

Survey 1 – List of Treatment Items – Report Summary

Background

The profession, including dentists, members of the wider dental team, Health Boards, and professional organisations, were asked to complete a survey giving us their views on a draft list of treatment items that we think should form the basis of a revised system going forward (a full copy of the list can be accessed [here](#)). The survey was intended to focus on the principles of what treatment items should be available on the NHS and not on the payments dentists would receive for each item.

Overview of Responses

The survey received a total of 557 responses from a range of dental professionals situated across Scotland. Demographic information gathered shows that there was a reasonable spread of respondents from across all Health Board areas. The most commonly held job role, chosen by almost half of respondents, was Associate Dentist. Of those respondents who were able to provide their NHS/private split, the majority had NHS earnings of 80% or more. In terms of gender, 48.7% of respondents identified as female, 39.5% as male, and the remaining 11.8% as other, preferred not to say, or did not respond to the question.

The survey asked respondents an initial question about whether they would prefer to retain the existing Determination I, develop a simplified version, or extend the existing version. A total of 555 people answered this question and of those 83% stated that they would prefer to develop a simplified Determination I.

This was followed by a series of questions about each of the six sections contained in the list of treatment items. Respondents were asked whether they agreed or disagreed that the list in each section contained all of the treatments that they would normally provide to their NHS patients.

Section	Agree	Disagree	Response Rate
Oral Health Examination & Diagnosis	80.6%	19.4%	100.0%
Urgent Dental Care	57.1%	42.9%	98.4%
Preventive Care	64.5%	35.5%	97.5%
Routine Treatments	73.0%	27.0%	97.1%
Advanced Treatments	62.0%	38.0%	97.9%
Advanced Aesthetic Care	66.7%	33.3%	95.0%

Overview of Comments

Respondents provided a wide range of comments which covered a variety of topics and treatment items. Many treatment items were suggested by some for inclusion and by others for exclusion. The treatment areas which were most frequently discussed in responses across all survey sections are summarised below. A full report of comments by section is included in the main survey report.

Include

The treatments that respondents mostly commonly mentioned for inclusion in the list of treatment items were: periodontal care, preventive care/screening, and extractions for urgent dental care. In terms of perio, suggestions were made for a perio assessment, with various elements such as BPE, plaque and bleeding indices, pocket charting, along with education and preventive advice. Management of perio related conditions, such as abscesses and periodontium was also noted.

For preventive care/screening respondents suggested that oral health advice, instruction and education was required. Comments suggested that this should be available for adults, parents/carers, and in domiciliary care settings. The use of diet diaries, smoking and alcohol cessation advice, prescription of fluoride products, fluoride varnish and silver diamine fluoride liquid were some of the suggestions made in the comments.

Exclude

The treatments most commonly highlighted by respondents for exclusion from the list of treatment items were: endodontics, veneers, dentures, and crowns. For endodontics, the most common aspect that respondents wanted excluded was molar endodontics.

In terms of veneers, the most common reasons given for why they should be excluded was because they aren't required to maintain oral health, they are often purely aesthetic, and they are not financially viable. Some respondents did note that if they are available it should only be in exceptional circumstances or for replacements for people who already have veneers.

There was a strong push for dentures, specifically cobalt chromes, to be excluded as some felt there is no functional reason to use those over acrylic dentures and they are not financially viable. However, a smaller number of responses did suggest the inclusion of cobalt chromes, particularly for people who already have them.

In terms of crowns, it was noted that temporary crowns and some molar crowns should not be provided. It was also suggested that inlays be excluded.

Alter

A very wide range of suggestions were made for ways in which the list, or specific treatments, could be altered. The most common theme for this was to move items to a different part of the list or change the terminology that was used to describe certain items. In addition, some respondents noted that the distinctions between routine, advanced and advanced aesthetic care were subjective and difficult to define.