Did Channel 4 Dispatch the truth?

Dental Tribune looks at the latest programme to highlight NHS dentistry

So, The Truth About Your Dentist has been aired and been the topic of many a conversation between colleagues in the dental practice.

The Channel 4 Dispatches programme was broadcast last month and attracted a combined viewing of approximately 1.1m people between the original broadcast and +1. Despite the original misgivings of many within the profession, the programme was not the dentist bashing one-sided affair that was expected – in fact may dental professionals have said that it has helped to draw attention to some of the flaws of the Unit of Dental Activity (UDA) remuneration system.

Dental Tribune has spoken to some of the dentists who appeared on the programme, as well as receiving comment from dental professionals.

No sensationalist negativity

Dr Gareth McAleer, dental practitioner and contributor to the Dispatches programme, commented: “There were several dentists involved in the making of the programme. We wanted to make sure there was none of the sensationalist negativity often seen with other programmes; this is often because the profession doesn’t get involved in the making of programmes such as these and so there is often only one side presented.

“In my opinion there seems to have been a lot of research done in the beginning; first the filmmakers called a number of practices, and then chose practices to send mystery shoppers to. As the research progressed, it was obvious to the filmmakers that they were indeed on to something.”

Dr McAleer was full of praise for his dental colleagues who agreed to be part of the programme and give the profession a voice: “It was great that the dentists who came onto the programme didn’t hold back explaining the problems of the system – this gave the programme balance. There was a lot of negativity from certain members of the profession before the programme came out – they didn’t give it a chance.

Honesty and integrity

“The reason the dentists featured were chosen were because they came across with a depth of honesty and integrity, showing that not all dental professionals were like those who had been filmed in their practices. This was to let the public see that although there are some dentists who are not wholly ethical, there are plenty out there who are.”

Dr McAleer also gave his opinion about the current state of NHS dentistry: “I believe the government needs to listen to what dentists are telling them; we told them in 2006 that the system would fail, and if they don’t listen to dentists now, that needs to be a completely new system implemented for NHS dentistry to work, then it is a criminal waste of time and money piloting a system we already know will fail.

“The issues surrounding dentistry today are much too big to be covered in one programme – even the filmmakers acknowledged that – so don’t be surprised if there is a part II to this story!”

Also featured in The Truth About Your Dentist was Dr Tony Kilcoyne, Specialist in Prosthodontics based in Haworth, West Yorkshire and an elected dental member of the GDC Council. Speaking to Dental Tribune, Dr Kilcoyne said that all comments given at interview were his own personal opinion and done in isolation to other parts of the programme, so until it was broadcast he wasn’t sure if, or what, would be included in the final programme.

“Whilst the adverts for it focussed on the title, The Truth about Your Dentist several days beforehand, the expectation was that this would highlight dentists as being the worst culprit for the continuous problems that beset NHS dentistry in England. However whilst the programme raised concerns whether some dentists offered everything the NHS contract requires, an equally strong theme was the failings of the existing UDA system itself, which simply isn’t designed to deliver complex or time-consuming dental care, such as molar endodontics or prolonged periodontal gum treatments, let alone additional time for important areas such as prevention.”
**Terrible statistics**

Dr Kilcoyne continued: “I was really pleased the programme directors left in my comments about the terrible statistics which show the third commonest reason for children being in hospital, for any medical reason, is rotten teeth.”

“‘There is simply no credible National Dental Prevention Strategy in England, the Department of Health in England has over-seen the health of children’s teeth even in Newham. England is significantly behind in comparison to other European countries. If the Department of Health in England put together its first National Prevention Plan, focussing on children from birth.”

**Too much to ask?**

Dr Kilcoyne added: “Thus whilst the dental profession cannot avoid some public criticism for the sorry state of the NHS dentistry den - sists and the clumsy way some of the dentists recorded were ‘bending the rules’ but the dentist pronouncing on their conduct could have been more balanced and discussed the role of the NHS contract in encouraging such behaviour. ‘Feedback from colleagues is that [the programme] was unbalanced but not to the extent that they expected. Feedback on my contribution was generally favourable, in that it was considered professional, provided some balance and the argument was truthful and accurate. I have received no direct feedback on the programme from patients but I have contact, I also with requests for my help from patients experiencing dental problems! I understand that feedback from the dental environment, especially the contributions on dental treatment has been favourable and much discussed on Facebook (appar- ently) but they expressed concern that the programme provided an unbalanced view.”

Having watched the pro - gramme, dentist lan Gordon said: “It is often uncomfortable for a profession to be subjected to journalistic scrutiny. It takes real courage to be interviewed for a programme such as Dispatches, there is always the risk of being misrepresented and misrepresented.

Overall I feel the programme was balanced informative and re - vealed nothing more than what I would have expected. My only criticism of the dentists who were interviewed would be reserved for Anthony Hubler, the expert witness, who dismissed molar RCT as a simple procedure. This was unfair and disingenuous. Dentists can make RCT straight - forward with years of experience and with use of additional equip - ment, but it is always a proce - dure with uncertain outcomes even in the most expert of hands.

‘The programme was, of course, sensational and biased against dentists since this is what is thought to attract audiences’

Undercover element

“The programme was, of course, sensational and biased against dentists since this is what is thought to attract audiences. The undercover element was under - hand but is routinely used in investigational journalism. The den - tists recorded were ‘bending the rules’ but the dentist pronouncing on their conduct could have been more balanced and discussed the role of the NHS contract in en - couraging such behaviour: ‘Feedback from colleagues is that [the programme] was unbalanced but not to the extent that they expected. Feedback on my contribution was generally favourable, in that it was considered professional, provided some balance and the argument was truthful and accurate. I have received no direct feedback on the programme from patients but I have contact, I also with requests for my help from patients experiencing dental problems! I understand that feedback from the dental environment, especially the contributions on dental treatment has been favourable and much discussed on Facebook (appar - ently) but they expressed concern that the programme provided an unbalanced view.”

Professor of Primary Dental Care at King’s College London Dentistry Institute Professor Stephen Dunne, who was featured in the programme discussing the type of dental disease he was treating in the hospital environment, said: “I agreed (with much trepidation) to take part in the programme to try to inform the Dispatches team and to encourage a more bal - anced programme than I feared right up to the point when the Coalition criticised the contract, with good reason, for all its fail - ings. He listened but never acted on the criticism of the contract, indeed as PCTs evolved they have become less flexible and more difficult in their dealings with dental practitioners. In times of financial cutbacks they sup - ports proposals for pilots and we all welcome that change is on the horizon.

“However change is at least three years away, three years of the same contract, UDA and tar - get relaxation the next three years away, three years of the same contract, UDA and target relaxation.

Another dentist, Simon Thackeray, said: “I think it’s about time the gaming was dealt with. “This was unfair and disingenuous. Dentists can make RCT straight - forward with years of experience and with use of additional equip - ment, but it is always a proce - dure with uncertain outcomes even in the most expert of hands.”

“Of course there were issues but these were policed by data monitoring, we have a far greater problem with under treatment and lack of prevention than we ever had with over treat - ment before. As a profession we have to do something NOW.”

Change on horizon

“The CDO sometimes seemingly singlehandedly supported nGDS proposals for pilots and we all welcome that change is on the horizon.”

**Agressive stance**

“I feel that those who are providing for example scales privately rather than on the NHS should not have signed the new contract. You cannot have your cake and eat it, and I feel the PCTs should have taken a more aggressive stance in the past to stamp out this gaming, I hope now that this is stamped out, and the practices that are doing this realise that instead of hiding behind the lack of knowledge of the public, they become open and honest about who is funding the treatment and how.

He added: “I am also concerned that the concept of full lists is being used to stop patients accessing the serv - ice. There is no registration, no card, no card, no — just a full list. If a patient needs a dentist the contract obliges you to continue to work with the DH on the pilots they must not forget this is 02 practices out of 10,000. They yielded some take - up for commissioning now, and if achieved the profes - sion must improve its image by delivering the care patients need. Failure to sign is done but with - out a change in the contract and support from the DH nothing will change.”

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