

BAOS Feature

Access to Oral Surgery

Since the start of the pandemic, the number of people waiting for NHS treatment has grown, then soared, and now is the largest since records began. Initially the rise was not so great because, whilst the number leaving the waiting lists was reduced because services focussed on Covid care, the number of people entering waiting lists was also reduced as referrals from primary care drastically fell away. This was particularly true for oral surgery as patients are usually referred by general dental services and these services stopped during 2020 and restarted slowly and are still not at normal capacity. So, as patients return to their general dentists then referrals will further increase the waiting list for oral surgery. The Institute for Fiscal Studies has predicted that the number of patients in England waiting for NHS treatment could rise to 13 million.

Publication of figures for Northern Ireland have already shown that of 524 surgical cancellations in a week in September 2021, 188 cancellations were 'red flag' suspected cancer procedures or confirmed cancer procedures. Whilst this is of particular concern, the delay in providing routine surgery is also of concern. Elective oral surgery procedures are often life-changing, alleviating pain and anxiety, and improving the quality of our patients' lives.

Meanwhile there has been much work done in the UK on 'rationalising' waiting lists. It is right therefore that the BAOS have produced our own guide to Oral Surgery prioritisation of patients on waiting lists, to help the consideration of our patients in the inevitable discussions between managers and speciality colleagues when we will all be competing for funding and facilities.

I was pleased that our BAOS 'Clinical Guide to Surgical Prioritisation of Patients on Oral Surgery Waiting Lists' was recently made available on our BAOS website. It is based on *The Federation of Surgical Specialty Associations Clinical Guide* but provides more specific information relevant to Oral Surgery procedures and also includes a colour-coded description of the level of risk of delaying a procedure.

The Royal College of Surgeons has called for investment in 'surgical hubs' to improve the infrastructure capacity, and also for the training of more frontline staff. Training staff takes time of course and so this is not a quick solution. We are well aware of huge workforce issues in dentistry

and oral surgery. There has been underfunding of dentist training for a long time and a reliance on overseas and in particular European dentists to make up the shortfall. Now with Brexit, and Covid restrictions on movement, and an international qualifying examination that is overstretched, we are in a desperate situation to catch up with care for our patients.

I recently, as Dean of a Dental School, had the opportunity to increase our admission of dental students by 67% but this was because I was taking advantage of a one-off opportunity arising as a consequence of huge unplanned grade inflation of secondary school final examinations and a government offer to fund the additional dental places. Our dental school usual cap on numbers will be re-instated next year, so this will be a tiny but positive contribution to producing more dentists for the UK workforce. Dental training is expensive, but if we therefore don't train sufficient dentists in the UK, then what about low- and middle-income countries?

Access to oral surgery services is hugely variable around the world as is surgery in general. The *Lancet Commission on Global Surgery* undertook a modelling study back in 2015 driven by the vision for universal access to safe, affordable surgical and anaesthesia care¹. They estimated that more than 2 billion people are unable to receive surgical care based on operating theatre density alone. When taking into account access to safe, affordable, and timely surgical care, this estimate rose to 4.8 billion people, that is, 67% of the world's population.

In the UK whilst we have a workforce problem, we are very fortunate to have safe and free oral surgery care. The membership of the British Association of Oral Surgeons largely consists of British surgeons, but we do have a growing number of international members, that is very welcome. We wish to share our experience and resources as best we can with the international community of oral surgeons and to learn from the global experiences of our colleagues. We hope that those around the world that may not have resources to produce them themselves we take advantage of our BAOS website resources. Similarly, our journal *Oral Surgery* has a wide international readership, and we hope provides a helpful educational resource.

The Royal Colleges of Surgeons in the UK and Ireland reach out internationally with training courses and examinations with partners, and of course, surgeons have always given their surgical skills and experiences in resource-poor settings and BAOS encourages this.

Reference 1:

BC Alkire, NP Raykar, MG Shrimel, TG Weiser, SW Bickler, JA Rose, CT Nutt, SLM Greenberg, M Kotagal, JN Riesel, M Esquivel, T Uribe-Leitz, G Molina, N Roy, J G Meara, PE Farmer. Global access to surgical care: a modelling study. *Lancet Glob Health* 2015; 3: e316–23. Published Online April 27, 2015 [http://dx.doi.org/10.1016/S2214-109X\(15\)70115-4](http://dx.doi.org/10.1016/S2214-109X(15)70115-4)



Paul Coulthard
BAOS Immediate Past
President

Social Media

For years now the world around us has become more and more digital, even more so recently with the advent of the pandemic. Remote working, online lectures and even virtual pub quizzes have become the norm for us! Here at BAOS, we can see this trend only increasing.

From this, our programme of webinars is up and running, we've been providing great opportunities for members and non-members alike to access regular teaching and CPD on numerous topics linked to Oral Surgery. With the great response of a variety of dental professionals engaging with this, we now aim to reach even more people than before.

Through our social media platforms, we are aiming to spread the word about all our upcoming events so as many people as possible can get involved and allow for quick and easy sign-up. We hope, as well, to bring more information in the form of relevant guidelines and top tips for any professionals undertaking aspects of Oral Surgery. Recently we've been adding interesting cases alongside clinical pictures where possible, which have been getting an amazing response!

Social media has been a great way to connect with trainees, DCTs and junior dentists – highlighting opportunities for them to engage in poster presentation, prizes and much more. This is allowing us to reach many more people and promote Oral Surgery in an exponential way, and we hope to keep the trend going!

So, if you're not already, make sure to follow us on Instagram, Twitter and Facebook!



Jack Williams
BAOS Social Media Rep

A New SAS Contract and the Specialist Grade; Navigating the Guidance Documentation

The NHS employs more than 26,000 SAS Grades. This makes up 20% of the total workforce. Within BAOS, the percentage is actually much higher, at last count it was two thirds of the entire membership! At BAOS we recognise that supporting our SAS Grades is hugely important and strive to do so.

2021 has seen significant change for us - some would call it progress. A new contract proposal has been negotiated and approved in a BMA/BDA led referendum. Amongst other things, the contract has overhauled the pay increment scale. This means that in the majority of cases the career average pension will significantly increase. The other encouraging area of progress is the re-introduction of a separate senior grade, named, somewhat controversially, the Specialist Grade. This grade is designed as a progression for experienced SDs who have capabilities for autonomous practice. Successful regrading should bring job satisfaction through recognition of extended skills, as well as, importantly, a higher pay scale.

Unfortunately, access to the Specialist Grade is not an automatic progression for the individual. Employers are required to identify a specific workforce need, then the post will be opened to external application. Individual portfolio development is therefore absolutely key to enable you to put your best foot forward. This then, is where guidance is required.

NHS Employers have several helpful documents on their webpage to help the practitioner prepare for application: [The new specialist grade for SAS 2021 | NHS Employers](#)

A “Generic capabilities framework” document outlines the capabilities that the applicant will need to evidence in order to enter the grade.

To link with this, a “Specialist Grade Appointment Guidance” document includes an easy-to-use template on how to evidence these capabilities.

Each role should be modified to be specialty specific and should give structure to the individual’s application. For example, in the document “Notes on person specification guidance”, SAS practitioners in the OMFS and OS specialties will follow different competencies- both structured by their individual specialty curricula, despite both groups being regulated by the GDC.

The BMA/BDA has a dedicated well-structured section on their website: [The 2021 specialist grade explained \(bma.org.uk\)](#)

This includes a comparison table of roles at different levels that should help you to identify if you are already “acting up” or give direction to where development is required.

Also available is a guidance template for the development of autonomous practice, which will be a key requirement of any application. <https://www.bma.org.uk/media/1640/bma-guide-to-autonomous-practice-sas-updated-2015.pdf>

Navigating all of this documentation will take time, and you may need some additional individual assistance. Approach your Trust SAS tutor who should be armed with all available information, as well as having insight into your individual Trust.

The BDA/BMA have specialist advisors who can assist in all matters relating to transferring to the 2021 contract. Also check out the BAOS website for other guidance related to role development and maximising your potential. **Good luck!!**



Kelly Gillan

BAOS Honorary Treasurer