Developing a theory-based intervention in partnership with stakeholders: the TiPTAP project

Dr Eilidh Duncan

Dr Linda Young, Irene Black, Prof Craig Ramsay

Health Services Research Unit
University of Aberdeen

HSRU is core funded by the Chief Scientist Office of the Scottish Government Health and Social Care Directorates. The author accepts full responsibility for this talk.
Developing TiPTAP

- Who was involved – TRiaDS and partners
- Why dental antibiotic prescribing
- How content was developed
- Components of intervention
- How implement trial results into service delivery?
Who - TRiaDS

- Knowledge translation
- Multi-disciplinary public, academic, policy, service and professional members
- Develop and evaluate strategies to improve KT in dentistry
An Audit and Feedback Intervention for Reducing Antibiotic Prescribing in General Dental Practice: The RAPiD Cluster Randomised Controlled Trial

Paula Elouafkaoui1,2,*, Andrew Elders3, Jan E. Clarkson2,3, and for the Translation Research in a Dental Setting (TRiADS) Research Methodology Group


Barriers and facilitators of evidence-based management of patients with bacterial infections among general dental practitioners: a theory-informed interview study

Rumana Newlands1, Eilidh M. Duncan1, Maria Prior1, Paula Elouafkaoui2,3, Andrew Elders4, Linda Young3, Jan E. Clarkson2,3, Craig R. Ramsay1 and for the Translation Research in a Dental Setting (TRiADS) Research Methodology Group
Why did we develop TiPTAP?

- Antibiotic resistance clear priority
- Primary care initiatives in General Practice
  - Scottish Reduction in Antimicrobial Prescribing ScRAP
- TRiaDS work – RAPiD trial
- NHS Education for Scotland partners in TRiaDS
  - Irene Black – Quality Improvement in Practice Training QIiPT team
Developing the content

Barriers
- Theoretical domains framework interviews with dentists

BCTs
- TRaDS Research Methodology group
- NHS Education for Scotland
- Academic implementation science
- Practice input

BCTs and modes of delivery
- TRaDs
- QIiPT
- Target audience

TiPTAP
<table>
<thead>
<tr>
<th>Intervention component</th>
<th>Mode of delivery</th>
<th>Delivered to</th>
<th>When</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feedback of individuals antibiotic prescribing data</td>
<td>Documents sent electronically</td>
<td>Dentists in practice</td>
<td>Prior to QIiPT visit</td>
</tr>
<tr>
<td>Power point presentation</td>
<td>Face to face (group)</td>
<td>Whole practice team</td>
<td>On the QIiPT visit before infection control and decontamination training</td>
</tr>
<tr>
<td>Problem solving discussion</td>
<td>Face to face (group)</td>
<td>Whole practice team</td>
<td>On the QIiPT visit day after the power point presentation</td>
</tr>
<tr>
<td>Toolkit - Posters - leaflets - Scripts – delayed prescribing – SDCEP flow chart</td>
<td>Provision of documents given at face to face group visit</td>
<td>Practice team (tailored to identified problems)</td>
<td>During problem solving discussion on QIiPT visit day</td>
</tr>
<tr>
<td>Action plans</td>
<td>Discussed at face to face training visit</td>
<td>Nominated practice contact</td>
<td>To be completed and returned within 6 weeks</td>
</tr>
</tbody>
</table>
Prescribing courses of antibiotic treatment can encourage the development of antimicrobial resistance and therefore must be kept to a minimum.

As a first step in the treatment of bacterial infections, use local measures. For example, drain pus if present in dental abscesses by extraction of the tooth or through root canals, and attempt to drain any soft-tissue pus by incision.

This should be the first step even if patients request antibiotics and even when time is short. Antibiotics are appropriate for oral infections where there is evidence of spreading infection, systemic involvement or persistent swelling despite local treatment.

Use antibiotics in conjunction with, and not as an alternative to, local measures.

If you would like to discuss any part of this feedback please contact: Dr Paula Elouafkaoui, Tel: 01382 740913, e-mail: TRiaDS@nes.scot.nhs.uk.
Content of TiPTAP - BCTs

- **4.1 Instruction on how to perform the behaviour**
  - Advise or agree on how to perform the behaviour (includes 'Skills training')

- **5.1 Information about health consequences**
  - Provide information (e.g. written, verbal, visual) about health consequences of performing the behaviour

- **5.3 Information about social and environmental consequences**
  - Provide information (e.g. written, verbal, visual) about social and environmental consequences of performing the behaviour

- **5.2 Salience of consequences**
  - Use methods specifically designed to emphasise the consequences of performing the behaviour with the aim of making them more memorable (goes beyond informing about consequences)
Content of TiPTAP - BCTs

- **9.1 Credible source**
  Present verbal or visual communication from a credible source in favour of or against the behaviour

- **5.5 Anticipated regret**
  Induce or raise awareness of expectations of future regret about performance of the unwanted behaviour

- **2.2 Feedback on behaviour**
  Monitor and provide informative or evaluative feedback on performance of the behaviour (e.g. form, frequency, duration, intensity)
How to implement trial results?

- TRiaDS approach
  - involves strong partnership from planning stage
  - ability to evaluate integration into service delivery
  - ability to up-scale intervention and evaluate roll out
Acknowledgements

TRiADS Programme is funded by NHS Education for Scotland
www.triads.org.uk

QIiPT: Lee McArthur, Laura Wilson, Fiona Elder

Health Services Research Unit
University of Aberdeen

The views expressed are those of the authors not the funding body.

HSRU is core funded by the Chief Scientist Office of the Scottish Government Health and Social Care Directorates. The author accepts full responsibility for this talk.