

The Association of Consultants and Specialists in Restorative Dentistry

Minutes of Council Meeting held on
12th February 2008
Royal College of Surgeons of England

Mr R Saravanamuttu*
Mr Howard Lloyd*
Mr S Jauhar
Mr G Pollock*
Dr S Barclay
Prof Youngson
* Apologies

Mr M Donachie
Ms S Watkins*
Dr A Milosevic
Prof D Bartlett
Prof T Watson
Prof P Brunton*

08/01 Welcome to new members – Professor T Watson, Dr S Barclay and Mr S Jauhar. Apologies were received as indicated above.

08/02 The minutes of the meeting of 18th October 2007 were accepted.

08/03 Matters arising from minutes.

Role of consultant document – executive summary is being processed by colleagues at Liverpool. Gary Pollock has emails of PCTs. In the near future CY will create an executive summary for distribution to PCTs and target cleft lip and palate, and oncology. MD quoted the population stats 1:250,000 against orthodontics 1:200,000. MD made the good use of the document during his discussions with his fund holders.

ACTION – to change website to 1:200,000 based on UK population and those accessing dental care

Special care dentistry – SpR appointments in special care appointed using restorative numbers. CY reminded the committee that with increasing numbers of undergraduates qualifying and numbers of GDPs on the list support will be required by restorative consultants in the future.

08/04 Website, database, membership

Website will become active at the end of the month. Ideally the ACSRD will pay for SpRs web on-costs but if fee is significantly more the ACSRD assures that the SpRs do not pay any more than they are currently paying.

Database – CY questioned the purpose of the database. It was originally designed to collate emails but now hardly used. The main method of communication is via email and that is how most people's information is stored. The other method is the standing order held by the treasurer. To consider paying for a secretary to update the membership figures.

Membership currently is 190.

08/05 AGM 2007 and 2008

2007 The joint meeting with the SpR was held on the 17-19th October 2007 at the Marriott Hotel in Peterborough. The meeting was very successful with a total of 69 delegates. Well organised and successful with a profit of £2K.

2008 Next year's meeting will be at Rigby Hall Village, in Blackpool and based on the maxillofacial prosthodontics and hypodontia. The meeting plan has already been made by the SpRs. The agreement is to have a joint meeting but with separate breakout meetings with each maintaining their own identity. ACSRD to have the Thursday afternoon and a joint Friday all day meeting. The accommodation is restricted at Rigby Hall which is a family type facility and was designed for the SpRs to reduce cost. They had planned to share rooms. There is an attached hotel which has

limited number of rooms (29 rooms). SpR's to book hotel for ACSRD.
<http://www.ribbyhall.co.uk/>

ACTION – to check out other hotels nearby as breakout – for information for those not quick enough to book the main hotel.

2009 – preliminary arrangements made for Newcastle.

Future meetings to held with the SpRs and to share profits and costs.

08/06 SAC

Report from SAC is on the web. The main change in role is that local postgraduate deans will manage quality assurance, the SAC would have management control and GDC would have control.

The assessment by the SAC for equivalence for those starting postgraduate training is challenging when considering time reduction for specialist training. For instance, how long can time be reduced for a PhD or MSc completed in a field which is not directly related to clinical dentistry. Potentially, someone on a mono-specialist list could apply for top-up restorative training thereby reducing their overall training time by 2 years. Particularly important if the monospecialist list had been gained on equivalence.

Angus Walls would be the new chair.

08/07 Hon Treasurer's report

The profit from the joint conference was £2000. Balance is £9,040 in the current & £15,451 in capital res. No need to increase in subscriptions.

08/08 Election of Officers.

A requirement of committee is to ensure of membership of the committee has continuity. Therefore the three new members will need careful management when their term of office completes to ensure the committee continues to have representation rather than all leaving at once.

Only one applicant for Chair was received by Professor Bartlett. The next stage is to consult the membership to see if anyone else wants to stand. If not then DB will be elected chair. CY remains as Vice Chair for 2 years until the new Vice Chair elected from the committee for the new Chair position in 3 years time.

08/09 Travel Fellowship

One application received from Suresh Nayar. The closing date is first week in July and if there are no other applicants then they will receive £750 from the ACSRD and £250 from the SpR

08/10 SpR report

Nothing to report

08/11 ACCEA

England, Wales, Scotland and Northern Ireland have different systems. Wales is email based and local awards are set to time served and pay scales, but national awards are similar to English but limited to Wales. The Scottish system is a similar system but different names and everyone applies by paper. ACSRD support 6 bronze and 2 silver/gold jointly for England and Wales, Scotland and Northern Ireland are separate.

The ACCEA advice on discretionary points prior to an application for a bronze award is to hold at least 4 discretionary points. The Welsh system is based on time served and different to the English. In Wales, the time limit to apply for bronze is 10 years and is not related to total number of local discretionary points. CY investigated the declared points by all of the membership and identified in England few restorative consultants who had been consultants for more than 10 years and were eligible to apply for a bronze.

Therefore in theory at least English restorative consultants are dis-advantaged compared to the Wales and Scotland.

This year all applicants from the UK were ranked together and then submitted through the appropriate systems. The committee would like to thank Professors N Wilson, Angus Walls and Callum Youngson, Mr R Joshi and lay person was Julie Crosbie-Chown.

Another discussion point should individuals get support from the ACSRD for local awards. The number of potential applicants that could seek support from the ACSRD would be huge. The decision of the committee was that the ACSRD would only support national awards and if support was provided by local awards this would dilute those at a national awards.

ACTION – CY to write to the ACCEA to get clarification

ACTION – DB to approach secretaries of BES, BSSPD, BSP and BSRD to encourage membership of ACSRD.

08/12 Role of consultant

See above

08/13 Any other business

Cleft lip

The committee all received correspondence from CLAPA via the orthodontic society. The closing date for the questionnaire was 15th January. The implication was that the cleft patients were not receiving restorative care delivered by consultants. RS replied personally. The NHS provides dental care for patients with cleft lip and palate.

ACTION – DB/CY to write to CLAPA to identify what is their problem

BSRD

Document received by GP on the plans by the BSRD and other specialist societies. The intention was for chairs/secretaries to meet to discuss common issues effecting all societies. To continue to support the concept.

New Tariffs

The tariffs are published.

D Bartlett 12th Feb 2008

Date of next meetings

15th July 2008