

Oral & Maxillofacial Surgery and the General Dental Council – October 2014

Some Frequently Asked Questions (FAQs) and some answers.

Whilst we have tried to be definitive, we would be grateful to receive corrections for any errors of content or omission so please contact us at office@baoms.org.uk . Mike Davidson – Chair BAOMS, Patrick Magennis – Hon Secretary BAOMS.

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Introduction

After the recent increase in the GDC Annual Retention Fee (ARF), many OMFS surgeons are wondering why they should continue to be on the dental register. BAOMS contributed to the GDC's ARF consultation suggesting that, as the GMC is our regulator, OMFS surgeons should have a minimal fee for the GDC to publish the GMC's OMFS specialist list for patient information. However, at a meeting on the 30 September 2014, the Chief Executive of the GDC Evlynne Gilvarry made it clear that the GDC had no plans to have any form of differential pricing across dental registrants. They are content that OMFS surgeons who do not 'need' GDC registration, should not be on the register.

The final size of the price increase will be decided later this year (2014).

We presented the evidence of the likely exodus of OMFS surgeons from the GDC register, and the reply was that the GDC was not a membership club but a regulator. If a surgeon did not want to be regulated by the GDC, then they should cease their registration.

On the positive side, the Ms Gilvarry recognised that it was a waste of everyone's time for OMFS surgeons to have to change certificates of CME to say 'hours' rather than 'points', and said that the GDC would accept a printout summary of a surgeons appraisal documentation indicating CPD hours signed by a responsible officer as an record of CPD which is appropriate to an OMFS surgeons practice.

To help our members we have listed some questions and answers and, in the e-mail accompanying this document, there is a link you can click to a few questions which we would be very grateful if you would answer.

http://www.formdesk.com/baoms/GDC_Questionnaire

FAQs for OMFS specialists (consultants and those on the OMFS specialist list)

Does an OMFS consultant have to be registered with the GDC to practice OMFS? Yes, sometimes.

We have listed the current advice below.

If your practice includes working somewhere which looks like a dental surgery (GDC stipulation)

Even if your practice is restricted to the contents of the GMC's OMFS curriculum GDC registration is needed if you practice somewhere which looks like a dental surgery (GDC stipulation). They are concerned that a patient may 'mistake' an OMFS consultant for a 'dentist' under these conditions.

If dental registration is a requirement of your terms of employment (Trust stipulation).

This is the case in at least one Trust.

If your practice includes dental procedures not in the OMFS curriculum, then it would be prudent for you to be on the GDC register (BAOMS advice).

To supervise a trainee who has temporary registration with the GDC (dental SHO, dually qualified overseas fellow).

To teach undergraduate dental students aspects of the practice of dentistry which are outwith the OMFS curriculum (GDC stipulation).

One myth we would like to bust is that you have to be on the GDC register to teach dental students or supervise dentists in training. This is NOT the case except where the training is outwith the OMFS curriculum i.e. you are teaching them 'the practice of dentistry' (GDC stipulation). OMFS consultants usually teach dental students or dental core trainees in the GMC registered speciality of oral & maxillofacial surgery. This is no different from students or trainees being taught intubation by an anaesthetist or resuscitation by a nurse practitioner.

To prescribe treatment by a Dental Care Professional (DCP e.g. hygienist, technician, dental nurse).

Some DCPs are happy to see patients directly (Direct Access) and the GDC allows this. Others prefer to work under the prescription of a dentist. Obviously, for those who prefer a prescription from a dentist, a dentist needs to be available to prescribe the treatment.ⁱⁱⁱ

For some oral surgery contracts they may be limited to oral surgery specialists or dentists with a NHS provider number (contractual or bidding requirements from CCG).

What are the disadvantages to being registered with the GDC?

The cost.

We hope to use the results of the survey that accompanies this document to negotiate a more reasonable fee. The standard Annual Retention Fee, and for many the additional fee for being on the Oral Surgery Specialist List is a significant expense, even though it is tax deductible.

Dual regulation "double jeopardy".

Dual registration means that a complaint can be aimed at both regulators. In the past some surgeons have been exonerated by the GMC and struck off by the GDC on the same complaint. The GMC and GDC are drafting a protocol for the management of cases referred to either regulator. BAOMS has not had sight of this protocol but has asked to be involved in its evolution. We feel strongly that any complaint about a practice within the OMFS curriculum should be the sole remit of the GMC with the GDC only regulating actions outwith the OMFS curriculum but there is not confirmation from either regulator that this will be their approach.

Oral Surgery Specialist Listing

Can anyone on the OMFS Specialist List Automatically Join the OS Specialist List?

Yes. It is recognised that anyone on the OMFS specialist list can be entered onto the OS specialist list by the fact that they are on the OMFS specialist list. The process is described as Route 11 on the GDC document 'Application for entry to the Specialist List in Oral Surgery'.

CPD and CME for those with dual registration

Do I need to maintain my CPD records with the GDC?

Yes. You must fill in your annual report and maintain records to support these submissions.

Must I achieve the required "verifiable" and "non-verifiable" hours of CPD?

Yes.

Must these records be in the 'compulsory' domains for example radiation protection?

No. The GDC recognises that a practitioner's CPD should be relevant to their sphere of practice. The evidence which you submit as part of your medical appraisal i.e. monthly audit meetings, Trust mandatory training and courses attended will contribute to your verifiable CPD requirements.

My Continued Medical Education is recorded in CME points (where 1 point = one hour) and my dental CPD is recorded in hours. Do I need to get two certificates for everything I do?

In theory no, in practice some of the junior officers in the GDC have not, in the past, been able to make this simple conversion.

The GDC has now agreed that it will not make recording CPD unnecessarily onerous for OMFS practitioners. As of September 2014, a printout of the summary of CME (including hours) from GMC appraisal software package i.e. the records you use for your revalidation and recertification with the General Medical Council will be sufficient for the GDC. Although this is agreed in principle, it remains to be seen if it happens in practice.

Questions for dually qualified OMFS trainees (ST OMFS)

Do I need to be on the Dental Register to work as a higher trainee in OMFS?

No. A registerable dental qualification is now needed to enter training, and to obtain a CCT (see below). It is not a requirement to work as an ST in OMFS. The advice from the Specialty Advisory Committee in Oral and Maxillofacial Surgery (SAC in OMFS) is that you should remain registered to avoid any problems at the end of training.

Do I need to be on the Dental Register to get my CCT?

A Certificate of Completion of Training (CCT) can *only* be awarded if the applicant has full registration with the GDC or a contemporaneous letter from the GDC stating that they are eligible for full registration. Temporary registration is not sufficient.

I don't have a UK registerable dental qualification, can I complete OMFS training?

Yes you can complete training, but you cannot gain entry onto the OMFS specialist list. You will have a year after completing training to gain a registerable qualification and get a CCT, after that you can apply for a Certificate of Equivalence of Specialist Registration (CESR).

There are three routes to onto the dental register. You can pass the Overseas Registration Exam (ORE) or the Licenciate in Dental Surgery from the RCS England (LDS) or satisfy the GDC that you are an "exempt person". More details are on the GDC website.

Do OMFS higher trainees (STs) have to be registered with the GDC once they gain entry to the OMFS specialist list?

See the answers above under OMFS specialists. Essentially – no.

Is the only way to prove I could be on the GDC register to be on the register?

No. Whilst this remains the safest and most reliable way to demonstrate that your qualification is fully registerable, the GDC has agreed that it will provide a contemporaneous letter in an agreed format in response to enquiries from OMFS trainees about their dental qualification.

Singly qualified trainees working in OMFS departments

What tasks can a practitioner with only GMC registration undertake?

GMC registered medical practitioners who are not on the OMFS specialist list may work in OMFS departments and carry out oral and maxillofacial surgery under the supervision of an OMFS consultant. The supervising consultant is responsible for assessing their level of competence, and therefore delegating appropriate tasks. The consultant retains overall responsibility for care performed under his or her delegated authority.

The scope of OMFS is defined in the OMFS curriculum held by the General Medical Council. Tasks outside the OMFS curriculum are not medical tasks but rather dental tasks, and medically qualified practitioners *cannot* practice dentistry. Examples include placing restorations or fitting crowns.

In the past a complaint was made to the GDC about medics working in OMFS taking out wisdom teeth alleging the illegal practice of dentistry. The GMC and BAOMS contacted the GDC on behalf of the unit and their trainees, pointing out that OMFS was not dentistry but rather a medical specialty defined by its curriculum held by the GMC. The GDC accepted this and the then executive wrote a letter which is appended to this FAQ document.

What tasks can a practitioner with only GDC registration undertake?

GDC registered dental practitioners who are not on the OMFS specialist list may work in OMFS departments and carry out oral and maxillofacial surgery under the supervision of an OMFS consultant. The supervising consultant is responsible for assessing their level of competence, and therefore delegating appropriate tasks. The consultant retains overall responsibility for care performed under his or her delegated authority.

They can practice dentistry such as placing restorations or fitting crowns.

Temporary Registration with the General Dental Council

How does temporary registration work for a trainee in an OMFS department?

Your temporary registration form needs to be signed by an Identified Dental Registrant – who will be your supervising OMFS consultant. Only OMFS consultants who are on the dental register can sign temporary registration forms and only registered dentists can undertake this initial supervision of a temporarily registered dentist.

GDC Advice on temporary registration

It has always been a requirement of temporary registration, that a GDC registrant is **always available** to assist the temporary registrant in case of patient emergency. This is made clear in the application form, the confirmation letter and the re-drafted guidelines served to formalise this requirement.

In terms of the level of supervision that is required, this decision is the total responsibility of the temporary registrant's supervising consultant. They would assess the ability of the temporary registrant, and make a decision as to what duties can be carried out with limited or no supervision.

How do the rules for temporary registration impact on an OMFS unit?

If you ever want to employ a trainee using temporary dental registration (this can often be the easiest and quickest way of registering a dually qualified overseas fellow), at least one consultant in the department must be on the dental register to be able to sign the temporary registration form.

Questions for Nurses and Dental Nurses

Which types of nurses can work in an oral and maxillofacial department?

General nurses *and* dental nurses who are sufficiently trained and competent to work within an oral and maxillofacial environment. Anyone who wishes to work in these departments needs to check whether their employer requires them to have any additional training or particular specialities in order to work.

Can registered general nurses work in Oral & Maxillofacial Surgery (OMFS), oral surgery or orthodontic clinics in hospitals?

Nurses who are registered with the Nursing and Midwifery Council *can* work with *and* assist OMFS surgeons practicing within the OMFS curriculum, just as they would any other surgeon working within their field of practice. We would not regard such medical tasks as dental nursing.

What OMFS tasks can a dental nurse assist with?

A dental nurse can undertake tasks for which they have received adequate training, and these will usually be in the overlap area included in "dentistry" and OMFS.

Can a general nurse assist someone undertaking a dental task i.e. one outwith the OMFS curriculum?

The GDC does not advise on what general nurses can do. Any queries of this nature need to be directed to the Nursing & Midwifery Council. GDC registrants must be sure that anyone to whom they delegate a task is trained and competent. However in this case an OMFS surgeon would be practicing dentistry and GDC registrants carrying out a dental procedure need to be assisted by another GDC registrant.

Appendices

SAC OMFS Advice on Dental Qualifications and Training in Oral and Maxillofacial Surgery (OMFS) **Sept 2014.**

Introduction.

The General Dental Council (GDC) is the regulator for dentistry in the UK and the final arbiter of whether a dental qualification is fully registerable. A fully registerable dental qualification is required for entry into specialty training (from 2014) and remains a requirement for a CCT (and consequent entry onto the OMFS Specialist list). The SAC OMFS will accept that your qualification is fully registerable if the GDC confirms this in a letter or if they enroll you on to the Dental Register. The letter from the GDC should state that 'the qualification would entitle the applicant to register if they applied' or 'the applicant is an exempt person (see below) and as such their dental degree is fully registerable'. The GDC may state that the only way to demonstrate that a qualification is fully registerable is for the applicant to join the GDC Register; a time consuming process.

For those not yet in OMFS specialty training.

From January 1st 2014, all applicants for specialty training in OMFS must have full registration with the UK GDC (see www.gdc-uk.org). A qualification which is only suitable for temporary registration is not acceptable. As first-time registration or re-registering with the GDC takes time, the OMFS SAC recommends that those intending to apply for specialty training register as soon as possible with the GDC or remain on the register. Some trainees were unable to complete the GDC registration process between a post being advertised and the application closing.

For those currently in specialty training in OMFS

A Certificate of Completion of Training (CCT) can only be awarded if the applicant has a fully registerable dental qualification. Temporary registration is not sufficient. Without a CCT, a trainee cannot gain entry onto the GMC's OMFS Specialist list. A CCT has to be awarded within one year of completion of training. Failure to achieve this commits the trainee to an application through the CESR process, which is much more onerous. Only those on the specialist list can hold a substantive consultant post.

NB As first-time registration or re-registering with the GDC takes time, the OMFS SAC recommends that those in specialty training register as soon as possible with the GDC or remain on the register. If the GDC will not provide a letter, you will have to re-register before you can receive your CCT. Some trainees have been unable to complete the GDC registration process and apply for their CCT in time for the consultant post for which they wished to apply.

Those currently in OMFS specialty training who do not possess a fully registerable qualification will have to gain entry on to the register either by passing the Overseas Registration Exam (ORE), the Licentiate in Dental Surgery from the RCS England (LDS) or by satisfying the GDC that they are an "exempt person". Full information is on the GDC website www.gdc-uk.org

For those running ARCPs for OMFS STs who do not hold a fully registerable dental degree

ARCP 6 and RITA G are awarded when trainees "having gained all required competences; will be recommended as having completed the training programme". Those trainees who approach the end of training *without* a registerable dental degree can be awarded an ARCP 6 or RITA G and will leave training in the normal way. They cannot however be awarded a Certificate of Completion of Training (CCT) as an ARCP 6 does not in itself guarantee a CCT; this also requires a fully registerable dental qualification. If a CCT is not obtained within 12 months of completing training, entry onto the specialist list will require an application by a CESR route (Certificate of Eligibility for Specialist Registration) http://www.gmc-uk.org/doctors/registration_applications/ssg.asp

For those applying for Consultant Posts in OMFS in the UK

You must be on the OMFS Specialist List, (held by the General Medical Council) to hold a substantive consultant post in the UK..

For Consultants in OMFS

Registration with the GDC is not a requirement to practice OMFS

Full registration with the GDC is required to supervise those trainees and junior staff who have temporary registration with the GDC, and to prescribe purely dental treatments, for example a scale and polish from a dental hygienist.

The GDC recognises that all activity on the OMFS curriculum is considered to be a medical task, as OMFS is a medical specialty.

For those who qualified in dentistry outside the UK. – is your dental qualification registerable?

The GDC are the statutory authority for dentistry in the UK and provide definitive advice on this. EU dental qualifications will usually be registerable and those from outside the EU rarely so. The only way to be sure is to ask the GDC.

Useful contact details.

The Overseas Registration Exam (ORE) is an exam in dentistry run by the General Dental Council (GDC). There are Questions and Answers on the GDC website:

<http://www.gdc-uk.org/Dentalprofessionals/ORE/Pages/ORE-FAQs.aspx>

The LDS exam is run by the Royal College of Surgeons of England

<http://www.rcseng.ac.uk/exams/lds>

To find out if you are an exempt person, you should check the GDC website:

<http://www.gdc-uk.org/Dentalprofessionals/Applyforregistration/Pages/Exempt-persons.aspx>

British Association of Oral and Maxillofacial Surgeons

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BAOMS Position Statement on Medical Practitioners working in OMFS including removing teeth Circulated in April 2008 and supported by Mr Duncan Rudkin (Chief Executive and Registrar for the General Medical Council)

Background

In response to a number of queries raised in relation to the effects of the 2005 Statutory Instrument, which amends The Dentists Act 1984 (the Act), the GDC has published a statement¹, seeking to clarify its position in relation to the "practice of dentistry". The GDC paper also seeks to define the scope of practice permitted under the "medical task" exemption, for non-GDC registrants. Until the recent amendment to legislation², it was necessary for consultant OMF surgeons on the GMC specialist list to hold dental registration however the necessity for dental registration has now been removed for OMFS specialist registration with the GMC.

The GDC statement on the practice of dentistry

Of relevance to the practice of OMFS the statement states:

"The Act does not define "medical task". However there may be situations where a task that would otherwise constitute the practice of dentistry might be considered a medical task for the purposes of the Act (for example in the course of emergency care OR (my emph.) Oral and Maxillofacial treatment). In determining this, the context of care will be an important factor."

The statement does not provide a definition of OMF treatment. However, the GDC's position with regard to the definition of the practice of dentistry is: "that which is normally practised by dentists". Applying the same logic, the practice of OMFS should be defined as: "that which is normally practised by OMF surgeons". Further guidance is available from the Post Graduate Medical Education and Training Board (PMETB) approved curriculum for OMFS.³

The scope of practice encompassed by OMFS defined in the curriculum, and normally practised by OMF surgeons, includes (*inter alia*): surgical removal of teeth, intra-oral soft tissue procedures, dental extractions and implantology. The scope is not restricted to more advanced surgical procedures for facial trauma, oncology or facial deformity which fall solely within the remit of OMFS. It should be noted that there is some overlap between the curriculum for OMFS and dentistry as published within the GDC document "The first five years", however the surgical removal of teeth is not part of the undergraduate dental curriculum.

BAOMS Council Position

The Council of BAOMS has considered the GDC statement with great care. It is the opinion of Council that a non-GDC registrant who is a registered medical practitioner on the GMC specialist list of OMFS, or acting in the capacity of a trainee or locum, under the supervision of a consultant in OMFS, should be entitled, by virtue of the "medical tasks" exemption, to practice OMFS without fear of prosecution.

For further clarification, the view of the Council of BAOMS is that medical (non-GDC) registrants, should be entitled under the existing legislation to practice the full scope of OMFS, including the surgical removal of teeth and dental extractions, provided a) this is undertaken under the auspices of a hospital department of oral and maxillofacial surgery, and b) under appropriate supervision of and delegation from a consultant OMF surgeon, and c) the practitioner only undertakes treatments where they are competent to do so. Council would not support a non-GDC registrant undertaking dental extractions or other dental procedures as an independent High Street practitioner.

Ian C Martin, BAOMS Chair of Council
16 April 2008

¹ <http://www.gdc-uk.org/NR/rdonlyres/563378AC-10D2-4A8B-A3FF-6B029F5E772E/76102/Practiceofdentistrystatement.doc>

² European Qualifications (Health and Social Care Professions) Regulations 2007 (S.I.No. 3101)

³ <http://www.iscp.ac.uk/Syllabus/Overview.aspx?enc=Dc9R8V0UqYwU7WL7u5FGHhUw5FKJocHepYhBFhX0=>

GENERAL DENTAL COUNCIL

www.gdc-uk.org

GDC protecting patients,
regulating the dental team

GDC letter to Stakeholders.

15 April 2008

Dear Colleague

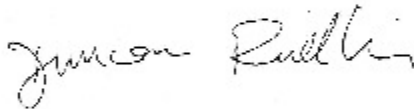
The practice of dentistry by non-GDC registrants

As you may know, the GDC recently produced a statement on the practice of dentistry by non-GDC registrants, which I attach for information.

The British Association of Oral and Maxillofacial Surgeons has produced guidance for its members following the GDC statement. I attach a copy of this guidance, which is being distributed to BAOMS members shortly. I believe that this is an appropriate interpretation of the GDC's position.

The Council regularly receives complaints about the illegal practice of dentistry and investigates them before deciding whether it is in the public interest to proceed with a prosecution. We intend to develop our prosecution policy so it deals appropriately with non-GDC registrants. In the meantime, I hope this communication is helpful. If you would like any further information, please contact my colleague Ewan Macleod on 020 7887 3001 or emacleod@gdc-uk.org.

Yours sincerely



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GDC Position Statement on the Practice Of Dentistry by Non-GDC Registrants (2008).

GDC statement on the practice of dentistry by non-GDC registrants

Background

The Dentists Act 1984 (the Act) defines the practice of dentistry as 'the performance of any such operation and the giving of any such treatment and advice or attendance as is usually performed or given by dentists'.

Prior to 2005, the Act allowed both registered dentists and registered medical practitioners to practise dentistry. Following a judgement¹ of the European Court of Justice that this was incompatible with the European directives², the Dentists Act was amended. This amendment was not procured by the General Dental Council but by the Department of Health in order to ensure UK compliance with European law.

As amended, the Act restricts the practice of dentistry to registrants of the General Dental Council. However, 'the practice of dentistry' is deemed not to include the performance of any *medical task* by a person who:

- Is qualified to carry out such a task; and
- Is a member of a profession regulated by a regulatory body listed in section 25(3) of the National Health Service Reform and Health Care Professions Act 2002.

A medical task is not defined in the legislation.

Definition of the practice of dentistry

The aims of the dental legislation include ensuring that dental patients access dental care from dental professionals. It is therefore the GDC's view that, in principle, the performance of dental treatment by anyone other than a GDC registrant is unlawful, and deliberately so. This general proposition is subject to the 'medical task' exception as properly understood.

The Act does not define 'medical task'. However, there may be situations where a task that would otherwise constitute the practice of dentistry might be considered a medical task for the purposes of the Act (for example in the course of emergency care or Oral and Maxillofacial treatment). In determining this, the context of care will be an important factor.

The General Dental Council considers that suitably qualified and registered healthcare professionals may take whatever action is necessary to deal with dental emergencies, such as stitching wounds or removing debris from the mouth, or re-implanting an avulsed tooth. We would regard such treatment as a 'medical task', when provided in a medical context, and therefore within the terms of the Act. However, the Council would expect any non-emergency dental treatment to be carried out by a GDC registrant.

A medical procedure might also require the performance of a task that would otherwise constitute the practice of dentistry. Whilst the dental legislation intends that dental patients should access dental care from dental practitioners, the Act should not prevent patients from accessing medical care from medical practitioners. Therefore, the Council would have no difficulty with suitably qualified and registered medical practitioners performing certain tasks, which would in a different context be restricted to GDC registrants (for example the extraction of teeth) if they are an essential part of a necessary medical or surgical procedure and are performed in that context.

This applies equally to Oral and Maxillofacial trainees and specialists.

¹ Vogel, case C-35/02

² Directives 78/686/EEC and 78/687/EEC now replaced with Directive 2005/36/EC

References

ⁱ Direct Access Q and As from the GDC website.

<http://www.gdc-uk.org/Dentalprofessionals/Standards/Pages/directaccessqas.aspx>

ⁱⁱ Benefits and risks of direct access to treatment by dental care professionals: A rapid evidence review 2012

<http://www.gdc-uk.org/Newsandpublications/research/Documents/FINAL%20VERSION%20of%20Literature%20Review%20on%20Direct%20Access.pdf>