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 two decades...

Then... Back in the early '90s, 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 delivery 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 seminars, the instinct of the profession was represented by a dentist as its advisor, representing the dental profession and its representatives where the administration was sub-contracted to back-office administrative agents. Anyway, suffice it to say that the natural self-regulatory instincts of the profession were to an extent encouraged by the third party control warnings, and life proceeded accordingly.

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 controlling whip much more effectively in order to try to squeeze a better outcome (access) out of a tighter and tighter budget, and no change of Government will alter this. In the new Decade of austerity, 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 thoroughly 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 control by PCT staff is not all, not by a long way. In addition, the PDS Plus template contract allows for entry and inspection of the practice premises by:

- NICE: an organisation apparently 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 prominent dentist as its advisor, represents yet another swathes of bureaucratic regulation, the need for which would be hugely questionable if the GDC was properly empowered to do what it was always 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 LINs, but to me this conjures up an unsmiling visit by the People's Party Representative in Stalin's Russia, who certainly will not have the well-being 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 oppressive restrictions on the freedom to act as they have been brought up 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 possible to sit up and do some careful analysis of the alternative funding structures for the delivery of their dentistry, and choose the route that best ensures that they remain in control of their own practice.

About the author

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