

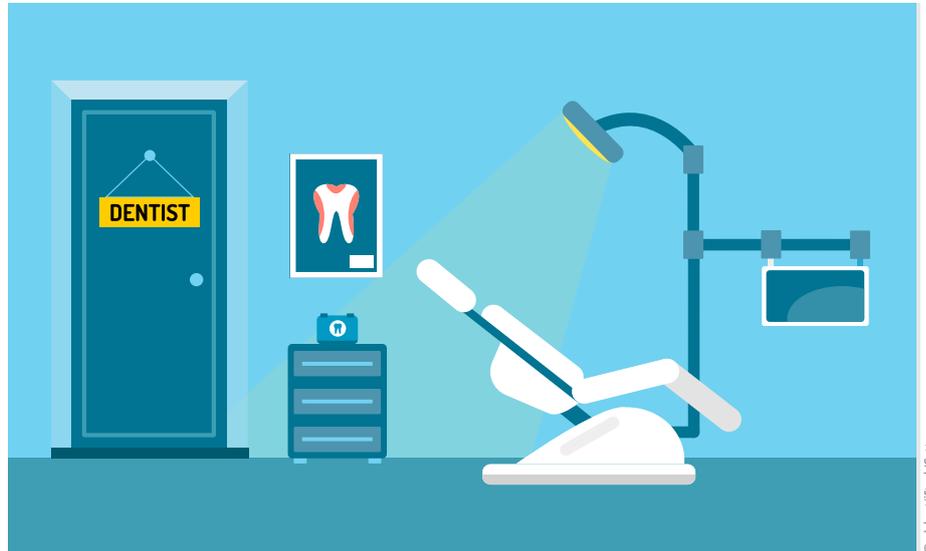
## Our hygienist will see you for your check-up now...

Feasibility study: Assessing the efficacy and social acceptability of using dental hygienist-therapists as front-line clinicians

*Br Dent J* 2016; **221**: 717-721, <http://dx.doi.org/10.1038/sj.bdj.2016.913>

Of the £3-4 billion spent annually on NHS dentistry, 90% of these costs arise from routine care provided by GDPs in 'high-street' dental practices. Over 50% of this NHS activity is limited to the GDP undertaking a 'check-up' with no further treatment required. As the oral health of UK adults continues to improve, it is likely that the proportion only requiring a 'check-up' might continue to increase. The authors of this paper challenge the rationale of using the most expensive resource (the GDP) to carry this out, when other members of the dental team, such as the dental hygienist/therapist could also undertake this safely. This study aimed to assess the feasibility of a definitive trial to evaluate the efficacy and social acceptability of using hygienists/therapists to undertake the routine dental 'check-up'.

Sixty regularly attending adult NHS patients presenting without pain or problems were randomised into three arms in two dental practices. Patients were seen by: only the hygienist/therapist, both the GDP and the hygienist/therapist or only the GDP. The primary outcome measures of the study were patient recruitment, retention and fidelity. A parallel qualitative study was also undertaken which recorded the views of participating patients to determine the social acceptability of the intervention.



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The initial recruitment rate for the study was 34%. This figure increased to over 82% when telephone calls or face-to-face recruitment was used. Over the 15-month period, three recall appointment cycles were employed. The retention rates were 60% for both the hygienist/therapist-only and the GDP and dental hygienist/therapist groups, compared to 70% for the GDP-only group. Treatment fidelity was at a consistently high level across all three rounds of appointments. Fifteen

patients were interviewed in the qualitative study and supported a team approach to the provision of 'check-ups' in the NHS.

The authors conclude that the results of this study appeared to be positive, demonstrating the feasibility of a definitive randomised controlled trial to evaluate the costs and effects of using hygienists/therapists as front-line clinicians in general dental practice.

By Dr Reena Wadia  
BDJ Research Abstract Team

### Author Q&A

with Richard Macey  
University of Manchester



#### Why did you choose to study this topic?

This study was part of an ongoing series of research investigating the greater utilisation and acceptability of dental hygienists and therapists (H-Ts). Previous studies produced positive results around the potential of H-Ts to detect caries, periodontal disease and potentially malignant lesions when compared to decisions made by general dental practitioners. The next logical step was to allow

H-Ts to complete the routine dental examination in a randomised trial to see the effect on oral health over a two- to three-year period. Before a trial of this type could be undertaken it was important to understand recruitment rates for patients in a study where they would not see a dentist for routine examinations and also whether it was possible to retain patients for multiple appointments which were at least six months apart. Finally it was important to understand how acceptable H-Ts completing the routine examination was to patients.

#### What, if anything, most surprised you in the results of this study?

The high level of acceptability reported by patients may be surprising to some, but this is in keeping with existing research which sees patient acceptance of H-Ts. Once patients are

exposed to H-Ts they appear to value and enjoy being treated by this group of professionals. Many patients have an implicit trust in what they often refer to as 'the system' to ensure that whoever sees them and provides treatment will be well qualified and competent at their designated tasks. It is important to understand that the practices involved had employed H-Ts for some years and so many patients may have based their responses on prior experience of H-T's treatment and oral health advice.

#### What are your next steps?

The future aims are to turn this feasibility study into a full trial to understand what impact on oral health, if any, would be identifiable after two to three years of patients receiving their routine dental examination from a H-T. ■