Engagement with the North Wales Local Dental Committee — part 2: communication preferences

Benjamin R. K. Lewis, *1,2,3 Ravi Boojawon, 4 Daniel C. Naylor, 5 Callum I. Smith 4 and Daniel M. Prior 4

Key points

Informs the readership of dentists' preferred methods of communication with a Local Dental Committee (LDC) and to show dentists' preferences for attending an LDC meeting.

Highlights the potential changes in accessing an LDC website during a pandemic and to highlight the perceived 'core' elements of an LDC website.

Demonstrates the perceived importance of the different elements of an LDC website.

Abstract

Aims To gather the views of dentists practising within North Wales on their preferences as to how they would prefer to interact with the North Wales Local Dental Committee (LDC) (NWLDC).

Design Descriptive cross-sectional survey.

Setting Online electronic questionnaire.

Materials and methods Survey circulated via the NWLDC's current communication channels, local professional groups, the local health board and Health Education and Improvement Wales' MaxCourse email distribution.

Results A total of 167 unique responses were received from across North Wales, which included 132 responses from primary care dentists, yielding a response rate of 40.6%. Respondents would prefer to interact with the NWLDC via email notifications (88%), virtual meetings (52.1%) and via the LDC website (41.9%). Furthermore, 31.1% wanted a combination of both physical and virtual attendance at an LDC meeting to be an option and 43.7% of respondents did not want to attend LDC meetings as a preferred method of engaging with the LDC. The survey indicated that holding an educational event just before the LDC meeting will not have a positive impact on subsequent participation in the LDC meeting for 91.6% of respondents. The survey revealed that 70% had never visited the NWLDC's website, with only 20.4% of people visiting it more than once a year. Also, 83.8% stated that the pandemic had made no difference on them accessing the NWLDC website. The results allowed the identification of the top five 'core elements' for an ideal LDC website and which elements should have their access restricted only to LDC members.

Conclusions The survey revealed that the respondents want greater communication from the NWLDC and that this is best achieved over a variety of different communication platforms, using the NWLDC website as a primary information resource to which the other communication methods are tethered. It is recognised that only a minority will want to, or be able to, attend the quarterly LDC meetings and so it is imperative that the NWLDC's communication strategy accommodates these individuals, both proactively and passively, by effective use of digital media and to continuously monitor its effectiveness so that it can adapt its strategy to maximise engagement and information delivery. There is a need to expand the representation of the LDC committee to encompass those who have newly entered the profession or are new to the area. The NWLDC recognises the need to reach out to dentists across North Wales who many feel isolated and disenfranchised to establish a constructive, mutually beneficial relationship.

¹Consultant Orthodontist, Betsi Cadwaladr University
Health Board, UK; ²Orthodontic Department, Department
8, Wrexham Maelor Hospital, Croesnewydd Road,
Wrexham, Ll13 7TD, UK; ³Orthodontic Department, Glan
Clwyd Hospital, Rhuddlan Road, Rhyl, LL18 5UJ, UK;
⁴Dental Practitioner, Dant Y Coed Dental Practice, Maelor
Buildings, 1 Heol Maelor, Coedpoeth, Wrexham, LL11 3NG,
UK; ⁵Principle and Dental Practitioner, Ruabon Road Dental
Practice, 96 Ruabon Road, Wrexham, LL13 7PH, UK.
*Correspondence to: Benjamin R. K. Lewis
Email address: Benjamin.RK.Lewis@wales.nhs.uk

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Introduction

Local Dental Committees (LDCs) are statutory bodies who represent all primary care dental practitioners within their catchment area. Effective communication between the LDC and the dental community is crucial in ensuring the effective and sustainable delivery of clinical dental services. This requires a symbiotic relationship with communication flowing in both directions, allowing the LDC to provide a hub for information delivery and with the

local dental practitioners being able to notify the LDC of professional related issues which are affecting them.

The North Wales Local Dental Committee (NWLDC) was concerned that their current communication strategy was not achieving these aims and so set up a working party to ascertain the current level of engagement with the LDC and to identify how to facilitate greater participation and engagement. The current engagement of the North Wales dental community with the NWLDC has been reported in Part 1.

RESEARCH

This article will discuss the respondents' views on how they would prefer to interact with the NWLDC and how the LDC plan to achieve this.

Materials and methods

An online, anonymous, Google Forms questionnaire was created and piloted before circulation to the dental community of North Wales. The survey was circulated using a range of methods, including: the established NWLDC communication channels (the email distribution list, the LDC's Facebook page and the LDC website); invites to participate from the local health board (LHB), who emailed all primary care contract holders asking them to circulate the survey among the dental performers; and Health Education and Improvement Wales (HEIW), who forwarded the survey link via their MaxCourse email distribution network. Local professional networks, study groups and committees were called upon to help ensure the maximum awareness of the project was achieved.

The questionnaire consisted of a number of sections. The first section gathered anonymised, demographic data, including sex, age range, professional role, area(s) of practice within dentistry and location(s) of where that practice was undertaken. The next section asked about how they found out about the survey and their general awareness of, and participation in, the LDC meetings and activities. The final section focused on the respondents' preferences on the future way the LDC communicate with them.

The survey was open for a period of four months from 14 December 2020 to 14 March 2021. As this was a service evaluation, no ethical approval was required and consent to participate was implied by the individuals proceeding to complete the survey.

The returned survey responses were then downloaded to an Excel document to allow 'cleaning' of the data by assessing it at an individual level, with reference to the date stamps, demographic information and free-text entries, to enable any duplications to be removed. These cleaned data were then analysed to produce both quantitative and qualitative outcomes.

Results

The survey yielded 167 unique responses. Of this, 132 were primary care dentists, which resulted in a response rate of 40.6%. The other respondents included therapists, dental nurses, practice managers and secondary care providers.

Fig. 1 Age range and sex distribution of respondents

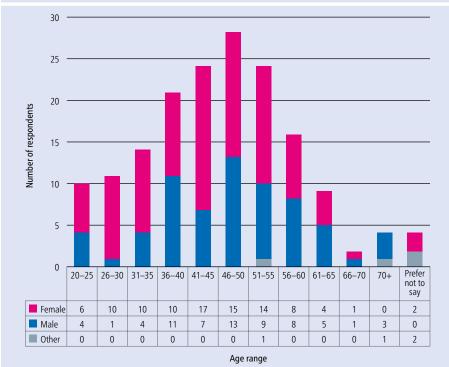


Table 1 What methods would you like the LDC to use to communicate with its members?

Source	Number	Percentage %
Paper-based communication	17	6.0
Face-to-face meetings	42	25.1
Virtual meetings	87	52.1
Website	70	41.9
Email	147	88.0
Facebook	55	32.9
Instagram	9	5.4
Twitter	8	4.8
Other	0	0

Source	Number	Percentage %		
Never visited it	117	70.0		
Yes – regularly (1 x 1/12)	8	4.8		
Yes – frequently (1 x 3/12)	11	6.6		
Yes – occasionally (1 x 6/12)	15	9.0		
Yes – rarely (1 x 12/12)	13	7.8		

Table 2 How often do you usually visit the

LDC website?

Yes - unsure when

As reported in Part 1, responses were gathered evenly from all the counties across North Wales, with the majority of responses being from women (58.1%) and aged between 25–50 years of age (58.7%), as shown Figure 1.

The respondents were asked how they would prefer to interact with the LDC and receive information/notifications (Table 1). Email notifications were by far the most popular options at 88% (n = 147), followed by virtual meetings (52.1%; n = 87) and via the LDC website (41.9%; n = 70). It was noted that 52 respondents (31.1%) wanted a combination of both physical and virtual attendance at an LDC meeting to be an option and that 43.7% (n = 73)

of respondents did not want to attend LDC meetings as a preferred method of engaging with the LDC.

1.8

We asked about several factors which could potentially alter the likelihood of attending an LDC meeting. The survey indicated that holding an educational event just before the LDC meeting would have no positive impact on participation with the subsequent LDC meeting for 91.6% (n=153) of respondents, whereas the use of video conferencing platforms to hold virtual meetings would encourage 55.7% (n=93) of respondents to attend compared to 4.2% (n=7) who would be less likely and 40.1% (n=67) who felt it would have no impact.

The survey asked how often the respondents usually visit the NWLDC website (Table 2). It showed that 70% (n = 117) of those that replied to the survey had never visited the NWLDC's website, with only 20.4% (n = 34) of people visiting it more than once a year.

The survey then asked if the COVID-19 pandemic had increased their use of the NWLDC website. Surprisingly, 83.8% (n = 140) of the respondents stated that the pandemic had made no difference in them accessing the LDC website, with 10.2% (n = 17) indicating that they visited the site less frequently and only 6% (n = 10) revealing that in increased their website use.

The respondents were asked if they felt that the NWLDC website should be 'open access' or to have some elements only accessible after an individual 'logs in'. The results showed that 24% (n = 40) felt it should be completely open access, 53.3% (n = 89) thought that some of the information should only be accessible after an authorised log in and 18% (n = 30) felt you should need to log in to access any information; 4.8% (n = 8) were unsure.

The survey asked what aspects of an LDC website they would consider 'core' elements (Table 3). The top five were: purpose of the LDC/ what the LDC is (89.2%; n=149); information on training/educational events (74.9%; n=125); forthcoming LDC meeting details, such as agenda/minutes/documents/location (73.7%; n=123); information of referral pathways to specialist services (71.3%; n=119); and previous LDC meeting details, including agenda/minutes/ documents (61.7%; n=103).

The respondents were also asked to rank the core elements into their 'top five'. The results were each allocated a numerical value: $1^{st} = 5$, $2^{\text{nd}} = 4$, $3^{\text{rd}} = 3$, $4^{\text{th}} = 2$, $5^{\text{th}} = 1$. This allowed each 'core' element to be ranked into their perceived importance. The respondents felt that the most important elements to have on an LDC website were: purpose of the LDC/ what the LDC is; forthcoming LDC meeting details, such as agenda/minutes/documents/ location; membership of the LDC committee; previous LDC meeting details, including agenda/minutes/documents; and newsletters. This ranking of importance was then compared to the popularity of each core element (Table 3) to highlight any variations.

The survey then asked which, if any, of the 'core' elements should only be accessible via a 'members log in' (Table 4). This revealed that only 'forthcoming LDC meeting details – agenda/ minutes/documents/location' (53.9%; n = 94)

Table 3 What 'core' elements do you feel should be on the LDC website?				
Core element	Number	Percentage (%)		
Purpose of the LDC/what the LDC is	149	89.2		
Information on training/educational events	125	74.9		
Forthcoming LDC meeting details – agenda/minutes/documents/location	123	73.7		
Information of referral pathways to specialist services	119	71.3		
Previous LDC meeting details – agenda/minutes/documents	103	61.7		
Links to external documents/guidance	99	59.3		
Links to support services	97	58.1		
Recruitment information/local job vacancies	97	58.1		
Membership of the LDC committee	95	56.9		
Links to LDC's social media	82	49.1		
Newsletters	81	48.5		
Links to other associated organisations	80	47.9		
LDC constitution	74	44.3		
'Search site' facility	63	37.7		
'Recently added information' banner	63	37.7		
Information for patients/general public	44	26.3		
Other	5	3.0		

Table 4 Do you feel any of the potential 'core' areas on the LDC websites should only be accessible via a 'members log in'?

Core element	Number	Percentage
Forthcoming LDC meeting details – agenda/minutes/documents/location	94	53.9
Previous LDC meeting details – agenda/minutes/documents	69	41.3
Information of referral pathways to specialist services	51	30.5
Recruitment information/local job vacancies	44	26.3
Membership of the LDC committee	43	25.7
Information on training/educational events	41	24.6
Links to external documents/guidance	36	21.6
Purpose of the LDC/what the LDC is	32	19.2
Links to LDC's social media	25	15.0
Links to support services	20	12.0
LDC constitution	20	12.0
Links to other associated organisations	16	9.6
Newsletters	15	9.0
'Search site' facility	8	4.8
'Recently added information' banner	8	4.8
Information for patients/general public	8	4.8
None	9	5.4
Unsure	5	3.0
Other	2	1.2

and 'previous LDC meeting details – agenda/ minutes/documents' (41.3%; n = 69) were felt should be restricted to view via a 'members log in' by over one-third of respondents.

Finally, we asked how the respondents felt the website could be improved. Thematic analysis showed that the main areas which were felt could be improved were: recent updates 'banner'; better information as to what the LDC does; improved links to specialist services; a local recruitment section; secure access; open access; making it more widely known/advertised; and having an 'ask us a question' link.

Discussion

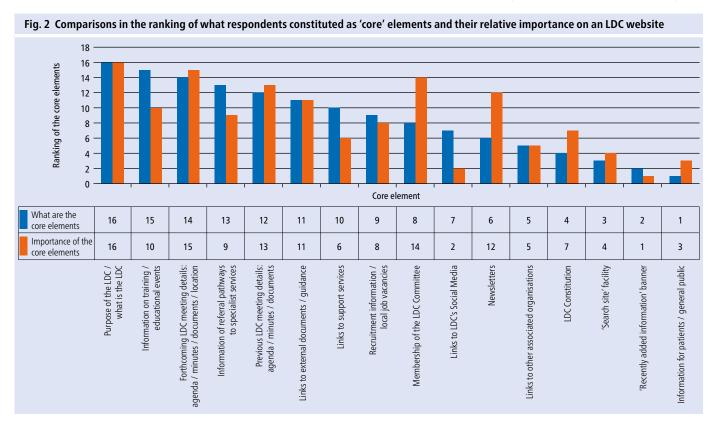
Effective communication between the LDC and its constituents is fundamental to the relationship, as without it, the LDC is unable to fulfil its obligations as it may not be fully aware of the issues affecting the dental community of North Wales, or be able to adequately cascade critical information down to those on the front line. This survey aimed to ascertain from the dentists of North Wales how they wanted the NWLDC to communicate with them, rather than the NWLDC making assumptions on the 'best way to do it'.

The respondents' overwhelming communication preference was for email notifications at 88% (n = 147), followed by

virtual meetings (52.1%; n = 87) and the NWLDC website (41.9%; n = 70). Less than onethird of respondents wanted to be notified by Facebook (32.9%; n = 55) or attend face-to-face meetings (25.1%; n = 42), with 43.7% (n = 73) unlikely to ever attend an LDC meeting either physically or virtually. These results are probably influenced by both the demographics of the respondents, the long-standing standardisation of email notifications being the main method of professional communications and the impact of the COVID-19 pandemic on the acceptability and normalisation of virtual professional interactions. It also highlights the importance of employing a broad range of methods for information dissemination as the individuals within the membership will each have their own preferences. The challenge for the LDC is to remain current in its communication strategy and this will be inherently influenced by the demographic makeup of the LDC committee and any co-opted members. A committee made up of predominantly middle-aged dentists will, most likely, only consider utilising the communication methods that they themselves prefer or are comfortable with. This highlights the importance of encouraging membership of the committee to be a more diverse pool of individuals, which will not only help the LDC stay fresh and representative, but will also help them to become aware of new communication innovations which can be implemented.

One of the fundamental aspects of most professional organisations is a website which allows a common point of access for individuals wanting to gain information relating to that organisation and allowing all other communication methods – which often need to be 'short and snappy' in style to encourage engagement – to be linked to the official website for improved information delivery. LDCs are no different and the majority have their own dedicated websites providing a portal for information storage and its dissemination to their membership.

An LDC website potentially forms the backbone resource for information delivery to the local dentists and their teams. In North Wales, there was a wish to review the current LDC website to ensure that it was fit for purpose to fulfil the needs of the dentists within the region. Although 41.9% (n = 70) of respondents wanted to access NWLDC information via a website, only 30% (n = 50) had ever actually used the current site. The survey results indicated that this was mainly due to lack of knowledge about the NWLDC's website's existence. Interestingly, it was expected that, during the COVID-19 pandemic, that information resources for dentists, especially digital ones, would have been more frequently used. However, the survey results indicate that this was not the case for the NWLDC's website, with only 6% of respondents stating the pandemic resulted in increasing their



use of the LDC website. This could be due to several factors, including a lack of awareness of the website itself, along with the presence of plethora of other sources of information, including the British Dental Association, Office of the Chief Dental Officer of Wales, Welsh Government and other professional bodies.

The respondents' views on what they felt were the 'core' elements of an LDC website and the relative important of these elements are shown in Figure 2. Generally, the same trends were followed, such as the 'purpose of the LDC/ what the LDC is, 'forthcoming LDC meeting details - agenda/minutes/documents/location' and 'previous LDC meeting details - agenda/ minutes/documents' coming at the top section of both tables. However, there were some slightly contradictory aspects with 'information on training/educational events' and 'information of referral pathways to specialist services' being ranked the 2nd and 4th in the 'core' elements identification, yet they were much further down the reported 'importance' when ranked by the respondents. Whereas the opposite was true of 'membership of the LDC committee' and 'newsletters', which were ranked much more important than originally indicated in the list of 'core' elements. This could be due to a difference in the respondents' perception about what they felt should be on an 'ideal' LDC website and what they would actually find most useful.

There had been previous discussions during LDC meetings about having patient-centred information on the LDC website and whether the site itself should remain 'open access'. The results of this survey indicated that the majority of respondents felt the site should be professionally facing only and with restricted access (71.3%). This was primarily for potentially sensitive documents, such as meeting minutes, as this would potentially allow more comprehensive and 'unfiltered' minutes to be recorded. This could be more beneficial to those viewing the LDC minutes who were not present at the actual meeting.

However, the overwhelming comment was to make the presence of the LDC website more widely known, although it is likely that the act of conducting this survey has gone some way to achieving that.

Following analysis of the results found in Part 2 of the survey, the following actions are being enacted by the NWLDC to improve the information dissemination:

- To encourage a more diverse membership of the committee, including representations from dental foundation trainees and co-opted members representing the secondary care sectors and dental care professionals
- To widely disseminate through multiple sources (HEIW, LHB, study groups, Facebook etc) formal invites to the dentists of North Wales to participate in the LDC and request them to join the LDC mailing list to ensure that the dental community are kept up to speed, while also adhering to General Data Protection Regulation guidelines
- To invite the dentists, through a varied of digital media, to join the NWLDC Facebook group and newly created WhatsApp group, to allow instant messaging to be implemented for any important events and 'breaking news', as well as allowing the membership to communicate with each other on professionally related topics
- To redesign the NWLDC website to take into account the results of this survey and the needs of the users
- To liaise with the health board to provide 'welcome packs' to dentists who move to the area, detailing the role of the LDC and inviting them to form a proactive relationship with the NWLDC
- To provide summary 'e-newsletters' with links to the LDC website to keep local dentists informed of developments within North Wales
- To monitor uptake of the dentist engagement, including the number 'registering' for e-notifications, on a rolling basis and amend the strategy accordingly
- Undertake a further assessment of the level of professional engagement and their wishes for further modifications to their relationship with the LDC and their communication methods in two years' time.

Conclusions

This survey revealed that the respondents want greater communication from the NWLDC and that this is best achieved over a variety of different communication platforms, using the NWLDC website as a primary information resource to which the other communication methods are tethered.

There is a need to expand the representation of the LDC committee to encompass those who have

newly entered the profession or are new to the area. The NWLDC recognises the need to reach out to dentists across North Wales who many feel isolated and disenfranchised to establish a constructive, mutually beneficial relationship. It is recognised that only a minority will want to, or be able to, attend the quarterly LDC meetings and so it is imperative that the NWLDC's communication strategy accommodates these individuals, both proactively and passively, by effective use of digital media.

The NWLDC needs to be ever vigilant about its relationship with the dentists of North Wales and ensure that it continues to monitor and adapt its strategy to maximise engagement and information delivery.

Ethics declaration

The authors declare no conflicts of interest.

This study was devised to evaluate the current communication strategies of the North Wales Local Dental Committee with the individuals who were invited to complete the survey being the dental professionals served by the LDC. As such, the study did not require ethical approval as it was a service evaluation and not considered research as per the Medical Research Council/NHS Health Research Authority. Consent to participate was implied by individuals proceeding to complete the survey.

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Author contributions

Benjamin R.K. Lewis: working group member, survey design and construction, survey circulation, results analysis, and article write-up. Ravi Boojawon: working group member, survey design and tester, survey circulation and contribution to article write-up. Daniel C. Naylor: working group member chair, survey design and tester, survey circulation and contribution to article write-up. Callum I. Smith: working group member, survey design and tester and survey circulation. Daniel M. Prior: working group member, survey design and tester and survey circulation.