

Barriers and facilitators to using an objective risk communication tool during primary care dental consultations: an analysis informed by the Theoretical Domains Framework

 Danielle Musson¹ Heather Buchanan¹ Matthew Nolan² Koula Asimakopoulou³
University of Nottingham¹ Merivale Dental Practice² Kings College London³



INTRODUCTION

METHOD

- Objective risk calculators can supplement clinical judgement and support the accurate understanding and communication of potential health risks [1]. One example of an objective calculator is the Denplan Previser Patient Assessment (DEPPA) tool [2].
- To our knowledge, no research has been undertaken to explore the barriers and facilitators to implementing an objective risk communication tool within dental consultations.
- The Theoretical Domains Framework (TDF) is a system designed by behavioural experts which has a strong theoretical basis and can be used to assess implementation barriers in clinical practice [3, 4].



AIM

The aim of this study was to use the TDF [3] to identify barriers and facilitators among dentists to implementing a risk-communication tool (DEPPA) within dental consultations.

- This study used a dual recruitment strategy: (1) a member of the research team emailed personal contacts, and (2) participants were recruited via an existing database of practices which had access to the tool.
- Thirteen one-to-one semi-structured interviews were conducted with dentists using the TDF as a guide.
- The schedule explored (i) dentists' perceptions of a risk communication tool and (ii) any barriers or facilitators to its use.
- Data were thematically analysed and then deductively coded into the TDF using the domain descriptions provided by Cane et al [3].



RESULTS

Eight theoretical domains and fourteen sub-themes (seven barriers and seven facilitators) were identified through the analysis.

TDF DOMAIN SUB-THEME (BARRIER/FACILITATOR)

TDF DOMAIN	SUB-THEME (BARRIER/FACILITATOR)
Optimism	Scepticism as to whether the tool can facilitate behaviour change (B)
Social influences	Colleagues/management influence tool usage (F)
Environmental contexts & resources	Time constraints (B) Workload pressures (B) Software incompatibility (B)
Behavioural regulation	Monitoring tool usage (F)
Memory, attention & decision processes	Lack of patient engagement influences decision (B) Perception that the tool is less appropriate for some patients (B)
Reinforcement	Using the tool to maintain professional accreditation (F)
Beliefs about consequences	An evidenced-based assessment which reduces dentist-patient conflict (F) Belief that the tool facilitates risk communication (F) Belief that the tool enables a comprehensive assessment (F)
Goals	Scheduling and integrating the tool into routine practice (F) Risk communication tool perceived as a low priority task (B)

CONCLUSION

- Dentists understood the value of using an objective risk calculator during dental consultations, though require further support to integrate the tool into practice.
- Our findings provide a sound theoretical base for future health psychology interventions aimed at facilitating the use of a risk communication tool.
- Further research should select intervention functions and operationalise behavioural techniques based on the implementation difficulties identified within this study.

References

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