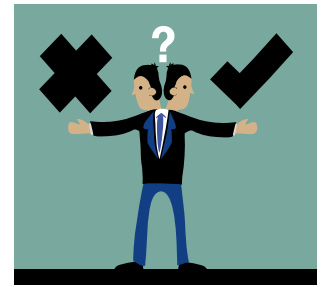


# Delegation

Shaun Sellars continues his series on ethical dilemmas in dentistry which appears in every second issue of the *BDJ*.



I have a good friend who is a specialist oral surgeon. They run a successful multi-surgery practice in the Midlands with a team providing exceptionally high-quality dentistry. While the clinic is a success by every measurable standard, they're in the same business as the rest of us, which means they're open to competition. What surprised me is what they envisage their commercial rivals to be. It's not, as you might expect, the other local specialist practices, but a new breed of dentists eager to upskill and carry out high-level dentistry themselves.

It feels as if the standard of general practice has increased over the last decade or so. Dentists enhancing their skills is nothing new, but how we go about this has changed. Previously, we were often tied to lectures or hands-on courses that could only be run a handful of times a year. A typical course now has content delivered online to be digested at our own pace at a time to suit ourselves. Support is provided via direct contact with the organisers through various messaging networks, and

many educational providers have bespoke online portals providing educational material on a wide array of subjects. The advent of podcasts and YouTube has led to a more open environment for sharing knowledge. Even hands-on content is changing, with my oral surgeon colleague offering an implant restorative course you can do at home. General practitioners have never been able to provide their patients with a more advanced, predictable level of care.

Of course, there will always be specific treatments we don't like carrying out. Maybe you enjoy root treatment but hate making dentures, or would prefer to spend all day taking out teeth? In an ideal world, would a practice run on a 'hub-and-spoke' principle, where patients were assessed and allowed to see the practitioner who excelled in each specific discipline to carry out particular items of treatment? This 'horizontal delegation' already happens in an *ad hoc* manner in many practices, but why not formalise it? We may have to rethink how dentistry is compensated, as none of us want to lose income. But as primary care seems to

be moving towards larger practices, with the 'one-man band' now the exception rather than the rule, this inter-practice collaboration would undoubtedly benefit patients.

Expanding on this, as dentists, we should ideally only be carrying out the work that only we can do. I can give oral hygiene instruction and carry out RSD, but I work with several highly skilled hygienists who, quite frankly, are much better at it than I am. Many practices have nurses carrying out intra-oral scans or radiography as routine. This multi-tiered delegation approach is the future of dentistry. And it's also why my oral surgeon friend doesn't need to worry too much about the competition from generalists. Because although the standard of general dentistry is increasing, there will always be treatment that can only be carried out by a specialist. We'll always need to delegate upwards.

## Collection: The Dental Profession Worldwide

*BDJ Open* has launched a new collection of content online called 'The Dental Profession Worldwide', which is open to submissions of both research articles and reviews.

The Collection addresses the question of what it is like to train and practise as dental professionals in different parts of the world. The articles reflect individuals' day-to-day experiences, from patient interaction to specific education and training issues, in the UK and internationally.

Examples of articles already in the collection are:

- 'Difficult' dental patients: a grounded theory study of dental staff's experiences [from Sweden]
- Economic burden of becoming a dentist in Thailand [from Thailand]

- Peer-assessment ability of trainees in clinical restorative dentistry: can it be fostered? [from authors in Syria and the UK]
- Drawings to explore faculties' and students' perceptions from different generations cohorts about dental education: a pilot study [from Canada].

The Collection is open for submissions until 31 March 2024. For more information and to submit a manuscript, use the QR code included with this article or visit <https://www.nature.com/collections/iidbibiajc>.

