

## **WORLIDAYS**

### **Roger Matthews**

According to the *Financial Times*<sup>i</sup> many people are now taking ‘worldays’ – a sort of work and leisure combination, where you check your BlackBerry while sitting on the beach, or do a bit of web-based CPD at the poolside.

Admittedly, the idea has some sense behind it, despite your initial revulsion. When in clinical practice – and I have to say that was before e-mails and webinars were in existence – there was always a mad rush to get everything done before I went away. Mrs Brown’s bridgework to fit, Mr Jones’s endo to check, staff rotas done and the PAYE sorted out...you know the sort of thing.

The result was – and may still be for you – that one departed with a head full of clinical and administrative concerns and it took a full week before you actually relaxed. I had a colleague once who was known regularly to board a flight back after about three days, such was his mental pre-occupation, leaving the family in the sunshine.

Now I’m no longer chairside, it’s the returning from leave that’s a nightmare. There will be x-hundred e-mails to read (my efficient PA will have deleted all the ones that actually don’t need an answer) and so it’s the week I come back that leaves me mentally frazzled. Ready for a worlday, in fact.

So a quick peek at the BlackBerry now and again or a furtive log-on when no-one’s looking all seems fair to me. The human body is probably in any event not equipped to deal with the sudden change from work-time activity to holiday torpor.

So as August opens and the diary looks a little less full, I wonder what the political world will look like when ministers and civil servants return from their break? It has been said, in the context of the Greek economic meltdown, that they have bequeathed two words to just about every language in the world: *chaos* and *catastrophe*. Given that the first two days at Westminster open with a full report stage and third reading of the Health and Social Care Bill, that maybe rings true.

Dentistry, meanwhile will probably continue to languish in the backwaters as the furore over the Bill itself continues. Some, if not all, of the pilots due to start last April will have commenced, and a chosen few of our colleagues will be mulling over the intricacies of the new PCDDA (do keep up: Primary Dental Care Patient Assessment), risk assessment and Use of English (mandatory field for each patient).

I can't help thinking that in creating GP Consortia (sorry, Clinical Commissioning Groups), the government has carefully placed GPs in the position formerly reserved for faceless PCT managers, when it comes to declining care or at least selecting the most cost-efficient.

For GDPs, the introduction of Care Pathways and software based algorithms, means that at least the dentist will be able to remark 'Computer says no' with absolute authority. And to think we used to laugh at Little Britain!

Above and beyond the individual practice comes the suggestion that we'll have a new tier of management to contend with. Having reduced 152 Primary Care Trusts to 52 PCT clusters, there is now the prospect of having 20-30 Local Professional Networks to ensure that the NHS Commissioning Board is responsive to local (well, regional) need and demand.

Staffed by lead clinicians and managers, these bodies will interact with Local Health and Wellbeing Boards, Clinical Commissioning Groups and of course the NHSCB itself. What could be simpler?

It's difficult now to see where the White Paper (*Equity and Excellence*) got its figures from in July 2010, when it claimed that 45% of NHS management costs would be saved by introducing consortia and the NHSCB. Having been knocked from pillar to post by everyone from the professions, Select Committees, politicians, to managers, unions and patient groups, the Bill may be a sorry rump of proposals to greet returning MPs.

Backwater or not, dentistry will have to limp along with a brave new raft of centralised proposals, and policy decisions which are still being made – and which may be subject to further review as the big NHS questions are sorted out.

Coming at a time when Welsh dentists have joined English ones with a 0.5% contract increase, pensions costs are going up by 3% next April (and pensions payouts will be calculated against the – lower – CPI instead of RPI), oh, and Seniority Pay has been abolished, none of this is good news.

I think I need a few more worldidays – and I hope you enjoyed yours!

-ends-

[767 words]

**Notes to Editors:**

**Roger Matthews MA BDS DGDP (UK) FDSRCS(Edin) - Chief Dental Officer**

Roger joined Denplan in 1995 having spent 20 years working in general dental practice and as a dento-legal advisor for the Medical Defence Union. He oversees dental advice to the company and its links with professional bodies, and is responsible for Denplan's professional services.

---

<sup>i</sup> Financial Times, Monday 1<sup>st</sup> August 2011