

Rating the human touch

Sarah Manton explains how the FDT's rating systems for the dental team's non-technical skills will improve patient safety

Patient safety is at the heart of the College's role in upholding the highest standards of surgical practice. Patient safety also underpins 'Standards for Dental Trainers across the Dental Team', a document published by the Faculty of Dental Trainers (FDT) to support its aim of securing improved patient outcomes through excellence in education and training.

The role of human factors and their impact on clinical performance are topical issues for the training of undergraduates and postgraduates. Whereas, historically, curricula concentrated on teaching clinical skills and testing competencies, it is now appreciated that proficiency in non-technical skills (NTS) is just as important for safe and successful patient management.

Investigations into adverse events have shown that as many as 80% of incidents are the result of issues relating directly to human factors, such as breakdowns in communication, the inability to reflect, or poor situation awareness, task management and team-working. Training to enhance these professional skills contributes directly to improved efficiency and safe patient care.

Established in 2018 with the support of the General Dental Council, the National Advisory Board for Human Factors in Dentistry has taken up the importance of human factors. This year the board released a position paper, 'Human Factors and Patient Safety in Dentistry', to raise awareness and understanding of how

human factors can result in unforeseen outcomes that can compromise the safety of the team and the patient. The paper calls for fostering learning, better understanding, openness in reporting and a no-blame culture when discussing adverse incidents.

The taxonomy for rating the non-technical skills for surgeons (NOTSS) developed by the RCSEd, the University of Aberdeen and NHS Education for Scotland has led the way in recognising the importance of assessing NTS in postgraduate clinical training. NOTSS has been adopted around the world and is now embedded in the curricula of training programmes. The FDT has followed this lead by developing DeNTS, the first taxonomy for rating the NTS of dentists.

UNIQUE CHALLENGES

In dentistry, clinical training takes place across all healthcare sectors, including general dental practice, public and community dental services, hospital dental services, universities, colleges and the armed forces. An assessment tool has to be relevant for all training settings and this presented a number of challenges when developing DeNTS.

For example, a surgical team in an operating theatre always has a number of staff present. A dental team often consists of just two



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people working in a surgery with the patient, or may be made up from two or more dentists and DCPs working in a larger clinical setting.

Most patients at the dentist are awake, generally quite anxious or even fearful, and can be quick to pick up on non-verbal cues. They are usually very aware of what is happening around them and may not be able to see what is going on inside their mouth. Performing complex procedures and dealing with nervous patients are just two reasons why dentistry is stressful.

Most patients do not welcome going to the dentist and the pressures on dentists to perform clinical tasks to the standard and in the time required are considerable. The negative impact and additional worries that the COVID-19

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pandemic has had on dental practice and training have been widely reported by professional organisations and the press.

Good NTS are essential for helping to reduce stress and to make dentistry easier. Anticipating everything that may be needed for a procedure, which complications may arise and how to deal with them, managing the unexpected, working efficiently with the dental nurse, communicating with the patient, using non-verbal clues and recognising when to change direction or stop what you are doing are all required to deal with situations as they arise. Coping better comes with clinical experience, but awareness and strategies for coping can be taught, improved and developed in training.

The FDT has recognised that the working dynamic between the dentist and the dental nurse (and other DCPs) is crucial. The dental nurse is working chairside during the patient's appointment and is often able to see stresses developing

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and complications arising before the dentist, who may be concentrating so hard on the clinical procedure that he or she is not aware of, for example, signs of anxiety from the patient that require reassurance. The dental nurse is in an ideal position to provide feedback that will encourage the team to reflect on how each member can assist the other to make improvements.

In recognition of the vital role of the dental nurse in patient safety, the FDT has also developed a dental nurse assessment taxonomy (DNAT), which enables them to rate the behaviours of the dentist they are observing. This gives an opportunity for the dentist and the dental nurse to reflect on good practice and identify areas for improvement.

Both DeNTS and DNAT are formative, non-threatening rating tools and engagement is voluntary. Developing good NTS promotes team dynamics and inclusivity, enhances the ability of the clinician to cope, relieves stress, improves patient safety and reduces the likelihood of patient complaints, which may in turn herald an investigation by the regulatory body.

The FDT is looking forward to rolling out DeNTS and DNAT for the benefit of trainers and clinicians alike. After all, trainees expect their trainers to demonstrate excellent skills themselves.

For information about the Faculty of Dental Trainers please visit fdt.rcsed.ac.uk

References

1. Faculty of Dental Trainers RCSEd (2019): Standards for Dental Trainers across the Dental Team.
2. Human Factors and Patient Safety in Dentistry (2020); National Advisory Board for Human Factors in Dentistry.