Discussing dental nurses

In the third part of this four-part interview, Neel Kothari talks to Susie Sanderson about dental nurses

NK: I wanted to ask about dental nurses. Nurses are amongst the lowest paid of the dental team and they’ve suffered a huge rise in costs – registration fees, compliance with CPD and other rules and regulations. Have they seen good value for money and are these costs fair?

SS: This is one of those circular issues. We know from our research that a significant proportion of practices pay their dental nurses’ regulation costs, and by that I mean not just the GDC fees but also the CPD fees. Now that’s fine, but of course it just gets recycled into the expenses of the practice so the wages bill looks bigger or the education bill looks bigger, profession costs, and by that I mean the CPD fees. Now that’s not just the GDC fees but also the representation, but this is really an empirical issue.

Pay freeze

The Department of Health has been told by the Treasury and by the Secretary of State that there’s a pay freeze on public sector workers so dentistry gets an amount of money that dentists are doing more for the same money, and their expenses are not being fully met. In effect, a pay cut.

Step too far?

So you’re absolutely right, it’s potentially a real expense to the dental nurses ultimately. How do you then align this with the Government’s pay freeze?

NK: It seems that if you’re a full time nurse, that’s great, but it seems that there are large numbers of people who are concerned about the cost. For instance, I can pick out three nurses from my own experience who have come back from maternity and have said, ‘I can’t afford to go back into the profession?’

SS: Yes, and it isn’t just dental nurses either who struggle with it. Part time dentists still have to pay the full annual registration fee. They also pay a significant proportion of the full BDA membership at the moment. When we first started having on call rotas, it was a 1990 contract that brought out of hours responsibilities in, huge rows erupted about ‘well I only do one day a week, why should I do the same amount of on call cover on the rota as my friend who works seven days a week and works all night?’ It was a similar problem.

NK: I think has been really good for the profession, because it’s challenged the dentists’ perception of paternalism.

SS: And actually when you talk to dental nurses (perhaps not the youngsters, but certainly nurses who have been around for longer), they actually quite like the requirement to do CPD and they find it empowering.

Empowering

One of the knock-ons is that, when you look at the GDC now, the majority of the registrants with the GDC are dental nurses. So that has been hugely empowering, not just on a practice basis, but politically as well. You will also find many central committees, either advisory committees or committees that are influencing changes in dentistry, regulation, all sorts of other things, that don’t have the full spread of DCPs on it. So being regulated and being part of the GDC has immediately led to full representation of the dental team, and it’s not just token representation, but this is really active representation. Now, that

NK: And finally...