

REASON WHY?

Patients at SATH were waiting on average two years for their impacted teeth to be exposed and bonded under general anaesthetic (GA). These waiting times needed to be significantly reduced to prevent possible patient harm and to ensure that orthodontic treatment can be commenced in a timely manner. Several improvement ideas are currently being tested to improve this pathway. As part of the implementation of a pathway change, a specific patient information leaflet (PIL) and video was designed.

PLAN

Under the previous pathway, all patients seen by the orthodontists who required exposure and bonding of unerupted teeth would be referred via letter to the Oral & Maxillofacial Surgery (OMFS) team. The patient would be then seen by the OMFS for an separate assessment before being added to their waiting list for the operation.

This pathway often led to duplication and rework with the same information being given out to the patient by both the orthodontist and OMFS team. Concerns that the time-lapse between referral and surgical treatment may have affected the plan, also led to rework for clinicians and reattendances for patients.

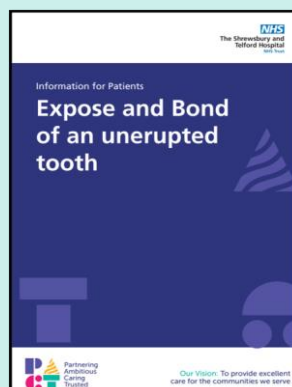
Due to the timescales involved, patients were often also failing to be able to recall previous information given to them verbally and inconsistencies in post-operative instructions were often reported by patients.

As part of the implementation of a new orthodontic-oral surgery referral pathway, which includes a "virtual" assessment by OMFS for simpler patients and a Multi-disciplinary team (MDT) joint clinic for complex patients, it was deemed necessary and prudent to take the opportunity to develop a PIL and video which would ensure consistency of information as well as to give patients the opportunity to refer to this information in their own time on multiple occasions. There was no previous Trust PIL or video on this procedure.

It was determined that the video and leaflet needed to be audited to ensure patient acceptability.

DO

A dedicated patient information leaflet was designed by OMFS and orthodontics as well as a specific patient information video. The video and leaflet were approved by the patient experience team and discussed at Governance.



After approval, all appropriate patients seen by L Seager on clinic at RSH were given the QR codes to watch the video and complete the questionnaire at home. After a 2-month period and having receiving very few responses (4), it was decided to ask patients to watch the video in clinic and complete a hand-written questionnaire for feedback. At the conclusion of the audit, 20 post-operative and 17 pre-operative patients had watched the video and completed the questionnaire



To improve the consistency and format of information being provided to patients who require surgical exposure and bonding of unerupted teeth and have been referred onto the oral surgery-orthodontics pathway by April 2025. There should be >95% acceptability from patients who watched the video.

STUDY

Questionnaires were completed by 20 patients who had experienced unerupted teeth being exposed and bonding as part of their on-going orthodontic treatment, as well as 17 patients who have been referred to OMFS for this procedure. Results strongly indicate that the video is acceptable to patients.

5. Now that you have watched the video do you think you would have found it easier to understand your treatment if it had been available to you before your treatment?
20 responses



Written feedback received

"All good. Clear and right on point"
"Very helpful and easy to understand"
"It is helpful to reassure patients about how they might feel after the surgery"
"This has helped me understand the procedure more clearly"
"Really good"
"Maybe a little long, quite informative however"

ACT

The Expose and bond of an unerupted tooth leaflet and video will be ADOPTED.

It is recommended that all appropriate patients are given this leaflet and recommended to watch the video when they are consented for their orthodontic treatment. Whenever possible it is also recommended that patients are given the opportunity to watch the video in-clinic. This is likely to require the purchase and use of tablet devices.

The MDT oral surgery-orthodontic clinic and virtual clinics are currently being TESTED and will utilise the patient information leaflet and video as part of this change. This audit provides assurances that the PIL and video are providing patients with understandable and useful information, which may have been a risk otherwise for patients who are directed down the virtual clinic pathway.

- 97% of patients strongly agreed or agreed that they would recommend this video to other patients
- 97% of patients strongly agreed or agreed that they understood the information in the video
- 97% of patients felt the video was the right length
- 100% of patients waiting for surgery strongly agreed or agreed that they found the video helpful
- Only positive feedback was received in the free-text comments