



'I can now share my knowledge'

The British Dental Association's **Anne-Marie Moisley** speaks to three dental care professionals who have studied on the BDA's oral health education course.

The value of having an oral health educator (OHE) in a practice is often overlooked or not even considered, but times are changing. Oral health education is being recognised as an essential service needed in dental practices. For dental nurses, training to be an OHE not only provides personal and professional development, but enables them to bring new services to their practices.

The three dental nurses featured in this article discuss what qualifying as an OHE has meant to them; their roles within the dental team; and the opportunities studying on the British Dental Association's (BDA's) course has given them.



Julie Horton
Practice nurse

Julie is a mum with four children; she qualified as a dental nurse in November 2003 and now works in a mixed practice in Corsham, Wiltshire. She qualified as an OHE in September 2010.

Why did you want to qualify as an OHE?

I wanted to gain more experience and increase my responsibilities. I enjoy talking to people and being an OHE is a good way of doing that.

I wanted to support patients on a one to one basis.

Are you using your OHE qualification now?

Yes I am, but not as much as I would like to. However, this is definitely changing. I am hoping to get a Friday afternoon clinic started, just giving oral health education. I am really passionate about nursing and oral health education and feel it is a real boost to my career. I have always wanted to do this since I left school, so at 16 I left school and joined a practice as a trainee.

Do you see your own patients?

At my previous practice I did have patients regularly referred to me from the dentist. I have only been at my new practice since July and I'm now starting to build up a healthy patient base. This is a small practice and we have been short staffed, but we have recently taken on a new nurse and this is definitely coming together now.

How effectively do you feel your OHE qualification has benefited your practice?

The dentists can see the benefits to the practice, how it frees up their time while I demonstrate a technique or give oral health advice. Patients from my practice are learning about what I do. They can talk to me one-to-one and on their own level and feel at ease. They don't feel that they need to ask the dentist, which is good as

sometimes a patient feels that their questions are not valid enough to ask the dentist.

How have you benefited from qualifying as an OHE?

I am much more confident in everything, not just my ability at work. I am confident in how I integrate with people and feel I am an equal. It has given me such a boost to have achieved something and achieved it well. I was hesitant about taking the course. I questioned whether I was capable. I proved (as I'm that bit older than my colleagues) that it could be done. When I am with the patients I can talk about oral health, I can give them the best advice that I can. When I don't know something I will ask (that's okay too) and I always get the answer back to the patient.

What has been the most interesting thing/project you have been involved in since qualifying?

I was involved with a project with Boots promoting 'Family Mouth Check', sponsored by GSK. I was asked to walk around the store and ask customers to fill out an oral health questionnaire; I would offer advice having asked about people's oral health habits. I really did enjoy the two days, meeting people, and would not hesitate to do it again given the chance. It was interesting to find out how people have some funny ideas about their oral health and help to put them right. In effect lay the myths to rest!

Have you encountered any obstacles or problems since qualifying?

Getting somewhere private to speak to patients or a free surgery is always a little difficult. We are such a small practice and very busy so there is nowhere to see patients unless surgery is finished, so usually I get to see the patients after 3pm. Additionally, when we are short staffed, I have to nurse. Hopefully, this will soon be alleviated as a new nurse is taken on permanently. I have suggested to the dentist to include additional oral health advice in the price for private patients, which he is happy to look into.



Yuri Watkins
Community nurse

Yuri works in Yeovil for the Somerset Primary Care Service and is one of seven OHEs in the OH Promotion Team which is part of the NHS Community Dental Service. Yuri originally qualified

as a dental hygienist in Japan, but due to the invalidity of her qualification in the UK had to start again as a trainee dental nurse. In summer 2011 with a family of four children and having to also learn the English language, Yuri successfully qualified as an OHE.

Why did you want to qualify as an OHE?

I wanted to learn about the prevention of oral disease and to make a difference. I felt if people know how to look after their mouths so many problems could be prevented.

Are you using your OHE qualification now?

Yes, every day. In my nursing home visits I see at least three patients.

Do you see your own patients?

No I cannot book my own patients as I move around the district. Dentists do refer patients to me but this usually happens on the spot in the surgery or on a domiciliary visit.

How effectively do you feel your OHE qualification has benefited your practice?

Dentists will refer patients to me as they know I'm qualified. I am asked questions by both dentists and other nurses regarding oral health activity. The dentists are grateful they can refer patients to me as it gives them more time to do something else. We are a good team and help each other.

How have you benefited from qualifying as an OHE?

I can now share my knowledge. I enjoy learning and want to continue learning. I was not confident to talk to people I didn't know, but since qualifying my confidence has grown. It has enabled me to work more efficiently as a team member, giving good oral health advice. The book *Basic guide to oral health education and promotion* (published by Wiley-Blackwell) which the BDA sent to me whilst on the course has become my 'bible'.

What has been the most interesting project you have been involved in since qualifying?

Delivering oral health training sessions to other health professionals. It was really interesting to train community dietitians who were especially interested in learning about 'nil-by-mouth' patients. It was also interesting to train speech and language therapists in the importance of good oral hygiene.

Additionally, I was involved in delivering oral health education and reinforcing the importance of regular check-ups to the socially excluded (the homeless and travellers) in a drop in centre where a free lunch was provided.



Julie Brunswick
Prison nurse

Julie works for the Prison Service three days a week at a large men's prison in Oxfordshire with 1,200 patients. Julie works part-time with one dentist in this single surgery

as a self-employed dental nurse and practice manager. Julie also works in Adult Education teaching a soft furnishing course. She qualified as an OHE in September 2010.

Why did you want to qualify as an OHE?

I had already been undertaking the role anyway and wanted to underpin my knowledge with the facts and formalise with a qualification. It was a logical CPD progression.

Are you using your OHE qualification now?

Yes, having the qualification has enabled me to offer more support to the practice and allowed me to work with more autonomy. I am involved as a smoking cessation advisor within the prison. We also try to link with all the different areas, so when the gym is offering a session like 'Healthy Prison Day' all prisoners

accessing the gym that day will be able to visit my dental stand and fill out a questionnaire on diet. I give advice about diet as many prisoners are into body building and not aware of the hidden sugars in their protein foods or juices. I advise them to swap juice for water, and sugar for sweeteners. I see my role is to expand the oral health message amongst all groups within the prison.

Do you see your own patients?

I see patients in the wing in group sessions. I also triage the long term patients. This can be a planned group session, but I do not see patients independently due to the structure of the prison and security restrictions.

How do you feel your OHE qualification has benefited your practice?

I am very fortunate that I work with a very supportive dentist. We regularly evaluate our service to ensure we are providing the best for the service. The qualification reassures the patients, reassures me and provides reassurance to the dentist that I am providing the correct facts. The surgery has become more time efficient as we can multi-task between us. The dentist continues to value my contribution.

How have you benefited from qualifying as an OHE?

Within the prison my responsibilities have been developed further – in terms of giving out smoking cessation and diet advice. I am giving new officers information about what I do. I have links with doctors, chiropodists, opticians and the detox team that attend the patients. I find my role even more rewarding seeing the benefits of the patients who change and engage with the oral health message.

What has been the most interesting project you have been involved in since qualifying?

I have been involved with school visits, which is completely different from prison work, and I organised a Prison Training Day for dental staff from other prisons.

I also got involved with the GSK/Boots oral health promotion. I found the interaction with members of the public very interesting – particularly once again interacting with those that generally don't access dental care on a regular basis.

For more information about the BDA online course in oral health education please visit www.bda.org/ohcourse or contact the BDA Education team on oh.support@bda.org or 020 7563 4551.