

DON'T HOLD YOUR BREATH
Roger Matthews

These were the words which stayed with me on leaving a meeting this morning at which both Jimmy Steele and Barry Cockcroft spoke about the recently published *Review of NHS dentistry*.

By coincidence on the train, I read an article by the Astronomer Royal. Forty years after men landed on the moon, he mused about why the promised future of the 1960S - manned space stations, a lunar encampment, men on Mars and so forth – never came to pass.

He commented: “This is an example of the ever-widening chasm between what can be done, technically, and what there is a motive for doing”.

Like most people, I found the Steele Review well-written and full of commendable ideas and principles. However, as Jimmy himself has said, writing the Review was the easy bit. Finding the motivation for change – ah, there’s the rub.

Today we heard, again, how the Government had accepted the report (subject to resource), but that although there was a huge demand from volunteer PCTs and dentists to be part of the piloting process for reform, there was to be a short hiatus whilst quality indicators were developed.

I’m not sure exactly how long a hiatus lasts. Does it eventually become an interval?

Patient registration, I also learned, is “a bit of a red herring” (quote) and what was really meant was a commitment, by both dentists and patients, to the concept of a continuing relationship.

And it was pretty clear that whilst Jimmy thought that IT, and the extension of broadband access to every chairside, was a pressing area for central finance, this feeling was not, well, universally shared on the platform.

It does appear that Mike Warburton's New (as in New, New) Contract format is almost ready to hit the printing presses, encouraging new procurement and access for all, and that some of the Review's recommendations are to be piloted within the framework of Dr Warburton's Dental Access Programme team

However, as the BDA pointed out, genuine pilots could (like share prices) lead to financial losses as well as systemic gains, and this may mute the enthusiasm of some pilot volunteers.

It did strike me that a lot of the topics covered in the Review (and some of those not covered, but explored in today's question and answer session), were, in Prof Steele's words, either "difficult" or "complex" (and occasionally both). These included thorny topics like the availability of advanced and complex care, professional skill-mix, quality indicators and three year guarantees for restorations.

A good case was made by the platform for the – undeniable - principles behind all of these issues, but principles are not the sort of metrics that the Treasury or Health Department can get their teeth into (pun intended) or rely on in times of financial restraint.

So, I'm not holding my breath. The Chief Dental Officer said that the 2003 Health and Social Care Act was the Government's response to Bloomfield, and that 10 years (or so) was not a bad timetable for such change. I'll drink to that.

Notes to Editors:

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