

TURKISH DENTAL ASSOCIATION

2013 NATIONAL REPORT

COUNTRY : TURKEY

ASSOCIATION : Turkish Dental Association

VENUE : Ankara / TURKEY

YEAR : 2013

I. Changes

- In the Association and Its Organization

Board of Turkish Dental Association (TDA)

14th Term (2012-2014) Board of Directors of Turkish Dental Association

President	Prof. Dr. Taner YÜCEL
Vice President	Dr. Serdar SÜTCÜ
Secretary General	Ahmet Tarık İŞMEN
General Accountant	Ufuk ARALP
Member	Dr. Serdar AK
Member	İrfan KARABABA
Member	Yusuf KILIÇ
Member	Mustafa ORAL
Member	Dr. Faik Serhat ÖZSOY
Member	Tuncay SEVEN
Member	Ümüt YURDAKUL

II. Trends and developments

- In professional politics
 - Employment of dentists in public

Personnel Rights of Dentists and Public's Receiving Services from Clinics

State- owned Social Security Institution (SSI) of Turkey which only purchases the health care services regarded the offer of Turkish Dental Association significant on prioritizing the preventive applications and SSI presented this offer to the Economic Coordination Committee which directs the country's economy. The Committee, showing the economic conditions in our country as a reason, stated that public should not get services from the private dental clinics for now.

Our Association started works to reveal with a scientific analysis that our offer containing of preventive applications will affect the public finances in a positive way in the long run.

Ministry of Health, also in 2013, tried to continue to increase the employment of dentists in public sector. The Minister of Health has been trying to equalize the numbers of the self-employed dentists and dentists working in public sector.

Not the qualified treatment but the care for more patients in number is encouraged by the practice based on performance.

• Preventive Practices for Public Oral Health Care

Oral and Dental Health Action planning works 2013-2018 of Ministry of Health which is aimed to reach all school children was started in cooperation with our Association.

This Action Plan would be a an important and comprehensive application for the public finance by providing savings in terms of prioritizing the protective applications in oral health as well as having a dental problem-free generation by tracking the oral and dental health problems in children for a long time. But on the change of the Minister of Health, this project failed in the same year.

- In educational politics

• Continuing Dental Education

Turkish Dental Association Continuing Dental Education (CDE) aiming the post graduate education of our colleagues was disciplined by a directive regulation made in 1998.

In 2013, Continuing Dental Education (CDE) Directive has been renovated in a more comprehensive manner according to the changing needs. The new regulation provides that the educations could be given within the institutional structures and that our colleagues take a more realistic training.

• TDA Competency Development Project

The rapid development of dental profession in our country and around the world, the changing needs of society about the oral and dental health care and the need for professional continuing education have showed up more crucially than in the past decades.

Need for qualified human resources, reflections of fast-growing technology in dentistry, strengthening the service-quality oriented approaches and the demanding form quite a large market for professional training

There are many training activities organized in the field of dentistry. Contribution of each training activities to profession and colleague is not the same. The main principles of professional continuing education, application methods, and success criteria have been an

important issue for many years studied by many professional institutions and universities around the world; they are generally accepted and their success has been determined.

The first information that is required to evaluate the success of any training given in any area is the educational gains that have been identified in various sizes. When it comes to professional continuing education, educational achievements have been revealed as the development of the capabilities that a dentist should have after the bachelor's degree.

For that purpose; in order to form a basis for the evaluation of continuing professional education programs by our Association, the structuring of the organization which includes the procedures for determination of Professional Qualifications and Standards is ongoing.

It has been requested contribution and co-operation from Ministry of Health for the implementation of the organization.

• Dental Faculties

In Turkey, by the year 2013, there are 54 Dental Faculties. Currently, there is education in 37 of these faculties.

In the last 5 years, while the population of our country increased 6,87 %, the number of dental students increased 95%.

Due to the continuation of the opening of the new Dental Faculties without proper workforce planning, lack of the geographical distribution of the workforce and poor dental visits, our colleagues continue to face a serious unemployment problem.

- Some Other Information

• Solidarity Fund

In 2013, we have helped to our 15 dentists and their families from the Fund of Solidarity which aims to assist the dentists and their families who have great difficulty to practice their professions by reason of natural disasters or serious illnesses.

Turkish Dental Association subsidized to the Philippine Dental Association \$10,000,000 (Ten Thousand US Dollars) because of the Typhoon Haiyan (Cyclone Yolanda).

The income of the Fund is composed of the fees that our members pay to their Chambers.

• Incapacity Insurance and Personal Accident Insurance

It is arranged by Turkish Dental Association the Incapacity Insurance and Personal Accident Insurance for the members whose names are notified by Chambers of TDA. Due to the Insurance, it is decided to pay approximately 7.500 USD for once only to the relatives of the dentists who has died or has been injured in an accident and unable to practice their profession. Also for the colleagues who has unable to practice their profession temporarily, Turkish Lira equivalent to 50 Euro is paid for a period not to exceed 200 days in a year.

III.Changes in Fees

- Medical Fee in Private Dentistry

Examination and Treatment Wage Tariff in private practice is determined and put into effect by Turkish Dental Association through the right of legislation according to the cost analysis based on scientific data.

IV. Further New Information

- FDI 101st Annual World Dental Congress

FDI 101st Annual World Dental Congress hosted by Turkish Dental Association was held in Istanbul between the dates of August 28th and 31th, 2013. 16,197 is the final number of visitors attending the 2013 FDI Annual World Dental Congress (AWDC) and Exhibition. That makes it the biggest FDI Congress for over one decade and that also makes it the largest medical congress ever held in Turkey.

"Istanbul Declaration" calling upon to recognize oral health as an essential component of global health has been signed by all the participant countries of FDI 2013 Istanbul AWDC and will continue the repute of the congress for years.

That such a declaration describing the conceptual and political changes in our profession has been signed in Istanbul contented us.

- International Congresses of the Turkish Dental Association

The 20th International Congress of Turkish Dental Association will be held between May 29th and 31st, 2014 in Ephesus Convention Center, Kuşadası, Aydın, a touristic paradise with its historic fabric. Congress preparations are being maintained at national and international level.

- Health Data Collection Insist of The Ministry Of Health Despite the Constitution

The Ministry of Health of the Republic of Turkey has taken a decision on its own in a manner contrary to the law and the Constitution and requested us to send our patients' data. However, under the leadership of our Association, other Health Professional Associations have objected to this decision. The reason that we insist not to send the data of our patients to the Ministry of Health is because there is not a separate law regarding data collection and protection which determines the power or the responsibilities. In spite of the punishment threat by the Ministry, our colleagues have not sent any data of their patients determinedly. There still continues the extremely inefficient regulations of the Ministry of Health.

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