

# From the outside looking in



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**H**ave you ever stopped to ponder what people outside of dentistry think of dentistry? Perhaps a GCSE or A Level student planning their career, patients who regularly attend for routine check-ups, or even just the average person who knows very little about dentistry other than how to use a toothbrush.

I often wonder if sometimes we're *too* close to dentistry to see what others think and to really see what's going on. For example, take NHS patient charges in England. Since 2010, these charges have increased by over 40%, including the latest absurd 5% increase that came into effect on 14 December 2020. In the same time, dentistry is the only part of the NHS operating on a lower budget than it received in 2010, with no effort made to keep pace with the cost of living or population growth. Prior to the pandemic real terms net government contributions have fallen by over £650 million. So, not only are patient charges plugging the government's lack of investment, they're also serving to price NHS dentistry in England out of many people's pockets – let's not forget there's a finance-crippling global pandemic going on here.

When this was announced, sure enough most social media comments contained words such as 'greedy', 'money-grabbing', 'waste of money' and 'robbing'. Public perception is very different to the reality.

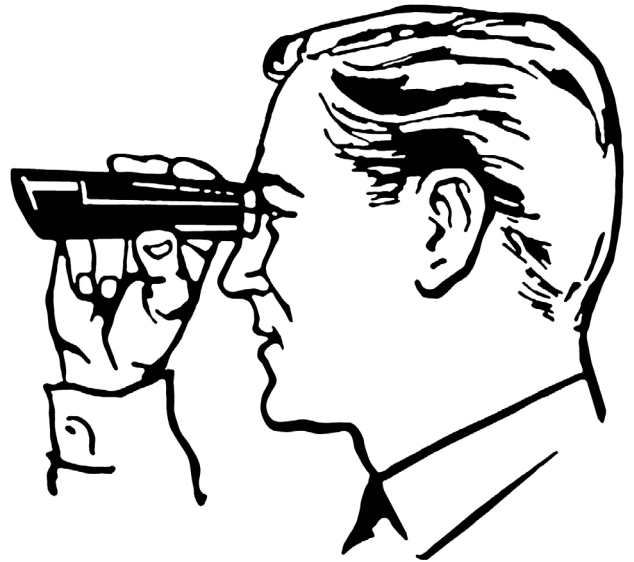
On top of that, patients are then asking what exactly they are paying for. In March alone, the following stories have been reported:

- A dental crisis on the Isle of Wight with not one dentist taking on new patients
- A lack of dentists forced the closure of Leiston's final dental practice

- Half of adults in Bolton have not paid a visit to the dentist in the last two years
- More than half of adults in Northamptonshire have not been to a dentist in the last two years
- Almost half of adults in Northumberland have not been to a dentist in the last two years
- Three-fifths of adults in Cumbria have not been to a dentist in the last two years
- Almost two-thirds of Milton Keynes dental patients not seen in two years
- Lack of dentists forces a Scarborough practice to close leaving patients struggling to find care
- Only two NHS dentists in the Harrogate district are accepting new patients – and both have a waiting time of at least two-and-a-half years.

To me, the picture is pretty clear; why on earth would anyone want to become an NHS dentist in England? Patients can't afford an NHS check-up because the government is pricing them out of doing so, you have patients who think you're in it for the money, and when they can finally get into see you for a check-up, there's a fair chance they're not there for routine maintenance, they've done a bit of DIY on their mouth in the interim leaving them with more pain requiring complex treatment, costing more and the cycle returns to 'can't afford it' before returning to pain.

From the outside looking in – and of course it's easy to say the grass is always greener on the other side – you can see why so many are moving into the private sector. Time with patients? Yes. A patient base that values you as a professional? Yes. Need I go on? Personally, I'd want to work in Wales or Scotland, where it *looks* as though their workforce is well-supported – or at least significantly better than



their English counterparts. In England, targets were imposed on practices from 1 January, resulting in financial penalties if they were unable to meet 45% of their pre-pandemic activity. In Scotland, intermediate support funding arrangements for NHS dental services in the 2021/2022 financial year were published and welcomed by the BDA. The baseline difference in approach is sizeable.

Something is broken. That's undeniable. I've been in post for five years and I have seen absolutely zero progress on any of these things. Hiding behind a 'COVID cloak' simply won't cut it – problems were there before March 2020, they've got significantly worse since and there is little sign of these issues improving – short, medium or long term.

But what is the answer? Rather like the vaccine, it's easy to think of contract reform as the silver bullet that will gloss over horrific shortcomings of the past. We'll only know if it is as simple as that if/when (delete as you see fit) contract reform in England presses ahead. We'll only know if persisting with over-inflation NHS charges is designed to fill the holes in government investment or to purposely erode the lines between NHS and private.

Either way, from the outside looking in, dentistry wouldn't be something I'd get my teeth into. ♦

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