Computers in general practice

Questionnaire survey on the use of computerisation in dental practices across the Thames Valley region
J. H. John, D. Thomas and D. Richards   Br Dent J 2003; 195: 585–590

Objectives
To investigate the extent of and attitudes to computerisation in dental practices across the Thames Valley Strategic Health Authority Region.

Design
Postal questionnaire survey.

Results
A response rate of 88% was achieved. Most (77%) of the practices were using computerised systems or were planning to do so soon. The main reasons for not using computers were that computerisation was not currently necessary (56%), practice staff were reluctant to move to electronic systems (24%), or because computer systems were perceived as too expensive (19%). Computerised systems were used mainly for transmitting Dental Practice Board data, or managing patient and financial records. Only 45% of practices had access to the internet and electronic mail (email). Forty-nine percent of practices thought that it was important to have access to email, 46% to the internet and 40% to NHSnet. Many practices requested training for staff in a variety of areas including managing databases and setting up web-sites.

Conclusions
Despite the advantages of using computerised systems, many dental practices were only using them to a limited extent. Training and follow-up support may encourage dental practice teams to develop more positive attitudes towards computerisation and encourage them to use computers more extensively in clinical practice.

IN BRIEF

- Most dental practices in the region were using computerised systems but many only to a limited extent. Barriers cited include lack of need, cost and a reluctance by practice staff to move away from a successful 'paper' system.
- Electronic mail would facilitate communication to other parts of the healthcare network eg for referrals, and with patients eg for making appointments.
- Internet access would enable all members of the dental team to access patient and professional resources available on-line, including CPD courses.
- There is potential for the development of 'electronic dental records' as part of a patient's 'electronic health record' enabling patient information to be shared within healthcare in general. This would be beneficial to patients and to healthcare providers.

COMMENT
With the move towards closer integration of dentistry with the mainstream NHS, the need for practices to be computerised is becoming more pressing. This paper has much to recommend it. Firstly, it highlights the distance that some practices have yet to travel towards computerisation. Secondly, the discussion section illustrates some of the benefits of moving to a computerised practice.

Central to supporting the vision of NHS dentistry outlined in *Options for Change* is the need for practices to be linked electronically both within and outside the NHS. The aim will be to manage flows of information within and between practices, with local and national NHS Trusts and Health Authorities, and with the public. This is in addition to day–to–day practice management and electronic record–keeping. Local dental services will also wish to develop their own websites.

The survey achieved a high response rate (88%) through a very clear and short questionnaire. Encouragingly nearly 80% were using or about to start using computers. Unsurprisingly larger practices were more likely than smaller practices to be computerised. The use of computers in practices is mainly for sending information to the DPB, practice accounts, managing appointments and storing clinical records. Around half of practices used email and the internet. Although email is mainly restricted to personal mail, the internet was used for continuing professional development in the majority of these practices. Using email or websites to communicate with patients was found in around one in five practices.

In relation to other recent but earlier studies, this survey shows that there seems to have been an encouraging and fairly rapid shift towards computerisation. Half the practices thought it was very important for all practices to be using email and the internet. Practices without computers were not using them because they felt that it is not currently a necessity, and they do not yet see a reason to change tried and trusted practice. The perceived financial, opportunity cost and efficiency implications of moving to computerisation are apparently less of a barrier for these practices, although still important. About half of all practices wanted some staff training.

The paper highlights that there has been a significant move towards computerisation in dentistry. They are not yet being used to their full advantage, and a significant minority do not yet see any advantage at all to outweigh the costs. National and local strategies for implementing *Options for Change* will need to raise awareness of the advantages of computerisation and support IT training of the dental workforce.

A. Sprod, Senior Research Fellow,
Dental Public Health, University of Bristol Dental School
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