



**Translation Research
in a Dental Setting**



**Scottish Dental
Clinical Effectiveness Programme**

Prevention and Treatment of Periodontal Diseases in Primary Care Guidance Implementation Summary

For SDCEP guidance, information about potential barriers and facilitators for implementation is sought at various stages during the development process, such as during scoping, consultation and peer review, targeted external expert review and at other times pre-publication. This may include financial and organisational barriers that operate at the policy-level in addition to practice- practitioner- and patient-level barriers. The impact of these potential barriers is considered during the development of the guidance and the guidance recommendations, content and format may be influenced or changed as a result.

Much of this work is carried out in collaboration with SDCEP's partner programme TRiADS (Translation Research in a Dental Setting), a multidisciplinary research collaboration which aims to develop and evaluate guidance implementation strategies to improve the knowledge-to-practice gap in primary care dentistry in Scotland. Reports of the results of TRiADS research are provided on its website (www.triads.org.uk).

This document provides a summary of the potential barriers and facilitators to implementation of the *Prevention and Treatment of Periodontal Diseases in Primary Care (2014)* guidance recommendations, information on how these influenced the guidance and updates on any changes that have taken place since publication of the guidance that may affect implementation.

Potential Barriers/Facilitators	Pre-publication Action (e.g. changes made to the guidance, provision of implementation tools)	Post-publication Activities
Service provision		
<p>Some practitioners reported concerns that the existing dental contract in Scotland did not fully support the time required for a full periodontal assessment and treatment, especially for patients with more severe disease.</p>	<p>The GDG acknowledged that the current dental system might be perceived by some dentists as a barrier to implementation of the guidance but considered that the terms and application of the dental contract was outside the remit of the guidance producers.</p> <p>The group judged that the guidance should be evidence-based and its recommendations should support best clinical practice. It was anticipated that the guidance would be influential in taking forward and informing policy initiatives for progression to a dental system that is more supportive of preventive care.</p>	<p>Concerns raised by practitioners about service provision within the existing dental contract were reported to the National Dental Advisory Committee (NDAC).</p> <p>In 2018, the Scottish Government published the Oral Health Improvement Plan (OHIP), which prioritises a preventive system of care for adults and would include a revision of remuneration for dental care.</p>
Awareness		
<p>Promoting awareness of the guidance and understanding of the importance of the subject for all members of the dental team was identified as important for implementation.</p>	<p>SDCEP undertake various dissemination approaches at the launch of the guidance to raise awareness. These include notifying all dentists and hygienists/therapists in Scotland of the guidance publication, press releases, newsletter and magazine articles and the use of social media.</p>	<p>Dissemination approaches as described.</p> <p>The GDG chair has promoted the guidance through presentations at various locations in Scotland.</p> <p>In March 2017, SDCEP participated in a 'Perio Roadshow' which further promoted the guidance amongst dentists and hygienists/therapists in Scotland.</p> <p>In 2019, the guidance was included as a toolkit</p>

		<p>within SDCEP’s Dental Companion smartphone and desktop app. This presents information in a layered format, allowing the user to decide how much depth to explore a particular topic of interest. The content is also searchable, facilitating rapid access to information of interest.</p>
<p>Training</p>		
<p>The need for training on the topic was identified as a possible barrier to implementation of the guidance.</p> <p>Areas highlighted included:</p> <ul style="list-style-type: none"> • what information on periodontal disease assessment and diagnosis should be included in patient records • how to explain the meaning of periodontal disease assessment to patients before treatment • how to discuss lifestyle issues (smoking cessation, alcohol consumption, healthy eating) with patients • how to provide oral hygiene advice. 	<p>In response to these needs, various tools were introduced with the guidance to aid with implementation of the guidance recommendations. These included:</p> <ul style="list-style-type: none"> • the addition of a chapter in the guidance on record keeping • advice on how to communicate with patients on lifestyle issues including smoking cessation and oral hygiene • a visual aid for use when discussing the results of assessment • a video demonstrating how to carry out an oral hygiene consultation with a patient to help meet training needs on this aspect of the guidance • patient education leaflets to aid communication <p>The requirement for further training will be assessed during the TRiADS implementation process.</p>	<p>NES held a Dental Team CPD symposium on the topic in May 2014.</p> <p>Surveys: TRiADS carried out pre- and post-publication surveys of dental practice to monitor levels of adherence to guidance recommendations and assess and inform any training requirements (www.triads.org.uk/in-development/prevention-and-treatment-of-periodontal-diseases-in-primary-care/). A paper describing this work is in preparation.</p> <p>Research Audit: In 2015, dentists participating in both surveys were invited to undertake related quality improvement (QI) activities (www.sdpbrn.org.uk/qi-research/periodontal-diseases-research-audit/). These included self-reflection and reporting on any gap between their provision of periodontal care and guidance recommendations, and the development and implementation of action plans for improvement. Research audit hours were made available as an incentive and more than 50% of survey participants completed these QI activities.</p>

		Since 2014, NHS Education for Scotland offers regular courses that address learning outcomes associated with the guidance recommendations.
Patient education and motivation		
Patient motivation to improve and maintain oral hygiene was perceived by practitioners as a barrier to implementation.	<p>Oral hygiene TIPPS, a behavioural change strategy aimed at improving oral hygiene behaviour was developed and included in the guidance.</p> <p>A patient information leaflet explaining the symptoms of periodontal disease and advice on plaque removal was developed. A leaflet relevant to patients with diabetes was also produced. Both of these leaflets are available on the SDCEP website with the published guidance.</p>	Oral hygiene TIPPS and associated video are being cited in the updated version of Public Health England's <i>Delivering Better Oral Health V4</i> toolkit, which is due to be published in 2021.
Dental team		
Practitioners reported that having a dental hygienist associated with the practice would facilitate implementation of the guidance recommendations.	To try to encourage practitioners without a dental hygienist to engage in periodontal disease assessment and treatment, the guidance was presented according to the aspects of the management of the condition rather than in sections targeted at individual dental team members.	
Practice management systems		
Having a computerised system to prompt recording of BPE scores was considered a facilitator for carrying out a basic periodontal examination.		