Whose practice is it anyway?

Quentin Skinner discusses the issue of control - control of your practice and the organisations with a potential interest in your business...

How funny life is, in that sometimes certain of its fundamental tenets change over a relatively short period of time without any one noticing. Consider how the mindset of the dental profession has changed over the last tow decades....

Then... Back in the early 90's, when BUPA DentalCover was launched in an effort to compete with Denplan Care, both brand-ed schemes felt the need to introduce 'quality' measures as part of the procedures necessary to help protect the national deliver-y of the brand promise. From a businessman's point of view, this was a perfectly sensible proposition, as it would help to reduce the risk of many customers operating under the same banner getting tarred with the brush created by the actions (or inaction) of a smaller number of miscreant customers.

However, at the time, the profession took a very different view. I remember well from my time at Denplan, whenever we raised the subject of "quality" at semi-nars, dentists would invariably round on us, saying that clinical quality was a matter for the profession and its representative bodies, and certainly not a mat-ter for third party commercial ventures to get involved with.

It was also in the early 1990's that the BDA started waving the red flag to its members, warning of the dangers of third party control if they got involved with the 'dental plan administra-tors'. The basis for the BDA's argument was almost entirely framed around the situation in America - this was quite differ-ent to the UK, with an oversupply of dentists and funding levels controlled by the combination of employers who were in con-tract directly with the dental plan administrators/insurers for the provision of employee dental benefits. Granted, a few aspects of the BDA's warnings could indeed have been relevant to the nationally-branded dental schemes, but they just did not apply to the operation of dentists' own practice-branded plans.

Now.... I believe that the passage of time has shown that dentists who offer their own private dental plans, practice-branded and using ad-ministrative sub-contractors - a much cheaper and less stressful alternative than trying to do it themselves - have had no reason to claim any third party interfer-ence whatsoever. Furthermore, many of those who subscribe to a nationally-branded scheme have largely come to accept a degree of quality inspection by the plan administrator as a necessity, even if some might resent other moves to hijack patient loyalty away from the dentist to the conSUMER brand.

However, what makes me wonder about life is the degree to which dentists may be prepared to accept third party interference in their practising framework whilst offering NHS dentistry. The new Personal Dental Serv-ices Plus template agreement is full of it. The degree of informa-tion and data that is required to be submitted to PCTs in order that dentistry can be micro-managed by non-dental PCT staff is quite breath taking.

This is most important, even for those dentists who feel that things might just carry on as they are under their existing nGDS contract. Any of the extra funds for dentistry promised by the Government will only be released in conjunction with this new contract. PCT staff are currently being trained up to be able to crack the control-ling whip much more effectively in order to try to squeeze a better outcome (access) out of a tight-er and tighter budget, and no change of Government will alter this. In this new Decade of Aus-terity, any change of ownership, any under-delivery, any need for contract variation - any chance to move more NHS funding into this web of control will be seized upon, because otherwise the PCT staff will not be doing their jobs...

And, of course, merely by submitting notice but without giving any reason, PCT staff will be at liberty to enter the practice premises and thor-oughly check up on all aspects of the business. Acceptance of this situation is a far cry from those feelings not 20 years ago that quality is a matter of the profession and the profession alone.

4th, 5th, 6th party control... Oh, and interference and con-trol by PCT staff is not all, not by a long way. In addition, the PDS Plus template contract al- lows for entry and inspection of the practice premises by:

- NICE: an organisation appar-ently directed to help manage and control the costs of NHS care, and one that is not even represented by a dentist.

- The Care Quality Commission: which, whilst retaining a promi-nent dentist as its advisor, repres-ents yet another swathe of bu-reaucratic regulation, the need for which would be hugely ques-tionable if the GDC was properly empowered to do what it was al-ways previously responsible for doing in the past.

• Local Involvement Network Representatives: doubtless, someone will come up with a more positive explanation of the need for LINks, but to me this conjures up an unsightly visit by the People's Party Representa-tive in Stalin's Russia, who cer-tainly will not have the well-be-ing of the dentist in mind...

Whose practice is it, anyway? So, there will always be those in life who will succumb to control by others, even when this points towards an ongoing squeeze on their personal circumstances. However, many others sooner or later find that such oppre-sive restrictions on the freedom to act as they have been brought up or trained to do force them to look for a newer, independent way forward.

I would therefore encourage dentists who wish to operate in a working environment as free from third party control as possi-ble to sit up and do some careful analysis of the alternative fund-ing structures for the delivery of their dentistry, and choose the route that best ensures that they remain in control of their own practice.