

Registered Charity No. 1073464

ORTHOGNATHIC OUTCOME DATA COLLECTION TOOLS

February 2014

Dear Colleagues

You will be aware that the BOS have been working with our partners from the British Association of Oral and Maxillofacial Surgeons (BAOMS) to finalise agreed outcome data collection tools for orthognathic treatment / surgery. Having worked on the evidence based response to the South Central Orthognathic Commissioning report and on the development of the recent NICE accredited Commissioning Guidance Process Manual, it has become very clear that we have a dearth of good quality UK - sourced orthognathic outcome data. As a consequence of our joint discussions on this issue we have produced the following orthognathic outcome data collection tools: -

- 1. The orthognathic minimum dataset this allows orthodontists and surgeons to quantify the extent of the dento-skeletal disproportion and the effects and stability of orthognathic treatment / surgery.
- 2. The post treatment PROMS data collection tool. This will allow us to quickly gather useful patient related outcome data from our orthognathic patients after surgery.
- 3. The post treatment PROMS data collection tool (2. above) has been put into an online survey and can be accessed by clicking the following link: -

https://savingfaces.wufoo.com/forms/r7p6q5

4. The orthognathic Quality of Life questionnaire. This should be completed by the patient at the beginning of treatment and at the end of treatment. We expect this data to be very helpful in quantifying the expected increase in positive QoL expressions and the decrease in the QoL negative expressions.

The orthognathic outcome data collection tools have all been developed from previously validated outcome collection questionnaires and proformas. These will form the basis of a national orthognathic outcome database hosted on the Health and Social Care Information Centre servers with the support and facilitation of the National Facial and Oral Research Study Centre (NFORC) with whom both the BOS and BAOMS have signed a joint memorandum of understanding.



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This is likely to be to your unit's benefit for when working on the commissioning guidance manual we were told by the commissioners that eventually future commissioning was likely to only go to those centres who report outcome data. It is our understanding that all data will be stored anonymously as part of the national dataset and only those inputting their own data can subsequently identify where their own data sits as part of the national database.

Can I please encourage all who are involved in the provision of orthognathic treatment to support this initiative and engage actively in this data collection process?

Kind regards.

Yours faithfully,

Nigel Hunt Chairman

British Orthodontic Society



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