Is your PCT (preventive care team) ready? asks Seema Sharma

All NHS and private dentists have to register with The Care Quality Commission in 2011, and CQC has developed a set of outcomes around personalised care, treatment and support.

How many times have you been to a practice building seminar which tells you that your hygienist is the key to your practice’s success? Well, here is an opportunity to tie this success back to CQC requirements, demonstrate how you provide personalised care for all patients and free your time up for higher production dentistry – the dentistry you trained to do. Practice management gurus tell you time and time again that most of your practice’s success is sitting unclaimed in your filing cabinet, and your hygienist can help you unlock it. The key, however, is elusive unless you develop systems to monitor how you deliver care and use your teams effectively.

The previous article explored how patients can be risk assessed and help develop systems according to need to develop clinically driven practice management systems. This provides a system to tailor care to the patient’s needs and fits well with private practice profits, the Care Quality Commission and the care pathways outlined in the Steele Review. And why wouldn’t it? After all it’s just “good dentistry”!

Green (low needs) patients do not need to log your diary up by coming in for a chat and a check-up! Send them away for a two-year ‘NICE recall’ but remember a recall is a “view of oral health”, not a scale and polish, so that is not going to take care of their dental and periodontal maintenance requirements or your risk of unwittingly providing superseded neglect. A lot can happen in two years! Bring them back with your hygienist for their interim care at least six-monthly for younger patients, and 12 monthly for older patients with no disease and no risk factors.

Amber (moderate needs) patients are at a higher risk of dental disease because they have risk factors, but not necessarily active disease. They are often the patients you will need to provide the most high end treatment for such as whitening, implants, cosmetic dentistry etc, because they do not necessarily have disease precluding treatment but they are not problem free. Such patients should be on a four or six-monthly regime with the preventive care team really coming in to consult and advise on the need for caries prevention and therapy. They are at higher risk of dental disease and no risk factors.

Intensive Advice & Intervention

6-12 MONTHLY PROFESSIONAL CARE
With hygiene/preventive care team
DENTAL TRENDS
April 19-25, 2010

Preventive Care Team
Green
Low risk
Amber
Medium risk
Red
High risk

Advice & Intervention

4-6 MONTHLY PROFESSIONAL CARE
With hygiene/preventive care team
PERIO RISK (poor plaque control, diabetes, smoker)
As for green plus:
• Detailed ONH/IDC assessment
• Disclose plaque & biofilm
• Debridement
CARIES RISK (no caries but poor sugar control or plaque control)
As for green plus:
• Diet Recording & Analysis
• Fluoride varnish
• Debridement
INCREASE FLUORIDE AVAILABILITY
• (6-12) Fluoride supplement
• 6ppc in fluoride varnish
FLOUREIDE VARNISH
• (Age 3-18) 2 x annum
• (Age 18+) 2 x annum
CANCER RISKS
• Smoking/tobacco cessation
• Alcohol consumption advice
Advice/Intervention by Dentist reinforced by practice team, website and literature

SKILL MIX
• Dental Nurse (extended training for F Varnish apps)
• Hygienist (maintenance)

INTENSIVE ADVICE & INTERVENTION
3 MONTHLY PROFESSIONAL CARE – with hygiene/preventive care team

IF PERIODONTAL DISEASE
As for amber plus:
• Consider chlorhexidine mouthwash
• Debridement
• Tippin affected sextant, active treatment, leukotrauma control
• Referral as necessary

IF CARIES
As for amber plus:
• Referral to oral health educator for caries control programme

FLOUREIDE AVAILABILITY & VARNISH
As for amber plus:
• (16) 2800 ppm F toothpaste
• (16) 500 ppm F toothpaste

CANCER RISKS
For caries
• Leukotrauma

ADA/Dental Protection
Use dental protection at all times.

SKILL MIX
• Dental Nurse (F V apps)
• OHE (Oral Health Advice)
• Hygienist (peri control)
• Therapist (caries control)