

Annual Clinical Journal of  
**DENTAL HEALTH**

*in collaboration with the*  
International Journal of Dental Hygiene

THE BRITISH SOCIETY OF DENTAL HYGIENE AND THERAPY





The mission of BSDHT is to represent the interests of members and to provide a consultative body for public and private organisations on all matters relating to dental hygiene and therapy. We aim to work with other professional and regulatory groups to provide the highest level of information to our members as well as to the general public. The Society seeks to increase the range of benefits offered to members and to support this with a clear business and financial strategy. The Society will continue to work to increase membership for the benefit of the profession.



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# Annual Clinical Journal of DENTAL HEALTH

in collaboration with the

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# Editorial ACJ



BSDHT members will recall that, almost two years ago, I shared with you a proposal from Professor Dagmar Slot, Editor-in-Chief, the *International Journal of Dental Hygiene (IJDH)*. She approached the BSDHT Executive team requesting that we collaborate and produce a special UK issue of the *IJDH* to celebrate the 75th anniversary of the BSDHT, in 2024.

Despite our aim to have a journal ready to share with you all at the OHC in Harrogate in November 2024, the deadline that summer was tight and passed all too quickly. Since manuscripts continued to be submitted at that time, we took the decision to extend the deadline and give due consideration to all submissions from UK dental hygienists and dental therapists involved in research projects. I thank the authors for their attention to the revisions that were requested by the peer reviewers and their patience throughout the process.

Under the expert guidance of Professor Slot, a huge amount of work has gone into this project. I was delighted, and surprised, by the number of manuscripts submitted. This certainly exceeded my expectations! I am most grateful to Dagmar for her expertise and significant input into this project – on a personal note, I have learnt a lot!

Finally, I can now share the authors' work in this journal, on the BSDHT website and on the *IJDH* website.

On the following pages, you can read Q&As with the authors offering a flavour of their research methodology and a summary as to how their findings may impact your clinical practise. Information about the CPD relating to each of the papers is also included. One link and one QR code, for all 18 papers, take you directly to the BSDHT website where they are hosted and you can read them in full. As a member, you can also upload and submit your reflections and obtain up to 27 hours of CPD - 1.5 hours per paper. For those papers that have been published with Open Access, you have a further option of reading them on the *IJDH* website where you can also download a pdf copy.

We are presenting the *ACJ* in this format, this year, for entirely pragmatic reasons. A financial analysis revealed that taking into account the various stages of production - design, print and postage - it would be prohibitively expensive to send a hard copy to BSDHT members: potentially circa £30,000! We did

explore all avenues for potential commercial support and are extremely grateful to Haleon for providing an educational grant that enabled us to cover the costs of publishing four papers Open Access on the *IJDH* website. We are also appreciative of Listerine's financial support towards the costs of printing this journal.

My thanks to every member for your patience regarding access to this publication. Similar to the change with the format of the OHC 2025 (this year's joint Oral Health Summit with the BSP), normal service will resume and next year you will receive a copy of the 2026 *ACJ* by post.

At the OHC in Harrogate last November, the Oral and Dental Research Trust held a seminar for dental hygienists and dental therapists who were interested in becoming actively involved in clinical research. Delegates packed the room and I was encouraged by BSDHT members' appetite to learn. This enthusiasm was replicated the following day when the Publications Team hosted a research workshop. Our speakers, Dr. Susan Bissett and Dr. Jeanie Suvan, both inspirational dental hygienists, shared their career pathways in the world of research. Their enthusiasm for their subjects was infectious!

I hope that when you read their published papers, these dental hygienist and dental therapist authors will equally inspire you. The research presented here demonstrates the various career pathways and options available to dental hygienists and dental therapists today. Our important roles and contributions to professional oral health care are wonderfully portrayed throughout this compilation.

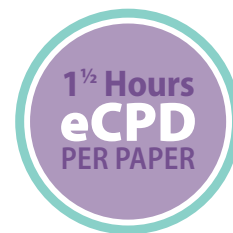
I very much look forward to receiving your submissions for next year's journal.

## Heather Lewis



# Beyond bouncing back: exploring undergraduate dental professional students' perceptions of resilience

Vaida Kaunaite<sup>1</sup> Marina Harris<sup>2</sup>



## Author affiliations

1. Dental Hygiene and Dental Therapy Student, University of Portsmouth Dental Academy, Portsmouth, UK
2. Associate Professor Dental Education and Wellbeing, University of Portsmouth Dental Academy, Portsmouth, UK

### AIM

By adopting a qualitative approach, the study aimed to explore undergraduate dental profession students' perceptions of resilience, the influencing factors and strategies to develop resilience.

### LEARNING OBJECTIVES

The authors will:

1. Define and conceptualise resilience.
2. Identify factors influencing resilience.
3. Describe strategies to foster resilience.

### LEARNING OUTCOMES

Having read this paper, the reader will be able to:

1. Recognise students' resilience as a fluctuating and contextual phenomenon influenced by personal, social, and environmental factors rather than a fixed trait.
2. Explain the range of factors that influenced students' resilience, including mindset, peer support, academic environment and stressors, such as intense workload and commuting.
3. Apply practical approaches to cultivate resilience, including leading a healthy lifestyle, effective time management, seeking support, and practising self-compassion.

*Aligned with GDC learning outcomes: A and D*

To read the paper in full and obtain 1.5 hours CPD, please follow the link or scan the QR code at the bottom of the page.

## Author Q & A

Ms. Vaida Kaunaite discusses the authors' work.

### What were the reasons that led you to undertake this study?

We were motivated by a pressing need to better understand and support the resilience of dental profession students, in response to the early emergence of mental health challenges in the profession.

### Were any of the results unexpected?

The results reflected a more nuanced and personal interpretation of resilience than we had anticipated. We found it surprising that some students perceived stress as a motivating stimulus to succeed. The mature students interviewed drew resilience from their driven peers. This was an unexpected finding given that existing literature has shown that a competitive academic environment is often linked to stress and perfectionism among dental students. Furthermore, the students perceived resilience as a dynamic and contextual phenomenon that fluctuated as opposed to the traditional view of resilience as a static trait.

### How do you think your findings could potentially impact the clinical practice of dental hygienists and dental therapists?

The findings suggest that building resilience contributes to improved emotional preparedness, which can positively influence clinical performance. The study highlights multiple practical resilience-building strategies, including self-compassion and

leveraging social support networks. Integrating these habits into daily routines can help foster adaptive coping mechanisms, enhance decision-making and support continuous personal and professional growth. Insights from the study may also inform the development of resilience-focused training in undergraduate education, preparing future clinicians to smoothly transition into real-world practice. This can only have a positive impact on new graduates.

This paper was submitted to the collaborative UK Special Issue of the *International Journal of Dental Hygiene* to celebrate the BSDHT's 75th anniversary. It is published Open Access in the Early View section, courtesy of an education grant to BSDHT from Haleon. You can read it here: <https://doi.org/10.1111/idh.12873>

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# Exploring the feasibility and acceptance of delivering oral health interventions in a primary care diabetes context in North East England: a qualitative two-case study

Susan M. Bissett<sup>1</sup>, Philip M. Preshaw<sup>2</sup>, Justin Presseau<sup>3,4</sup>, Tim Rapley<sup>5</sup>

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4. School of Epidemiology and Public Health, University of Ottawa, Canada
5. Faculty of Health and Life Sciences, Northumbria University, Newcastle upon Tyne, UK

1½ Hours  
eCPD  
PER PAPER

## AIM

To recruit primary care medical practices in North East England to develop a new oral health intervention for informing people with diabetes about the links between diabetes and periodontitis and signposting them to a dental professional for assessment. The implementation was evaluated for feasibility and acceptance.

## LEARNING OBJECTIVES

The authors will:

1. Develop an intervention to inform people with diabetes about the links between diabetes and periodontitis.
2. Evaluate the intervention by establishing the three main questions asked to the diabetes teams.

3. Investigate how the mechanism for signposting to a dental professional differs between medical practices.

## LEARNING OUTCOMES

Having read this paper, the reader will be able to:

1. Explain the intervention, who is best placed to deliver the intervention, and when the intervention should be delivered.
2. Discuss how the practices established a process which enabled the intervention to be successfully embedded into their diabetes review appointments.
3. Recognise that dental hygienists and dental therapists are ideally situated to implement best practice recommendations for their patients with diabetes (or pre-diabetes).

Aligned with GDC learning outcomes: **A, B, C and D**

To read the paper in full and obtain 1.5 hours CPD, please follow the link or scan the QR code at the bottom of the page.

## Author Q & A

Dr. Susan Bissett, Deputy Degree Programme Director for BSc Dental Therapy, Newcastle University discusses the authors' work.

### What were the reasons that led you to undertake this study?

The evidence supporting a bi-directional relationship between diabetes and periodontitis is well established and guidance documents include the need for collaborative working

This paper was submitted to the collaborative UK Special Issue of the *International Journal of Dental Hygiene* to celebrate the BSDHT's 75th anniversary. It is published Open Access in the Early View section. You can read it here:

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between medical and dental healthcare teams. Challenges with interprofessional working, that have been reported in the literature, can hinder the uptake of best practice recommendations. This research aimed to develop and evaluate an oral health intervention for feasibility in two medical practices with different demographics and diabetes protocols.

### Were any of the results unexpected?

Previous research conducted by the authors indicated buy-in from medical teams involved in diabetes care, especially nurses and diabetes educators, but there were reservations that an intervention would create disruption. This case study describes how the practices established a process which enabled the intervention to be successfully embedded into their diabetes review appointments.

### How do you think your findings could potentially impact the clinical practice of dental hygienists and dental therapists?

Dental hygienists and dental therapists are ideally situated to implement best practice recommendations for their patients with diabetes (or pre-diabetes). Whilst direct communication with the general practitioner or diabetes nurse may be difficult, communicating with and through the patient can raise awareness, develop collaborative working and help to improve health outcomes for patients.



# Education of dental hygienists and dental therapists working with head and neck cancer patients in oral and maxillofacial surgery departments in the United Kingdom: a quantitative study

Jocelyn Harding<sup>1</sup> and Kenneth Eaton<sup>2</sup>

## Author affiliations

1. Dental Hygienist, Confident Dental and Implant Clinic, Stroud, Gloucestershire, UK
2. Visiting Professor University of Portsmouth, Honorary Professor University of Kent, Kent, UK

1½ Hours  
eCPD  
PER PAPER

### AIM

To explore and evaluate the current undergraduate and postgraduate education for dental hygienists (DHs) and dental therapists (DTHs) in the UK regarding the care of head and neck cancer (HANC) patients in oral and maxillofacial surgery departments (OMFS) and to identify gaps in training and areas for curriculum development.

### LEARNING OBJECTIVES

The authors will:

1. Evaluate the current content of undergraduate and postgraduate education for dental hygienists and dental therapists in the UK in the care of HANC patients.
2. Identify the gaps in undergraduate and postgraduate education in this clinical area.

3. Explore the need for psychological training to prepare dental professionals to support HANC patients.

### LEARNING OUTCOMES

Having read this paper, the reader will be able to:

1. Discuss current educational practices for DHs and DTHs treating HANC patients in OMFS departments.
2. Recognise the need for curriculum reform that includes standardised HANC training and psychological provision.
3. Identify educational needs for continuing professional development to provide appropriate treatment for patients with complex cancer care needs.

Aligned with GDC learning outcomes: **A, B, C and D**

To read the paper in full and obtain 1.5 hours CPD, please follow the link or scan the QR code at the bottom of the page.

## Author Q & A

Mrs. Jocelyn Harding, President Elect of the Mouth Cancer Foundation, discusses the authors' work.

### What were the reasons that led you to undertake this study?

From personal experience, dental hygienist (DH) training in HM Forces lacked education regarding the care of patients who had received a diagnosis of head and neck cancer (HANC). Over the past 30 years, it has become clear that, anecdotally, many professionals feel unsupported when treating these patients, mainly due to a lack of relevant training. Findings in the literature search revealed that the undergraduate curriculum varied widely.

This study explored the type of HANC care education provided to DHs and dental therapists (DTHs) currently studying in UK universities. It aimed to understand the experiences of those currently, or previously employed, in such roles.

### Were any of the results unexpected?

An unexpected result from this research was that, for those DH and DT treating patients with head and neck cancer, their average time in post was around six years. The investigators assumed that it would be short and fluid due to the lack of training and support. Another unexpected outcome related to future training was that when participants were asked which topics should be included in

a future professional development courses, psychology emerged as the most requested topic. This reflects the emotional and psychological demands of supporting patients through what many describe as a 'brutal journey'.

### How do you think your findings could potentially impact the clinical practice of dental hygienists and dental therapists?

As the incidence of head and neck cancer continues to rise, it is likely to impact the future clinical practice of DHs and DTHs with an increasing number of HANC patients being supported in primary care.

This paper was submitted to the collaborative UK Special Issue of the *International Journal of Dental Hygiene* to celebrate the BSDHT's 75th anniversary. It is published Open Access in the Early View section. You can read it here:  
<https://doi.org/10.1111/idh.12875>

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# The experiences of implementing a near-peer teaching scheme into an undergraduate dental hygiene and dental therapy programme at the University of Sheffield in the United Kingdom

Kate Peysner and Emma Bingham

## Author affiliations

The University of Sheffield, School of Clinical Dentistry Sheffield, UK

1½ Hours  
eCPD  
PER PAPER

### AIM

To review the outcomes of implementing a near-peer teaching scheme into an undergraduate dental hygiene and dental therapy programme.

### LEARNING OBJECTIVES

The authors will:

1. Gain an understanding of the concept of near-peer teaching in academic institutions.
2. Learn how near-peer teaching can be included in undergraduate teaching curricula.

### LEARNING OUTCOMES

Having read this paper, the reader will be able to:

1. Describe the benefits of near-peer teaching in dental education.
2. Identify the key components of a successful near-peer teaching programme.
3. Evaluate the impact of near-peer teaching on student outcomes and institutional resources.

Aligned with GDC learning outcomes: **B and C**

To read the paper in full and obtain 1.5 hours CPD, please follow the link or scan the QR code at the bottom of the page.

## Author Q & A

Mrs. Kate Peysner, Deputy Programme Lead, Clinical Tutor and Emma Bingham, Professor in Dental Hygiene and Dental Therapy, Programme Lead, University of Sheffield discuss their work.

### What were the reasons that led you to undertake this study?

The research was undertaken as part of our educational evaluation of the near-peer teaching scheme, which initially started as a pilot in 2015.

### Were any of the results unexpected?

The results were consistent with the literature on peer teaching, and we are grateful that we have been able to add to the growing body of evidence which highlights the strengths of incorporating peer teaching into undergraduate curricula.

### How do you think your findings could potentially impact the clinical practice of dental hygienists and dental therapists?

We would hope that the findings from our research will encourage other dental training programmes to incorporate peer teaching into their curricula, strengthening participants' confidence, building professional relationships, enhancing teamworking skills and aiding personal development and promotion opportunities.

This paper was submitted to the collaborative UK Special Issue of the *International Journal of Dental Hygiene* to celebrate the BSDHT's 75th anniversary. It is published in the Early View section. You can read it here: <https://doi.org/10.1111/idh.12879>



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# The complex world of toothpaste diversity, meeting patient clinical needs. An umbrella review

Jeanie Suvan<sup>1,2</sup> and Crystal Marruganti<sup>2</sup>

## Author affiliations

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2. Unit of Periodontology, Endodontology, and Restorative Dentistry, Department of Medical Biotechnologies, University of Siena, Siena, Italy

### AIM

This umbrella review aims to provide clinicians with an overview of toothpaste ingredients and evidence of efficacy for a variety of oral conditions, including gum health issues, caries, dentine hypersensitivity, tooth surface loss, oral malodour, and tooth whitening (staining).

### LEARNING OBJECTIVES

The authors will:

1. Provide clinicians with an overview of toothpaste ingredients.
2. Facilitate clinicians' understanding of the evidence to support efficacy of toothpaste ingredients for various oral conditions.
3. Enable clinicians to individualise application of the evidence to patient needs.

### LEARNING OUTCOMES

Having read this paper, the reader will be able to:

1. Identify key characteristics of various toothpaste ingredients for a variety of oral conditions.
2. Understand the evidence for the recommendation of various toothpaste ingredients for oral conditions.
3. Discuss why and when a toothpaste with a particular ingredient might be recommended for a particular oral condition.

1½ Hours  
eCPD  
PER PAPER

Aligned with GDC learning outcomes: **A, B, C and D**

To read the paper in full and obtain 1.5 hours CPD, please follow the link or scan the QR code at the bottom of the page.

## Author Q & A

Dr. Jeanie Suvan discusses the authors' work.

### What were the reasons that led you to undertake the research?

Over the past years toothpaste formulations have advanced to include a variety of active ingredients. When I realised that I was not the only clinician challenged to understand the differences and options for my patients, despite the availability of a vast amount of published evidence, an umbrella review was undertaken to provide an overview.

### Were any of the results unexpected?

Results were not entirely unexpected but, via the research, it became clear that the magnitude of diversity of toothpaste ingredients was even more than expected.

### How do you think your findings could potentially impact the clinical practice of dental hygienists and dental therapists?

This umbrella review might be a practical guide for clinicians as they aim to individualise toothpaste recommendations to fit the needs of each patient.

This paper was submitted to the collaborative UK Special Issue of the *International Journal of Dental Hygiene* to celebrate the BSDHT's 75th anniversary. It is published Open Access in the Early View section. You can read it here:

<https://doi.org/10.1111/idh.12904>

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# A report on a qualitative service evaluation of return to dental therapy reskilling schemes in the United Kingdom

Amanda Gallie<sup>1</sup> and Kira Stearns<sup>2</sup>

## Author affiliations

1. Lincoln Institute for Rural and Coastal Health, University of Lincoln. Ross Lucas Medical School, Lincoln. Bupa Stamford, Bupa Dental Care UK, Lincolnshire, UK
2. Dental Therapist Foundation Training Program Lead, NHS England South East, Thames Valley and Wessex Dental Directorate, Oxford, UK. Centre for Dental Public Health & Primary Care, Barts and The London School of Medicine and Dentistry, London, UK

### AIM

To evaluate the quality and appropriateness of Return to Therapy courses in Thames Valley and Wessex, National Health Service England.

### LEARNING OBJECTIVES

The authors will:

1. Evaluate whether the scheme met the needs of the participants.
2. Establish the impact on the participants and trainers.

### LEARNING OUTCOMES

Having read this paper, the reader will be able to:

1. Explain the knowledge gaps in the Return to Dental Therapy programme.
2. Identify barriers and facilitators relating to the up skilling of Dental Therapists.

1 ½ Hours  
eCPD  
PER PAPER

Aligned with GDC learning outcomes: **A, B and C**

To read the paper in full and obtain 1.5 hours CPD, please follow the link or scan the QR code at the bottom of the page.

## Author Q & A

Mrs. Amanda Bloomfield- Gallie, Doctoral Researcher, University of Lincoln and Keira Stearns, Dental Therapist Foundation Training Programme Lead NHS England South East, discuss their work.

### What were the reasons that led you to undertake this study?

We undertook this work following a request to evaluate the appropriateness of the Return to Dental Therapy Programme which was being run by NHS England in Thames Valley and Wessex in

This paper was submitted to the collaborative UK Special Issue of the *International Journal of Dental Hygiene* to celebrate the BSDHT's 75th anniversary. It is published Open Access in the Early View section. You can read it here:

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2023. After some deliberation with colleagues, it became clear that a service evaluation was the most appropriate method to employ.

### Were any of the results unexpected?

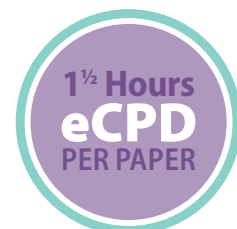
We were pleasantly surprised to observe that the dentist supervisors demonstrated enhanced knowledge and understanding of the competencies related to scope recognition and task sharing with dental team members, through exposure to guiding and observing the dental therapist in the clinical environment. This example showcases successful inter-professional collaboration using the lived experience.

### How do you think your findings could potentially impact the clinical practice of dental hygienists and dental therapists?

The service evaluation highlighted knowledge gaps in specific clinical areas that need to be considered in curriculum development.

# A cross sectional study of the current and future dental hygiene and dental therapy student workforce in the UK and Ireland during 2022-2025: considering facilitators and barriers to the growth of this workforce

Sarah Murray<sup>1</sup> and Jason Niggli<sup>2</sup>



## Author affiliations

1. Reader in Dental Therapy Education, Centre for Dental Public Health & Primary Care, Institute of Dentistry, Faculty of Medicine and Dentistry, Queen Mary University of London, London, UK
2. Professor, Oral Health Sciences and Dental Education, School of Health and Social Care, University of Essex, Essex, UK

### AIM

The primary aim of this paper was to provide an updated and comprehensive overview of student intake numbers across dental hygiene, dental therapy and combined dental hygiene and therapy programmes in the United Kingdom and Ireland. By compiling and analysing current training data, the study sought to inform national and international stakeholders about the potential future supply of these dental care professionals and contribute to discussions surrounding workforce planning and dental education policy.

### LEARNING OBJECTIVES

The authors will:

1. Identify the number and distribution of dental hygiene, dental therapy, and combined programmes across the UK and Ireland.

2. Compare student intake figures across different institutions and regions.
3. Interpret how variations in educational capacity may affect the future availability of dental hygienists and dental therapists.

### LEARNING OUTCOMES

Having read this paper, the reader will be able to:

1. Discuss the current landscape of dental hygiene and therapy training programmes in the UK and Ireland, including the number of students enrolled and the distribution of programmes across institutions.
2. Recognise regional and institutional variations in training numbers and consider the implications for workforce planning and service provision.

*Aligned with GDC learning outcomes: B*

To read the paper in full and obtain 1.5 hours CPD, please follow the link or scan the QR code at the bottom of the page.

## Author Q & A

Ms. Sarah Murray MBE and Professor Jason Niggli discuss their work.

### What were the reasons that led you to undertake this study?

The Directors of Dental Hygiene and Therapy Group maintain a database of training numbers for all dental hygiene, dental therapy and combined dental hygiene and therapy programmes across the UK and Ireland. The dynamic nature of training numbers, shaped by factors such as institutional capacity, funding allocations, and policy changes, necessitated a systematic update to ensure the data remained relevant and accurate to support discussions around workforce modelling and the utilisation of dental hygienists and dental therapists to improve oral health. The research aimed not only to update the national database but also to contribute to international discourse on the education and utilisation of dental hygienists and dental therapists, supporting global efforts to strengthen preventive dental services and workforce resilience.

### Were any of the results unexpected?

While the overall findings were largely in line with expectations regarding the distribution and availability of training programmes across the UK and Ireland, a few results were unexpected. Notably, there was considerable variability in student intake numbers between institutions – not always attributable to geographical

factors alone – and is likely to reflect disparities in institutional resources and clinical placement availability.

### How do you think your findings could potentially impact the clinical practice of dental hygienists and dental therapists?

Anticipating workforce supply enables practices to optimise skill mix, delegate appropriate care, and potentially reduce patient waiting times, particularly for aspects within our respective scopes of practice. The successful utilisation of DH and DTH enhances access to care and contributes to the broader objectives of improving oral health outcomes and addressing inequalities in service provision.

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# Working to a full scope of practice in general dental practice. A mixed methods study presenting the results of a British Society of Dental Hygiene and Therapy Member survey

**Diane Rochford**

## Author affiliations

The British Society of Dental Hygiene and Therapy, UK

1½ Hours  
eCPD  
PER PAPER

### AIM

The aim of the study is to establish whether dental hygienist and dental therapist BSDHT members are working to their full scope of practice within a general dental practice setting.

### LEARNING OBJECTIVES

The author will:

1. Investigate the types of clinical skills that are being utilised in addition to how often these skills are used.
2. Establish the consistency at which the skills are being performed.
3. Discover the potential barriers and facilitators for working consistently to a full scope of practice.

### LEARNING OUTCOMES

Having read this paper, the reader will be able to:

1. Define what is meant by working to a full scope of practice according to the GDC definition.
2. Interpret the results of the BSDHT member questionnaire.
3. Identify the current working patterns and additional clinical skills being carried out by BSDHT members.
4. Summarise the barriers and facilitators described relating to working to a full scope of practice.

Aligned with GDC learning outcomes: **B and D**

To read the paper in full and obtain 1.5 hours CPD, please follow the link or scan the QR code at the bottom of the page.

## Author Q & A

Ms. Diane Rochford, Past President BSDHT, discusses her work.

### What were the reasons that led you to undertake this study?

As a dental hygienist consistently working to my full scope of practice, I appreciate the potential benefits this affords me as a clinician and the benefits to patients. However, anecdotally, I know that this way of working is not common among many of my

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colleagues. When a participant in a meeting I attended in March 2022 (as BSDHT President) commented that: 'Of course, all dental hygienists and dental therapists work to a full scope!' I realised that there was a need to investigate further.

### Were any of the results unexpected?

The member questionnaire revealed that the percentage of dental therapists who would prefer not to work to a full scope of practice was lower than anticipated. It was surprising to learn that dental therapists are more likely to provide preventative treatments, such as fluoride varnish application and fissure sealants, than dental hygienists, despite both these treatments being within the scope of practice of a dental hygienist.

### How do you think your findings could potentially impact the clinical practice of dental hygienists and dental therapists?

The questionnaire results illustrate the current working patterns and additional clinical skills being carried out by BSDHT members. These results provide much needed evidence which can be shared with other stakeholders. By discussing the barriers and facilitators experienced by other members of the Society, I hope the reader can use the findings to begin a conversation for potential change within their own clinical team.

# An evaluation of a new ultrasonic water irrigator in the management of gingival health: a randomised study

Susan M. Bissett<sup>1</sup> Polina Gulakova<sup>2</sup> Katrin Unberei<sup>2</sup> Robin A. Seymour<sup>1</sup> Philip M. Preshaw<sup>3</sup>

## Author affiliations

1. School of Dental Sciences, Newcastle University, Newcastle upon Tyne, UK
2. SGS Proderm GmbH, Schenefeld, Germany
3. School of Dentistry, University of Dundee, Dundee, UK

### AIM

The aim of the study was to compare the efficacy of the ultrasonic oral irrigator, used as an adjunct to manual toothbrushing, compared with dental floss, used as an adjunct to manual toothbrushing, in reducing gingival inflammation in the management of patients with gingivitis.

### LEARNING OBJECTIVES

The authors will:

1. Investigate the efficacy of an ultrasonic oral irrigator as an adjunct to a manual toothbrush compared to dental floss as an adjunct to a manual toothbrush in reducing gingival inflammation.

2. Compare an ultrasonic oral irrigator to dental floss as an adjunct to toothbrushing in reducing gingival inflammation.

### LEARNING OUTCOMES

Having read this paper, the reader will be able to:

1. Explain the mechanism of the portable ultrasonic oral irrigator and discuss how this could benefit patients.
2. Recognise there is a contrast in these results compared to the Cochrane review.
3. Apply this knowledge to ongoing patient care.

1½ Hours  
eCPD  
PER PAPER

Aligned with GDC learning outcomes: **A, B, C and D**

To read the paper in full and obtain 1.5 hours CPD, please follow the link or scan the QR code at bottom of page 4. BSDHT member login is required.

## Author Q & A

Dr. Susan Bissett, Deputy Degree Programme Director for BSc Dental Therapy, Newcastle University discusses the authors' work.

### What were the reasons that led you to undertake this study?

Recently, the study funder has developed a portable ultrasonic oral irrigator, which has a characteristic feature whereby the pressure of the water flow changes within the nozzle, generating fine bubbles within the water flow. When these fine bubbles collapse, they generate shock waves that include ultrasonic frequencies, which can remove plaque and debris through the force of these shock waves. In vitro studies have shown the device to be effective at removing plaque from artificial surfaces, but it has not yet been evaluated in the clinical setting.

### Were any of the results unexpected?

The study demonstrated that in terms of plaque control, daily use of an ultrasonic oral irrigator is useful as an adjunct to toothbrushing as is dental floss. It also showed significant reductions in inflammation. This was in contrast to the recommendations made in a Cochrane review of interdental cleaning devices. The device was considered easy to use and participant satisfaction with the ultrasonic irrigator was high, and compared favourably to manual floss.

### How do you think your findings could potentially impact the clinical practice of dental hygienists and dental therapists?

Within the limitations of the study (short duration), it has been shown that the ultrasonic oral irrigator may offer an alternative to flossing in the reduction of plaque and gingival inflammation for patients who find flossing challenging.

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<https://doi.org/10.1111/idh.12883>

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# A perspective from the British Society of Dental Hygiene and Therapy members regarding the need for clinical support by a dental nurse

Debbie Reed<sup>1</sup> Laura McClune<sup>2</sup> Sarah Murray<sup>3</sup>  
Frances Robinson<sup>4</sup> Miranda Steeples<sup>5</sup>

1½ Hours  
eCPD  
PER PAPER

## Author affiliations

1. Kent Community Health NHS Foundation Trust, Kent, UK
2. University of Portsmouth, Portsmouth, UK

3. Queen Mary's University of London, London, UK
4. Faculty of Life Science and Medicine, Kings College London, London, UK
5. British Society of Dental Hygiene and Therapy, UK

### AIM

1. To explore the perspectives and experiences of dental hygienists and dental therapists regarding the availability and necessity of dental nurse support during clinical practice.
2. To identify how the presence or absence of dental nurse support impacts clinical efficiency, patient care, and professional well-being.

### LEARNING OBJECTIVES

The authors will:

1. Evaluate the current levels of clinical support available to dental hygienists and dental therapists across different practice settings.
2. Analyse the impact that the presence or absence of dental nurse

support has on clinical workflow, patient safety, and professional well-being.

3. Identify potential strategies and policy recommendations that could improve access to consistent chairside support for dental hygienists and dental therapists.

### LEARNING OUTCOMES

Having read this paper, the reader will be able to:

1. Summarise the key challenges faced by dental hygienists and dental therapists when clinical support from a dental nurse is not available.
2. Recognise the implications of inadequate chairside support on the quality of care, patient safety and professional practice.

Aligned with GDC learning outcomes: **A and D**

To read the paper in full and obtain 1.5 hours CPD, please follow the link or scan the QR code at the bottom of the page.

## Author Q & A

Ms. Miranda Steeples, Immediate Past President BSDHT, discusses the authors' work.

### What were the reasons that led you to undertake the research?

Primarily, workforce concerns. BSDHT members had reported inconsistent access to dental nurse support, impacting their workflow and patient care.

Secondly, the need for professional recognition and support. BSDHT members had called for formal recognition of their clinical

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support needs, similar to dentists, to ensure fair working conditions.

Finally, the need for evidence for advocacy. The BSDHT sought data to influence regulatory bodies to acknowledge and address the need for appropriate dental nurse support for its clinician members. Collectively, these reasons highlight the study's relevance in advocating for improved working conditions and patient outcomes.

### Were any of the results unexpected?

Yes, while many expressed a desire for consistent dental nurse support, some respondents indicated otherwise. An unexpected finding was the inconsistency in dental nurse support levels being provided across similar practices, with some practices offering full-time support and others none, regardless of patient complexity. This highlights the importance of addressing the matter of chairside support as it affects, as the findings demonstrated, workforce sustainability and patient care quality.

### How do you think your findings could potentially impact the clinical practice of dental hygienists and dental therapists?

The findings potentially serve as a catalyst for systemic improvements that support a safer, more efficient, working environment. Furthermore, the study could lead to further investigation, policy changes, improved working conditions and enhanced patient care, all of which contribute to an equitable and professional clinical environment for dental hygienists and dental therapists.

# Burnout, stress, and wellbeing: the rising mental health crisis in UK dentistry in dental care professionals: a quantitative perspective

Jenny Durkin<sup>1</sup> and Ceris Mumford<sup>2</sup>

## Author affiliations

1. School of Medicine and Dentistry, University of Lancashire, Lancashire, UK
2. Faculty of Arts, Society and Professional Studies, Birmingham Newman University, Birmingham, UK

### AIM

To determine whether or not dental hygienists, dental therapists and dental nurses (DCPs) working in NHS practices were more at risk of stress, wellbeing concerns and burnout than their colleagues working in mixed NHS and private general practice.

### LEARNING OBJECTIVES

The authors will:

1. Investigate the prevalence and severity of stress, wellbeing concerns and burnout among dental hygienists, dental therapists and dental nurses.
2. Compare the psychological wellbeing of DCPs working exclusively in private dental practices with those working in mixed NHS/private practices.

Aligned with GDC learning outcomes: **A and B**

3. Explore potential workplace-related stressors that differ between practice types.

### LEARNING OUTCOMES

Having read this paper, the reader will be able to:

1. Discuss the prevalence of stress, wellbeing concerns and burnout among dental hygienists, dental therapists and dental nurses (DCPs) working in various practice settings.
2. Identify factors within the workplace that can potentially contribute to increased stress and burnout among DCPs.
3. Apply this knowledge to positively influence wellbeing within the dental team.

1½ Hours  
eCPD  
PER PAPER

To read the paper in full and obtain 1.5 hours CPD, please follow the link or scan the QR code at the bottom of the page.

## Author Q & A

Ms. Jenny Durkin, Lecturer in Dental Therapy, discusses the authors' work.

### What were the reasons that led you to undertake this study?

With increasing reports of burnout among dental professionals, particularly within the NHS, the investigators wanted to understand the contributing factors and explore whether these concerns were more prevalent in certain practice environments.

Involvement in the education and preparation of future dental professionals also played a key role in this decision. If aspects of the NHS pathway can be identified as contributing to burnout, these insights can be integrated into the curriculum and shared with students. By better preparing graduates for the realities of modern dental practice and equipping them with the skills to build resilience, we can promote healthier career pathways, enhance professional satisfaction, and ultimately improve patient care. This research is a step towards creating a more informed, supportive, and sustainable dental workforce.

### Were any of the results unexpected?

Yes, one of the most unexpected findings was that clinicians and dental nurses working in mixed practices reported similar levels of stress, wellbeing concerns, and burnout to those working exclusively in private practices. The investigators had initially anticipated that the presence of private work, with its perceived flexibility and financial incentives, might act as a protective factor against the pressures commonly associated within NHS dentistry.

Instead, it points to broader systemic or cultural issues within dentistry that impact clinicians across different settings. These findings should encourage further critical thinking about the profession-wide pressures, such as workload, patient expectations, and administrative demands, that may be contributing to reduced well-being, regardless of the funding model or practice type.

### How do you think your findings could potentially impact the clinical practice of dental hygienists and dental therapists?

The findings highlight the need for a deeper exploration of dental professionals' lived experiences and emphasise the importance of supporting DCPs through wellbeing education, stress management, and resilience training within undergraduate curricula and ongoing professional development.

This paper was submitted to the collaborative UK Special Issue of the *International Journal of Dental Hygiene* to celebrate the BSDHT's 75th anniversary. It is published Open Access in the Early View section. You can read it here:  
<https://doi.org/10.1111/idh.12906>

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# The impact of female hormones on the periodontium: a narrative review

Juliette Reeves

## Author affiliations

The British Society of Dental Hygiene and Therapy, UK

1½ Hours  
eCPD  
PER PAPER

### AIM

To provide an updated narrative review of current concepts relative to the impact of female hormones on the periodontium throughout the life stages of the female patient. To analyse the implications for the clinician and to amalgamate the main findings from a wide range of empirical studies and theoretical perspectives.

### LEARNING OBJECTIVES

The author will:

1. Provide an overview of the female hormones and their actions through the female life cycle.
2. Discuss the potential effect of hormones on the periodontal health of female patients.
3. Examine oral conditions associated with female hormone status through the female life cycle.

4. Provide treatment options and solutions for oral conditions associated with hormone fluctuations.

### LEARNING OUTCOMES

Having read this paper, the reader will be able to:

1. Classify the different female hormones and their actions throughout the female lifecycle.
2. Describe the effects of female hormones on oral health associated with hormone fluctuations.
3. Diagnose oral conditions associated with female hormone status.
4. Identify treatment options and solutions for oral conditions associated with the female life cycle.

Aligned with GDC learning outcomes: C

To read the paper in full and obtain 1.5 hours CPD, please follow the link or scan the QR code at the bottom of the page.

## Author Q & A

Mrs. Juliette Reeves, Honorary Secretary BSDHT and practising dental hygienist, discusses her work.

### What were the reasons that led you to undertake the research?

To better understand the oral manifestations of hormone fluctuations throughout the life cycle of the female patient, the impact female hormones have on the periodontium and to help with differential diagnosis of oral conditions. To be able to provide treatment and treatment recommendations to menopausal patients with oral complaints.

This paper was submitted to the collaborative UK Special Issue of the *International Journal of Dental Hygiene* to celebrate the BSDHT's 75th anniversary. It is published Open Access in the Early View section, courtesy of an education grant to BSDHT from Haleon. You can read it here:

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### Were any of the results unexpected?

Yes – the dual role of oestrogen and progesterone in modifying the host immune response. It was a revelation to learn that oestrogen and progesterone can exert both pro-inflammatory and anti-inflammatory effects on the host immune response.

### How do you think your findings could potentially impact the clinical practice of dental hygienists and dental therapists?

They will help enable dental hygienists and dental therapists to provide differential diagnosis and treatment for those patients presenting with increased inflammation and risk of periodontal disease in the absence of increased biofilm accumulation and poor oral hygiene.

# Activation of the urokinase plasminogen activator/urokinase plasminogen activator receptor system in periodontitis: a case-control study

Ahmed Khudhur<sup>1</sup> Christopher Dowson<sup>2</sup> Susan M. Bissett<sup>2</sup> Rachel van de Merwe<sup>2</sup> John J. Taylor<sup>2</sup> Philip M. Preshaw<sup>3</sup> Katrin M. Jaedicke<sup>4</sup>

## Author affiliations

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3. School of Dentistry, University of Dundee, Dundee, UK
4. Faculty of Health Sciences and Wellbeing, University of Sunderland, Sunderland, UK

1½ Hours  
eCPD  
PER PAPER

### AIM

To investigate the potential role of the plasminogen activating (PA) system in periodontal disease pathogenesis.

### LEARNING OBJECTIVES

The authors will:

1. Establish the potential role of plasminogen activating system in the pathogenesis of periodontal disease.
2. Analyse the importance of studying disease biomarkers in saliva.

### LEARNING OUTCOMES

Having read this paper, the reader will be able to:

1. Recognise that patients with periodontitis have higher levels of the investigated salivary biomarkers (uPA and uPAR) which may be relevant in the pathogenesis of the disease.
2. Explain how salivary uPA and uPAR may be candidate biomarkers for periodontal disease.

Aligned with GDC learning outcomes: C

To read the paper in full and obtain 1.5 hours CPD, please follow the link or scan the QR code at the bottom of the page.

## Author Q & A

Professor Philip Preshaw, Dean, School of Dentistry, University of Dundee discusses the authors' work.

### What were the reasons that led you to undertake this study?

Given that the PA system plays important roles in various aspects of normal functioning in health and disease, such as wound healing, enzyme activity and cell growth, we hoped the findings could increase salivary testing in clinical practice to improve patient outcomes.

### Were any of the results unexpected?

This is a novel area of research, consequently we did not have any clear expectations of what the results might be. However, the fact that patients with periodontitis had significantly higher levels of both the urokinase plasminogen activator (uPA) and its receptor (uPAR) in saliva compared to healthy patients certainly points to a possible role for the PA system in periodontal pathogenesis.

### How do you think your findings could potentially impact the clinical practice of dental hygienists and dental therapists?

At this stage, there is no direct impact of these research findings on clinical practice. However, the research adds to the increasing

body of evidence on the importance of studying inflammatory and immune biomarkers in periodontal disease, which could ultimately lead to new diagnostic or prognostic tests.

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# Development of dental hygiene and dental therapy students using programmatic approaches to assessment

Joanne Bowles and Luke Dawson

## Author affiliations

University of Liverpool School of Dentistry, Liverpool, UK

1½ Hours  
eCPD  
PER PAPER

### AIM

The aim of this paper is to explore staff and student opinions of the advantages and disadvantages of using integrated longitudinal approaches for assessment and development, compared to high stakes 'on the day' clinical tests and formative feedback, to professionally develop dental hygiene and dental therapy students.

### LEARNING OBJECTIVES

The authors will:

1. Explore the views of staff and students on assessment strategies within a dental hygiene and dental therapy programme.
2. Determine the key principles and components of programmatic assessment and their relevance to dental education.

### LEARNING OUTCOMES

Having read this paper, the reader will be able to:

1. Compare the current assessment strategies against a conceptual framework using the concept of 'utility' (validity, reliability, educational impact, acceptability and feasibility).
2. Identify the recommendations for the adoption of a programmatic approach to assessment within dental hygiene and dental therapy education.

Aligned with GDC learning outcomes: C

To read the paper in full and obtain 1.5 hours CPD, please follow the link or scan the QR code at the bottom of the page.

## Author Q & A

Ms. Joanne Bowles, Senior Lecturer in Dental Therapy at the University of Liverpool, discusses the authors' work.

### What were the reasons that led you to undertake the research?

This research was undertaken as part of a Masters in Learning and Teaching in Higher Education. With an interest in assessment, and knowing that clinical assessments were being done differently within the BDS programme in Liverpool, we wanted to find out more to aid and develop assessment strategies for the future with a dental hygiene and dental therapy (DH/DT) focus. Programmatic Assessment (PA) aims to support development, and defensible

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progression decisions, through the triangulation of evidence from different sources of assessment back to the relevant learning outcomes. PA presents curriculum design challenges and requires staff and student acceptance. With limited evidence of the impact within dental education, and more so for DH/DT, this study explores the likely support for change to PA.

### Were any of the results unexpected?

There was already anecdotal evidence and so the results were not unexpected. Results were also supported by literature (even though this was limited for dental education) confirming the support from staff and students for a change to programmatic assessment within dental hygiene and dental therapy programmes.

### How do you think your findings could potentially impact the clinical practice of dental hygienists and dental therapists?

Moving to a programmatic assessment strategy, as the staff and student findings support, it is also clear from the literature that a programmatic approach aligns assessment with the realities of clinical practice. It makes it more developmental, reflective and inclusive. For dental hygienists and dental therapists this can be translated into the skills required for lifelong learning and continued professional development, resulting in greater clinical confidence, safer and more effective patient care and better communication and professionalism.

# Teamworking in dentistry: the importance for dentists, dental hygienists and dental therapists to work effectively together: a narrative review

Philip M. Preshaw<sup>1</sup> Helen Minnery<sup>2</sup> Ian Dunn<sup>3</sup> Susan M. Bissett<sup>4</sup>

## Author affiliations

1. School of Dentistry, University of Dundee, Dundee, UK
2. Health Education England North West General Practice Education, England, UK
3. Specialist Periodontist, Private Practice, Liverpool, UK
4. School of Dental Sciences, Newcastle University, Newcastle upon Tyne, UK

### AIM

To investigate the role of dental hygienists and dental therapists as part of the dental team.

### LEARNING OBJECTIVES

The authors will:

1. Describe how to integrate dental hygienists and dental therapists into effective clinical care teams.
2. Identify the barriers to effective implementation of integrated teamworking in clinical practice.

### LEARNING OUTCOMES

Having read this paper, the reader will be able to:

1. Review and discuss the scope of practice for dental hygienists and dental therapists.
2. Apply strategies for successful teamworking in dental practice.

1½ Hours  
eCPD  
PER PAPER

*Aligned with GDC learning outcomes: A, B and D*

To read the paper in full and obtain 1.5 hours CPD, please follow the link or scan the QR code at the bottom of the page.

## Author Q & A

Professor Philip Preshaw discusses the authors' work.

### What were the reasons that led you to undertake this study?

It is now apparent, more than ever, that effective delivery of oral healthcare requires an integrated approach that involves all members of the dental team working together. This is the reason why we undertook this review, to investigate teamworking in dentistry, and in particular, focusing on the role of dental hygienists (DHs) and dental therapists (DTs) as part of the dental team.

### Were any of the results unexpected?

We identified that including DHs and DTs as key members of the dental team results in tangible patient benefits, improved access to care (especially in under-served regions), more efficient treatment, and better patient outcomes. However, we also identified that DHs and DTs are not always working to their full scope of practice, and this is something that needs to be addressed systemically as well as locally within individual practice settings.

### How do you think your findings could potentially impact the clinical practice of dental hygienists and dental therapists?

Given the clear benefits of improved patient care by adopting a full-team approach, it is important to overcome the barriers to team-

working, including at policy level to reduce and remove regulatory and financial barriers, as well as attitudinal barriers among different dental team members. Better integration of DHs and DTs into healthcare teams more broadly can lead to clear patient benefits, more efficient and effective care delivery, and improved treatment outcomes.

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# Restorative thresholds of dental therapists: a UK perspective

Nicola Stockford<sup>1</sup> and Avijit Banerjee<sup>2</sup>

## Author affiliations

1. NHS Wales Health Education and Improvement Wales, UK
2. King's College London Faculty of Dentistry Oral & Craniofacial Sciences, London, UK

1½ Hours  
eCPD  
PER PAPER

### AIM

To investigate the variation in restorative thresholds among dental therapists in the UK, particularly in the management of deep carious lesions, and to assess how postgraduate education and years since qualification influence adherence to minimally invasive dentistry (MID) principles. To support evidence-based education and inform continuing professional development (CPD) needs for dental therapists.

### LEARNING OBJECTIVES

The authors will:

1. Explore current trends in restorative decision-making among dental therapists and identify deviations from minimally invasive protocols.
2. Explain how postgraduate training influences treatment planning and clinical judgment in managing caries, particularly in deep lesions.

3. Evaluate gaps in knowledge and confidence, informing future CPD and educational programme design to support safe and effective patient care.

### LEARNING OUTCOMES

Having read this paper, the reader will be able to:

1. Demonstrate a deeper understanding of how dental therapists manage carious lesions, with a focus on preserving tooth structure and applying MID principles.
2. Recognise the importance of reflective practice and continued learning to reduce variation and improve clinical decision-making.
3. Apply research findings to advocate for improved clinical training and CPD initiatives that support high standards in restorative dental therapy care.

*Aligned with GDC learning outcomes: A, B, C and D*

To read the paper in full and obtain 1.5 hours CPD, please follow the link or scan the QR code at the bottom of the page.

## Author Q & A

Ms. Nicola Stockford, Dental Hygiene and Dental Therapy Lead Health Education and Improvement Wales (HEIW), discusses the authors' work.

### What were the reasons that led you to undertake this study?

There is currently very limited research conducted *by or about* dental therapists, particularly in relation to restorative decision-making and deep caries management. Most existing studies focus on dentists, leaving a gap in understanding how dental therapists apply minimally invasive dentistry (MID) principles. As their scope

of practice expands, it is vital to explore how dental therapists approach restorative thresholds and whether factors such as postgraduate training or years since qualification influence their decisions.

### Were any of the results unexpected?

One unexpected finding was that newly qualified graduates were more likely to disregard MID protocols, opting to cut larger, more traditional cavities. This was surprising given their recent exposure to MID teachings, and may reflect limitations in simulation training or confidence in clinical settings.

### How do you think your findings could potentially impact the clinical practice of dental hygienists and dental therapists?

The study's findings highlight variability in restorative thresholds, especially for deep lesions. This reinforces the need for stronger undergraduate and continuing professional development (CPD) training in MID techniques. I hope the research encourages dental therapists to feel more confident in managing deeper cavities conservatively and promotes greater uptake of CPD in cariology. Ultimately, supporting evidence-based, minimally invasive care can help preserve tooth structure and improve long-term patient outcomes.

This paper has been submitted to the collaborative UK Special Issue of the *International Journal of Dental Hygiene* to celebrate the BSDHT's 75th anniversary. A publication date is yet to be announced. BSDHT members will be informed when this paper is

available to read in full on the BSDHT website by following the link: <https://members.bsdht.org.uk/journals> or scanning the QR code. Member login is required.



# The perceived impact of the COVID-19 pandemic on dental therapy and dental hygiene students' mental wellbeing: a qualitative study

Morag Powell<sup>1</sup> James Donn<sup>2</sup> Vivian Binnie<sup>3</sup>

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3. Professor of Dental Education and Scholarship, School of Medicine, Dentistry and Nursing, University of Glasgow, Glasgow, UK

1 ½ Hours  
eCPD  
PER PAPER

### AIM

To explore the perceived impact of the COVID-19 pandemic on the mental wellbeing of dental therapy and dental hygiene students, and to consider how these findings can inform future educational practice and professional resilience within dentistry.

### LEARNING OBJECTIVES

The authors will:

1. Describe the key stressors experienced by dental therapy and dental hygiene students during the COVID-19 pandemic.
2. Evaluate how clinical training disruptions and assessment pressures influence student wellbeing and professional development.

3. Identify strategies that can support wellbeing and resilience in undergraduate training and future clinical practice.

### LEARNING OUTCOMES

Having read this paper, the reader will be able to:

1. Demonstrate an understanding of the psychological impact of COVID-19 on dental therapy and dental hygiene students.
2. Recognise the importance of embedding wellbeing and resilience into dental education to support safe effective practice.
3. Apply insights from this research to reflect on their own professional practice and consider approaches to sustaining wellbeing across a career in dentistry.

*Aligned with GDC learning outcomes: A, B, C and D*

To read the paper in full and obtain 1.5 hours CPD, please follow the link or scan the QR code at the bottom of the page.

## Author Q & A

Ms. Morag Powell discusses the authors' work.

### What were the reasons that led you to undertake this research?

The COVID-19 pandemic significantly disrupted clinical education worldwide, however there was little evidence on how COVID-19 affected dental therapy and dental hygiene students' wellbeing, despite known raised stress levels within this group. An opportunity arose to explore this at Peninsula Dental School when we continued clinical teaching throughout the pandemic and lockdown in the UK.

### Were any of the results unexpected?

Yes, one unexpected finding was that students were more concerned about missing clinic and assessments than about contracting covid. Their strong confidence in the University's safety protocols was also an unexpected finding.

### How do you think your findings could potentially impact the clinical practice of dental hygienists and dental therapists?

The findings highlight the need to embed wellbeing and resilience training in undergraduate education. Supporting students' mental health can enhance resilience, reduce stress-related risks and ultimately improve patient care. This will educate and empower our clinicians of the future to develop the sustainable resilience that is required for a long and successful career in dentistry.

This paper was submitted to the collaborative UK Special Issue of the International Journal of Dental Hygiene to celebrate the BSDHT's 75th anniversary. It is published Open Access in the Early View section. You can read it here: <https://doi.org/10.1111/idh.70104>  
Or here on the BSDHT website: <https://members.bsdht.org.uk/journals> or scan the QR code. Member login is required.



# Co-creation of educational resources for culturally diverse dietary advice

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1½ Hours  
eCPD  
PER PAPER

### AIM

This study aimed to co-create, with students, resources to improve cultural competence in undergraduate dentistry, dental hygiene and dental therapy students' delivery of dietary advice.

### LEARNING OBJECTIVES

The authors will:

1. Outline how co-creation with students can be used to address curricular deficiencies.
2. Recognise the importance of cultural competence in oral healthcare and reflect upon this in the context of their own delivery of dietary advice.

### LEARNING OUTCOMES

Having read this paper, the reader will be able to:

1. Define cultural competence and recognise how this applies to delivery of dietary advice.
2. Describe the benefits of active involvement of students in co-creation of learning resources.

*Aligned with GDC learning outcomes: A, B, C and D*

To read the paper in full and obtain 1.5 hours CPD, please follow the link or scan the QR code at the bottom of the page.

## Author Q & A

Dr. Helen Rogers, Senior Clinical Lecturer and Honorary Consultant in Paediatric Dentistry, School of Dental Sciences, Newcastle University, discusses the authors' work.

### What were the reasons that led you to undertake the research?

This research was prompted by a previous qualitative study led by this team, which identified that undergraduate dental students lacked confidence in delivering dietary advice to families from different cultures to their own. This study aimed to address this, by actively involving students within the research team.

This paper has been submitted to the collaborative UK Special Issue of the *International Journal of Dental Hygiene* to celebrate the BSDHT's 75th anniversary. It is published OPEN ACCESS in the Early View section.

You can read it here: <https://doi.org/10.1111/idh.70092> or

on the BSDHT website by following the link: <https://members.bsdht.org.uk/journals> or scanning the QR code. Member login is required.



### Were any of the results unexpected?

This co-creation approach was particularly well received by students – they felt a sense of pride in contributing to the study, and had a positive first experience of conducting research. Further active engagement of students in future research studies is likely to have a number of benefits.

### How do you think your findings could potentially impact the clinical practice of dental hygienists and dental therapists?

The resources developed through co-creation have been embedded within the undergraduate curriculum for all undergraduate dental courses. It is hoped that these will help dental hygienists and dental therapists to feel greater confidence in delivering dietary advice to families from different cultural backgrounds upon graduation.

The authors are keen to promote a greater awareness of the importance of cultural competence in clinical practice, and hope that this paper stimulates further interest in this field.



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Systematic reviews, meta-analyses, the **European Federation of Periodontology S3 level clinical practice guidelines**, and a recent consensus report from global experts, convened by **Spanish Society of Periodontology and Osseointegration (SEPA)\***, support the adjunctive use of antiseptic mouth rinses.<sup>1-3</sup>

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1. Bosma, M.L., McGuire, J.A., DelSasso, A. et al. Efficacy of flossing and mouth rinsing regimens on plaque and gingivitis: a randomized clinical trial. BMC Oral Health 24, 178 (2024). <https://doi.org/10.1186/s12903-024-03924-4> 2. Figuero, E., S. Roldan, J. Serrano, M. Escribano, C. Martin and P. Preshaw (2020). "Efficacy of adjunctive therapy in patients with gingival inflammation. A systematic review and meta-analysis." J Clin Periodontol" 3. EFP: Guidelines for effective prevention of periodontal diseases (2014). Available at: <https://www.efp.org/news-events/perio-workshop/past-workshops/perio-workshop-2014/>