

Consultation Interview Schedule – Management of Acute Dental Problems

Interviewer:

Name of participant:

Telephone No.:

Date and Time of interview:

Discussion checklist:

- a) Researcher introduction – advise not a clinician
- b) purpose of the study: to inform the future development of this guidance
- c) aim of the interview: to get a more in depth feedback of dentists' views of the guidance and it's potential impact on practice.
- d) practicalities / timescales:
 - o brief list of questions by telephone ~ approx 20 minutes
 - o interviewer taking written notes
- e) assurance of confidentiality

Questions:

1. Before we discuss the draft guidance it would be helpful if you could tell me:
 - a) How many dentists work in your practice?
 - b) What is your role within the practice (e.g. principal dentist, associate etc)?
 - c) How long have you been qualified for?
 - d) How long have you been in your current post?

e) Does your practice employ a hygienist or a hygienist therapist?

f) Is your practice fully NHS?

Thank You. As you will be aware this guidance document is at the consultation stage and still under development. I will pass on the feedback you provide today to the Guidance Development Group, who will use your feedback to inform the future development of the guidance.

What I'm going to do now is ask you some general questions about the draft guidance document and so it may be helpful to have the document to hand. I will then touch on a few aspects in more detail.

2. To start off, from looking at the draft guidance what do you think the guidance is trying to achieve?

3. Do you currently face any challenges providing care for patients presenting with acute dental problems? If so, what?

4. Do you think the guidance will help address this?

What I'm going to do now is ask you some specific questions about the pathways to providers of care as recommended in the draft guidance.

So, just thinking about patients in general....

For patients presenting with pain and/or swelling (pathways 2.1 and 2.2 on Pages 6 & 7)

5. a) From looking at the pain and swelling pathways, do you think there is anything you don't currently do when a patient presents with pain and/or swelling?

If there are aspects not being followed – Why?

- *Is it that you just don't do this/follow this step or is it that you do something differently?*
- *Then ask questions b & c.*

If they say they are following it all -

- *What steps would you take to determine if the patient might be having a heart attack?*
- *How would you go about determining if a patient may have taken an overdose?*
- *When you assess the degree of swelling, how would you go about that? What are the things you would look for?*
- *Are there any situations where you would prescribe an antibiotic?*

b) As a result of reading the guidance, do you plan to change your practice?

c) Does the guidance give you sufficient information in order to do this?

For patients presenting with bleeding (not caused by trauma)

6. a) Based on the bleeding pathway, do you think there is anything that you don't currently do when a patient presents with bleeding that is not caused by trauma?

If there are aspects not being followed – Why?

- *Is it that you just don't do this/follow this step or is it that you do something differently?*
- *Then ask questions b & c.*

If they say they are following it all -

- *How do you find the timings that are being recommended, do you think they are realistic? achievable?*

b) As a result of reading the guidance, do you plan to change your practice?

c) Does the guidance give you sufficient information in order to do this?

For patients presenting with trauma (pathways 2.4.1 and 2.4.1 on pages 9&10)

7. a) Based on the trauma pathways do you think that there is anything you don't currently do when a patient presents with trauma?

If there are aspects not being followed – Why?

- *Is it that you just don't do this/follow this step or is it that you do something differently?*
- *Then ask questions b & c.*

If they say they are following it all -

- *When assessing for the possibility of a more serious injury what sorts of things do you look for? (head injury, loss of consciousness, significant facial trauma, uncontrollable bleeding etc.)*
- *How do you respond? (emergency medical care/immediate care)*

b) As a result of reading the guidance, do you plan to change your practice?

c) Does the guidance give you sufficient information in order to do this?

For patients presenting with altered sensation or abnormal appearance, e.g. lesion, mark or lump (pathway 2.5 page 11)

8. a) Based on the altered sensation/abnormal appearance pathway, do you think there is anything you currently don't do when a patient presents with either of these symptoms/problems?

If there are aspects not being followed – Why?

- *Is it that you just don't do this/follow this step or is it that you do something differently?*
- *Then ask questions b & c.*

If they say they are following it all -

- *When checking for signs of stroke, what sorts of things do you look for? Are you aware of F.A.S.T?*
- *How do you respond? (emergency medical care/immediate care)*

b) As a result of reading the guidance, do you plan to change your practice?

c) Does the guidance give you sufficient information in order to do this?

For patients presenting with ulceration (pathway 2.6 page 12)

9. a) Based on the ulceration pathway, do you think there is anything you currently don't do when a patient presents with ulceration?

If there are aspects not being followed – Why?

- *Is it that you just don't do this/follow this step or is it that you do something differently?*
- *Then ask questions b & c.*

If they say they are following it all -

- *How would you go about determining if the patient is systematically unwell?*

b) As a result of reading the guidance, do you plan to change your practice?

c) Does the guidance give you sufficient information in order to do this?

10. Have you any thoughts about how other healthcare professionals such as GPs may find these pathways to follow?

What I'd like to do now is to ask a few questions about some more general aspects of the guidance.

11. How important do you think it is to follow the recommended pathways to providers of care?

12. Are there any difficulties you can for see for you or your practice to follow these pathways?

13. Thinking about the guidance as a whole are there any difficulties to following the recommendations?

14. Is there anything that may help overcome these difficulties?

15. Are there any aspects of the guidance that you think will be relatively straightforward for your practice to implement?

Why?

- *Is this because you are already carrying them out?*
- *Are there changes you plan to make which will be relatively easy?*

16. What do you think are the main advantages of following the recommendations in this guidance

- for you personally?
- for your patients?
- for your practice as an organisation?

17. What do you think are the main disadvantages of following the recommendations in this guidance

- for you personally?
- for your patients?
- for your practice as an organisation?

18. Is there anything else about the draft guidance that you'd like to comment on?

I would just like to finish by asking a few questions about another of the SDCEP guidance documents that is related to this draft guidance

Emergency Dental Care Guidance

- 19.
- a) This guidance is the clinical follow on from the SDCEP Emergency Dental Care Guidance (published in Nov 2007). Are you aware of the emergency guidance?
- b) Do you find this guidance useful in your practice?
- *How do you use it?*
 - *What parts are useful?*
 - *If no, why?*
- c) SDCEP is now planning to update the Emergency Dental Care guidance. Are there any recommendations or aspects of the guidance that you think ought to be reconsidered when the guidance is reviewed?
- d) Do you have any suggestions on how the guidance could be improved?
- *Is there anything that you would like to see in the update that is not currently included?*
- e) Do you have any other comments on the Emergency Dental Care Guidance?