

# Oral surgery services and training

Nairn Wilson CBE

Chairman, Oral Surgery Services and Training Review Group

Send your comments to the Editor-in-Chief, British Dental Journal, 64 Wimpole Street, London W1G 8YS  
Email [bdj@bda.org](mailto:bdj@bda.org)

EDITORIAL

Medical Education England (MEE) has recently published a long-awaited review of oral surgery (OS) services and training. The group appointed to conduct the review, which stemmed from a Postgraduate Medical Education and Training Board (PMETB) review of training in oral and maxillofacial surgery (OMFS) was tasked to consider all aspects of the future provision of services and training in OS, set against the backdrop of how the specialty of OS has developed and its relationship to OMFS. The membership of the review group, which included various members of the Dental Programme Board (DPB) of MEE, was drawn from the wide range of stakeholders. During the process of the review, the review group considered a large amount of evidence gleaned from written submissions, oral evidence sessions, existing literature and site visits.

As set out in the chairman's foreword to the review, OS is a distinctive branch of dentistry which is an integral element of oral healthcare provision. As such, OS needs to be viewed separately from the medical specialty of OMFS, albeit that there is overlap in the scope of practice of the two specialties – a situation which is by no means unique to OS and OMFS. It is suggested that in the interests of patients and enhanced efficiency and effectiveness in the provision of OS and OMFS services, the specialties of OS and OMFS should further develop and strengthen inter-specialty, collaborative working.

## SUFFICIENT UNDERGRADUATE TRAINING URGED

Faced with steadily increasing OS referrals across the country from primary to secondary care, with most of these referrals being managed in OMFS units at considerable cost to the NHS, and the need to provide enhanced patient-centred, better value for money OS services, the review group has made a series of recommendations to encourage the development of more accessible and affordable, high quality OS services. Included in the series of recommendations are proposals to expand OS consultant-led services and training in the specialty. Also, consideration is given to OS training and mentoring provided in undergraduate dental degree programmes and vocational (DF1) training, together with more widely available opportunities for practitioners to develop a special interest in OS. Above all else, however, the group has recommended that OS services in the primary care setting should be developed to meet the needs and expectations of patients for appropriate, accessible care, and to make more efficient use of NHS resources.

Linked to this, the group has recommended that specialist OS services in the NHS, accessed through clinical networks and

referral management systems, should be led by consultants in OS. In addition to treating referred patients in a variety of primary care settings and providing care in hospital settings to best manage patients with complex needs, together with those requiring general anaesthesia, the consultant would lead OS services across primary and secondary care. To help achieve this goal, individuals in Staff and Associate Specialist (SAS) grades, who are on the specialist list in OS, should have the opportunity to further their careers to satisfy requirements for appointment to the Consultant grade. Also, it is suggested that there is a need to address succession planning issues in academic OS, as part of a significant need for investment in training in OS to secure the future of the specialty. In supporting recommendations of the Joint Committee for Specialist Training in Dentistry (JCSTD), now reconstituted as the Joint Committee for Postgraduate Training in Dentistry (JCPTD), in respect of the competencies, including the so-called extended competencies, relevant to the specialty of OS, the review group concluded that specialists in OS should, according to local need and the availability of training capacity, have the opportunity to acquire these competencies in the process of preparing themselves for eligibility for appointment to the consultant grade.

Regarding instruction in OS at the undergraduate level, the review includes the recommendation that undergraduate courses should contain sufficient training in routine OS skills to prepare new graduates to practise these skills during dental foundation (DF) training. Furthermore, it is recommended that DF1/trainers must be capable of further developing the OS skills of foundation trainees.

MEE and the DPB in unanimously supporting the report and its recommendations, which have been fully endorsed also by the devolved administration in Scotland, Wales and Northern Ireland, recognised, first and foremost, the need for OS services to be developed to meet the needs of patients and to make more efficient use of NHS resources. MEE also decided, to preclude the possibility of the review becoming a report which gathers dust on a shelf, that a group be established to implement the recommendations included in the review. It is anticipated that this group will be formed in the near future with the expectation of early implementation of the recommendations.

1. MEE Dental Programme Board. Review of oral surgery services and training. London: Medical Education England, 2011. <http://www.mee.nhs.uk/PDF/os%20review.pdf>

DOI: 10.1038/sj.bdj.2011.52