

SCOPE

1 Guideline title

Dental recall: recall interval between routine dental examinations

1.1 Short title

Dental recall

2 Background

- a) The National Institute for Clinical Excellence ('NICE' or 'the Institute') has commissioned the National Collaborating Centre for Acute Care to develop a clinical guideline on recall interval between routine dental examinations for use in the NHS in England and Wales. This follows referral of the topic by the Department of Health and Welsh Assembly Government (see Appendix). The guideline will provide recommendations for good practice that are based on the best available evidence of clinical and cost effectiveness.
- b) The Institute's clinical guidelines support the implementation of National Service Frameworks (NSFs) in those aspects of care where a Framework has been published. The statements in each NSF reflect the evidence that was used at the time the Framework was prepared. The clinical guidelines and technology appraisals published by the Institute after an NSF has been issued will have the effect of updating the Framework.

3 Clinical need for the guideline

- a) Inequalities in dental health exist in the UK, especially across different socio-economic groups and between areas with and without a fluoridated water supply.² Other modifying factors include age, general health and medication, disability, diet, ethnicity, tobacco use, alcohol

use and other oral habits, fluoride use, dental attendance and clinician performance. Given these inequalities in dental health, it is possible that recall intervals may need to be adjusted to reflect unique oral health needs of both individuals and groups.

- b) This guideline will need to take account of the current system of delivering dental care and also the policy direction in which the clinical and payment systems are being modernised.³
- c) The General Dental Service currently allows payment for a dental examination every six months. However, the practice of a blanket six-month recall interval strategy is not evidence based.
- d) Registration rates differ across England and Wales, perhaps reflecting patient issues of:
 - inability to register with a National Health Service dentist
 - cost of check-ups and/or treatment which can be a deterrent to attendance in adults, especially among those with a low income (children get free dental care)
 - ‘fear’ of visiting a dentist.
- e) There are clinical challenges in assessing the oral health and susceptibility to disease of each individual patient.

4 The guideline

- a) The guideline development process is described in detail in three booklets that are available from the NICE website (see ‘Further information’). The Guideline Development Process – Information for Stakeholders describes how organisations can become involved in the development of a guideline.
- b) This document is the scope. It defines exactly what this guideline will (and will not) examine, and what the guideline developers will consider.

The scope is based on the referral from the Department of Health and Welsh Assembly Government (see Appendix).

- c) The areas that will be addressed by the guideline are described in the following sections 4.1 to 4.4.

4.1 Population

4.1.1 Groups that will be covered

- a) All dentate and edentulous people (i.e., those with or without their natural teeth)
- b) Both children and adults.

4.2 Healthcare setting

- a) The guideline will cover primary care received from NHS dental staff (dentists, independent contractors contracting within the NHS, dental hygienists and therapists) practising in England and Wales.

4.3 Clinical management

4.3.1 What the guideline will cover

- a) The guideline will include recommendations for the optimal recall frequency for routine dental checks. This may not be a single interval, and may differ according to a patient's risk. This will take into account the potential of the patient and the dental team to improve or maintain the quality of life and to reduce morbidity associated with oral and dental disease.
- b) In arriving at recommendations, the impact of dental checks on: patients' well-being, general health and preventive habits; caries incidence and avoiding restorations; periodontal health and avoiding tooth loss; and avoiding pain and anxiety will be considered.

4.3.2 What the guideline will not cover

- a) The guideline will not cover intervals between dental examinations that are not routine dental recalls; that is, intervals between examinations related to ongoing courses of treatment, or part of current dental interventions.
- b) The guideline will also not cover emergency dental interventions, or intervals between episodes of specialist care.

4.4 Audit support within guideline

The guideline will include key review criteria for audit, which will enable objective measurements to be made of the extent and nature of local implementation of this guidance, particularly its impact upon practice and outcomes for patients.

4.5 Status

4.5.1 Scope

This is the final draft of the scope following consultation.

4.5.2 Guideline

The development of the guideline begins in Spring 2003.

5 Further information

Information on the guideline development process is provided in:

- *The Guideline Development Process – Information for the Public and the NHS*
- *The Guideline Development Process – Information for Stakeholders*
- *The Guideline Development Process – Information for National Collaborating Centres and Guideline Development Groups.*

These booklets are available as PDF files from the NICE website (www.nice.org.uk). Information on the progress of the guideline will also be available from the website.

6 References

1. NHS Dental Practice Board, England and Wales registrations for January to March 2002. http://www.dpb.nhs.uk/ddonline/reg_total.cfm?period=M02&chapter=REG
 2. Davenport C et al (2001) The clinical and cost-effectiveness of routine dental checks. West Midlands Health Assessment Technology Group, The University of Birmingham.
 3. Department of Health (2002) NHS Dentistry: Options for Change. London, Department of Health.
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Appendix – Referral from the Department of Health and Welsh Assembly Government

The Department of Health and Welsh Assembly Government asked the Institute:

“To prepare guidance for the NHS in England and Wales, on the clinical and cost effectiveness of a dental recall examination for all patients at an interval based on the risk from oral disease.”
