

Promoting excellence in Oral Surgery through education, training and research for better patient care

## BAOS Newsletter Issue 4 2023

### **BAOS Feature**

#### To be or not to be... Specialist or Not?

The General Dental Council (GDC) is an organisation which regulate dental professionals in the United Kingdom. It keeps an up-to-date register of all qualified dentists and other dental care professionals.

It was established in 1956 to set and maintain standards in UK dentistry, with the aims of protecting the general public from unqualified dental professionals, including dentists who are entitled to use one of the 13 specialist titles recognised by the GDC.

These titles are designed to protect the public against inaccurate claims of specialist skills and to help employers and others recognise dentists with specialist skills and experience. One of these specialist titles of course relates to Oral Surgery.

Dentists do not have to join a specialist list to practise any particular specialty, but they can only use the title 'specialist' if they are on that list.

#### Joining the Specialist List

Dental professionals registered with the GDC and who have completed an approved specialist training programme in the UK may apply for the award of a Certificate of Completion of Specialist Training (CCST) and entry onto the relevant specialist list.

GDC-registered dentists who do not hold a CCST can apply to join a specialist list by submitting evidence that they have an equivalent level of knowledge and experience gained in other ways. This is also known as an assessed application. For oral surgery the level of knowledge and experience must be gained through the route of academia or research work.

Historically, these applications are made to the GDC and assessed by Specialist Advisory Committees (SACs), which are intercollegiate bodies within the Royal Colleges that advise on higher specialist training in the dental specialties.

#### CCST

In 2015, the Council adopted the Standards for Specialty Education, for use in quality assuring specialty education in the UK. The Standards set quality requirements for all UK education and training programmes leading to inclusion on one of the GDC's specialist lists. This was updated in 2019.

If you are registered with the GDC and have completed an approved specialist training programme, you may apply for the award of a CCST and entry onto the relevant specialist list.

Applications for approved training programmes must be submitted to your regional postgraduate dental dean who will monitor you throughout your period of training. At the end of your training you must hold the agreed qualification awarded by one of the three Royal Surgical Colleges: the Royal College of Surgeons England, the Royal College of Physicians and Surgeons of Glasgow and the Royal College of Surgeons of Edinburgh. You must fulfil all entry, training, and assessment criteria to be eligible for the award of a CCST.

#### Assessed Route (Non-CCST)

For UK and overseas qualified dentists without a CCST, alternative evidence can be considered for entry onto a specialist list. This route is for those who either hold a specialist dental qualification awarded outside the UK or who have gained equivalent knowledge or experience from academic or research work.

In this system, an application was made to the GDC and the applicant's evidence was passed to the SAC for consideration and determination of equivalence of training. The issue was there is no direct contact between the GDC and those undertaking the assessments within the SACs, which can result in a disjointed user experience and makes the overall process more complicated than it needs to be. Where applications are turned down, there is a right of appeal against the decision, and there were also concerns about how that process worked.

In 2021, the SAC expressed concern through the Intercollegiate Royal Colleges about the quality assurance, effectiveness and speed that applications to the specialist list were being adopted. This being so in March 2022 the assessment to the specialist list were paused until a more robust process could be determined. After careful consideration informed by discussion of the issues with Deans of the Royal Colleges and others, it was decided that the GDC will in future administer the scheme directly and also make changes to the process for considering appeals.

In June 2023 following advice from myself and two other member of the SAC (whom all are Council Members of BAOS) the new process of assessment of applicants started again. Along with these individuals, a cohort of new assessors with specialist skills and experience were recruited to give rigorous and objective advice on whether applicants have met the high standards needed for admission to the specialist list. The new process is clearer, with defined requirements and it is hoped the process will give feedback to applicants if they do not achieve the required standard.

It is imperative to state, that this process is not easy to achieve, as evidence equivalent to three years full time as a trainee, with the addition of academia and research work is required. The fast-track process of being a trainee with a national training number is still the only guaranteed way of being awarded a CCST and entry on to the oral surgery specialist list, although with this new process, with the progress made by BAOS to help our members, those who have the clear skills now have the chance to be awarded the title of 'specialist in oral surgery'.



Adrian Thorp BAOS Hon. Secretary

#### Well, It's an honour!

At last conference, as many of you will remember, Colette Balmer had Honorary Membership conferred upon her. Subsequently, it was discussed at Council and we felt that as we have so many extraordinary members, the nomination for this honour should become an annual event.

Honorary membership of BAOS may be conferred upon any member, not necessarily from the United Kingdom, by nomination of the membership and vote at the December BAOS Council meeting. An Honorary member of BAOS will have all the privileges of the Society and have electronic access to the Oral Surgery Journal.

Of course, there are specific criteria to be satisfied to permit nomination, including that the nominee must be someone who has demonstrated significant support to BAOS. They must also be someone who has dedicated their career to the furtherment of Oral Surgery (regardless of the sector(s) within which they have worked). Although more difficult to ascertain, they must also be someone who has the respect of their colleagues and peers.

Nominations for Honorary Member must be submitted in writing to BAOS by the September Council Meeting prior to Conference the following March. Any member of BAOS can nominate someone for an Honorary Membership of BAOS. Details of the nominee and the nominator as well as a written statement supporting the nomination will need to be submitted. Any nominations will be circulated to the Council Members and discussed at the December Council Meeting, a vote will take place and the successful candidate will be awarded the Honorary Membership at the formal dinner of the next Conference.

Don't worry that you have missed completing the form for Conference 2024, we will accept nominations at any time of the year and any coming through after September 2023, will be considered for the award at Conference 2025!

If you would like to see a colleague honoured in this way, please do get in touch with us at mail@baos.org.uk and ask for a nomination form.



Julie Burke BAOS President

# Thinking outside the box – a bold move by a bold Clinical Director

We are all aware that most referrals to secondary care OMFS units are for Oral Surgery related conditions. This was recently highlighted in a paper by Moore et al. who assessed referrals received from primary care.<sup>1</sup> However, despite this evidence there continues to be a lack of Oral Surgery Consultant appointments nationwide.

Huddersfield Royal Infirmary (Calderdale and Huddersfield Foundation NHS Trust) is a case in point. This longstanding unit serving a population of around 65000 over a wide geographical area has visiting OMFS consultants from Bradford Trust providing a fast-track oral cancer and skin malignancy service. This resulted in dentists who attend less than full time, managing the oral surgery service, with increasing referral pressures, a lack of direct senior clinical leadership, development opportunities, teaching, and formal governance,

The Clinical Director (CD) for the Head and Neck service realised that there was an urgent need for Consultant Oral Surgeons and thus created 2 posts in a bold and unusual move that has resulted in the only new Consultant Oral Surgeon appointment in Yorkshire District Hospitals for many years. I congratulate Ms Aletta Carbone, the Clinical Director, who scrutinised the data and evidence on this service, recognised an unmet need and had the courage to action the *harder right* option rather than the *popular soft* option.

This should be an inspiration for CDs out there who all know that there is an unequivocal need for Oral Surgeons in their hospitals.

References

 Moore, R., Pretty, I., Douglas, G. *et al.* An evaluation of referrer factors for 98,671 referrals made to the West Yorkshire oral surgery managed clinical network over a three-year period. *Br Dent J* (2022).



Divya Keshani BAOS Council Member