If you haven't yet heard of the Advancing

Dental Care programme, you soon will, writes **Caroline Holland**, who examines the

implications for some *BDJ Team* readers.

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dvancing Dental Care (ADC) is an education and training review. Commissioned in 2017, it is now in its second phase¹ and third year (in 2020). According to Malcolm Smith, Postgraduate Dental Dean for the North East and the Chair of the ADC programme, speaking in a vlog² on the website of Health Education England (HEE), it's about having 'the right workforce in the right place doing the right thing for the right people'.

Aimed at everyone in the dental team, dental care professionals (DCPs) probably have most to gain, particularly dental nurses and dental therapists, since the availability of NHS training opportunities and career pathways are most limited for these roles.

ADC and flexible dental careers

Many individuals and representative organisations are being encouraged to engage with the process and to share their views. Colourful and complex training pathway schematics, described by Malcolm as 'tube maps', have been developed by HEE to reflect different career pathways and stimulate discussion at the stakeholder events.

There is clearly an aspiration to develop training and career pathways which are flexible and to provide part-time opportunities in order to keep trained staff in the NHS. Phase 2 of the ADC programme takes forward the 21 recommendations³ from the first phase and is driving forward with profession-wide engagement.

All the Postgraduate Dental Deans are holding stakeholder events and encouraging dental team members to attend. They are encouraged to study the 'tube maps' and consider the following questions:

- 1. What is working well in dental education and training in England
- 2. What changes can we introduce that will meet the needs of the future population as well as the career aspirations of the future workforce?
- 3. What does the future oral healthcare workforce look like in England?

Until now, the DCPs with the most successful careers are those who have been 'in the right place, doing the right thing with



Jacqui Elsden

the right people. In other words, it's been a matter of chance rather than equality of opportunity. This is true of Jacqui Elsden, the new President of the British Association of Dental Nurses (BADN).

There is an assumption, says Jacqui, who is also regional DCP lead for HEE in London, Kent, Surrey and Sussex (HEELKSS), that dental nurses should want to progress upwards through a clinical pathway and move on to become a dental hygienist or therapist. This assumption is reflected in a version of the 'tube map' which shows the pathway to being a leader passing through the role of the dentist. But some dental nurses want to progress directly to become a manager or team leader.

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Jacqui's own route to a leadership role came about because a dental nurse in the practice where she worked in the 1990s was doing a City and Guilds NVQ course in dental nursing and needed an assessor. Jacqui voluntarily undertook a qualification to help a colleague and eventually she found herself taking on a City and Guilds assessor role and ultimately getting a job with the South East Coast Strategic Health Authority (SECSHS) in 2004. She continued working for the NHS and is now employed by HEELKSS.

She would like to make career progression for dental nurses easier, acknowledging that she was in the right place at the right time: 'If I had stayed chairside I would have eventually got bored and left,' she says. Jacqui has already had a chat with Malcolm Smith in which she highlighted the absence of a direct route from senior nurse to team leader on the 'tube map' and her input was welcomed.

Similarly, Debbie McGovern, President of the British Association of Dental Therapists (BADT), has met Malcolm. Fresh from an Asia Pacific Oral Health conference in Singapore, she was keen to share with him the different ways that dental therapists around the world operate:

'There is so much potential for dental therapists to grow what they do in the UK. We are currently unable to work to the limits of our Scope of Practice because the 2006 General Dental Services contract does not allow us to open a course of treatment? Debbie is looking forward to sharing with ADC the aspirations of BADT which were set out in their submission to the HSCC enquiry into dentistry.⁴



Debbie McGovern

Sally Dye, Chair of the Orthodontic National Group (ONG) for orthodontic nurses and therapists, said members had been encouraged to share their views on ADC with HEE. She commented: 'I am fully supportive of education and access for all and acknowledge that the correct professional development will utilise an individual to their full potential which in turn has a positive benefit on patient care.

'I feel it is essential that all centres are delivering the same level of education and that learners obtain and achieve the same goals and knowledge and in turn take up-todate skills into the workforce.

'Glancing through the report there is a mention that there is not enough emphasis on the standardisation.

Not directly linked to the ADC programme, but consideration for available funding for education has to be addressed. Personal and



Sally Dye

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professional development comes at a cost - and if funding is not correctly channelled and is not easily accessible then promoting professional development to improve patient care will be lost - before it has got started...'

Everything about ADC feels big and unwieldy. The timeframe, the mission and of course, the myriad developments taking place within and around the dental profession, chief amongst them the reform of the 2006 dental contract. Phase 2 is due to conclude in 2021. If successful, the words 'dental team' should mean that career progression and training are there for all. It's an ambitious piece of work but for DCPs, ADC is an opportunity to initiate a culture change which is long overdue.

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