

National Report

Country: Germany
Association: German Dental Association
(Bundeszahnärztekammer – BZÄK)
Venue: Prague (Czech Republic)
Year: 2012

I. Changes in the association and its organisation

None

II. Trends and developments

a. in professional politics

- **Dental care of people in need of care and of disabled people**

BZÄK and KZBV have developed together a reform draft with the title „Oral health despite handicap and old age“ (AuB-Konzept) with the objective to improve the oral health of people in need of care and of disabled people and thus to create the adequate necessary preconditions for a better dental care. On 01.01.2012 a law has passed (Versorgungsstrukturgesetz) which can be regarded as first step towards the implementation of the AuB-Konzept. A new item “fees for visiting immobile patients” has been included in the scale of fees of the Statutory Health Insurances. This first step however is by far not enough to improve basically the dental care situation of the concerned people.

- **Online programmes to evaluate dentists**

Online-evaluation programmes of doctors and dentists are of increasing importance. Presently many evaluation programmes of medical practitioners have been established which differ greatly with regard to their quality, many of them are not reliable and their misuse is quite possible. Before asking the question: “Where do I find a competent practitioner?” the question is asked: „Where do I find a reliable online portal?”. Therefore, BZÄK and KZBV have together with the medical associations prepared quality criteria which are meant to support and advise programme operators in designing and structuring their online programmes and also to assist the medical and dental practitioners and patients when looking for serious and reliable programmes.

b. in health and social politics

- **Patients’ rights**

Presently a legislation for patients’ rights is being prepared in Germany which shall unite in toto all the regulations for the patients’ protection and their rights. Amongst others the following topics shall be regulated: any treatment agreement must contain full information and documentation on the therapy planned, an extensive liability clause (no general reverse of the burden of proof) must be included and also an information on the procedure in case of treatment failures and furthermore also an information on the patients’ right and on the fostering of patients’ participation in the treatment measures must be given. Because of the complex responsibilities concerning patients’ information and instruction as well as documentation, the dental profession fears that the consequence will be a further increase of bureaucratic work in their dental surgeries.

- **Quality assurance**

The dental profession has the statutory obligation and responsibility to do an internal quality management of their practice and also an external interdisciplinary quality management. The implementation of these statutory responsibilities is regulated by guidelines of the Joint Federal Committee. Special dental guidelines for quality assessment and quality evaluation have now been prepared which will be adopted in a near future. According to them, sample surveys in dental surgeries will be carried out annually in order to control the documentation of the treatment for specific diagnosis and therapy measures.

c. in education politics

- **Dental licence regulation**

The new dental licence regulation will probably be adopted in a very near future. It is intended to update the dental curriculum, to adapt it in the first years more closely to the medical curriculum and to reduce the number of the intake of students at the clinical education courses. However, the new education system will not come into force before 2015 as prior to this date the universities will have relevant intake problems. In 2012/2013 two school-leaving age groups will start their academic education at the same time as the school education which ends in Germany with the so-called „Abitur“ has been shortened in Germany from totally 13 to 12 years.

- **Education for specialization**

A model guideline for specialization has been developed for specialists in orthodontics and oral surgery and will be adopted in a very near future. Further specialists' disciplines are presently not desired by the majority of the dental profession.

d. In the health insurance system

After years of deliberations, the new private dental scale of fees (GOZ) has been adopted in November 2011 and came into force on 01.01.2012. After 24 years, the out-dated scale of private fees had an incomplete catalogue of dental fees and therefore some new items have now been incorporated. A so-called „Öffnungsklausel“ (opening clause) has not been included so that the liberal choice of the practitioner has been maintained. This was one of the objectives the dental profession supported strongly and they succeeded in having it maintained against a strong opposition. Despite these success factors, the new (GOZ) is not orientated sufficiently towards the state of science of dentistry and ignores the cost development factor of the last years.

III. Further topical information

In June 2011, BZÄK adopted a memorandum focussing on the topic of the compatibility of family and profession for dentists. In dentistry as well as in the whole society a change in gender role can be observed. The memorandum describes the challenges which are the follow-up of such changes in the professional exercise. The paper is meant to be a stimulus for further activities in this respect at federal and regional level.

BBK/27.03.2012