Children with oral health problems will have to live with those problems for the rest of their lives. The second part of your question was, have they cocked something else up that is similar; yes, there are other areas of health where they did. The first ISTC programmes that came out in phase one were a fundamental disaster. Contracts were being paid 100% on 40% of activity and had no training facilities.

MP: I think you’ve touched on one of the fundamental flaws within the system. We know that the ‘swings and roundabouts’ approach is unfair for patients.

NK: For most simple treats- ments, prices have rocketed under this new contract. Do you feel that the ‘swings and roundabouts’ approach is unfair for patients?

MP: The package isn’t helpful in the way that you’ve just described. The government I think knew this anyhow. Dentists should be treated fairly and the contract should remunerate you fairly. What really worries me at the moment is that as some of the contracts have been issued we have people coming in from outside the United Kingdom, quite legally under the European Union employment laws, but are being paid a pittance to provide the services. That’s not fair in the 21st Century and that shouldn’t happen.

But I think if we move the contract back to what the NHS was designed to do, which was to be the welfare state, to look after the oral hygiene, of the people in this country for those that do not wish to have or cannot afford private dentistry. That’s where we need to be.

NK: Yes, but the key link that I want to draw here is if a patient requires 10 fillings, should they be paying the same as if they require 1 filling?

MP: No, of course not.

NK: And should a dentist be remunerated the same as if he was doing 1 filling?

MP: Well what we need to look at is having a payment plan which doesn’t put us in the position where we are now; a payment plan which isn’t a deterrent to the patient, isn’t a deter- rent to the NHS dentist and also isn’t a deterrent to the taxpayer, who quite rightly will say ‘is this value for money?’ If you look at the last audit commission report, the previous Health Select Committee report into dentistry and this one, all of them slammed the government over the way they were handling den- tistry. They actually turned around and said that personal dental contracts were funda- mentally good things. Why the government didn’t put personal dental contracts in around a reg- istration system, I’ve no idea. That’s something they’ll have to explain for themselves. All I know is that every time I try and debate with them, when I go and speak to the BDA at their confer- ence, no minister turns up. At the London Dental Council, no