The Steele behind the Steele Review

Interview: Lisa Townshend speaks to Prof Steele

F or the last nine months, the name on the lips of anyone in-
terested in NHS dentistry has been Professor James Steele. Since the
announcement of the independent Review into NHS dentistry in
December 2008, Prof Steele has been at the forefront of the dental
agenda as the lead in the Review process.

Prof Steele graduated in den-
tistry from the University of
Dundee in 1985 and was awarded
his PhD in 1994. His research is
around oral health in populations
and oral health services research.
He has been awarded the Interna-
tional Association for Dental Re-
search Distinguished Scientists
Award for geriatric oral research.
He is also a clinician, working as a
consultant in Restorative Dentistry
for the Newcastle Hospitals NHS
Trusts. Formerly chair in Oral
Health Services Research at New-
castle University, he has recently
taken up his new post of head of
Newcastle Dental School.

Speaking with Prof Steele, he
looked back at the Review and
explained how he had become
involved: “I was contacted in
November of last year to ask if I
might be interested in the Review,
and I think there was a shortlist of
people at that time. I’m really not
sure how I ended up on that short-
lst to be honest. I like to think it was
a combination of things – I hadn’t
been involved in everything that
gone before, so I think that
made it a bit easier as I was coming
from a neutral position and I had no
‘baggage’ attached. I had made vari-
ous comments and observations over
the initial reform period, which
had been reasonably bal-
anced. In addition, I think an aca-
demic background helps when
producing documents, writing and
analysing etc – so I probably had the
right sort of skills. But as to how I
was selected is actually a mystery.”

He was keen to praise the sup-
port the University of Newcastle
had given him during the Review
process: “It’s not really something
you can turn down – it was a really
big task and a really difficult task. It
was a quite important thing to do in
a sense I was less concerned about
the dental school more concerned
to make sure that the university un-
derstood what it was I had been asked
to do and they were broadly sup-
portive.”

“Sometimes your natural mod-
estly takes over and you think ‘can I
really do this?’ and I looked at it and
thought ‘well yes I think I probably
can do this’. There are a lot of things
I can’t do but this was one I could.”

One of the first tasks for Prof
Steele was appointing the Review
team. “I had a lot of input into the
rest of the Review team. There were
some really difficult decisions to make
because this had to be done quite
quickly – this was my deci-
sion. There was a certain amount of
momentum coming off the back of
the Health Select Committee report
and I wanted to maintain that. I
wanted to keep the momentum; I
wanted to do it relatively quickly,
and I wanted to engage widely, but
I didn’t want a huge team with
dozens of people because we would
never have gotten the job done. I
was keen to keep the team quite
small and compact and have on
board people that I knew could
deliver.”

Deciding on a team of him and
three others who would assist him
then he had all the bases covered. The
Review team finally consisted of him-
self, Janet Clarke (clinical director, 
Salaried Dental Services, Birming-
ham), and deputy director, Provider
services, Heart of Birmingham
Teaching PCT, Eric Rooney (con-
sultant, Dental Public Health, Cum-
bria and Lancashire PCTs) and
Tim Wilson (director of Contract-
ing and Performance, NHS Tame-
side and Glossop).

He added: “One of the areas
where I had been a bit of an is-
sue was whether I should have a
practising dentist on the team, and
I had to give that a lot of thought.
Initially I was quite keen to do that,
but then the more I considered it
and thought through the implica-
tions, for the team and the individual
concerned, I thought that it was not
in the best interest of the Review,
largely because it would put im-
credible pressure on the one who
was doing it. And then the accusa-
tion would be that I had only gotten
one view, or whatever I had been.
The complexity of views about the way
forward that in order to do the process fairly
I was working with, I had about ten
or 20 practitioners on the team and
that would have made the whole
thing quite difficult. However, the en-
gagement events were focussed to-
towards practitioners and I think in
retrospect that they actually gave
us a much better opportunity for
people to have an input, which we
could then take control of and im-
plement in the writing of the Re-
view.”

Prof Steele has admitted that
he did have a couple of fixed ideas
about what was going to pan out –
and he says that he was proved
almost completely wrong. “I did
have a few preconceived ideas and
whenever I had they were all
wrong. Well not all wrong – I
knew I’d find quite a lot of anger
amongst the profession. Amongst
patients we weren’t really sure
what we would find to be honest,
and we weren’t really sure what
we would find in the commissioning
world and people’s responses. I did-
n’t find exactly what I expected
from the profession - I think there
was a fantastic willingness to en-
gage with the process, a real inter-
est in getting it right and a lot of den-
tists who were really interested in
doing good dentistry. That didn’t
surprise me but what perhaps did
was the real willingness to engage
with the process and to really want
to try to improve the system for
everybody – not just for dentists but
for patients and everybody else as
well. And that was good - because
if I had got to the end and finished
the job in a very satisfactory
way and then finished it back in December it
wouldn’t have been much of a Review!”

Discussing the biggest issues
which came out of the Review Prof
Steele did state that UDAs weren’t
the actual problem. “The UDA ends
up as a focus of all evil. But it’s not
the concept of being paid for a unit
of treatment, we always had that.
It’s just that in the past we had dif-
ferent sizes of units. The biggest is-
ssue is actually the variability of the
UDA and one that does concern me.
And the way it is grouped together
the banding across the system –
came up as a bit of a problem.”

“Clearly some dentists have
done much better than others and
some have benefitted because of
the reforms and others not. How-
ever, some of the cases that concern
me are the really honest guys who
are trying to do a thoroughly good
job and who it hasn’t really worked
for - because of the way the their UDAs
ended up or their patients or what-
tever it was and I have a lot of sym-
pathy there. So the UDA was one
thing, but actually there was much
more.”

“There was an awful lot about the
relationship between the den-
tists and the commissioners and
how good or bad that relationship
was. In some areas the relationship
was absolutely fantastic - there was
really good commissioning and it
was imaginative. However, we
heard a lot about that; naturally
people were very keen to tell us
how well it was working in their
area. This included dentists who
didn’t like the contract but who
thought that commissioners were
doing a really good job and who were
working with them. Equally,
there were lots of complaints about
the commissioning process. This
included that they [commissioners]
didn’t know what they were doing
and were junior so couldn’t ex-
cepted to get their head round den-
tistry because they had so many
other things to do at the same
time. And so dentists felt short-changed
by not getting the quality of com-
misisioning they felt they should de-
serve. And I think a lot of commis-
ioners felt the same way.”

Of course cynicism about the
Review was something Prof Steele
was expecting – and got! “I did come
across a lot of cynicism about what
we were doing and I still come
across it. And I think to some extent
that’s understandable. We have been
through a number of Reviews before
and nothing has come of it. But
I think we are in a different
place now we are running out of
chances to get it right; so I can un-
derstand the cynicism and we re-
ally have to get it right now.”

“The circumstances in which
we have to do this - we are in the
middle of a recession, there’s not
much money and there is a cut in
public spending, so it is not
understood that now is not the easiest
time to do it. In a sense though, if you understand that no-
body is getting to make a lot of money
then it makes it a bit easier – not to deliver but it does make it easier
to say ‘right this is the situation we are
in’. We are in a battle now to main-
tain our position to be appropriately
resourced. We have to use what we
have maybe a little better. From
the point of view of the profession it
must make sure that it does main-
tain what we’ve got because erod-
ing it further could cost dear. And I
think we can do a lot with the re-
source we have if we use it better
than we do.”

Prof Steele added: “The feed-
back we’ve had has been pretty pos-
itive, but it has involved a great deal
of cynicism that you might expect. I’ve
had the accusation that the Depart-
ment of Health was all over this,
that it was a DHI document - I
can assure you weren’t! It. What
I negotiated with DH at the begin-
ing was for total editorial control
of the Review and that was re-
jected. It’s the Reviewers’ Review
team and I stand by everything that’s in the document – nothing has
been altered.

“There have been a lot of ques-
tions about implementation I think
there is perhaps some frustration
that there isn’t more detail of imple-
mentation in the Review. I thought
it was more important to get the
principles clearly set out then the
principles clearly agreed by all par-
ties - then the details can be worked
on the back of that. In addition, our
terms of reference didn’t include implement-
ing, so they just had to make suggestions about how we
were going to do various things. For
these things to work they have to be
firm foundations; sensible, clin-
ic and theoretical foundations for
what might work and what might
not. Let’s Review the theoretically what patients want and what dentists can
deliver and it was done on that sort

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of basis. For that there will be all sorts of detail and the devil is in the detail - detail about set up about the contracts and how they operate and that’s fine detail that frankly I don’t want to be involved in! But it has to be done and there are people who will do that.

Discussing the recommendations the Review has made, Prof Steele detailed what he thought would be the hardest to implement. “The most difficult for DH is always going to be the thing that implies most resource, so I think the most difficult for them will be the IT; actually I think it could be one of the most important recommendations in the whole thing so that we get our data collection systems and IT properly set up. The one that I think has been most controversial amongst practitioners is the idea of warranties. The point I was trying to make is that this is a principle because it is something that patients say ‘well, why not?’ and we have to ask the question ‘if we can’t do that, then why can’t we do that?’ - there would have to be a very good answer to that. There are situations where you can’t guarantee it and there are many situations where we already do because there is a free replacement for some treatment within 12 months. That one will be the hardest to get agreement on, and the hardest to implement will be the one that costs money, so I think that will probably be the IT.

Looking to the future, Prof Steele was clearly excited about his recent appointment to head of Newcastle Dental School, a position that he took over at the beginning of August. “It’s been a revelation. The Review now seems years away, I feel like I finished it months and months ago when in reality I only finished six weeks ago. So much happened during the period of the Review and it was so intense that it really occupied every minute of my life just about for six months. Then it tailed down a little bit with the presentations and that’s all done now. So I’ve been trying to clear an awful lot of back, and the new role has already been really challenging!

“As head of the dental school I have to make the decisions about how we are run. I have to make big strategic decisions about research direction, our teaching ‘manifesto’ and our role in the NHS. There’s some quite big decisions I’ve got – I have to manage our budget properly which is quite substantial I’ve got dealings with the local trusts which we are part of. Many millions of pounds come into the system every year and I’ve got to try to make sure that is used fairly. I think we’ve got a fantastic school here and a fantastic workforce and I’ve got to make sure that we use everybody to the best of their ability. It’s a reasonably big school and it is obviously very expensive to train dentists so I have to think pretty carefully about how we do that.”

Training and retaining students and young dentists within the NHS is a matter that has been coming up more often as the issue of access is raised. Prof Steele acknowledged that dental schools have an important role to play in this and commented that it had been raised within the Review, “It’s come up in independent think tanks and one of the consumer associations raise their concerns about dentists being committed for a certain time. There is an issue as the taxpayer puts an awful lot in to training dentists and they quite rightly expect something back. I think that for the most part we do get something back which is good. But I’m very keen to ensure our students recognise that actually they are working for the NHS that they have a role within the NHS they do – a really important role in the NHS. They provide care within the NHS and in return they have an awful lot invested in their training.

“It’s interesting that the students pay fees now - £3000 a year - and I think there’s a misconception that the fees cover the training. It doesn’t come close and I’m not sure they get that. So I’m very keen to make sure they know that they have a huge responsibility to the NHS, that they have a real role to play. But it’s been a real challenge and I’ve enjoyed it so far.

Looking back on the last nine months, Prof Steele wanted to show his appreciation to the people who participated in the Review process. “I would like to put on record my thanks for the people who contributed out of their own time, and there were many people who emailed in (I tried to reply to all of them but sometimes I was unable to do so because of the volume), people who came along to the engagement events, people who telephoned me or stopped me at meetings or gave me stuff that was important and I didn’t have a chance to thank all of them so if they are reading Dental Tribune – Thanks! I tried to make sure that I read everything that I got and that it was a vast amount but I really did try to do that so I would like to thank the whole of the profession for that.”