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Introduction Points

• Webinar Session is recorded
• Session is for 60 minutes
• Questions at the end
• The Chat facility is off

Happy 80th Birthday BADN

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Dental Nursing…
An Historical Perspective…
The Story…
Aim, Objectives and Outcomes

**Aim:**
To provide an insight to the history of dental nursing set within the context of the evolution of dentistry.

**Objectives:**
- Set Dental Nursing into accurate historical context - tracing Dental Nursing back for at least the past 100 years.
- Summarise the sources of historical materials, written and oral, that regarding dental nurse profession.
- Establishing a clear view of the past, as a lens through which to view future Dental Nurse contributions within the dental team.

Linking to GDC Outcomes B and C
Background

Doctoral Research

Narratives established through story telling
Motivation

• Relevance of Story Telling
  • Narrative (bigger picture, the deeper meaning)
  • Achieved through story telling
    – Who tells the story
    – Who is audible (and mentioned)
    – What is telling (and of interest) is who or what is silence or missing?

• Relevance of understanding history
  • Unearthing and understanding the past
  • Provides a better understanding of the present
  • Enables better preparation for the future
Sources Of Information

- Where does the information come from...
  - News Papers
  - Journals (issues of perspective)
  - Hansard – Parliamentary Debate
  - Archive Records
  - Census
  - Pictures
  - Cartoons
  - Adverts...
  - Photographs
  - First hand accounts
  - Books
My Interest... Prompted By...

- **Interest in Dental Nurses** –
  - When were DN first ‘acknowledged’...
  - Dating back from when?

- **What are the key periods in relation to...**
  - The dental sector
  - Why
  - In whose interest??

- **Who is claiming what...**
  - Knowledge and ‘territory’
    - for their own...
    - and why..
    - and what does that say...

- **Context**
  - What was going on at that point in time
  - Key Events...
  - Bigger picture and the influence on the dental sector...
    - And how we know this

Best way to explain is to tell you a story – the story...
Assisting The Dentist
Dental Related Procedures

- Dentists were known as tooth drawers (extractors and adapters)
  - Pharmacists – plugging...
  - Blacksmiths... and
  - Barber Surgeons
    - Local licences by Bishops,
    - Company of Barber Surgeons

- 17th Century
  - The term ‘Dentist’ (French) was used to describe a tooth operator...
The rich did not wish to be seen having a tooth out, so the ‘tooth extractors’ carried out the first domically care and realized that there was more money to be made by treating the rich than the poor.
Pharmacy – save teeth...repeat business

Restoration rather than extraction an American concept
Anaesthetics in dentistry after 1850...

Chaperone for women patients
Also, in the 19th century ‘dental assistants’ were apprentices who became dental mechanics or pupils who trained to become dentists.
A realisation, that if a tooth was extracted it was lost for ever, it is better to fill them, so patients keep returning for treatment.

- No legal control of tooth operators existed
- ‘Scientific’ basis John Hunter’s 1771 text
- Private work through ‘word of mouth’ and reputation...
- Doctors lucrative sideline for their private patients
- But 1856 – Doctors set up the Odonatological Society
- 1878 Doctors with a sideline saw an opportunity...
2nd Boar War

1899-1902

Of nearly 70,000 men 6% were rejected for dental ailments.

69,553 men inspected and 4,400 rejected through loss or decay of many teeth...

- Diet and nutrition issues
- Poor physical state of the recruits
- Hence the rejection and returning of soldiers due to poor teeth and lack of dental fitness

Also concerns about the poor physical state of the workforce...
Education and Health


Education (Administrative Provisions) Act 1907

- Required local authorities to set up medical inspection units.

- Over the course of their schooling years, each child would be given a medical examination on no less than three occasions.

- Grant aided schools had to provide free, means tested, places. This was based on the previous years intake and saw an increase in the number of free places of 25% of higher.

- From 1912, medical treatment in schools would be free.

- Remember, that this was before the introduction of the National Health Service.

- However, it was not compulsory to provide medical treatment, so the provision was limited.
Bigger Picture.... Housing, Sanitation, Diet and Welfare Support and Reform

Public Health literature and records can help fill the gaps...but limited...

But also the believes of the day...

Issues of
- Dental Sepsis (William Hunter -1910)
- & Focal Sepsis (Frank Billings -1912)

https://en.wikipedia.org/wiki/Focal_infection_theory
Observing Gaps... Seeing Activity Overseas...

1909 Berlin

1917 - USA
Health Care

1911 National Insurance Act

(Wage earners only – about 70% of the population not covered)

1909 - Lloyd George Budget Speech

“putting ourselves in this field on a level with Germany; we should not emulate them only in armaments”

Insurance against illness and unemployment

Contribution:

- 4d workers
- 3d employer
- 2d government

10 Shillings for the first 13 weeks & then 5 Shillings for the next 13 weeks

• TB free
Story of Haig’s Tooth Ache Before Dental Service Introduced In Army

1915

WW1 - 28 July 1914 to 11 November 1918
Remember in the UK...prior to WW1...health was a local authority function
Other Key Event

- 8th March 1917 - Russian Revolution
- 1918 Representation of the People Act
- 1918 – Spanish Flu Pandemic
- 1926 – General Strike
- 1928 Representation of the People Act (equal suffrage)
Examples From Overseas...

New Zealand School Dental Nurse

Child Welfare...

- Local Education Authorities set up in 1902
- 1907...Responsibility for improving child health were passed down to the local authorities
- This was ‘taken’ to include treatment...
- Including teeth...
- County Medical Officer...who reported to County School Board
Woolwich School
Treatment Centre
(1914) 1917-48
So what is known about this group of women and how do they link to Dental Nurses....
No discussion and virtually unknown
And little information available
Curious...

- Found mention of Dental Nurses also known as Dental Dressers!

- Also some called Sidney Barwise cropped up...in the role of the Derbyshire County Medical Officer...

Search of local news paper archive...
Sidney Barwise

• Born 1861

• Educated – Birmingham In Sir Josiah Mason College

• Achieved 2nd Division MD In 1881

• Medical Officer Blackburn then County Medical Officer Derby (1891-1925)

• Published
  • Sanitation

• Schools
  George Widdows
Published

- But an incredible interest in all areas of public health, including teeth....
Made me more curious.....
Effect on Schools...

• Worked with George Widdows who was responsible for the design of about 80 schools in Derbyshire where he was Chief Architect

• Including Woodville Junior School which opened in 1912.
Serendipity

• Access to the Archive of the Lancet...

Searched
– Dental;
– Dental Nurse;
– Dental Dresser;
– Barwise

Guess what....
The Lancet...1924...the debate

James Kerr

Sidney Barwise

Sir George Newman

AJ Pitt

Grantley Smith

Robert Lindsay - BDA

And then nothing
Own research
- On-Line
- Physical archive retrieval

So let me share with you the what I found out... some of which you may or may not know...
Key Legislation Related To Dentistry

1878
Dentist Act

1921
Acland

1946
Teviot

1957
McNair
But Focused On The Derbyshire Dressers

Acland Committee

- 1917-1919
- to inquire into... “the extent and gravity of the evils of dental practice by persons not qualified under the Dentists Act [1878]

Report

- The Extent And Gravity Of The Evils Of Dental Practice By Persons Not Qualified Under The Dentists Act [1878]

Dental Act 1921

- Amendments to previous Act

Outcome

- Limitation of permitted duties outlined in a pamphlet
- Compulsory registration
- Established the Dental Board
Interest in Derbyshire...

The improvement is slow, and we do not think there can be any sudden great change. The home conditions have to be altered as the condition of the children's heads is merely a symptom of general laxity. Even if the state of the children's heads could be improved by a strenuous effort (and apparently it cannot), after all it would be merely treating a symptom. The cause lies far deeper. It is only by altering the whole atmosphere of the home that an improvement can be obtained. This alteration will only come gradually when the children now in the schools have homes of their own, or by the influence they exert on the homes in which they are brought up.

At the present time, however, they are taught very little in the way of personal hygiene, and the keeping clean of their heads, clothes and bodies is one of the most important lessons which they should be taught in school. If as we hope the teaching of personal hygiene will be organised in this County, so that personal cleanliness becomes part of the feeling in every school, then, and not till then, will the present lamentable conditions be remedied.

TEETH.

The medical inspection of school children has revealed many depressing facts. Perhaps amongst the most important is the peculiarity universal prevalence of dental caries, for it may be taken as a general statement that almost every child possesses at least four bad teeth, whilst those who have a whole set are few and far between.
Acland Committee leading to Dentist Act 1921

Acland Committee (1917-1919) to inquire into... “the extent and gravity of the evils of dental practice by persons not qualified under the Dentists Act [1878]”
10th June 1920

British Dental Association.

10th June 1920

Derbyshire Dental Dressers:
1917 Training sponsored by Charles Markham £250
Shropshire
Sheffield
Derby
York
Hull
Nottinghamshire
Birmingham
Ely
• Qualified Nurse to train as a dental dresser.

• £120 a year

• Issues regarding women drivers!
17th August 1922

All communications should be addressed to:

The Secretary,
Medical Department,
Board of Education,
5-6, Clement’s Inn,
Strand, W.C.2.

BOARD OF EDUCATION.

SCHOOL MEDICAL SERVICE.

Performance of Minor Dental work by persons who are not registered Dentists.

Local Education Authorities will find in the Appendix to this Circular the conditions which have been approved by the Minister of Health under Section 1 (3) (c) of the Dentists Act, 1921, for the performance, in connection with the School Medical Service, of minor dental work, under the personal supervision of a registered dentist, by a person who is not a registered dentist.

A few Local Education Authorities have, under conditions approved by the Board of Education, already tried the experiment of employing the services of dental nurses or dental dressers to undertake minor dental work. If such Authorities desire, after the receipt of this Circular, to continue to employ any persons for the dental treatment of school children, an intimation to that effect should be sent to the Board of Education, together with an assurance that the work will in future be conducted in strict compliance with the conditions set out in the Appendix.

In the case of other Authorities desirous of employing on minor dental work under these conditions any person who is not a registered dentist, full particulars of the proposal should be submitted (on a Form in the Appendix) for the approval of the Board under Section 13 (1) (a) of the Education (Administrative Provisions) Act, 1907, before any appointment is made.

A. H. Wood
Barwise reported having been working ‘experimentally’ for 5 years.
16th Dec 1922

- No possibility of a continuance but a 2 year transition...

Then

- It was possible to trace the extent of the determination to eliminate the Dental Dressers...

- Starting with Mr Dolamore’s visit and report...
Mr Dolamore’s Visit and Report
15th February 1923 pp.1&2

To the Chairman of the Education Committee.

Sir,

In accordance with your instructions I have examined Mr Dolanore's report to the Health Department and have found that the Dental Clinic at the time of Mr Dolanore's inspection had been specially arranged for his inspection. He pointed out to Mr Dolanore that the Clinic had been specially arranged for him to test the accuracy of the registration of the Dental Dressers with probe and mirror, and to test their competency in drilling and filling, so that the criticisms based on this aspect of the work do not apply to our routine procedures.

Mr Dolanore refers to the theoretical training of the Dental Dressers and states that there is an error in the way the report has been written. The Dressers are not allowed to use the electric engine until they have proved themselves to be thoroughly efficient in the handling of the foot engine, and has any Dresser been allowed to drill until she has been passed by the Dental Officer in working on teeth in the mouth. I submit that the theoretical training has been personal, but had been arranged for the syllabus of training to be approved. I drew up a syllabus two years ago and sent it to the Chief Medical Officer of the Board of Education to send it on to Mr Harman Bennett, and since then I have heard nothing. Had the course been approved I would have seen that it had been systematically carried out and attendances counted. Mr Dolanore did not interview the County Pathologist to ascertain the effect of her teaching.

Whatever the training has been, the test is the efficiency of the Dresser, which I understand was the object of Mr Dolanore's visit.

In paragraph 5 of Mr Dolanore's report, he says that inspecting the children in the schools by the Dresser fails to direct attention to minor degrees of caries, but he produces no evidence that any of the dental Dressers failed to detect caries in any of the schools that they examined at his inspection. The children were there for him to examine, but he did not find a single dental dresser who overlooked any caries whatever. Only in the case of one dental dresser did...
5th April 1923

...Intention to apply for a continuance of their present arrangement...
The draft was duly amended and dispatched with the date of 9\textsuperscript{th} April 1923
20th Aug 1923

Dear Lord Vernon,

I trust that you, too, have been as pressed as we of the Board of Education have been. The need to secure the training of dental dressers in the last few months has been acute and it has been met. This, as you know, has caused a considerable amount of discussion as to what should be the standards and qualifications required for dental dressers. There are, in fact, two main points of view: those who believe that dental dressers should be trained as dentists and those who are content to have them as technicians.

In our opinion, the present system of dental dressers' training is inadequate. The training should be more comprehensive and should include practical work. A person under the Board of Dental Education's regulations is required to pass certain examinations before being admitted as a dental dresser. In our view, this is insufficient. We believe that dental dressers should be trained in accordance with the standards set by the Dental Board of Education.

The training of dental dressers is an important part of the practice of dentistry. We believe that dental dressers should be trained to a high standard to ensure that they are able to perform their duties effectively.

Yours sincerely,

(signed) [Name]

[Address]
HEALTH NOTES.

The following notes are issued at the suggestion of the Derbyshire Insurance Committee in the hope that gradually the standard of health of the population will be built up.

Although children do not come under the Insurance Act, the healthier the child, the healthier the insured person of the future. For this reason the Insurance Committee desires to co-operate with the Health Authorities in maintaining and improving the health of the children.

Sickness begins in childhood and is the result of unhealthy habits.

SLEEP.

Children require more sleep than is supposed. From five to eleven at least 10 hours of sleep are wanted. For childhood sleep is growth, as well as rest, but to be of value it must be taken in a room with the window wide open. Night air will do no harm; it is often purer than the air during the day time.

TEETH.

Good teeth are necessary for good health. Decayed teeth are the starting point of much serious disease—such as indigestion, anemia (bloodlessness), enlarged glands of the neck and tuberculosis. At two years of age a child has a complete set of teeth and should not be fed on soft, pappy food but on solid foods. The child should not drink during a meal so that it must chew the solid food and make the teeth hard and the jaws broad.

Hard foods scratch the teeth and help to preserve them. Soft pappy foods cling to the teeth, turn sour, and cause decay.

Foods which cleanse and preserve the teeth—Baked bread, dry toast, crusts, uncooked fruits that require biting, radishes, celery. Every meal should be ended by eating a hard food.

DO NOT TAKE LIQUIDS WITH A MEAL. DRINK AFTERWARDS.

Use a tooth brush with powdered chalk before going to bed.

HANKERCHIEFS.

Every child should have a pocket handkerchief, and be taught to use it when needed. "Wiping" the nose is not sufficient—the child should "wheeze it" thoroughly, one nostril at a time.
11th July 1924

Sir,

I am instructed by the Maternity and Child Welfare Committee of the Yorkshire County Council to apply to the Minister of Health for his approval of a Public Dental Service for children below school age, under which they are to receive dental treatment under the personal supervision of a registered dentist.

The County Medical Officers report that a large number of children are already suffering from teeth in a condition such as would be improved by appropriate dental treatment before they reach school age.

The administrative area of the County has a population of 600,000 and there are in the area only 11 dentists qualified by examination apart from those who were on the register in 1894. There are, however, three trained dental nurses who, at the present time, are under the personal supervision of the dental service. By means of this arrangement, the number employed are to be increased to four, thereby ensuring that the children under school age are not neglected.

The work that the dentists and these dental nurses shall be allowed to do is:

(a) Examination of the teeth with probe and mirror.
(b) Extraction and treatment of temporary teeth.
(c) The treatment of caries in permanent teeth.

As to the competency of these dental nurses, Mrs. E. Upton, Miss H. Dolan, and Miss E. Offutt, for this duty, I should inform you that after twelve months during which they have been employed on this work under the supervision of registered dentists, for the last three years, the competency of this staff, the Committee have had the very highest opinion of their work.

Yours faithfully,

[Signature]

Ministry of Health, N.W.I.
Legal Opinion of Kings Council
1920’s

- Coal reserves had been depleted during the War and Britain was now importing more coal than it was mining.

- All this and the lack of investment in the new mass-production techniques in industry led to a period of depression, deflation and decline in the UK’s economy.

- Poverty amongst the unemployed contrasted strikingly with the affluence of the middle and upper classes.

- By the mid 1920s unemployment had risen to over 2 million. Particularly affected areas were the north of England and Wales, where unemployment reached 70% in some places.

- The re-introduction of the Gold Standard by Winston Churchill in 1925 kept interest rates high and meant UK exports were expensive.

- These factors lead in turn to the General Strike of 1926 and, following the US Wall Street crash of 1929, the beginning of the Great Depression of the 1930s.
Plugged Into Networks
Then the very public dialogue in the Lancet...1924...the debate ...

- James Kerr
- Sidney Barwise
- Sir George Newman
- Robert Lindsay - BDA
- AJ Pitt
- Grantley Smith

And then nothing
It was difficult to find a working-class person with good natural teeth.

Even children’s teeth had a bluish tinge.

Anyone over thirty with their own set of teeth was an abnormality.
So… where did it all go wrong???
Sidney Barwise – death 24/5th January 1925
Key Points

Throughout history those conducting dentistry have been assisted.

Dental nursing has been a recognised occupation since the end of the 1800.

The dental nurses have contributed to wider public health initiatives since the early 1900’s.

There is a substantial historical archive documentation charting the challenges experienced in establishing dental nursing in the early years.

Sound education and training have underpinned dental nurse practice for over 100 years.
Publication

To ensure that history of dental nursing and the events that precipitating the formation of the BADN, 80 years ago are accessible to all...

Thank you.

D.Reed@Kent.ac.uk
Reference and Further Reading

The Truth about Teeth Your Teeth Part 1 BBC Full Documentary 2015
https://www.youtube.com/watch?v=7NZGQZXaKRc

The Truth about Teeth Your Teeth Part 2 BBC Full Documentary 2015
https://www.youtube.com/watch?v=HPcs4O_gi2g

BBC Drills - Dentures and Dentistry An Oral History
https://www.youtube.com/watch?v=WPgLZtgClWY

The Hidden History of Dentistry
https://www.youtube.com/watch?v=stDps85lZM0

In addition to the documents and sources already mentioned, the following informed the material delivered today...

  https://repository.royalholloway.ac.uk/file/dba85db6-3e09-48f5-9721-804021cee27c/1/10098404.pdf


- The Lancet – On-Line Archive Accessed September 2018


• That concludes the Webinar

• Thank you for your time

• Stay in touch D.Reed@Kent.ac.uk