

Spring 2005

The Newsletter of the British Association of Oral Surgeons

Dear Colleague.

I must apologise for the delay in writing this newsletter. I am afraid that the pace of events has been much greater than I anticipated and I am only just beginning to realise the magnitude of what I have taken on.

I would like to take this opportunity to express my gratitude to my predecessor Mr Michael Hahn for all the dedication and hard work that he gave to the Association particularly during the difficult transition from BASD to BAOS.

My term as president began with the Inaugural conference of BAOS at the Royal College of Surgeons of Edinburgh. This was a wonderful beginning for our Association and was well attended with nearly 200 delegates being treated to an exceptional range of interesting speakers which combined with a full social programme making the event a great success.

I would like to thank all the team who were responsible for putting the conference together, with particular thanks to Yvonne Gilbert our secretary without whom the event could not have happened.

The feedback we have received from yourselves has been excellent and I hope you will all want to support the 2005 conference that will be held in Portsmouth on the 22<sup>nd</sup>, 23<sup>rd</sup> and 24<sup>th</sup> September and which promises to be another great event.

Since the conference the final report of the Standing Dental Advisory Committee Review of the Dentally based Specialties and Specialist lists has been published. The whole report can be viewed on the Department of Health web site. As far as the specialties of Oral Surgery and Surgical Dentistry are concerned the report makes the following recommendations;

The GDC should be invited to consider reconfiguration of the current arrangements for oral surgery (including academic oral surgery) and surgical dentistry

The GDC should be invited to consider adjustment of the current mechanism of entry to the specialist lists

Funded training programmes should be developed for all the dentally based specialties

The principles set out by the Training and Assessment Committees of PMETB should be applied to dentistry and the evolution of the Board should be closely monitored to enable the GDC to determine whether it would be beneficial for dentistry to be incorporated within its remit

The principles of *Modernising Medical Careers* should be applied to dentistry

Proposals for the development of dentists with special interests (DwSI) should be carefully planned to avoid confusion for patients and that uniform national quality standards are set and maintained

Developments in specialisation across the EU and internationally should be regularly monitored.

The report also brought attention to the contentious issues relating to the remit of revised specialty of 'Oral Surgery'

Following on from this BAOS was invited to contribute to a meeting hosted by the CDO for England Professor Raman Bedi. This was primarily concerned with training issues in Oral and Maxillofacial Surgery, but it was recorded that the CDO would arrange a meeting with BAOS, BAOMS, and AACOMS to discuss the development of a revised specialty of Oral Surgery.

**Council.** More recently the election for vacant seats on council has taken place and the new council will meet for the first time on Feb 4<sup>th</sup>.

The following are council members:

Mr Paul Allen (President elect)  
Ms Pippa Blacklock  
Mr Rob Bunyan  
Mr Michael Hahn (Immediate past president)  
Ms Rebecca Heirons  
Mr Ian Hollingum co-opted  
Mr Louis McArdle (Hon. Secretary)  
Mr Nigel Moss  
Mr David Pagliero  
Mr James Parker (President)

I should like to take this opportunity to welcome the new members of council and hope they find their involvement with the Association both stimulating and rewarding.

I should also like to say thank you to the retiring members who are:

Mr Ben Aghabeigi  
Mr Mark Diamond  
Mr Richard Hayward  
Ms Maggie Sherborne  
Ms Jane Shearer.

All have given a valuable contribution of time and effort to the Association

and without their help we would not have been able to develop so well.

### **Current Issues:**

**Website.** Jane Shearer has put a lot of time on the website, which is currently at <http://www.oral surgery.org.uk>. It is my intention that we should continue to develop the site into something that will be of value to you all. Initial thoughts are that there should be a description of the aims and objectives of the Association and a description of what Oral Surgeons and Surgical Dentists do on the open access part of the site. I would like to develop a members' only area where things like the minutes of council meetings and general progress with Association business can be displayed. I would propose that the special interest groups of Primary care Oral Surgery and secondary care Oral Surgery should have feature areas and that we should consider the setting up of a discussion forum. I am very keen that the website should develop as you would wish and with that in mind if any of you have thoughts on this I would be grateful if you could send them to me at [hj.parker@btopenworld.com](mailto:hj.parker@btopenworld.com) or to Yvonne at [y.gilbert@rcsed.ac.uk](mailto:y.gilbert@rcsed.ac.uk).

**Membership Categories.** One issue raised at the AGM that needs resolving was that of membership categories. Currently the Association has two categories of membership which are member and associate member, at present it is a requirement that to be a member one needs to be on a related specialist list, all others being associate members. This has caused some upset amongst people who have joined the Association as practising Oral Surgeons or Surgical Dentists, but with no specialist listing, and who find themselves as associate members with no voting rights. This needs to be carefully looked into, but any change

will need to be brought to the next AGM before change can be effected.

**Journal** Progress continues with the journal, which we still hope will become a reality in 2006. The publishers Blackwell Munksgaard are currently in the process of tying up details with the editorial board and once this is complete the call for submissions should follow on quite soon.

**Dentists with a Special Interest.** The development of 'Dentists with a Special Interest' in the primary care sector. From October 2005 PCT's will have the option of contracting with general practitioners to provide special interest services. The areas of dentistry involved are Orthodontics, Minor Oral Surgery, Endodontics and Periodontics. The Association will be monitoring these developments with interest and contributing to developments wherever possible. The Royal College of Surgeons of England is hosting a day dedicated to this on 21<sup>st</sup> April 2005; applications for which should be returned by 31 March if you are interested.

**Surgical Care Practitioners.** There is already underway the production of a training pathway leading to the qualification of Surgical Care Practitioner, the details of this have yet to be finalised, but in essence these individuals will be able to carry out surgical procedures for which they have received specific training from the Consultant to whom they will be responsible. It is noted that questions are being asked as to which Oral Surgery procedures might be considered suitable for these individuals to carry out. The draft Curriculum Framework document has been delivered to the DOH, who intends to conduct a consultation process with key stakeholders, the

details of which should be available later this month.

**Faculty Elections.** You will have received notice from the Faculty of Dental Surgery advising that there is to be an election in May 2005 to elect two new members to the board of the English Faculty.

This represents an opportunity for someone who represents our interests to gain a place on Faculty and as such should be taken advantage of.

The way the election works is that if for example there are two vacancies, each voting member will be given two votes to be distributed according to their preference across the candidates. Our best chance of getting a member on the board will be firstly to put only one candidate forward, and secondly for voting members to vote for that person and to discard their remaining vote, in that way the vote for the preferred candidate will not be diluted across the others, if the number of vacancies were greater than two obviously more votes would be available however the same system should be applied.

You should consider this information carefully before casting your vote or votes.



James Parker  
President BAOS.