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Walgett Aboriginal Medical Service Co-operative Ltd

ABN: 78 014 990 451 37 Pitt St (P.O Box 396), Walgett NSW 2832 Phone: (02) 6820 3777 Fax: (02) 6828 1201 Email: walgettams@bigpond.com

SERVICING THE ORAL HEALTH NEEDS OF ABORIGINAL COMMUNITIES IN RURAL NEW SOUTH WALES

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WALGETT ABORIGINAL MEDICAL SERVICE (WAMS) BACKGROUND

In 1986 Walgett Aboriginal Medical Service Co-operative Limited (WAMS) opened its doors to the community. The Board of Directors moved a resolution to treat all people. Currently, 40% of clients are non-Aboriginal. WAMS is the first Aboriginal Community Controlled Health Service (ACCHS) in NSW to be accredited (1998) with the (National) Quality Improvement Council (QIC) / (State) Quality Management Service (QMS). WAMS are dual accredited for general practice facilities with General Practice Accreditation Plus.

WAMS offers comprehensive primary health care programs including dental care, to the population of Walgett and surrounding areas such as Collarenebri, Goodooga, and Grawin. WAMS is the only dental provider in town, and through the years has adopted a more preventively based approach to community based dental care, despite the challenges of remote area workforce recruitment and retention.

SUMMARY ISSUES REGARDING ADULT DENTAL SERVICES

- Dental services, as part of the primary health care approach to Closing the Gap, are most effectively provided in the Community Controlled Health sector
- Dental services delivered through WAMS are coordinated with other program areas such as Healthy for Life, Family Centred Primary Health Care, child and adult checks, as well as being provided on a demand appointment basis
- This results in a managed and integrated care approach for dental services by dentists cooperating with general medical practitioners, Aboriginal health workers and program staff
- The same clientele, if they were to seek dental care in the public dental system (if eligible) or private sector (if available), would most likely receive treatment for a dental problem only
- Target groups are antenatal women and young mothers, people with chronic disease especially diabetes and cardiovascular disease, and those requiring dentures to restore dental function and, importantly, dignity.
- Dental workforce must be guided as to appropriate dental care for high risk groups, and work in close cooperation with community based Aboriginal health staff.

GOALS OF THE WAMS DENTAL PROGRAM

- To provide Oral Health services to the community serviced by WAMS
- To reduce the incidence of dental diseases experienced by the population serviced by WAMS
- To provide data related to dental service provision and utilisation, including demographic and epidemiological data
- To contribute to the improved general health of the Aboriginal population by improving oral health care.

WALGETT DENTAL FACTS

Health checks conducted between 2000-04 in the region found that Aboriginal people had twice the decay rates of non-Aboriginal people, and a lower rate of teeth filled due to caries (unpublished data). This is consistent with published data which found that In this population group 49.3% have untreated caries compared to 25.3% of non-Indigenous (sic) Australians, and 34.2% have periodontal disease compared with 26.7% of non-Indigenous Australians¹.

In 2011 the rate of untreated caries was 2.3 times more in the Indigenous than the non-Indigenous adult population, with 57% of Indigenous adults having one or more teeth affected compared with 25% of non-Indigenous adults, and there was also greater tooth loss².

Most adults only seek dental care when they can no longer bear the pain. Health check programs are attempting to address this behaviour through early detection and referral for those needing dental care. Dentists must be competent in a broad range of dental treatments as the long distances to referral centres such as Dubbo often mean patients will not follow up on necessary dental care.

WAMS AND PARTNERSHIPS

WAMS has had a working dental partnership with the Western New South Wales Local Health District (WNSWLHD, and previously the Greater Western Area Health Service GWAHS) since 2005. Aspects of this partnership involve funding support from the WNSWLHD to provide dental care to their eligible clientele, and workforce support by providing visiting dental/oral health therapists.

As a member of Bila Muuji Aboriginal Health Service Incorporated (Bila Muuji), WAMS works with the other member organisations to participate in the Oral Health Promotion Partnership with the Western NSW Local Health District, and the Memorandum of Understanding with Charles Sturt University.

WAMS dental staff works closely with Mr Suman Kavooru the Bila Muuji Regional Oral Health Promotion Coordinator. The team attended the Bila Muuji regional oral health promotion workshop held at Dubbo in 15 & 16 May 2013.

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¹ Spencer, A. J. and Harford, J. (2008), *Improving Oral Health and Dental Care for Australians*. Prepared for the National Health and Hospital Reform Commission, p23.

² Williams S, Jamieson L, MacRae A, Gray C (2011) *Review of Indigenous oral health*. Retrieved [access date] from <u>http://www.healthinfonet.ecu.edu.au/oral_review</u>

As part of the Memorandum of Understanding with Charles Sturt University (CSU), WAMS participates in the Clinical Placement program run by the Faculty of Dentistry at the CSU. This is a structured program offered by CSU, where Dental and Oral Health Therapy students have working placements in a variety of community based settings. The Oral Health Therapy students work in the clinic under the supervision of the Dentist and Dental Therapist employed by WAMS.

CONSULTATION AND COOPERATION

The WAMS Dental Consultant (DC) continues to support the program in offering best practice dental care to the community serviced by WAMS. The DC works actively to recruit and support Dentists, support local staff, and ensure adherence to adequate practice management and reporting procedures. The WAMS Directors and staff are extremely grateful for the support the DC has provided to promote and recruit resources for the Dental Clinic.

The Western NSW Local Health District provides ongoing technical support and advice for WAMS staff, and there are good referral procedures between WAMS and the Western NSW Local Health District dental clinics, for oral surgery and orthodontic cases.

WAMS DENTAL TEAM

The Team is operated by three Dental Assistants who work with various Locum Dentists and the visiting WNSWLHD Dental Therapist who provides fortnightly clinics in Walgett. WAMS engages locum dentists, most of whom demonstrate their commitment to improving Aboriginal oral health in Walgett by returning regularly to WAMS over many years.

Recruitment of Dentists in rural and remote areas is a national problem, though WAMS is developing a group of interested Dentists who are willing to commit to regular visits to Walgett. WAMS also utilises other avenues of recruitment support such as linking in to professional networks and liaising with the Australian Dental Association to inform Dentists of the opportunities available at our service

STAFF TRAINING AND SUPPORT

Dental staff are working towards completion of the Certificate 3 in Dental Assisting at OTEN. They attend regular in-service training sessions, and have presented information on oral health issues to WAMS staff.

DENTAL CLINIC AND EQUIPMENT

Staff maintain high standards of clinical management according to current practices and protocols. The Clinic consists of two surgeries with the latest equipment and technologies. WAMS received funds from the Centre for Oral Health Strategy for two new dental units - dental chair, light, drills and accessories and surgery stools - which have greatly enhanced the functionality of the clinic. At the time of installation of the units, the dental xray machine previously located in a separate room, was fixed into Surgery Two. This surgery has also been decorated to make it a more attractive environment for young children.

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ORAL HEALTH IMPROVEMENT ACTIVITIES

ADULT AND CHILD HEALTH CHECKS, AND NUTRITION

The Dental team participates in the health checks, and ensures access to appropriate and timely dental care for those people referred from the checks.

Accessing healthy and fresh foods locally is often difficult due to high prices in the supermarket, with many fruits and vegetables no longer being "fresh" due to prolonged transport and storage times. A high consumption of sweetened foods and drinks adds to the higher dental disease rates, as well as to other health conditions such as diabetes and obesity.

WAMS is working with other health staff to prioritise care for pregnant women and young mothers (as they are taking care of future generations), and those with chronic diseases. Priority is also given to people requiring false teeth, to enable them to eat and socialise with confidence.

TOOTH BRUSHING PROGRAM

The Dental team is pro-active with oral health promotion and provides 'the tooth brushing program' to Birralegal and Koolyangarra pre-schools. They provide health screens at the pre-schools. Any child found with poor oral hygiene or caries is referred to the Dental Therapist. St Joseph's primary school has also set up a similar program, in cooperation with WAMS staff. At Collarenebri the staff worked with the Bila Muuji Oral Health Promotion Coordinator and school staff, to establish the brushing program in the school.

FLUORIDE VARNISH

The team offers fluoride varnish application for 0-3 year olds as they present to the clinic, as a preventive measure, and to older children as needed, to prevent and control dental decay. The majority of children seen by the Dental Therapist are treated with fluoride varnish. 'Lift the Lip' is a preventative measures and strategy that provides educational resource to complement the Early Childhood Oral Health Guidelines for Child Health Professionals (Guidelines) which aims to improve the health and well-being of children in NSW by integrating oral health into 'general' health interventions provided by Child Health Professionals.

SMILES NOT TEARS

WAMS is a participant in the 'Smiles not Tears' program focused on improving the dental health of Aboriginal children with the target audience being the parents of young infants. It is a preventative dental care strategy that can be delivered by Dental Assistants and Aboriginal Health Workers. This initiative is run in conjunction with NSW Health Centre fro Oral Health Strategy, The University of Sydney and The University of Newcastle (Professor Fiona Blinkhorn).

FURTHER ORAL HEALTH PROMOTIONAL ACTIVITIES

Dental staff set up a stand at NAIDOC week and at the Walgett Show in May. They have provided oral health sessions to mothers and babies groups, antenatal groups and playgroups where they provided advice on oral hygiene and diet, and distributed oral hygiene packs. Dental staff have provided dental education sessions to Elders and Young Mothers groups in Walgett and Collarenebri, and participate in general health check programs where they identify people requiring dental care, and advice.

PERFORMANCE MEASURES

The Dental program collects and analyses data using OASIS dental software, and demographic data using Communicare. The following services and visits were recorded_for fy 2012:

EXAMINATIONS	475	DENTURES	25
RADIOGRAPHS	288	TOOTH EXTRACTIONS	299
RESTORATIONS	434	SURGICAL EXTRACTIONS	8
ENDODONTIC TREATMENTS	32	MEDICATIONS PRESCRIBED	17
PREVENTIVE	58	PERIODONTAL TREATMENTS	144

Dentists practise preventive care and try to restore teeth rather than extracting them. However, the history of dental care seeking behaviour in adults is still weighted heavily towards relief of pain and associated tooth extraction/s.

However as WAMS moves closer to achieving a model of improved dental care by regular locum Dentists, a level of trust is being built between Dentist and patients, and people are accepting more preventive and restorative dental care. WAMS also has a good communication and referral network with private Dentists in Dubbo.

ETHNICITY

	ABORIGINAL	NON-ABORIGINAL	TOTALS
Female	300	161	461
Male	218	195	413
TOTAL	518	356	874

CONCLUSION

Despite the continuing difficulties in recruiting dental staff, WAMS manages to provide dental care to Walgett and nearby communities, with an increasing emphasis on preventative dental care, and adherence to best practice clinical management. Dental care is provided as part of a holistic and integrated primary health care approach, providing Aboriginal people a greater chance to "close the gap" in life expectancy, and to achieve a better quality of life.

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