

HURLING INTO ANOTHER BLACK HOLE? **Roger Matthews**

It was in September 2004 that I first unveiled my “black hole” theory. At the time, the profession had just had sight of the “Framework agreement” which for the first time gave some hints about what the new NHS dental contract in England and Wales might contain.

I warned then that the trouble with black holes of the astronomical variety was that by the time you had got to the point where you could make out their structure (the “event horizon”) you had also passed the point of no return and were inexorably drawn into centre by the increasing forces of gravity.

At the time, I’m sure, many dismissed this notion – that by the time we knew exactly what the new contract looked like, it would be impossible to pull out. However, unlike the cosmic phenomenon it would appear that the dental variety continues to mystify by constantly changing its nature.

To begin with there was PDS. Then came GDS (which, if you were PDS you could revert to, but the money didn’t make it worthwhile, since the average PDS contract was worth 15% more, as decreed by the Health Department). And now we have PDS Plus.

Plus what you may ask? Well, plus lots of additional constraints and requirements, lots of Key Performance Indicators, time limited contracts and control of just about every aspect of the practice’s functions. But then again, calling it PDS Minus wouldn’t have the same marketing appeal, would it?

There now come suggestions – as I have referred to before – that if PDS Plus works well (and there seem to be lots of dentists keen to investigate this new black hole), it can be regarded as a sort of pilot for the next development, which could be simply converting all existing contracts to the new format. Indeed I hear that some PCTs are already considering this possibility.

PDS Plus dentists are even less likely to revert to GDS contracts because only half the value is paid in UDAs (so an equivalent GDS contract would be worth only half as much) and, er, because at that stage there may not be a GDS to revert to.

However, as always, there are those whose glass is so half full, it regularly runneth over, and who are certain that the commitments given by all parties will mean that dentistry will continue to be generously funded by the government.

Unfortunately, as the head of the Audit Commission recently remarked, to refrain from making post-electoral cuts (sorry, efficiencies) in those sectors which had recently enjoyed the greatest uplifts in funding (he meant the Health Service) would be “insane” – and I’m quoting.

So the black holes continue to whirl around us, and the pressures from managers, regulators and politicians continue to drag us in. If you’re reading this on a Monday morning, now might be a good time to consider Plan B.

[485 words]

Notes to Editors:

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