

Editorial

Orthodontic Speciality Training in the UK

I thought that I would take this opportunity to describe some aspects of the current state of orthodontic speciality training in the United Kingdom and I make no apologies for being a little controversial.

In the UK we have a long history of orthodontic training with a recognized qualification that is awarded by bodies external to the Universities. The Royal College of Surgeons of Glasgow awarded the first of these qualifications, in 1948. Over the years specialty training has evolved and training is provided by a 3-year full-time programme that is centred on University Departments. This training is monitored by the Speciality Advisory Committee of the Royal College of Surgeons and is based closely on the EU Erasmus recommendations. At the end of the period of training the trainee takes an M.Sc. exam administered by the University and also the Membership in Orthodontics of one of the UK Royal Colleges. Therefore, we have a well-structured, monitored training programme that is subject to constant external assessment.

While the programmes are generally considered to be excellent there are some problems with the current situation. These are concerned with the future provision of orthodontic workforce and the recent introduction of the UK specialist register. I will first consider the workforce.

One feature of orthodontic supply in the UK is a shortage of trained specialists, which has resulted in excessive waiting lists in many parts of the country. This is likely to mean that many children who have a clear need and demand for orthodontic treatment will have to wait an unreasonable time to have their care. One solution to this problem is to train more specialist practitioners. Indeed, the General Dental Council has suggested that this may be achieved by providing training on a part-time basis to dentists and making some aspects of training more accessible. While this is a laudable aim, this does not seem to be coming to fruition because the Department of Health is restricting the number of training places that are available. This is in spite of capacity for additional trainees on the training programmes.

At present, our most up to date calculations suggest

that there will be insufficient trained orthodontists to counteract the effect of projected retirements. So I imagine that our problems will continue. What is the solution? This is simple, the restrictions on training places should be removed and market forces will determine the number of orthodontists that can be trained. We may ask, where is the model for this type of "free for all"? Again, the answer is simple . . . the other EU countries and the rest of the world.

A similar problem has occurred in specialist registration. When the General Dental Council (GDC) introduced specialist registration they recognised that there should be a transition period in which those dentists who considered that they fulfilled the criteria for entry could apply for inclusion on the specialist list. In general, most of these applications were from orthodontists with specialist qualifications. However, another group of practitioners who had not undergone any specialist training, but devoted a fair proportion of their time to orthodontic treatment, applied for inclusion. A number of these were initially rejected because they did not have an orthodontic qualification. These people then appealed through the appeals process of the GDC. Some of these appeals have been successful and they have been accepted onto the specialist list. This is a situation that I, and many others, cannot understand. The orthodontic training programmes in the UK have been in place for many years and yet these dentists did not undertake any formal training, despite this being available to them. I certainly, do not feel that their experience bears any comparison to the person who has undergone a 3-year training programme and yet they are considered to be equal.

In summary, in the UK we appear to have a well structured and monitored orthodontic training programme that produces graduates who are equal to the best trained in the world. Yet, we have a manpower shortage and are prevented from training more specialists. Paradoxically, we introduce a specialist register and accept people who have had no formal training and they are recognized as specialists. Only in the UK . . .

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