**Research Audit Credit: BEHAVE 2 Reflective Report**

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| Instructions |

Participation in the BEHAVE2 study has been awarded 2.5 Research Audit Hours credit. These Research Audit Hours count towards your Clinical Audit Hours. General Dental Practitioners will be able to claim Clinical Audit Allowance in respect of the Research Audit Hours awarded to this study. More information can be found [here](http://www.sdpbrn.org.uk/how-we-work/).

In order to claim Research Audit Hours for your participation in the BEHAVE2 study you must have fully participated in the requirements of the research study (audio-visual recording and post-recording interview) and must complete this reflective report. The electronic template for this report is available for download on the SDPBRN website ([www.sdpbrn.org.uk](http://www.sdpbrn.org.uk) ) in the Audit section of the website.

**N.B. It is entirely up to you if you wish to claim or not to claim the research audit hours awarded to participation in this study. If you do not wish to claim research audit credit hours, you can still participate in BEHAVE2 but do not need to complete this reflective report.**

Completed reflective reports must be submitted to SDPBRN.Audit@nes.scot.nhs.uk within 4 weeks of your interview with the study lead in order for certification of your audit hours to be progressed. On submission of your report to SDPBRN you will receive an email confirming its receipt and details of the next steps in the approval process.

The information you provide in your reflective report will be kept confidential. Anonymised information may be analysed to help inform quality initiatives in NHS primary care dental practice. It will not be possible to identify you or any of your patients in any report or other publication arising from this audit.

If you require any further information about research audit, please contact:-

Mrs Lorna Barnsley, SDPBRN Administrator,

NHS Education for Scotland,

Dundee Dental Education Centre,

Small’s Wynd,

Dundee,

DD1 4HN

Telephone: 01382 740912

E-mail: SDPBRN@nes.scot.nhs.uk

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| BEHAVE2 REFLECTIVE REPORT |

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| **Dentist Name:**  |  | **GDC Number:** |  |
| **Date report submitted to SDPBRN:**  |  |

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| Fluoride Varnish Application |
| 1. (a) Reflect on your interactions with your child patients when applying fluoride varnish and describe which aspects of these interactions you think went well and the reasons why this might be. *(unlimited character field, text box will expand automatically)*
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| 1. (b) Reflect on your interactions with your child patients when applying fluoride varnish and describe which aspects of these interactions you think went less well and the reasons why this might be. *(unlimited character field, text box will expand automatically)*
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| 1. (c) Thinking of this experience with your child patients, what might you do differently next time to improve the quality of your interactions with your child patients? *(unlimited character field, text box will expand automatically)*
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| Providing Oral Health Advice |
| 1. (a) Reflect on your interactions with your child patients’ parents / carers when providing oral health advice and describe which aspects of these interactions you think went well and the reasons why this might be. *(unlimited character field, text box will expand automatically)*
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| 1. (b) Reflect on your interactions with your child patients’ parents / carers when providing oral health advice and describe which aspects of these interactions you think went less well and the reasons why this might be. *(unlimited character field, text box will expand automatically)*
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| 1. (c) Thinking of this experience what might you do differently next time to improve the quality of your interactions with your child patients’ parents / carers? *(unlimited character field, text box will expand automatically)*
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| This Study |
| 1. How do you think your experience in this study will inform your future practice when applying fluoride varnish and providing oral health advice? *(unlimited character field, text box will expand automatically)*
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| 1. Reflecting on the audio-visual recording, what are your thoughts of this as a potential tool for clinical audit or CPD within the practice? *(unlimited character field, text box will expand automatically)*
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| Reflective Report Submission |

Please submit your completed reflective report by email to SDPBRN.Audit@nes.scot.nhs.uk no later than 4 weeks after your study interview. On submission of your report to SDPBRN you will receive an email confirming its receipt and details of the next steps in the approval process.

If you require any further information about this research audit, please contact:-Mrs Lorna Barnsley, SDPBRN Administrator, NHS Education for Scotland, Dundee Dental Education Centre, Small’s Wynd, Dundee, DD1 4HN, Telephone: 01382 740912, E-mail: SDPBRN@nes.scot.nhs.uk