The new Oral Health Improvement Plan (OHIP) launched in January 2018 by the Scottish Government aims to prevent poor oral health, reduce oral health inequalities and address the oral health needs of an ageing population. The video of OHIP is available at https://youtu.be/0jZ72ELUx-E.

The plan has 41 actions, however, the Chief Dental Officer (CDO) advised that the first five priority actions would be:

1. **Community Challenge Fund**
   Dental teams will be encouraged to work more in partnership with communities to help to better understand their needs from services. A three-year Community Challenge Fund of up to £500,000 will be introduced later this year allowing third sector organisations to bid for funding to work in areas of deprivation to support communities to develop their own solutions for improving their oral health.

2. **New Domiciliary Care Provision**
   Arrangements to enable accredited GDPs to provide care in care homes will be introduced. These practitioners will work with care home staff and the Public Dental Service to ensure the maintenance of good oral health and hygiene. Initially the focus is on care in care homes but will eventually move to address the needs of those living in their own homes.

3. **Director of Dentistry**
   The Scottish Government will work with NHS Boards to introduce a Director of Dentistry in each Board area to provide a point of contact locally for national policy. Albert Yeung, Consultant in Dental Public Health, has recently been appointed to undertake this role for Lanarkshire on an interim basis.

4. **Supporting Practitioners with Problems**
   Following the letter from the Scottish Government on 29 June 2018, a pathway to support local dental practitioners has been developed to ensure that NHS Boards use local disciplinary procedures and NHS Tribunals where appropriate. These measures aim to avoid unnecessary referral to the General Dental Council.

5. **Occupational Health**
   Following the letter from the Scottish Government on 23 May 2018, an occupational health service for GDPs, members of the dental team and other practice staff has been available from SALUS from 1 June 2018.

You can follow the CDO at the following social media websites:

- [Facebook](https://www.facebook.com/Chief-Dental-Officer-and-Dentistry-Division-135763123915588)
- [Twitter](https://twitter.com/CDO_Scotland)
Prevention and Management of Dental Caries in Children

The Scottish Dental Clinical Effectiveness Programme Dental Clinical Guidance on Prevention and Management of Dental Caries in Children has recently been updated for practitioners and dental teams.

It highlights the need for good communication and multidisciplinary support to ensure help for vulnerable families who require additional support to accept dental care and balances the risks of treatment induced anxiety with early intervention and preventive dental care.

Advice for practitioners includes:
- Behaviour management techniques
- Defining needs and development of ongoing personal care plans tailored to suit individual needs
- Importance of timing interventions when planning and delivering dental care
- Importance of not leaving infection or caries in permanent teeth unmanaged

Restricting the Use of Dental Amalgam in Specific Patient Groups

From 1 July 2018, UK law states that dental amalgam should not be used in the treatment of deciduous teeth, in children under 15 years old, and in pregnant or breastfeeding women, except when deemed strictly necessary by a dentist based on the specific medical needs of the patient.

The law has been passed on the basis of environmental concerns about mercury pollution, and does not reflect any evidence-based concerns about adverse effects of amalgam on human health.

Advice and guidance is available from the Scottish Dental Clinical Effectiveness Programme on putting the restrictions into practice at www.sdcep.org.uk/published-guidance/dental-amalgam

Patient information leaflets are provided to inform patients and parents or carers about the restrictions on dental amalgam use, how this might affect the dental treatment offered and provide reassurance about their care.

If onward referral of children requiring enhanced prevention or caries management
- Importance of provision and continuity of dental care
- More focused approach to recall management and suspected dental neglect
- Working with other agencies to support and safeguard the wellbeing of children and young people

As the wellbeing of the child should be the main priority for all professionals, the overarching principles of this document supports dental teams with assessment, planning, providing and managing dental care by providing evidence based guidance to achieve a more positive outcome for children.

The Full Guidance and Guidance in Brief are available at www.sdcep.org.uk/published-guidance/carries-in-children

From 1 January 2019, dental amalgam must be used only in pre-dosed encapsulated form and amalgam separators will be mandatory.

By 1 July 2019, the UK must have a national plan in place to outline their intended measures to reduce dental amalgam use.

Further advice is available from the British Dental Association at https://bda.org/dentists/policy-campaigns/public-health-science/Pages/Dental-amalgam-FAQs.aspx
Ionising Radiations Regulations 2017 (IRR17)
On 1 January 2018, IRR17 were implemented, revoking the Ionising Radiations Regulations 1999.
One key change of immediate relevance is that employers are now required to register dental practices with the Health and Safety Executive if they use radiographic equipment. Applications for registration should have been made by 5 February 2018.

Ionising Radiation (Medical Exposure) Regulations 2017 (IRMER17)
The IRMER17 were introduced on 6 February 2018, replacing the Ionising Radiation (Medical Exposure) Regulations 2000.
As with IRR17, the changes within these new regulations that are likely to affect you are minimal but some additional work is required.
IRMER has always required the employer to establish a set of written procedures in relation to clinical work involving radiography. There is now a requirement for three additional written procedures, these are:

Benefits and risks
You need a procedure to say how, prior to taking a radiograph you will explain the potential risks and benefits associated with the exposure to the patient or their representative. Based on the national template, NHS Lanarkshire has developed a patient risk information poster.

Accidental or unintended exposures
All accidental or unintended exposures should be investigated; you also now need a written procedure to ensure that the referrer, the practitioner, and the individual exposed or their representative are informed of the occurrence of any relevant clinically significant unintended accidental or exposure and of the outcome of the investigation.
Once you have developed your new procedures, they should be issued to all relevant staff.

More information on the revised regulations can be found in the updated version of Selection Criteria for Dental Radiography. It is free online at www.fgdp.org.uk/guidance-standards/selection-criteria-dental-radiography.

General Data Protection Regulation
The General Data Protection Regulation (GDPR) forms part of the data protection regime in the UK, together with the new Data Protection Act 2018. The main provisions of the Data Protection Act, like the GDPR, came into force on 25 May 2018. These replace the Data Protection Act 1998, strengthen the current privacy legislation and place new obligations on organisations in the way they collect process and store personal identifiable information. As dentists we require to comply with both pieces of legislation.
There are some additional obligations which require dental practices to be able to demonstrate compliance with the data protection principles in the processing of personal information. e.g. continual review and recording of the types of personal data processed and justification of the legal right to process it.
Most of what you do stays the same, but some aspects need you to do more – for example:
• Audit your data to identify what you hold and why and if it is secure
• Nominate or appoint a Data Protection Officer
• Provide privacy notices for both staff and patients
There are numerous resources available to help practices comply with GDPR including the Information Commissioner’s Office guidance, advice from the indemnity organisations and guidance (Templates for Expert members) from the British Dental Association.
Two particularly useful resources are the interim advice available on the practice support manual at www.psm.sdcep.org.uk/general-data-protection-regulations-gdpr-2.
The second resource is a piece of work undertaken by Community Pharmacy Scotland, and while this relates to community pharmacy it could be easily adapted for use by dental practices. By working through the workbook, you will be able to demonstrate compliance with GDPR. More information is available at www.cps.scot/gdpr.
New Chair for Quality Improvement Committee

Lesley Burnside has recently taken over the role of Chairperson of Lanarkshire Dental Quality Improvement Committee (formerly Lanarkshire Audit Committee) following in the footsteps of Monica Downie.

Lesley is a Senior Dental Officer and has worked in Public Dental Service in Lanarkshire for 10 years, having previously worked in General Dental Practice in Lanarkshire for five years.

In her new role, Lesley is keen to take an inclusive approach. She said, “In light of recent developments in Dental Quality Improvement, I hope to help support dentists in Lanarkshire to complete peer review as well as audit.

“If any dentist has ideas on topics that they would like covered in future Quality Improvement activity then please contact me at lesley.burnside@nhs.net

“I believe that, in each area of the profession, Lanarkshire dentists work well together and this is something that I hope will continue through Lanarkshire Dental Quality Improvement Committee.”

Out with her professional life, Lesley enjoys travelling, exploring new cities and trying new cuisines.

Promoting Oral Health

Susan Lyttle has recently been appointed in the role of Senior Health Promotion Officer (Oral Health).

Susan, who has a BSc Honours in Neuroscience and a Masters in Public Health, first joined NHS Lanarkshire in 1995 as Health Promotion Officer for HIV/AIDS and most recently worked in the role of Smoking Prevention Manager.

Welcoming the challenge of her new position, Susan said, “This is a completely new role for me. My job is to work in partnership to develop oral health programmes that are evidence based where possible. It’s also to help reduce dental and oral inequalities and to promote good oral health for everybody in Lanarkshire.

“Good oral health is a right for all of us and your oral health affects what you eat, how you talk and even how you interact with others. We need to shift the focus to prevention and in doing so need to tackle lifestyle factors that impact on poor oral health such as smoking, alcohol and diets high in sugar.

“I love working in Lanarkshire. We have a great partnership ethic here with colleagues across the county from the statutory and third sector, all doing their best to reduce health inequalities and to promote the health of Lanarkshire residents.”

Susan lives in East Kilbride with her two children Sophie and Will and her interests include aromatherapy, yoga, Pilates and walking with friends and her West Highland Terrier.