Oral Health Assessment and Review (OHAR) Implementation Study: Patient Survey

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TRiaDS Translation Research in a Dental Setting

NHS Education for Scotland

BACKGROUND

In March 2011, the Scottish Dental Clinical Effectiveness Programme (SDCEP) published the *'Oral Health Assessment and Review' (OHAR)* Guidance in Brief .

The guidance operationalises the 2004 National Institute of Health and Clinical Excellence (NICE) Dental Recall Guideline and aims to facilitate the move from a restorative approach to patient care to a long term preventive approach that is risk-based and meets the needs of individual patients.

Feedback gathered during the guidance consultation stage highlighted that potential barriers to conducting a comprehensive oral health assessment (OHA) included general dental practitioners (GDPs') beliefs about their patients:

- patients may be unwilling to discuss their social and medical histories;
- patients may find a head and neck examination worrying;
- patients may be unwilling to attend the dentist at risk based recall intervals.

AIMS

The Translation Research in a Dental Setting (TRiaDS) Programme conducted an in-practice implementation study, focusing on the OHA component of the OHAR guidance.

The overall aim of the study was to investigate the barriers and facilitators to conducting an OHA in general practice.

The aim of this part of the study was:

To explore patients' views of the acceptability and importance of receiving an OHA.

METHODS

Nine GDPs were recruited to take part in the implementation study. During the prospective data collection GDPs conducted an OHA, as defined by the SDCEP guidance, on 10 of their patients who were due a routine check-up.

After their OHA appointment, patients were given an anonymous questionnaire to complete to gather feedback on their views of the OHA style check-up.

Patients were given the option to complete the questionnaire in the waiting room before leaving, or to take it home to complete and return to TRiaDS at a later date. Most chose to complete before leaving.

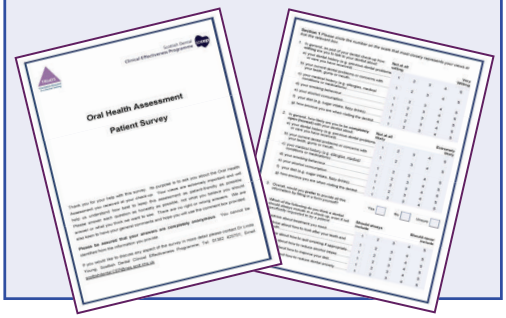
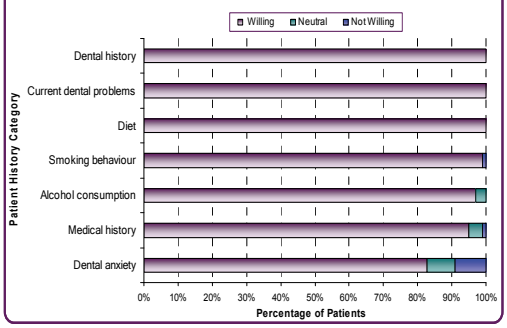


Figure 1: Patients' willingness to discuss medical, dental and social history



RESULTS (1)

Demographics

- Response rate of 91%;
- Average age 53 years;
- 51% were male;
- 95% were regular attenders at the dentist;

Willingness to discuss dental, medical & social histories

- The majority of patients were willing to discuss these factors (Figure 1) and responded that they would be honest with their dentist about them.

RESULTS (2)

Dental check-up

- The majority of patients believe that advice on dental related factors (treatment, oral health, anxiety) should always be included;
- Just over half believe that advice on social factors (smoking cessation, alcohol intake, diet) should always be included;
- The percentage of patients that believe advice on social factors should not be included was relatively small. (Table 1)

General aspects of an OHA

- The majority of patients were comfortable allowing their dentist to examine their head and neck and thought it was important to do so;
- Most patients were willing to come more often for check-ups, if high risk;
- However, fewer were willing to come less often, if identified as a low risk patient. (Figure 2)

Figure 2: Patients' beliefs about general aspects of an OHA

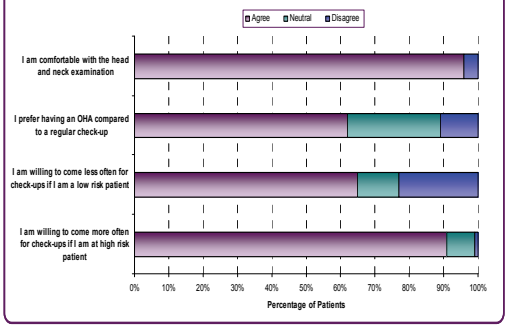


Table 1: Patients' beliefs about the types of advice to be included in a dental check-up

	Median	Should Include (%)	Neutral (%)	Should Not Include (%)
Dental Related				
Treatment required	5	97	1	1
Oral health	5	96	3	1
Dental anxiety	5	82	15	3
Social Related				
How to quit smoking	4	57	33	10
How to reduce alcohol intake	3	51	37	12
How to improve diet	4	59	32	10

CONCLUSIONS

- Patients were willing to discuss medical and social history and believed these aspects of an OHA were acceptable and important;
- Most were comfortable having a head and neck examination and attending at risk-based intervals;
- In general, GDPs perceptions of patients' views towards an OHA were not observed.

If you would like further information about this study contact Paula Elouafkaoui at paula.elouafkaoui@nes.scot.nhs.uk

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