

Features Section

Guest Editorial

The DARG report

The publication in March 1998 of the Report of the Dental Auxiliaries Review Group of the General Dental Council advances the debate on the use of auxiliaries into the next stage. The long period of consultation in the UK, ending in January 1999, has permitted the opportunity for widespread debate and comment. The last editorial in the UK on the use of auxiliaries to appear in this journal was in November 1996 when Professor Stephens made commentary about auxiliaries in the context of the dental political climate of the time. The nature of events as they are, influenced by political change, meant that these external pressures proved the view to be over optimistic.

Is regulation a necessary step?

The DARG report refocuses the debate and makes interesting reading. There are many intricacies to the report some directly affecting us as orthodontists and others due to its impact on the General Dental Services. There is a view that taken in its broadest context the report continues to perpetuate the mistaken belief that was initiated by the Nuffield Report. This was to confuse education and training of staff to expand their clinical role and standing in a team environment with the need for universal registration and self-regulation. This point is very important. Nowhere else in medicine (and its allied professions) is regulation by registration required unless the public need to be protected from an unsupervised independent operator. In the wider context of the Dental team the prospect of all staff being registered and subject to self regulation seems unrealistic. Undoubtedly the desire to empower staff within the framework of a dental team is desirable. However, the concept of the Dentist as 'team leader' and a code of conduct where dentists could be required, under their own codes of conduct and practice, to ensure their staff and those they contract to have been 'appropriately trained' makes much more sense than the over regulated, bureaucratic, and probably unworkable concept of universal registration.

What of the issue of the new grade of orthodontic auxiliary?

The DARG report has continued the traditional circumspection of the GDC in failing to promote radical change. The report raises two key issues, one explicitly and one by omission. The previous editorial by Professor Stephens was aggressively 'pro' the use of an expanded role for Dental Nurses as orthodontic auxiliaries. We must ask the question how much evidence is there to support this role? Those of us who have taught clinical skills to Dental Nurses first enrolled in an auxiliary school will testify to the length

of time they can need to train to become confident and proficient in the oral environment. The DARG report recognises this and commendably (in my opinion) opts for the suggestion of a unified grade of 'Oral Health Worker' encompassing dental hygiene, therapy and extended orthodontic duties. If we are so interested in improving the standard and access to treatment for our patients high quality trained staff appear central to this provision. The unified training may afford the opportunity to create an undergraduate degree training programme of three years to develop this concept even further. Why downgrade our standards of education and training to provide 'cheaper' (fee cutting?) opportunities to further undermine a service that is already the best value for money in the European Union? The opportunity exists to develop the case of team working as a concept based on the highest standards of education. This degree based worker, as is being developed in Dental Technology, could prove a 'leading—edge' concept throughout Europe.

Where and for whom should auxiliaries work?

The issue of who the auxiliaries work for is studiously avoided by the DARG report. The GDC cannot implement the specialist list as one initiative and fail to recognise the implications of the 'supervisory' role of such specialists in a team approach to orthodontics. In the BDA when the view has been expressed that orthodontic auxiliaries should be restricted to working within teams led by a specialist orthodontist this has, not surprisingly led to howls of outrage from our General Practitioner colleagues—the British Orthodontic Community should seek to influence the debate to avoid the feeding frenzy likely to occur when employment of such auxiliaries appears so attractive to the more business minded of our colleagues. Similarly what training have the majority of orthodontists received in supervision and support of auxiliaries? Surely only once auxiliary supervision is incorporated in the syllabus of the newly trained orthodontists can adequate and quality supervision be expected.

What of the issue of pilot studies?

The DARG report dismisses the value of pilot studies suggesting that sufficient evidence exists to make such an approach unnecessary. The specialty needs to ask itself if that is in fact the case. The DARG report requires the expanded orthodontic role to be evaluated within two years to 'assess their role in the light of experience'. How can this be done if criteria are not agreed in advance against which to measure any success? The lack of any credible structure

or process for evaluating the recommendations plus no direction to influence training mechanisms remain significant omissions from a report that will impact so widely on our profession and the future of our specialty. In his previous editorial Professor Stephens was very enthusiastic to emphasise the value of pilot studies (as was the then Minister of Health as therein reported). The GDC must take note of these views and act responsibly to provide evidence of the value of such auxiliaries to fulfil their prime function of protection of the public.

The twin issues of training and supervision appear to be the crucial issues facing orthodontics in the UK at the present time. Opportunity does not offer itself without risk but as a speciality we cannot afford but to be seen to advocate the highest standard of education, training and

supervision for whatever develops from the debate on auxiliaries.

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References

- Report of the Dental Auxiliaries Review Group. General Dental Council, March 1998.
- The Nuffield Report into the Education and Training of Personnel Auxiliary to Dentistry. September 1993
- Stephens, C., (1996)
Orthodontic Auxiliaries. Guest Editorial. British Journal of Orthodontics, 23, 367-368