

Pilots, contracts and deckchairs

Practice Plan's Nigel Jones discusses the current state of play in dentistry.

So invitations to take part in the Steele pilots have been sent out, with expressions of interest in the pioneer wave already in, and those for the autumn "whole system" wave required by March 19th. At one level, given the generally warm welcome Prof Steele's recommendations received, this can be seen as a positive development. At another, the fundamental question about how to fund this vision of the future seems more pertinent now than ever, given the main objective for any Government initiative currently, must be to save money.



At least the Warburton contracts could be interpreted as making some kind of sense in this world of deficits and budget cuts as they arm the PCTs with numerous ways to clawback cash from dentists. The mistake with the GPs of underestimating performance against the KPIs is not going to be repeated.

Also, the demands on management time involved in maximising achievement against the Warburton KPIs, when combined with the increasing challenge of meeting regulatory requirements, is consistent with an agenda to address inefficiencies in the NHS dentistry delivery model, by constructively dismissing smaller practices from the NHS.

However, it's hard to escape the feeling that all of this is an exercise in deckchair rearrangement. Take the debate about how best to fund a National Care Service. Despite the Tories refusing to take part in a cross party conference, all are agreed on the seriousness of the need to address the financing of social care in the light of our ageing population. And no wonder. A recent audit commission report has estimated that the bill for caring for older people could double by 2026, an increase of £9bn, or to put it another way, more than 3 NHS dentistry budgets.

As many people believe that the arithmetical skills of investment bankers extend only to the calculation of their bonuses, I hesitate to reinforce the point with some maths done by a specialist bank called Investec. However, looking forward over the next few decades and using some safe assumptions about growth in demand for health services and in the economy, Investec estimated that by 2050, we could be spending 37% of GDP on health. And that piece of work was carried out before the recession and current economic underperformance.

Given the state of the country's finances, time has run out for Governments of any persuasion to spin their way out of these fundamental issues. Some honesty about priorities is required such as has been witnessed in Ireland where the Irish Government has just reduced state subsidy of dentistry by 80% as part of its measures to tackle its deficit.

Of course, it would be ridiculously naïve to expect anything dramatic to be announced this close to polling day, even with the precedent of 1992. However, surely even the most idealistic of NHS dentists should now be plotting a route to join their colleagues in the private sector whether the prompt is the implementation of increasingly unpalatable contracts or something much more fundamental.