studies in Advanced and Specialist Healthcare and Course Director of the MSc in Advanced and Specialist Health in Global and Lifelong Learning at the University of Kent

"I am delighted to be working with BADN – the professional body for dental nurses in the UK – on this survey," said Dr Reed. "It is essential to gain insight into the dental nurse community at this time of uncertainty, and to gather that insight taking an ethically approved, methodologically sound research approach."

"The aim of the study is to provide understanding, by establishing a body of knowledge about the current state of the RDN (Registered Dental Nurse) workforce within the UK from the perspective of RDNs. As such, it is the intention to share the results of the study with the dental nurse community and associated stakeholders. This information then can be used to inform decisions regarding the measures most appropriate when seeking to retain and encourage RDNs to continue to contribute as part of the dental workforce within the UK."

"The report is now being compiled and I'm sure it will make for interesting reading."



BADN launches exhibition survey



The British Association of Dental Nurses (BADN), the UK's professional association for dental nurses, has recently launched its latest survey.

The number of dental exhibitions has increased considerably over the last few years, and BADN wants to know whether dental nurses attend dental exhibitions, which ones they attend, why they don't attend, and what they want from exhibition organisers.

In addition, dental nurses often report being ignored at exhibitions by sales reps who mistakenly believe that dental nurses have no input into purchasing decisions. So, the survey aims to find out how much influence dental nurses have on the decision-making process.

The results of the survey will be shared with exhibition organisers, dental trade companies and the BDIA. Further details can be found on the BADN website.

NOMINATIONS REQUESTED

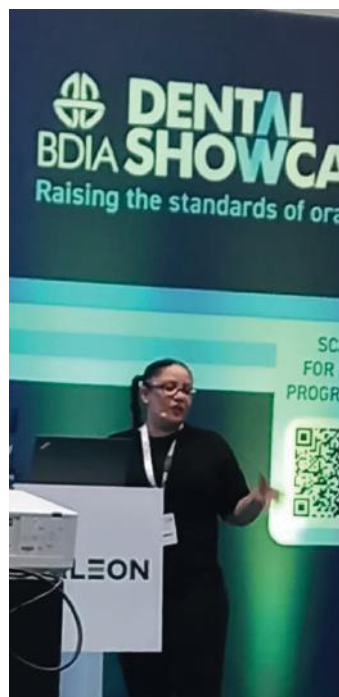
In accordance with the BADN Constitution, nominations are requested for the following roles:

President-elect 2023–2024 (President 2024–2026);
Chairman 2023–2025; Treasurer 2023–2025

Completed nomination forms (available on request from pam@badn.org.uk) should be returned to the Chief Executive by close of business on Friday 14 July 2023. Job descriptions and other info may be obtained from the Chief Executive on 01253 338365.

BADN at BDIA Dental Showcase

BADN was recently highlighted in London at BDIA Dental Showcase at ExCel. The BADN stand was manned by Adam Skalski and Pam Swain, with help from BADN member Rebecca Silver (who also spoke in the Oral Health Theatre on Dental Nurse Progression) and Jenny Hollywood from Parliament Hill, providers of the BADN Rewards



Scheme. President Debra Worthington gave the first presentation in the Oral Health Theatre on our Menopause Policy – which led to an influx of visitors to the stand for a copy of the Policy.

We had a special offer at the Show for not-yet-member-dental nurses – £5 off the already lowered annual membership fee of £35, plus entry into a draw for a £50 gift voucher courtesy of Parliament Hill – and gave away our BADN linen bags to dental nurses who visited the stand, together with BADN key rings/trolley coins. There were a surprising number of dental nurses at the Show, so by Saturday lunchtime we'd given it all away!





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Get your patients smiling all summer long

National Smile Month is a wonderful chance for us to really get patients to think more about their oral health. Now in its 47th year, the campaign remains a fantastic opportunity for all dental nurses to get involved by motivating and educating patients to care more about the health of their mouth.

The number of dental practices and dental care professionals participating in National Smile Month continues to grow at a fantastic rate, and the passion and enthusiasm from dental nurses in particular has been a big part in making the campaign such a wonderful success, especially over the last few years.

Once again, we need your help to put oral health at the forefront of the public's minds and truly put a smile on their face!

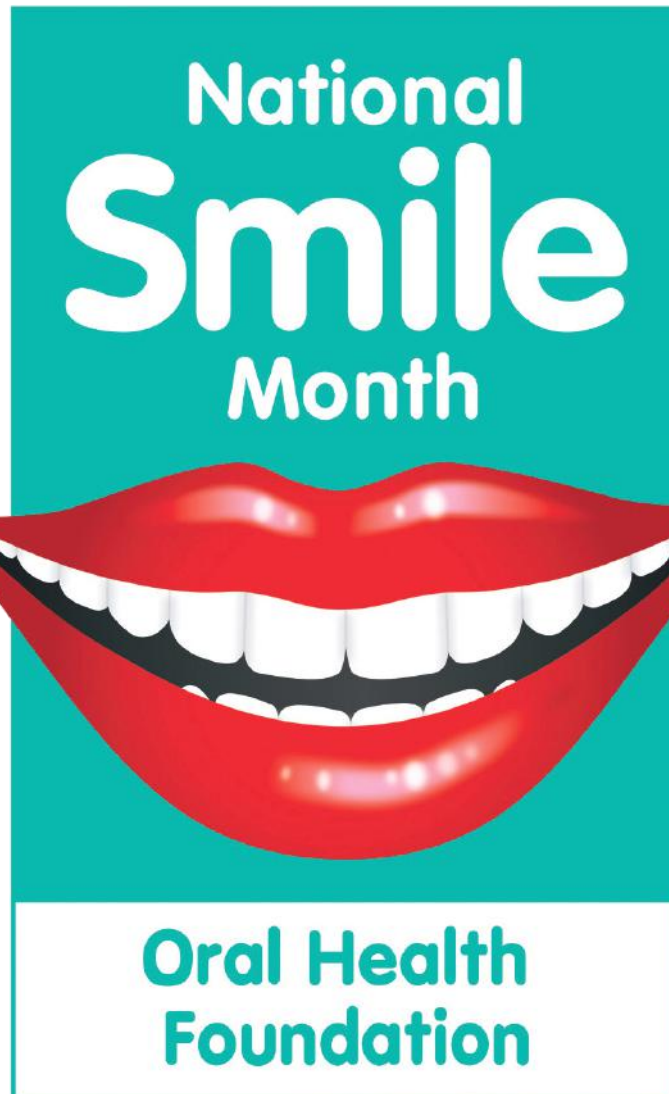
What it's all about

National Smile Month is organised and run by the Oral Health Foundation, a leading national charity working to improve oral health. Our goal is to improve people's lives by reducing the harm caused by oral diseases – many of which are entirely preventable.

Together, with the help of thousands of individuals and organisations, National Smile Month gives us the chance to make a positive difference and engage people with their oral health – something which is so often overlooked.

Ultimately, National Smile Month promotes three key messages, all of which go a long way in helping patients develop and maintain a healthy mouth.

These messages are to; brush our teeth last thing at night and at one other time during the day with a fluoride toothpaste, cut down on how often we have sugary foods and drinks, and visit our dentist regularly, as often as they recommend.



These messages may seem basic but as you'll know, they are the 'bread and butter' of developing and maintaining good oral health. By encouraging patients to following these three simple rules alone, we can put them on the right path towards having a healthy mouth.

Our goal with National Smile Month is to improve the oral health of everybody in the United Kingdom. This year, thousands of dental practices are taking part in the campaign, helping to broadcast oral health messages to millions of patients throughout the country.

The campaign starts on 15 May and will continue through to 15 June. We are encouraging all dental and health professionals, schools, pharmacies, community groups, colleges and workplaces – in fact anyone with an interest in good oral healthcare, to join in and help us educate, motivate and communicate positive oral health messages and improves the quality of smiles all around the UK.

It's not too late to become part of National Smile Month and as dental nurses at the forefront of the profession, you are in a wonderful position to help us make difference.

Where to start

Each and every year, National Smile Month is supported by more dental nurses. This

support is something that we truly value and we hope you will continue to do so, not only throughout this campaign, but also in future years too.

With your help, we'd like to go one better this year and really push the door open to better oral health for even more of the population, especially those groups who need it most.

Whether you have been part of National Smile Month before, or are a complete newcomer to the campaign, here is where you start and what you can expect over the next few weeks.

Your first step is to explore the campaign website at www.smilemonth.org. We have some great oral health tips and advice that you can download and pass on to your patients. There are also plenty of opportunities to have fun too with ideas for events and activities!

Show us your Smiley

A smile. It's one of the most powerful and emotive gestures we can do. Smiling shows confidence and has been proved to have a positive effect on our relationships, careers and overall image. It's so simple, yet so many people just don't do it, often caused by poor oral hygiene over the years.

With our Smiley, you and your patients will find it impossible not to smile behind it. They're popular too. We have sent out more than one million



A pack of ten Smileys costs only £2.50, with all the proceeds going towards a great cause. Please help support the campaign by putting a smile(y) on you and your patient's faces!

This year, we are encouraging everybody to help us raise awareness of oral health by uploading their Smiley photos to social media. Use #smilemonth and post a simple oral health message for your supporters – like encouraging them to brush twice a day.

You can either one take of just yourself or why not get others involved too? Perhaps arrange a group Smiley selfie photo with your team and your patients. The more people we can get involved in the campaign, the more we can engage with members of the public about the true importance of a healthy smile.



Smileys over the last 10 years. They are fun, and educational too... with each Smiley carrying our three key messages for good oral health.

Poor oral health can be both physically painful and psychologically damaging. It can affect self-confidence, image and even how we are perceived by other people. From the many interesting studies into laughter millions of people may also be missing out on the positive benefits of smiling and having fun. The Smiley is a great opportunity to take a moment to think about our oral health, and more importantly how we can improve it – which not only makes it a fun device for your staff but also a great patient tool too!

How about offering to visit a school to do a talk on how to look after your teeth and healthy eating? Or perhaps invite groups of local school children to deliver the lesson instead, you could include a surgery tour?
Here is a lesson plan designed for Key Stage 2 entitled 'Look After Yourself – Brush For Health'...

AIM

- Cleaning our teeth and gums helps to keep them strong and healthy.
- Eating healthy food can help to protect our teeth and gums.

OBJECTIVES

After the lesson, the children should know:

- That having clean teeth is an important part of having a clean body.
- Basic brushing techniques.
- What plaque is.
- What a cavity is.
- Why eating nutritious food is important for our teeth.

LESSON PLAN

1. Keeping our bodies and teeth clean. What are some of the things you do to keep yourself clean? (bathe, wash hair, wash clothes)
2. Why is it important to have clean hands, and have a bath and wash our clothes? (So you don't get ill, so that you look and smell nice)
3. How do you feel when you are clean? (Skin smells good, hands don't feel sticky etc.)
4. Can someone be clean if their mouth and teeth are not clean? (No)

Taking part in National Smile Month

With the help and enthusiasm of those who are passionate about health and wellbeing, hundreds of events and activities have already taken place to educate and engage patients and local communities about the importance of a healthy mouth.

As a vital member of the dental team, dental nurses are making a huge difference by supporting National Smile Month by getting their practices to take part and directly influence patients.

We understand budgets are becoming smaller, and your time is precious. That's why this year our National Smile Month team have created an online 'Events Hub' where you can find great information on our most popular event ideas, as well as an indication of how much time and money you would need to invest. We cater for all budgets and for dental nurses who have everything from a spare hour or two to a whole week.

Even if you and your practice are unable to commit any time to delivering specific oral health events and activities, there are some really simple things you can do with your patients in the remaining weeks of the campaign.

Visit www.smilemonth.org to discover more activities and events you can do during the campaign.

The legacy

With your support, National Smile Month reaches around 50 million people each year and is the biggest and most effective annual reminder

of the importance of good oral health. But there is still more work to do. One in four children start school with tooth decay, around a quarter of all adults say they have not visited a dentist in the past two years, three in every ten adults suffer from regular dental pain, a quarter of adults don't brush their teeth twice a day and over four-fifths of the population have at least one filling.



As we know, poor oral health doesn't just cause problems inside the mouth. A smile is hugely important to our personalities, self-confidence, relationships and success. General health is also at risk too as studies continue to associate poor oral health to serious health problems such as diabetes, heart disease, strokes, pneumonia, premature babies and other major conditions. With a good oral health routine, most of these conditions are preventable and your support during National Smile Month can make a big difference.

Taking care of teeth is a job for life, not just for a campaign. Educating patients on how important their oral health is the primary goal of the campaign. Your role is to help disseminate that information and help us to make further improvements.

Good luck, have fun and we hope to see those Smileys soon!

HEALTHY FOOD AND DRINK.

- There is another way we can help to keep our teeth clean and healthy. That is by eating and drinking healthy foods and drinks. A well-balanced diet that contains plenty of fresh fruit and vegetables will help to keep your mouth, teeth and the rest of your body healthy.
- If you need a snack, choose foods like fruit, low-fat cheese, low-fat yogurt or raw vegetables. If you are thirsty, have a glass of water or low-fat milk.
- Try not to eat too many sweets or drink fizzy drinks, if you do, have them with a meal.

Use the Friendly Snacks Magnetic Board to show the tooth friendly foods and snacks that do not stick to the teeth and the non-tooth friendly snacks which stick to the teeth.

BRUSHING TEETH

1. What can you do to keep your teeth clean and healthy? (Brush your teeth for two minutes, last thing at night and at least one other time during the day)
2. How many of you brush your teeth twice a day? (Good)
3. Why do we use toothpaste on our toothbrush? (Cleans better than water, gets food off your teeth, makes your teeth stronger, makes your mouth taste and smell good)
4. How much toothpaste should you put on your toothbrush? (A pea-sized smear of toothpaste that contains 1000 ppm fluoride between birth and 3 years old, over 3 years old toothpaste containing 1350-1500 ppm fluoride should be used)
5. Always remember to spit out the toothpaste after brushing and never swallow it!

BRUSHING DEMONSTRATION

Use the demonstration puppet and over-sized toothbrush to show correct toothbrushing technique.

1. Place the head of the toothbrush against the teeth, then tilt the bristle tips to a 45 degree angle against the gumline. Move the brush in small circular movements several times, on all the surfaces of every tooth. (Showing the children the circular movements).
2. Brush the outer surfaces of each tooth, upper and lower keeping the bristles angled against the gumline.
3. Use the same method on the inside surfaces of all of the teeth.
4. Brush the biting surfaces of the teeth.
5. To clean the inside surfaces of the front teeth, tilt the brush vertically and make several small circular strokes with the front part of the brush (Show the children at every stage).

WHAT IS PLAQUE?

- Plaque is a sticky, clear film that forms on your teeth all the time. It contains lots of germs (bacteria).
- How does plaque cause holes (cavities) to form in the teeth?
- Every time you eat or drink anything that contains sugar, the germs mix with it to make acid. This acid attacks the teeth and starts to dissolve the enamel which can make a hole (cavity). You will then need to see the dentist to have the hole cleaned out.

HIDDEN SUGARS

- Use the Sugar Kit (available from BDHF Educational Resources) to measure out the amount of sugar in particular products which the children may be eating and drinking on a regular basis. This will then lead onto discussing what is healthier for the teeth.



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Time to start thinking about CPD now

The General Dental Council outlines what you need to know about CPD

As you are aware, Continuing Professional Development (CPD) is a vital part of being a member of the dental team and is something we all must do it – but why is it so important?

Dental nurses are the biggest group of dental professionals

Dental nurses, perhaps more than any other profession, represent the dental sector and you are key members of the team. So, it's important that you work and engage with patients and your colleagues in a way that provides the best patient care and instils confidence in the profession. This will mean that patients and the public will view you as the highly trained professionals that you are.

Continuing Professional Development (CPD) is a vital part of demonstrating your commitment to professionalism and allows you to build on your initial training and education.

Completing your CPD early is essential for several reasons. Firstly, it ensures confidence in your practice, knowing that you are providing the highest quality care for your patients, and secondly, it allows you to stay up-to-date with the latest developments, technologies and treatments.

While we know some employers don't support dental nurses with their CPD and personal development, good employers are increasingly looking for dental nurses who are committed to their professional development and who have a wide range of skills and knowledge that can benefit their practice. Therefore, we know that CPD can also help you in progressing your careers and take on more senior roles.

That's why the GDC places such importance on the completion of your CPD.

As you know, CPD is a compulsory part of being a registered dental professional and not meeting your minimum CPD requirements can put your ability to practise at risk.

We understand that finding the time for CPD is hard. You may have demanding work schedules or not have the help or support from your employer to develop a meaningful personal development plan or complete your CPD. Dental nurses also often have family commitments or other obligations to attend to that mean completing your required CPD is a real challenge.

That said, most dental nurses are meeting their professional responsibilities when it comes to CPD. However, the number of those not meeting the minimum requirements has increased in recent years, and the GDC is concerned that if this continues there will be an increase in the numbers of dental nurses who fail to meet their CPD requirement.

What do dental nurses need to do each year?

As a registered dental nurse there are several things you need to do each year to maintain your registration:

- **Make your annual CPD declaration:** You need to complete at least 10 hours of CPD in each two-year period. And as a dental nurse you need to complete at least 50 hours of verifiable CPD during each five year CPD cycle.
- **Keep a personal development plan:** As well as completing any required CPD, you will also need to maintain a personal development plan, which you can use to inform your CPD priorities
- **Pay your annual retention fee of £114:** You need to do this before the deadline of 31 July. Don't forget, there is an option to pay the fee in four equal instalments, but if you want to do this, you will need to register for this before the end of May.
- **Make your indemnity declaration:** You must have appropriate indemnity arrangements in place so that if things do go wrong, patients are protected and can claim any compensation to which they may be entitled.

There may be some years when you are unable to complete any CPD. That's fine, but you need to remember to complete a zero-hours CPD statement when you are doing your annual renewal.



Don't forget, you must make an annual CPD statement every year, and complete at least 10 hours CPD during any two-year period of your cycle. This is really important as failure to do this will mean that you are removed from the register, and you will have to make an application to restore to the register to be able to continue to work as a dental nurse.

But remember, you don't have to wait until July make your CPD declaration- you can do this at any time throughout the year. You can check how much CPD you need to complete this year by accessing your online account on eGDC.

In your final year and need a bit more time?

If you are in the final year of your CPD cycle and need a little more time to complete your required CPD hours, you can apply for a grace period. This will give you an additional 8 weeks (56 days) to complete any outstanding CPD. You can apply for this in the CPD section of your eGDC account.

However, you need to apply for this grace period by 31 July.

Don't get left behind

Remember, if you don't complete your required CPD, including at least 10 hours during any two-year period, you could lose your registration and your ability to practise dental nursing in the UK.

Executive Editor's Note: The GDC say "could" here but in recent meetings with GDC staff, re dental nurses who have indeed been erased for minor discrepancies in logging their CPD, President Debra Worthington and I were told that anyone failing to log 10 hours of CPD per 2 subsequent years will be erased and have to appeal that decision.

This is something nobody wants, and it can have serious consequences for the individuals and their teams, as even if removal from the register is avoided, there could be associated stress, administration and potential costs to become compliant in a short period of time. This can all be avoided by keeping on top of that CPD planning.

So don't let yourself, or your dental team, down – get your CPD done and submitted on time.

And don't forget, you can log into eGDC to find out how much CPD you need to do and if you need additional support or have any questions, please get in touch with the GDC now, rather than waiting until renewal.

CPD is a key way to demonstrate your professionalism and support your personal development. Dental professionals with up to date knowledge and learning based on effective CPD will be better placed to provide high quality patient care.

What to do next...

Don't get caught out, as failure to comply with the GDC's CPD requirements can have serious consequences!

- Make sure you know what CPD you need to complete this year before your renewal in July, by checking on eGDC.
- If you are unsure of your CPD requirements you can check these on the GDC website: www.gdc-uk.org/education-cpd/cpd

The importance of staff appraisals

Staff appraisals are an opportunity for protected time to have face to face feedback between an individual member of the dental team and a member of the management team. It is a Care Quality Commission (CQC) requirement that appraisals must take place at least once a year



In this article, the **BADN Education Committee** members **Farah Saleem** and **Sarah Haslam** describe an individual's view of the appraisal process in two different work settings.

Firstly, Farah asks a practice manager how staff appraisals are managed at a General Dental Practice.

An appraisal is an important time to discuss a member of staff's performance and development. At Stonemount Dental Practice, the Practice Manager Mahmuda Khatun, describes the importance of achievements and future objectives with all staff. Mahmuda explains that appraisals help maximise the potential of a Dental Nurse.

Why are appraisals important at your practice?

Appraisals are important at Stonemount Dental Practice because it allows us to identify any performance related issues and address those needs.

The purpose of the appraisal is to match staff's performance with practice objectives and involving staff in achieving goals personally, professionally and for the practice.

One of the most important parts of appraisals is feedback. This allows us to work on the strengths and weaknesses of each member of staff.

How do you carry out an employee appraisal?

An invitation for an appraisal meeting is sent via a letter in advance to the member of staff. Mahmuda has an appraisal form, which will be completed in advance of the meeting with information she has collected from other members of the team to help with the appraisal questions.

In depth questions are asked about how the member of staff feels in the workplace, changes that could be made, their progression route regarding Personal Development Plan (PDP) and Continuous Professional Development (CPD), general feedback on the practice and any worries or concerns the member of staff may have.

Once the meeting has concluded, Mahmuda works with the member of staff to act on any feedback that was obtained.

What is importance of Personal Development Plans (PDP) and Continuous Professional Development (CPD) in your dental practice?

It is important for staff to ensure that they are continuously learning, improving their skills and knowledge in dental nursing and supporting staff achieve this is key.

How do you ensure dental nurses keep up with their Continuous Professional Development (CPD)?

Although this is the responsibility of each dental nurse, I ensure all dental nurses are up to date with their CPD by creating a practice CPD file. Each member of staff is asked in their appraisal meeting what stage they are at with their CPD hours and it is requested all certificates are uploaded into the individuals file. Caring about our staff's CPD keeps dental nurses on the GDC register and maintains GDC standards for the practice, in accordance with CQC requirements.

Mouth Care Lead Nurse at Darent Valley Hospital, Sarah Haslam now describes her personal experience of completing an annual appraisal.

Once a year I meet with my line manager for my annual appraisal. This is a periodic opportunity for constructive communication between myself and my line manager to set my SMART objectives for the year and to decide how I will achieve these as part of my Personal Development Plan (PDP).

I begin to prepare for my appraisal a few weeks before. This involves checking that my mandatory training is up to date. Completing my mandatory training will also form part of my continual professional development (CPD)

As part of preparation for my appraisal I will review the SMART objectives that were set during my previous appraisal to check that I have achieved them.

I use my appraisal as an opportunity to develop my career as Registered Dental Nurse. In my current role, as a Mouth Care Nurse I may be required to support people with special needs who may need the approach to their oral health education adapted so they can continue to maintain good oral health.

In 2019 during my appraisal my line manager and I agreed to focus on Special Care Dental Nursing as my field of practice as part of my PDP. Furthermore, we identified what my learning needs were, taking into account the skills and knowledge I would need to develop to become a Special Care Dental Nurse.

We agreed that completing the NEBDN Special Care for Dental Nurses course would ensure that my knowledge and skills were updated and enable me to be competent Special Care Dental Nurse.

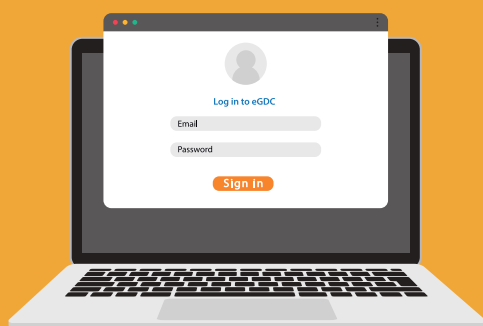
In March 2020, I completed and passed my NEBDN Special Care Dental Nurse Course.

Individuals' experience of the appraisal process may vary according to different workplace settings and should link with the appraisee's Personal Development Plan and CPD choices.

Manage your registration online

With eGDC you can:

- Apply to join the GDC's register
- Pay registration fees
- Complete the Annual Renewal process
- Submit and declare your Continuing Professional Development (CPD) hours
- Access anytime, anywhere 24/7



The fast, secure and convenient way to manage your registration.

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CPD for dental professionals

CPD is about keeping your professional skills and knowledge up to date. It also protects patients and maintains public confidence in the profession.

Are you on track to meet CPD requirements?



You need to complete at least 10 hours of CPD over each 2 year period and make a statement every year at renewal time.

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A Guide to Personal Development Plans (PDPs)

By Ruth Garrity and Joycee Rebelo, BADN Education Committee

Why is the Personal Development Plan important to the Dental Team?

All registered Dental Nurses are required to participate in Continuing Professional Development (CPD) in order to maintain their status on the General Dental Council (GDC) register. This means that Dental Nurses are responsible for maintaining their knowledge and skills in order to remain on the GDC register and be able to practise.

A personal development plan (PDP) is designed for members of the dental team to record their development goals and progress for the year and throughout the 5-year Continuing Professional Development cycle.

The PDP helps dental professionals to plan their own learning, whilst ensuring that the planned CPD meets the GDC outcomes and reflects their current role and patient population. In addition, it may be used to plan and prepare future advancement into new job roles or highlight any skill gaps or educational needs.

The PDP is a 'living' document and may be modified or updated at any time if your plans change.

How can I set up a Personal Development Plan (PDP) in the GDC website?

Firstly, go to the General Dental Council (GDC) website and log into your eGDC account. Then click on 'Education and CPD'

Click 'Find out more about CPD for Dental Professionals'.

Scroll down to the link for 'supporting documents'

Click the link then scroll down to 'Personal Development Plan Template'

Use of the GDC template is not compulsory, there are many alternatives available*.

However, in order to meet the GDC requirements, the PDP must include the following:

1. The CPD you plan to undertake during your cycle, which must include CPD that is relevant to your current or intended field(s) of practice;
2. The anticipated GDC development outcomes that will link to each activity;
3. The timeframes within which you expect to complete your CPD over your cycle.

How should I write up my Personal Development Plan (PDP)?

When considering your PDP for the reporting year and your 5-year GDC CPD cycle, you should aim to include all 4 development outcomes set by the GDC.

A. Effective communication with patients, the dental team, and others across dentistry, including when obtaining consent, dealing with complaints, and raising concerns when patients are at risk;

Examples of these include:

· Communication skills · Consent · Complaints handling · Raising concerns · Safeguarding

B. Effective management of self, and effective management of others or effective work with others in the dental team, in the interests of patients at all times; providing constructive leadership where appropriate;

Examples of these include:

· Effective practice management · Business management · Team working

C. Maintenance and development of knowledge and skill within your field of practice;

Examples of these include:

· Clinical and technical areas of study · Radiography · Cross infection

control · Medical emergencies and CPR · CPD on quality assurance for MHRA · CPD specific for your daily role(s) · Upskilling opportunities

D. Maintenance of skills, behaviours and attitudes which maintain patient confidence in you and the dental profession and put patients' interests first

Examples of these include:

· Ethical and legal issues and developments · Professional behaviours · Equality and diversity training

What should I consider when completing my PDP?

When writing your Personal Development Plan (PDP) you should think about what training you would like to complete, how you plan to access the courses, either a seminar, face to face, on-line, or using magazine articles, such as the CPD articles available via the British Dental Nurses' Journal (BDNJ) The journal is available at no cost to members of the British Association of Dental Nurses members (BADN).

You should consider which development outcome the planned CPD would cover in line with the GDC outcomes. A – D, details can be found on the GDC website.

Start your PDP with a little bit about yourself:

What is your field of interest, for example sedation, oral surgery, general dentistry?

Add some background such as where you currently work, what type of patients you care for.

Your current additional qualifications.

Your current work setting, how many surgeries, specialist care, on-site lab.

Add the following information, which will assist you in setting career goals:

What do I need to learn during this CPD cycle?

What areas have I identified as necessary to maintain my skills or progress my education?

Which GDC development outcomes will this training cover?

What benefit is it to my work?

Will it improve patient care?

When will I complete this training?

When training has been completed, remember to reflect and record your reflections. For example, what did you gain from it? Would you recommend it to a colleague? Would you remember the content of the training in a month's time?

In conclusion, having a PDP in place demonstrates to the GDC that your CPD activity is appropriate in supporting your work as a dental professional.

The GDC may ask to see your PDP to check you are keeping records which meet their requirements. The GDC does not evaluate the details in your PDP – it is for your personal use only. Depending on your job role and workplace setting, the PDP may be of use during the appraisal process.

**A free Personal Development Plan and a CPD Activity Log are available to BADN members - download from the members' area of the BADN website or send an A5 SAE to the BADN office, with CPD in top left corner of outer envelope for a hard copy.*

NEBDN, largest Awarding Organisation in the UK specialising in Dental Nursing qualifications, is now recognised by Ofqual

The National Examining Board for Dental Nurses (NEBDN) a Lancashire based charity, achieved Ofqual recognition in January 2023, this means they are formally regulated as an Awarding Organisation by the Office of Qualifications and Examinations Regulation (Ofqual). NEBDN has been examining and awarding dental nursing qualifications for 80 years, and ensure that Learners' knowledge, understanding and practical skills are assessed by highly experienced practitioners.

Kate Kerslake, CEO at NEBDN, has answered some questions on what this exciting new change will mean for the business and future Dental Nurses/Employers.



Who are Ofqual?

Ofqual are a non-ministerial government department, regulating qualifications, exams, and tests in England. Their purpose is to regulate for the validity and safe delivery of all applicable qualifications and assessments.

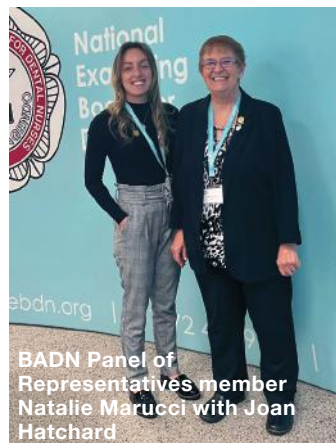
What is Ofqual recognition and what does it mean for NEBDN?

Joining a list of over 178 Ofqual recognised institutions, NEBDN will now join the register as a regulated Awarding Organisation. Being recognised by Ofqual offers future potential benefits to the users of NEBDN qualifications through the Regulated Qualifications Framework, including attaining UCAS points, building credits, attracting public funding, and holding a qualification regulated by an internationally recognised organisation.

Being recognised by them will increase the quality on what NEBDN develops. It also means we are one step closer to achieving our goal of being an End-Point Assessment Organisation (EPAO).



BADN Chairman Joan Hatchard with Past President Jane Dalgarno



BADN Panel of Representatives member Natalie Marucci with Joan Hatchard

What is an End-Point Assessment (EPA)?

An EPA is the final test for apprentices during their apprenticeship. It is designed to be an objective and impartial assessment of an apprentice's knowledge, skills and behaviours. Activities are different for every apprenticeship, but they all follow the same overall structure. NEBDN has applied for Ofqual recognition primarily to become an EPAO, which will allow us to offer an apprenticeship in Dental Nursing.

How will this benefit Dental Nurses and those getting into a Dental Nursing career?

NEBDN offering an apprenticeship product will provide two types of training routes to qualification and General Dental Council (GDC) registration, the Dental Nursing Apprenticeship as one product and the National Diploma as



the other. Through government apprenticeship funding, Employers can now potentially offer a fully funded training package, removing the need for trainees to financially contribute to their course.

What qualifications do you currently offer?

NEBDN offer the National Diploma for trainee Dental Nurses, alongside seven Post-Registration qualifications for dental care professionals who are GDC registered. These qualifications are in, Implant, Radiography, Sedation, Fluoride Varnish, Oral Health, Orthodontics and Special Care.

Why is NEBDN joining the Ofqual register so unique?

As previously mentioned, there's only 178 recognised institutions on the Ofqual register and NEBDN successfully passing the criteria to join is a huge achievement that not all organisations can fulfil. We are also the largest Awarding Organisation in the UK to offer this many Dental Nursing qualifications, allowing us the opportunity to expand and develop our products to suit the growing needs of the market.

Your flagship National Diploma qualification is very successful and has been around for several decades – in fact you are celebrating NEBDN's 80th anniversary this year! Why do you now want to enter the apprenticeship market?

It's something that our customers have been asking for and we recognise the importance of apprenticeships for those developing their careers. As an Awarding Organisation specialising in Dental Nursing qualifications, we want to support this route to registration alongside the National Diploma.

How have you found coping with the challenges in the healthcare sector?

Like most organisations we have had to adapt. We moved to online exams and had to provide increased support to Centres and Learners to enable them to continue their studies during a time when many were facing changing restrictions in practice or were often redeployed.

What would you say are the priorities for NEBDN and the Dental Nursing profession looking forward?

The focus has to be on encouraging more people into Dental Nursing and retain these skills by providing access to additional qualifications. NEBDN will continue with developments like Ofqual regulation to ensure we support career development and wider opportunities for Dental Nurses across the profession.

Brush up on CPD



Hello and welcome to Brush up on CPD. This program, produced by Purple Media Solutions, provides you with clinical features from which you can claim up to two hours of Continuing Professional Development (CPD), a mandatory part of registration with the General Dental Council. Each article offers an hour verifiable CPD on subjects.

Articles in this issue:

**The unrelenting desire for whiter, brighter teeth:
educating patients about safe smiles**

16 - 17

Help teenagers take control of their oral health

18 - 19

Q&A

15

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Brush Up on CPD appears in *The Probe* throughout the year. All certificates are issued online. Readers must be registered with www.the-probe.co.uk in order to gain access to the CPD questions and multiple choice answers. Once you have logged in, click on 'Brush Up' to see the question and answer options. When you have submitted the correct answers for both articles, you will be able to print out your two hours' verified CPD certificate.

To answer the questions below, visit www.the-probe.co.uk and log in.

Click on the 'CPD - Brush Up' tab.

The questions for this Brush Up will appear under 'Brush Up – BDNJ Spring 2023

CPD questions – The unrelenting desire for whiter, brighter teeth: educating patients about safe smiles

1) What is a Duchenne smile?

- a) A smile with the mouth closed
- b) One that reaches the eyes, raising the cheekbones
- c) An open-mouthed smile, showing all the teeth
- d) A smile without eye contact

2) At the last estimate, the tooth whitening industry in the UK was worth...

- a) £40 million
- b) £100 million
- c) £1 million
- d) £1 billion

3) The highest proportion of UK adults who would "probably" consider professional whitening was among the...

- a) 35-40-year-olds
- b) Over 50s
- c) 16-30-year olds
- d) 18-24-year-olds

4) In a product containing or releasing hydrogen peroxide, what is the percentage that indicates that it should not be made directly available to the consumer, according to the GDC?

- a) Anything over 5%
- b) Anything over 0.1%
- c) Anything over 1%
- d) Anything over 10%

5) In the UK, who is able to deliver tooth whitening treatments, by law?

- a) A registered dental professional only
- b) A registered dental professional or beauty therapist
- c) Anyone who has taken an appropriate course
- d) A dentist only

6) Cause of tooth discoloration can include...

- a) Poor oral hygiene
- b) Smoking
- c) Abrasion caused by over-zealous brushing
- d) All of the above

CPD Questions – Help teenagers take control of their oral health

1) Why might teenagers be difficult to treat?

- a) They might not have the same level of support at home that younger children might have
- b) Their body goes through physical changes that can affect oral health
- c) They are likely to engage in lifestyle habits that can put their oral health at risk
- d) All of the above

2. The use of e-cigarettes in 18-year-olds grew from 1% in 2021 to what in 2022?

- a) 3%
- b) 56.7%
- c) 20.4%
- d) 45%

3. Between April and December 2021, how many young people started treatment for an eating disorder?

- a) 57,000
- b) 30,000
- c) 4,000
- d) 10,000

4. The 'DIY dentistry' craze saw young people on social media doing what to their teeth?

- a) Using rubber bands to close gaps in their teeth
- b) Filing their teeth down with nail files
- c) Whitening their teeth with hydrogen peroxide
- d) All of the above

5. Social media use in young people can cause...?

- a) Poor self-image
- b) Increased levels of concentration at school
- c) Improved sleep
- d) High self-esteem

6. What is one of the ways that the dental team can improve oral health awareness in teenagers?

- a) Promote useful resources on their dental practice's social media, blog and/or website
- b) Tell them off
- c) Let them get on with it – they'll learn eventually
- d) Use scare tactics

The unrelenting desire for whiter, brighter teeth: educating patients about safe smiles

Learning objectives

- To understand the factors that have led to the high demand for tooth whitening
- To understand the law around tooth whitening
- To offer tips to help educate patients about how to brighten their teeth and reduce staining naturally and safely

GDC Development Outcome: C



Smiling is contagious; a genuine ‘Duchenne’ smile, one that reaches the eyes and raises the cheeks as well as the corners of the mouth, will generally be immediately reciprocated. It can help to make a positive first impression and put others at ease.

A smile signifies sincerity and sociability and increases a person’s rated attractiveness, when compared to a neutral expression.ⁱ

Historical concepts of beauty focused on the need for balance, symmetry and proportion.ⁱⁱ In modern dentistry, harmony is a key principle of smile design, which aims aim to “achieve pleasing composition (...) by creating an arrangement of various aesthetic elements” as well as a healthy, functional result.ⁱⁱⁱ Patients in pursuit of an improved smile desire straight, beautifully aligned teeth, but tooth colour is important too.

White, stain-free teeth are the current beauty standard. White has associations with purity and cleanliness; whiter teeth tend to signify good health and hygiene, also youth, as teeth often become naturally darker with age.^{iv} Studies have found that if teeth are discoloured, this can negatively influence social perceptions.^v The media may amplify the notion that white teeth are the ‘ideal’, but there are deep cultural and societal factors at play here too.^{vi} Someone with a beautiful smile is not only perceived as being more attractive, but more popular, successful and even intelligent.^{vii}

A million-pound industry

In the UK alone, the tooth whitening industry is worth millions; the last estimate was around £40 million, annually, spent on treatments and consumables to whiten,

brighten and remove stains.^{viii} In 2020, a survey found that 22% per cent of Brits said they would “probably” get their teeth professionally whitened, with the highest proportion being the 18-24-year-olds.^{ix} Among members of the general public, the word “professionally” can often be open to interpretation, however.

Reports of illegal whitening, delivered by someone “neither qualified to assesses a patient’s suitability for treatment (nor) able to intervene should an emergency arise” have risen significantly.^{x,xi} Investigations have uncovered sham training providers offering fraudulent qualifications that are misleading candidates who are unaware they could face a fine or prosecution; ignorance would not nullify their liability, though, in the event of something going wrong.^{xii}

The GDC’s position is that tooth whitening is the practice of dentistry, so can only be “legally and safely” offered by a registered dental professional, who will perform a comprehensive clinical examination to identify any concerns or risk factors. The GDC also states that “products containing or releasing between 0.1%-6% hydrogen peroxide should not be made directly available to the consumer, other than through treatment by a registered dentist (or dental hygienist or dental therapist or clinical dental technicians working to a dentist’s prescription).^{xiii} But crucially, if a beauty therapist tells a client they are using less than 0.1% hydrogen peroxide to carry out whitening, the fact they are unregistered still means that treatment is illegal, and unsafe.

For patients who are aware of the law, though, cost may be a motivating factor for going to a location other than a dental practice, or purchasing a home whitening

kit from the internet. In 2021, consumer group Which? found two products available on an online marketplace that contained around 30% hydrogen peroxide; over 50% of the home kits they looked at had 100 times too much than is safe or legal.^{xiv}

The adverse effects of illegal whitening include burns, blisters, scarring, chronic hypersensitivity, long-lasting pain and tooth loss. As well as the physical/oral-health related impacts, there will be psychological distress. There may be financial implications if corrective treatment is required; a patient may even decide to take legal action.

Useful practises before whitening begins

For a patient who is unhappy with the colour of the teeth, there is much they can do to help themselves, before considering professional whitening. In many cases, a brighter, whiter smile can be achieved at home, without the need for intensive procedures.

DCPs can offer tips at consultations, that cost nothing, or a minimal amount, to implement.

As prevention is better than cure, to reduce staining of the enamel patients should avoid too much tea, coffee or other highly pigmented drinks, such as red wine. Alcohol is acidic, and all acid beverages can lead to erosion and increased susceptibility to discolouration. Carbonated drinks come into this category, also fruit juices. Acidic drinks should be moderated, or eliminated entirely – colas, for example, do not have any significant nutritional benefit, or deliver hydration. Consider which foods a patient is regularly eating that could be causing staining, such as dark soy sauces.

Tobacco smoking significantly impacts dental aesthetics; one study found 28% of smokers reported moderate to severe levels of discolouration. For long-term smokers, their teeth may have taken on a brownish hue. Patients should be offered support with smoking cessation; quitting is the best thing anyone can do to improve their health. Illegal drug use also has many oral health impacts, including on aesthetics.^{xvi}

Tooth wear erosion can lead to the enamel becoming dull and losing its natural whiteness. Traditionally associated with older adults, patients across all age groups are now exhibiting more signs of wear, the reasons include socio-behavioural factors, such as increased consumption of acidic beverages and the rise in eating disorders among the younger population.^{xvii} Abrasion can also lead to discoloration, caused by the mechanical action of incorrect, overzealous brushing if someone is trying to scrub their teeth whiter.

Improving daily routines

Patients may be unaware that poor hygiene practises are the biggest cause of discoloration.^{xviii} A good homecare routine will improve dental aesthetics as well as oral health. Dentifrices containing baking soda are safe and effective for removing stains and whitening teeth, while elevating oral hygiene. They won't damage the enamel and are also clinically proven, for excellent results without the risks of illegal whitening.^{xix} Arm & Hammer™ has a range of toothpastes containing baking soda that can be used as part of daily routines. It includes Advanced White™ Pro for 3x whiter teeth in just 6 weeks, when used as directed. With MicroPolisher™ Technology, the product has a Stain Protection Shield for long-lasting results. As well as being convenient, such dentifrices are motivational, and can help patients maintain better habits that will improve their oral health-related quality of life and boost their emotional wellbeing. An elevated home routine should be supported by regular visits to the dental hygienist for a professional deep clean, to optimise plaque removal and reduce the risk of discolouration.

Teeth tell us a lot about individuals, their lives and their histories. Whiter teeth are a key part of dental aesthetics, signifying health as well as attractiveness. Such is the demand for tooth whitening, that

we have seen in a rise in unscrupulous practises, that are both unsafe and against the law. Satisfaction with one's own appearance is important for emotional wellbeing, so we must understand why patients are being tempted by options that are often cheaper. Alongside effective treatments delivered by a registered dental professional, they can adapt their behaviours and try high-quality products at home to brighten and whiten, and inhibit discolouration.

For more information about the carefully formulated Arm & Hammer™ toothpaste range, please visit <http://www.armandhammer.co.uk/> or email: ukenquiries@churchdwight.com

Arm & Hammer™ 100% Natural Baking Soda Toothpaste range can now be purchased from Boots, Superdrug and Amazon, with further stockists following.

References

- i. Reis, H.T., Wilson, I.M., Monestere, C., Bernstein, S., Clark, K., Seidl, E., Franco, M., Gioioso, E., Freeman, L. and Radoane, K. (1990), What is smiling is beautiful and good. *Eur. J. Soc. Psychol.*, 20: 259-267. <https://doi.org/10.1002/ejsp.2420200307>
- ii. Bhuvaneshwaran M. Principles of smile design. *J Conserv Dent*. 2010 Oct;13(4):225-32. doi: 10.4103/0972-0707.73387. PMID: 21217950; PMCID: PMC3010027.
- iii. *J Conserv Dent*. 2010 Oct; 13(4): 225-32.
- iv. Hendrie CA, Brewer G. Evidence to suggest that teeth act as human ornament displays signalling mate quality. *PLoS One*. 2012;7(7):e42178. doi: 10.1371/journal.pone.0042178. Epub 2012 Jul 31. PMID: 22860076; PMCID: PMC3409146.
- v. Kershaw, S., Newton, J. & Williams, D. The influence of tooth colour on the perceptions of personal characteristics among female dental patients: comparisons of unmodified, decayed and 'whitened' teeth. *Br Dent J* 204, E9 (2008). <https://doi.org/10.1038/bdj.2008.134>
- vi. Khalid, Abeer, and Carlos Quiñonez. "Straight, white teeth as a social prerogative." *Sociology of health & illness* 37.5 (2015): 782-796. <https://onlinelibrary.wiley.com/doi/pdf/10.1111/1467-9566.12238>
- vii. *Sociology of health & illness* 37.5 (2015): 782-796.
- viii. Do you think you would professionally whiten your teeth? Statista, 10 July 2020. Link: <https://www.statista.com/statistics/1132103/opinion-on-teeth-whitening-in-great-britain-by-age/> (accessed June 2022).
- ix. Teeth-whitening: Reports of illegal procedures up 26%. BBC, 10 February 2020. Link: <https://www.bbc.co.uk/news/uk-england-london-51388639> (accessed June 2022).
- x. Providers of illegal tooth whitening prosecuted by GDC. GDC, 9 October 2019. Link: <https://www.gdc-uk.org/news-blogs/news/detail/2019/10/09/providers-of-illegal-tooth-whitening-prosecuted-by-gdc> (accessed June 2022)
- xi. BBC, 10 February 2020.
- xii. Tooth whitening position statement. GDC, published 11 July 2016. Link: <https://www.gdc-uk.org/docs/default-source/what-is-the-legal-position/tooth-whitening-position-statement.pdf> (accessed June 2022).
- xiii. Don't buy teeth whitening products from online marketplaces. Which? 25 May 2021. Link: <https://www.which.co.uk/news/article/dont-buy-teeth-whitening-products-from-online-marketplaces-agxQc7m2V4ow> (accessed June 2022)/.
- xiv. Alkhatib MN, Holt RD, Bedi R. Smoking and tooth discolouration: findings from a national cross-sectional study. *BMC Public Health*. 2005 Mar 24;5:27. doi: 10.1186/1471-2458-5-27. PMID: 15790389; PMCID: PMC1079878.
- xv. Rossow I. Illicit drug use and oral health. *Addiction*. 2021 Nov;116(11):3235-3242. doi: 10.1111/add.15360. Epub 2021 Jan 15. PMID: 33247857.
- xvi. Zipfel S, Schmidt U, Giel KE. The hidden burden of eating disorders during the COVID-19 pandemic. *The Lancet Psychiatry*. 2022 Jan 1;9 (1):9-11.
- xvii. A Kadam, M Ganachari, B Mahendra Kumar, S Gurunath. Drug Induced Tooth Discolouration. *The Internet Journal of Dental Science*. 2008 Volume 7 Number 2.
- xviii. Li, Yiming. "Stain removal and whitening by baking soda dentifrice: a review of literature." *The Journal of the American Dental Association* 148.11 (2017): S20-S26. <https://www.sciencedirect.com/science/article/pii/S0002817717308115/?amp=1> ■

Help teenagers take control of their oral health

Learning objectives

- To understand the factors that put teenagers at risk of oral health complications
- To develop ways to communicate effectively with teenagers
- To help teenagers take control of their oral health

GDC Development Outcome: C

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It is never too late for a patient to take control of their oral health, but it is always best to establish healthy behaviours from a young age. This way, good habits can become second nature and a patient's adult life can be free from the burden of oral disease. Teenagers (those aged 10 to 19) pose some difficulties for the dental team. In regards to children, parents and guardians can be closely involved in their oral health education and guidance. But teenagers, especially those at the older end of the scale, are not likely to have the same level of support as those much younger in years. As such, the dental team play a monumental role in educating and supporting teenagers when caring for their dental health.

As children move into their teenage years, the body undergoes major changes which can affect the oral cavity. When children enter puberty, they experience increased levels of oestradiol, progesterone and testosterone, which are sex hormones.ⁱⁱ Research has suggested that these hormones could play a role in the development of plaque-associated gingivitis, and a link between these hormones and gingival enlargement has also been established.ⁱⁱⁱ As such, maintaining a thorough oral health routine is particularly vital during this developmental time, to help prevent the onset of oral complications.

There are also many external factors that can affect adolescent oral health, including lifestyle habits such as drinking and smoking. A survey^{iv} aimed towards secondary school pupils aged 11 to 15 demonstrated that 19% of pupils had reported smoking at least once, with 6% reporting that they were current smokers and 3% being regular smokers. The effects of smoking are widely known and accepted among the profession, but many teenagers who smoke might not fully recognise the oral complications that this habit can trigger. These include, but are not limited to, the increased risks of cancers of the mouth, periodontitis,

loss of periodontal attachment and tooth loss.^v E-cigarettes are often cited as an effective method to aid in smoking cessation, but many do still contain nicotine, which can affect oral health in a similar way to cigarettes. Certain sweet ingredients in e-cigarettes may be cariogenic, and the vapour produced by these products can be easily retained on the oral tissues.^{vi} Research shows that between 2021 and 2022 the use of e-cigarettes grew significantly in those aged 18, from 1% at the start of 2021 to 56.7% in 2022.^{vii}

As you well know, there has been a spotlight on mental health in recent years. In young people especially, the numbers are worrying. A survey^{viii} conducted by The Health Foundation found that among those aged 6 to 16 in England, 1 in 6 had a mental health condition in 2021. The links between mental and oral health have been established – conditions such as anxiety and depression can lead to self-neglect, and some individuals may avoid attending regular dental appointments. Latest NHS figures^{ix} show that a record number of young patients are being treated for an eating disorder, with almost 10,000 children and young people having started treatment between April and December in 2021. Issues such as dental erosion, dental caries, dry mouth and periodontal disease have been noted as oral complications of an eating disorder, although symptoms can vary depending on the type of eating disorder a patient has.^x Bulimia nervosa, for example, can cause erosion and reduced salivary secretions, potentially causing xerostomia^{xi}. Binge eating, which is characteristic of the condition, can also cause issues with oral health if large amounts of cariogenic food are consumed during binge eating periods.^{xii}

Social media has revolutionised how young individuals communicate, discover, research and interact. While there are certainly some positive factors to social media, there have

been major concerns surrounding the oral health educational resources in the past few years. The 'DIY dentistry' craze saw numerous individuals sharing videos on the platform TikTok showing 'hacks' on how to straighten, whiten and close gaps between the teeth. These 'hacks' included using rubber bands to close gaps, nail files to shave down teeth or the use of hydrogen peroxide to get a whiter smile.^{xiii} It goes without saying that these methods of at-home dentistry can cause long-lasting, if not irreversible damage.

Celebrity influence has undoubtedly played a role in growing patient trends in dentistry, with many individuals seeking whiter, straighter teeth quickly and discreetly. The effects this can have on younger generations is a continuous cause for concern, with regards to self-image and wellbeing. Many online 'influencers' transmit the image of being very much relatable to their audience, while employing filters and using clever editing to alter their appearance. A UK study^{xiv} found that social media use in young people can have adverse effects on mental health, especially in girls. Greater social media use was noted to be a potential factor for poor sleep, low self-esteem and poor body image.

For oral health education to be effective, patients need clarity in order to understand what constitutes a healthy and unhealthy oral cavity. Social media can convey confusing and often incorrect information around oral health, which is why it is important for dental teams to brainstorm ways they can provide credible resources. While chairside education is effective in combating the effects of misinformation,^{xv} dental teams should also consider putting educational resources on their social media platforms, blog and/or website, if they have not done so already. There are many causative factors for oral complications in teenagers, but when they recognise and understand the importance of great oral health, they can

continue good habits well into their adult life. The dental team are in an ideal position to not only provide relevant information and guidance, but also to recommend products that are tried, tested and proven to enhance a patient's daily oral health routine.

With 60 years of innovation, Waterpik® is the world's number 1 water flosser brand and continues to aid patients when caring for their dental health. The Waterpik® Water Flosser delivers a combination of water pressure and pulsation, which helps to clean deep between the teeth and below the gumline. The Waterpik® Water Flosser removes up to 99.9% of plaque from treated areas, and is up to 50% more effective for improving gum health vs. string floss.^{XVI, XVII} When used as an adjunct to oral hygiene practices at home, the Waterpik® Water Flosser helps to greatly enhance a patient's health.

Teenagers straddle the line between childhood and adulthood, and as such they can be tricky patients to treat. Many of them want to exercise their independence and establish their own identity and path in life, but when it comes to their health, they still need professional advice and guidance to keep themselves safe and healthy.

For more information on Waterpik® products please visit www.waterpik.co.uk. Waterpik® products are available from Amazon, Asda, Costco UK, Argos, Boots, Superdrug online and in stores across the UK and Ireland.

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References

- I. Viner, R. (2012). Life stage: Adolescence Chapter author. [online] Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/252658/33571_2901304_CMO_Chapter_8.pdf [Accessed 28 Jun. 2022].
- II. Mitova, N., Rashkova, M.R. and Popova, C.L. (2019). Saliva diagnostics of sex hormones and subgingival microflora in children in puberty. *Biotechnology & Biotechnological Equipment*, [online] pp.1–7. Available at: <https://www.tandfonline.com/doi/full/10.1080/13102818.2019.1688190> [Accessed 28 Jun. 2022].
- III. Nabeel Althaf, M., Hosadurga, R., Hegde, S., Rajesh, K. and Arun Kumar, M. (2016). Influence of sex hormone levels on gingival enlargement in adolescent patients undergoing fixed orthodontic therapy: A pilot study. *Contemporary Clinical Dentistry*, [online] 7(4), p.506. Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5141666/> [Accessed 29 Jun. 2022].
- IV. NHS Digital. (n.d.). Part 4: Smoking patterns among young people. [online] Available at: <https://digital.nhs.uk/data-and-information/publications/statistical/statistics-on-smoking/statistics-on-smoking-england-2019/part-4-smoking-patterns-in-children-copy#:~:text=Smoking%20prevalence%20among%20young%20people> [Accessed 29 Jun. 2022].
- V. Malhotra, R., Kapoor, A., Grover, V. and Kaushal, S. (2010) Nicotine and periodontal tissues. *Journal of Indian Society of Periodontology*. 14(1): 72-79. Available at: <http://doi.org/10.4103/0972-124X.65442>. [Accessed 29 Jun. 2022]
- VI. Iruka, K.F., Vence, B. and Donovan, T. (2020). Potential oral health effects of e-cigarettes and vaping: A review and case reports. *Journal of Esthetic and Restorative Dentistry*, [online] 32(3), pp.260–264. Available at: <https://onlinelibrary.wiley.com/doi/abs/10.1111/jerd.12583> [Accessed 29 Jun. 2022].
- VII. Tattan-Birch, H., E Jackson, S., Kock, L., Dockrell, M. and Brown, J. (2022). Rapid growth in disposable e-cigarette vaping among young adults in Great Britain from 2021 to 2022: a repeat cross-sectional survey. *Department of Behavioural Science and Health*. [online] Available at: <https://www.medrxiv.org/content/10.1101/2022.05.06.22274762v1> [Accessed 29 Jun. 2022].
- VIII. Peytrignet, S., Marszałek, K., Grimm, F., Thorlby, R. and Wagstaff, T. (2022). Children and young people's mental health. [online] www.health.org.uk. Available at: <https://www.health.org.uk/news-and-comment/charts-and-infographics/children-and-young-people-s-mental-health> [Accessed 29 Jun. 2022].
- IX. NHS (2022). NHS treating record number of young people for eating disorders. NHS England. [online] 7 Mar. Available at: <https://www.england.nhs.uk/2022/03/nhs-treating-record-number-of-young-people-for-eating-disorders/> [Accessed 29 Jun. 2022].
- X. Jung, E.-H. and Jun, M.-K. (2022). Relationship between Risk Factors Related to Eating Disorders and Subjective Health and Oral Health. *Children*, [online] 9(6), p.786. Available at: <https://www.mdpi.com/2227-9067/9/6/786/htm> [Accessed 29 Jun. 2022].
- XI. Rosten, A. and Newton, T. (2017). The impact of bulimia nervosa on oral health: A review of the literature. *British Dental Journal*, [online] 223(7), pp.533–539. Available at: <https://www.nature.com/articles/sj.bdj.2017.837> [Accessed 29 Jun. 2022].
- XII. Johansson, A.-K., Mjanger Øvretvedt, T., Reinholdsen, K.K. and Johansson, A. (2022). Eating Disorders: An Analysis of Self-Induced Vomiting, Binge Eating, and Oral Hygiene Behavior. *International Journal of Clinical Practice*, [online] 2022, p.e6210372. Available at: <https://www.hindawi.com/journals/ijcp/2022/6210372/> [Accessed 29 Jun. 2022].
- XIII. Dewshi, C. (2021). Dentistry on TikTok - oh no. *British Dental Journal*, [online] 231(7), pp.379–379. Available at: <https://www.nature.com/articles/s41415-021-3546-2#ref-CR15942> [Accessed 29 Jun. 2022].
- XIV. Kelly, Y., Zilanawala, A., Booker, C. and Sacker, A. (2019). Social Media Use and Adolescent Mental Health: Findings from the UK Millennium Cohort Study. *EClinicalMedicine*, [online] 6(2589-5370), pp.59–68. Available at: <https://www.sciencedirect.com/science/article/pii/S2589537018300609> [Accessed 29 Jun. 2022].
- XV. Ruiz, M., Kabani, F. and Cotter, J. (2022). A review of the effects of oral health media hype on clients' perception of treatment. *Canadian journal of dental hygiene: CJDH = Journal canadien de l'hygiène dentaire : JCHD*, [online] 56(1), pp.31–38. Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8937571/> [Accessed 29 Jun. 2022].
- XVI. Gorur A, Lyle DM, Schaudinn C, Costerton JW. *Compend Contin Ed Dent* 2009; 30 (Suppl 1):1 - 6. Available at: <https://www.waterpik.co.uk/professional-clinical-research/water-flosser-removes-plaque-gorur-2009> [Accessed 29 Jun. 22]
- XVII. Rosema NAM et al. The effect of different interdental cleaning devices on gingival bleeding. *J Int Acad Periodontol* 2011; 13(1):2-10. Available at: <https://www.waterpik.co.uk/professional-clinical-research/dental-floss-vs-water-flossing-reduce-gingival-bleeding-rosema-2011> [Accessed 29 Jun. 22] ■

What do you really know about your regulator and what they do?



The General Dental Council explains itself

The General Dental Council (GDC) regulates the whole dental team, across the four nations of the UK. That's around 115,000 dental professionals. But do you really know what your regulator does?

As you probably know, dental nurses are the single largest profession that the GDC regulates. According to the latest GDC figures, dental nurses make up around half of all dental professionals – that's over 59,000 of you!

So, what does the GDC do?

The GDC's primary purpose is very straightforward: to protect the public. Its primary roles are about protecting the public and ensuring that they have confidence in the services provided by dental professionals.

To achieve this, they do a number of different things, known as its statutory functions.

Firstly, they set the learning outcomes for all dental training in the UK. This ensures that any new dental professionals joining the register are taught the right skills and training and are safe to practice. To do this they carry out regular quality assurance inspections of education providers to ensure they are meeting the right education standards.

Secondly they hold the register of all dental professionals who are allowed to practise in the UK. They grant registration only to those dental professionals who meet the GDC's requirements on education and training, health and good character. Only those people who are registered with the GDC can practise dentistry in the UK.

They also ensure that you keep your skills up to date by setting the continuing professional development (CPD) requirements. For dental nurses this is 50 hours of CPD, over a five-year period, with at least 10 hours CPD needing to be completed in each two-year period.

This is important as there are standards that need to be met so that patients can be confident that dental treatment is safe, and that's the third area where the GDC has legislative powers. Although the GDC don't set clinical standards (that's done by the Royal Colleges and others) they do set the professional standards for conduct, performance and ethics for the whole dental team.

These are all functions that focus on prevention, rather than dealing with something after things have gone wrong, and this is where most of the GDC's work - and effort - is focused.

However, it's important that patients have somewhere to go if something goes wrong, or if they have a concern about a dental professional. To do this the GDC has its fitness to practise processes, where they will act to protect the public if any dental professional falls short of their professional standards.

It's important however to remember two things about this part of the GDC's role.

The first is that the GDC would always recommend that patients who have a concern should raise that with the dental professional or practice first. They would always encourage you to seek feedback from patients and look to resolve any concerns that you do receive with the patient, where you can.

The second point is that if the GDC does receive a concern, it is legally bound to investigate it, and that may mean contacting you to find out a bit more information.

That said, the number of concerns the GDC receives and the ones that result in any consequences for the dental professional is very small, compared to the 115,000 dental professionals they regulate. For example, in 2021 there were only 32 hearings that involved dental nurses, a very small number and percentage, compared to the 59,000 dental nurses on the register.

What do patients expect from dental professionals?

There are nine principles of professionalism set out by the GDC, and it's no surprise that the first four of these are focused on how you should engage with patients.

We know that patient expectations are changing and that they have a really clear idea of what they want and expect from you.

Firstly, they want you to put their interests before any financial gain or business need. They will also expect you to be appropriately trained and qualified and to work as a team. They also expect that you will maintain professional behaviour and act with integrity,

communicate clearly and acknowledge their preferences and concerns with them.

They also expect you to keep their records secure, up to date, accurate and clear and that you will work within current laws and regulations. Finally, if things do go wrong, they expect you to deal with any complaint or concern promptly.

Patients expect these things to stay safe and have confidence in dentistry and so does the GDC. That's why it's important to understand and work to these nine principles.

What can you do as a dental nurse to put your patients' interest first?

As a dental nurse, and key member of the dental team, you have an important role in ensuring that your patients' interest is put first, and there are a few things you should always try and do.

- Make sure you communicate effectively with patients, and check they understand what has been said to them. This will help make sure that the dentist obtains valid consent.
- Maintain and protect patients' information by ensuring it is kept safely and securely.
- Make sure you understand our practices' complaints procedure and that you can share that with a patient if they ask.
- Make sure that you within your professional knowledge and competence and that you look at development opportunities to improve a develop your skills within the dental nurse scope of practice.
- Don't be afraid to raise concerns if you feel patients are at risk.

Finally, make sure that your own behaviour, both at work, and in your personal life, is of a high professional standard and that you don't do anything that affect the public's confidence in the dental professionals the GDC regulates.

General
Dental
Council

protecting patients,
regulating the dental team

Finally, a quick reminder of what the GDC doesn't do

Over the years there have been many misconceptions amongst dental professionals, about the GDCs remit and what they do. So, having explained what the GDC does do, and its role in public safety and confidence, we thought it was worthwhile sharing what they don't do.

The GDC only register dental professionals, not dental practices. The regulation of practices is the responsibility of the different systems regulators, across the four nations.

Another misconception is that the GDC set the clinical standards, they don't. This is the role of others such as the Royal Colleges and the College of General Dentistry.

Neither do they represent the interests of dental professionals; their core purpose is to protect the public. That's the role of the professional bodies, such as the BADN. That said, the GDC does work very closely with all the professional bodies in delivering its regulatory functions.

The GDC doesn't set pay levels for dental professionals or have any powers to influence employers with regards to the salaries they pay their dental nurses. However, employers must pay at least the national minimum wage rates, which are set by Government.

And finally, although the GDC has an interest in workforce, as they maintain the register, responsibility for workforce planning sits with the individual Governments, and setting the NHS fee levels and NHS contracts are the responsibility of the NHS across the four nations.

You can find out more information on the GDC's website, or if you have a question you can email them at communications@gdc-uk.org

British Society of Paediatric Dentistry Annual Scientific Conference

Newcastle, 13-15 September 2023

BSPD would like to invite you to join them in Newcastle upon Tyne for their Annual Scientific Conference 2023 on 14th and 15th September 2023, with the Teachers' Study Day taking place on the 13th September 2023. The theme for the conference is "Tipping the Scales – making a better and fairer world for children in the future" with sessions driven by the need to rebuild and innovate within healthcare.

Speakers will cover the most contemporary methods of treating carious teeth, reducing dental health inequalities, decision making in paediatric dentistry, and crucially; how to ensure this is all done in as a sustainable way as possible!

Registration and Abstract Submission are open!

Key dates

- Early bird registration deadline: 12 June
- Abstract submission Deadline: 31 March

DCP Poster Prize

- At BSPD Conference 2023 there are a number of prizes awarded to include a DCP poster prize: <https://bspd.co.uk/Professionals/Awards-and-Prizes/DCP-Poster-prize>
- Entry is by submitting an abstract: <https://fitwise.eventsair.com/bspd-2023/abstract> Deadline: 31 March 2023

bspdconference.org.uk



BSPD Annual Scientific Conference, Newcastle 13-15 September 2023

CONFERENCE HIGHLIGHTS

- Keynote lectures from internationally renowned speakers on themes of cariology, inequality and sustainability
- New for 2023 Small group breakout sessions on a variety of topics to include acupuncture, clinical tips, sign language, commissioning, gender awareness/ equality, and lots more...
- Separate Teacher's Study Day (13 Sept)
- Posters and oral presentations
- Exhibition
- Full social programme
- Networking opportunities
- And much more!

PROGRAMME HIGHLIGHTS

- "Cariology for the Paediatric Patient" Prof Yasmi Crystal
- "An overview of deep caries management and vital pulp therapies: current concepts and techniques" Prof Hal Duncan
- "Deep End' Primary Care Network – engaging primary care practitioners to reduce health inequalities" Dr Sarah Snowden & Dr Sameena Hassan
- "Inequalities in Oral Health" Prof Rebecca Harris
- "Sustainable healthcare in an NHS Trust" Mr. James Dixon
- "Experiences of the first carbon-neutral surgery" Mr. Sandro Di Simplicio
- "Sustainable healthcare – approaches from a national perspective" Mrs. Alifia Chakera
- "Environmentally sustainable anaesthesia, focussing on nitrous oxide usage" Dr. Chris Allen
- "Sustainable dentistry for the paediatric dentist" Prof. Paul Ashley & Dr. Alexandra Lyne



bspdconference.org.uk

Forensic dentistry

By Joan Hatchard LCGI FBADN, BADN Chairman



This is a part of dentistry that many Dental Nurses find very interesting. Occasionally, it is not possible or acceptable to ask the next-of-kin to identify a body. This is because the facial features may be disfigured due to trauma, fire or putrefaction, if a body has not been found for some time.

If there are any ante-mortem dental records, the Coroner will ask a Forensic Odontologist to attempt to identify the body using dental records and by examining the teeth and or any dentures.

This is another reason for accurate day to day record keeping by the dental team!

Additionally, radiographs, study models and clinical photographs are extremely useful.

A dental identification is preferable to DNA as the latter is still very expensive.

The Forensic Odontologist will attend the mortuary, where the body is stored. The body will have been removed from the fridge (where it will have been kept at approximately -4 degrees centigrade by the mortuary technicians) to allow it return to a higher temperature so that the jaw can be opened and thus, examination is possible.

Before entering the morgue, both the dentist and DN will don PPE which includes surgical gloves. (The dentist will double glove) surgical masks, scrubs and rubber boots.

A very important aspect for the DN is that, legally, the DN may not handle human remains.

However, the DN is a very useful member of the team, as were the FO to be alone, every time charting was done, or any notes taken, the dentist would have to deglove each time. This would be enormously time consuming, so the DN acts primarily as “dry hands”.

Other duties which the DN can carry out include photography, assisting with soft tissue retraction, cleaning the teeth with a toothbrush, replacing the dentures in the mouth on completion of the examination and cleaning all of the instruments that have been used.

Some bodies are badly decomposed, so the DN must not be squeamish! Occasionally, mouth breathing is necessary due to the odour of decomposition.

Where there are mass deaths such as plane accidents or tsunamis,

teams are sent out. Here the DN may become the first person of contact for officials or the relatives of the dead.

When a body from a country outside of the UK has to be examined, it is essential to know international methods of charting.

In the UK, the Coroner would contact the Forensic Odontologist to arrange an appointment at the morgue and the FO would then contact me to see whether I could come along to assist.

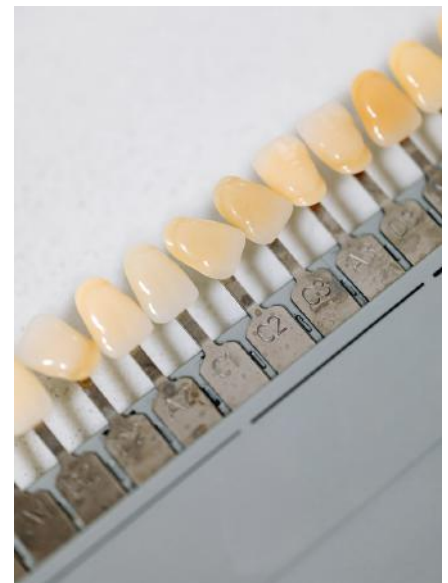
I was fortunate enough to be employed by a dentist who allowed me to help at identifications at the drop of a hat!

I have assisted at quite a number of dental identifications over a number of years and I still assist the same Forensic Odontologist, when asked to do so. I find the investigative side of this branch of dentistry absolutely fascinating.

I recommend the following for people interested in Forensic Dentistry

- The British Association of Forensic Odontology (BAFO), which you can join as a DN. Forensic Dentists have now realised that DNs are very useful team members
- A very interesting book: The Colour Atlas of FO by DK Whittaker and D.G Macdonald published by Wolfe Medical Publications Ltd. ISBN 0 7234 0617

Currently, you have to be a dentist to take qualifications in Forensic Dentistry.





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How we coped – a view from a trust

By Nicola Jeffrey, General Manager, Dental HealthCare, Cambridgeshire Community Services NHS Trust



It's timely, given we are seeing a spike of staff with Covid-19 in our service, that I was asked to write about our experience, as part of an NHS Trust, of working during the Covid-19 Pandemic.

The reality of the pandemic became very real towards the back end of February 2020 which started with awkward moments during meetings. "Do I shake their hand?" I was asking myself when encountering visitors to the Practice, opting for a more appropriate elbow bump.

We very swiftly moved from tentative greetings to putting our pandemic Business Continuity Plans into place when we got the news that people who could work from home, should work from home. As a provider of Dental Access Centres our Service quickly remodelled into 4 UDC sites across Cambridgeshire and Peterborough.

As with all health services, the issue of a lack of suitable and appropriate PPE and consumables was a considerable challenge but working within an NHS Trust the corporate structure provided us with central command to procure and distribute PPE and consumables such as gowns, masks, FFP3 and hand gel to our sites. That meant that we had to provide a weekly count of our stock items at each site in order that products and supplies were being issued to the teams in the Trust with the greatest need.

Part of our Business Continuity Plan, masterminded by one of our dentists, was to split our teams in two. The staff worked within these teams on a week on week off basis, the aim being to give the staff valuable down time whilst working in these stressful circumstances along with preserving our workforce by reducing the spread of infection. The team continued to benefit from full pay during this period.

Our leadership team, including our Senior Nurses were involved in Daily "Sitrep" calls which were held over MS Teams. These provided us with transparency over site challenges, check in on wellbeing of the teams and monitor any staff with the Covid-19 infection. It was during these meetings that we were updated with any changes to the NHS SOP for

Urgent Dentistry during the pandemic. We also ensured that we were working consistently across our sites with donning and doffing practices, PPE requirements, safe passage for patients, remote prescribing, and fallow times to name but a few.

The Trust provided many wellbeing resources along the way to keep everyone motivated. We were offered online Zumba sessions and Senior Trust leaders offered regular Q&A sessions and infection control updates and as NHS employees we were lucky to be supported by lots of offers from supermarkets, coffee houses, concert tickets and even unlimited Wi-Fi access via one mobile phone network.

It cannot be underestimated the impact that the constant change and stress of working in a pandemic landscape; along with keeping our families safe during this time has had on the team. We have direct access to Occupational Health, physiotherapy, counselling services, financial support, mental health support and a whole raft of health and wellbeing resources.

We offer free CPD, we have an Annual Staff Study Day for all staff. There are lots of opportunities to join networks such as BAME, Diversity, Green, Health, & Wellbeing. We have Freedom to Speak Up guardians who offer a safe space for anyone wishing to raise a concern. We offer the opportunity to dental nurse in special care, oral surgery, sedation, general anaesthetic sessions as well as emergency dental and domiciliary visits. This brings opportunities to apply for extended competency courses which we fund.

We currently have vacancies in our Cambridge and Wisbech clinics for qualified dental nurses and we are also growing our own by recruiting Apprentices.

Please do look at https://www.jobs.nhs.uk/xi/search_vacancy/ using keyword "dental nurse" and location "Cambridge" or "Wisbech" to search for our current vacancies.

Find us online at www.dentalhealthcareee.nhs.uk

{my}dentist Dental Nursing Success

{my}dentist are excited to announce that 232 of our Student Dental Nurses passed their National Diploma in Dental Nursing, a 90% pass rate, and our biggest cohort to date! After taking the decision to move our Student Dental Nurse training in house in 2017, our programme has gone from strength to strength. Over the 6 years it has been successfully running, we have seen over 1400 Students gain their qualification and register with the GDC.

We are extremely proud of each and every one of our Dental Nurses and would like to wish them a huge congratulations!



Recent press articles regarding tax refund services and HMRC

Statement by The Tax Refund Company

You may have seen recent press articles concerning tax refund firms using devious practices to take advantage of unsuspecting taxpayers. The increased press coverage in recent weeks is due to HMRC actively taking steps to try and prevent these firms operating, although this may take some time to have any effect.

There has also been an increase in advice given out through press articles, financial websites and forums that although good in intent, is encouraging taxpayers to contact HMRC directly to claim a refund, but without explaining the full process involved or clearly setting out the risks of doing so, which on many occasions can do significantly more harm than good!

Apart from the process of claiming a refund being far from simple and easy to understand for the average person, the real risks involved are that taxpayers contacting HMRC directly are not having their tax affairs fully reviewed. Although they may get a refund, they may not receive a refund for everything they were entitled to and as a result, may continue to pay too much tax in the current and future years due to their tax code not being properly corrected.

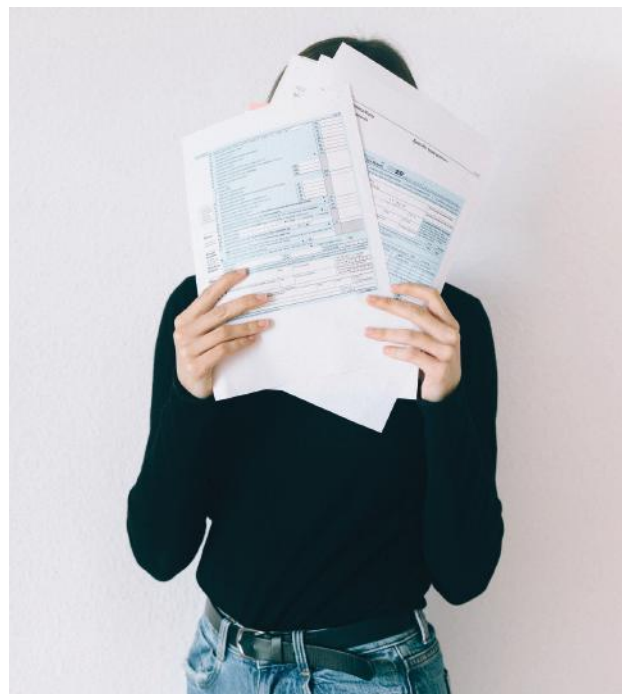
It has always been made clear that you can get your money back from HMRC directly, but to do so assumes you have the necessary understanding of the PAYE tax rules to make the right claims and be able to check that HMRC has repaid them the correct amount, or to confirm that any resulting tax bill they receive, is correct.

The Tax Refund Company would like to reassure you that the tax review/refund service we provide, is professional, ethical and is not provided by a firm being targeted by HMRC.

On the contrary, The Tax Refund Company is the only firm who provides a written guarantee to recover all the money you are owed by HMRC and will pay you directly in the event they don't. We are also the only firm who provides a written guarantee to pay your tax bill in the event you get an unexpected tax demand from HMRC as a direct result of completing our tax review.

Our fees are clearly displayed before you are told how to contact us and the fees are clearly displayed on our website, whilst our terms & conditions are short, easy to understand and free from excessive legal jargon.

The Tax Refund Company is also the only firm who carries out a comprehensive, professional review for taxpayers in any employment sector, and no refund is too small for us to claim. Although small refunds



are frequently not viable for us to process, these refunds can lead to an amended current tax code from which you will make ongoing tax savings year after year, free of charge.

Unlike many of the firms being mentioned in the recent press articles, we can be contacted easily, by telephone between 9am and 5pm Monday to Friday or via email, Messenger and Facebook where you will receive a prompt response.

Those using the service provided through the Tax Refund Company can therefore be confident that their tax affairs are being handled professionally and that they are protected from the dishonest actions of the firms set up to take advantage of taxpayers lack of understanding of tax.

This statement reflects the view of The Tax Refund Company.

DLEF essay prize announced for 2023

The 2023 Dental Law and Ethics Forum (DLEF) essay prize is now open for entries from young dentists and dental care professionals who want to make a mark in the dento-legal field. Any GDC registrant – including dentists, dental hygienists, dental therapists and dental nurse - who has been qualified for up to five years as well as anyone in their final year of study is eligible to enter one of three categories.

The essay topics are as follows:

1. For final year students: "Is it possible to obtain consent from a patient who has dementia?" This essay can be up to 800 words long.
2. For first year registrants: "Is it ever ethical to do something that is illegal?" This essay can be up to 1000 words.
3. For registrants who have been qualified for between two and five years "What are the dento-legal issues to consider if a 17-year-old patient wants limited treatment orthodontics followed by composite bonding?" This essay can be up to 1500 words long.

The deadline for all the essays is July 30th and the prize for the best essay in each category is £250 and the opportunity to speak at the December meeting of the forum. The DLEF is a group of

influential people in the dental world who meet several times a year for talks given by experts in the world of dento-legal and medical ethics. Established 24 years ago, the forum provides valuable opportunities for debate and networking.

For the inaugural competition in 2022, there were two categories, one for first year registrants and the other for those qualified for between two and five years. Following the success of last year's competition, the DLEF has added an extra prize to include those in their final year of study. The winners last year were Rachel Manson, a first-year dentist registrant and Sophie Rimmer, a newly qualified dentist. They both presented to the DLEF's December meeting when they were awarded their prizes.

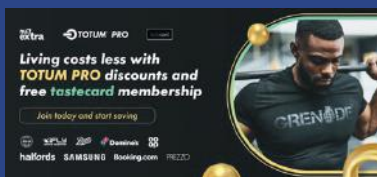
Chris Morris, current President of the DLEF and dually qualified as a dentist and a lawyer, said; "We had a very impressive set of entries last year. The 2023 essay topics are designed to encourage reflection on challenging contemporary topics which revolve around the theme of consent. They explore the kind of issues that the indemnity organisations deal with on a regular basis and will appeal to dental professionals at various stages of their career who are hoping to develop a portfolio career or who have an interest in the dento-legal world."

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member, you will also receive a free tastecard* (worth up to £39.99 a year) for the duration of your membership. Enjoy the benefits of tastecard which include 2 for 1 dining at thousands of restaurants, 50% off pizza deliveries and super cinema savings!

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2023 CALENDAR



April

- 4 Copy date for Spring 23 British Dental Nurses' Journal (pam@badn.org.uk)
- 4 NEBDN National Diploma written exam
- 17 BDA CPD Hub course: Dental Radiography for DCPs (8-week theory course and final exam held entirely online. See CPD Hub for additional start dates throughout year)
- 28 Spring 2023 edition of British Dental Nurses' Journal published

May

- 12-13 British Dental Conference and Dentistry Show, NEC Birmingham (www.birmingham.dentistryshow.co.uk)
- 19 BADN Executive Committee meeting
- 19 BDA in-person event: Contemporary periodontal management for general dental practice (London)
- 19-20 Scottish Dental Show, Braehead (www.sdshow.co.uk)

June

- 2-18 NEBDN National Diploma OSCE

July

- 4 Copy date for Summer 2023 British Dental Nurses' Journal (pam@badn.org.uk)
- 28 Summer 2023 edition of British Dental Nurses' Journal published

July

- 4 Copy date for Summer 2023 British Dental Nurses' Journal (pam@badn.org.uk)
- 28 Summer 2023 edition of British Dental Nurses' Journal published

August

- 18 BADN Executive Committee meeting

October

- 3 Copy date for Autumn 2023 edition of the British Dental Nurses' Journal (pam@badn.org.uk)
- 6-7 London Dentistry Show, ExCel London (www.london.dentistryshow.co.uk)
- 27 Autumn 2023 edition of British Dental Nurses' Journal published

Key

NEBDN – see www.nebdn.org for more info or contact 01772 429917
BDA Courses – Sign up for BDA CPD Hub courses at: cpd.bda.org;
 Sign up for BDA in-person and online events at: bda.org/training
BADN – see www.badn.org.uk
Other dental dates – to add your event to the diary, please send details to events@badn.org.uk

If you have any events planned for 2023 and would like them to be included in the BADN Diary, please email details to pam@badn.org.uk.

Please keep and use the contact details below.**BADN staff****BADN Chief Executive & Editor, British Dental Nurses' Journal:**

Pamela Swain	01253 338365	pam@badn.org.uk
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Invoicing, bookkeeping, etc:

Shirley Lyons	01253 338361	shirley@badn.org.uk
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Membership, journal subscriptions:

Val Forshaw	01253 338366	val@badn.org.uk
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BADN events, social media, website, IT matters, etc:

Adam Skalski	01253 338364	events@badn.org.uk adam@badn.org.uk
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General Enquiries

enquiries@badn.org.uk

Our phone lines are very busy! If you are put through to voicemail, please leave a message stating your name, BADN membership number, and contact phone number, and we will get back to you as soon as possible – **please do not hang up; or keep ringing round all the various phone numbers and hanging up – this just blocks the system!**

Should you wish to contact members of the BADN Executive Committee, please do so via the BADN office or use the email addresses below – for reasons of privacy, work/life balance, etc, please do not use the individual concerned's personal home or work email address:

President

Debra Worthington	president@badn.org.uk
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Educational Representative

Anita Stanforth	education@badn.org.uk
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Chairman

Joan Hatchard	chairman@badn.org.uk
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Immediate Past President

Jacqui Elsdon	president@badn.org.uk
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Treasurer

Michelle Brand	finance@badn.org.uk
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Please note that all hard copy correspondence should be sent to the BADN office at:

BADN, Room 200, Hillhouse International Business Centre, Thornton-Cleveleys, FY5 4QD

For queries regarding **BADN Rewards**, please contact Jenny Hollywood at Parliament Hill at jhollywood@parliament-hill.co.uk

For queries regarding **CPD in the Journal**, or access to the CPD certificates, please contact Jack Stennulat at Purple Media on jack.stennulat@purplems.com.

For queries regarding **indemnity**, please contact Trafalgar Risk Management Ltd on trmadmin@trafalgar.uk.com

To **advertise in the Journal**, please contact Ed Hunt at Purple Media at ed.hunt@purplems.com

To obtain your long service member badge (5, 10, 15, 20, 25 years), please go to www.badn.org.uk/longservicebadge and complete the claim. You will then receive an email from Val confirming your eligibility and requesting an SAE. Please put a Self Addressed Envelope, with stamps to the value of £1.05 (second class mail) or £1.45 (first class mail), together with a note of your name and BADN membership number, into a second envelope addressed to the BADN office and with "BADGE" written in the top right hand corner of the outer envelope. Remember to stamp the outer envelope too!

To obtain your hard copy of the CPD Activity Log, Personal Development Planner or Menopause Policy, please put a Self Addressed Envelope, with stamps to the value of £1.05 (second class mail) or £1.45 (first class mail), together with a note of your name and BADN membership number, into a second envelope addressed to the BADN office and with "CPD/PDP" or "MENO" written in the top right hand corner of the outer envelope. Remember to stamp the outer envelope too!! These are also available in e-form on our website under "Downloads".

You can **obtain replacement membership badges** (£5), 80th Anniversary brooches (£10.50) and BADN Bundles containing a BADN pen, coaster and keyring with trolley pound (£5) from our online shop at www.badn.org.uk/membership





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