The role of the DH, DT and OHT in Special Needs Dentistry

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University of Adelaide, South Australian Dental Service and
Westmead Centre for Oral Health
In practice

• My experience consists of:
  – General, Periodontal and Orthodontic practice
  – Domiciliary aged care
    • Research project
  – Westmead Centre for Oral Health
    • Focus on intellectually and physically disabled patients
  – South Australian Dental Service
    • Focus on medically complex and head and neck cancer

• Completing a PhD looking into the oral health of hospitalised older patients
Why?
Definitions

• Dental hygienist and dental therapist
  – Classical definitions similar to those used internationally

• Oral health therapist
  – Merging of the DH and DT
In practice

Dental hygienists, dental therapists and oral health therapists exercise autonomous decision making in those areas in which they have been formally educated and trained. They may only practice within a structured professional relationship with a dentist. They must not practise as independent practitioners. They may practise in a range of environments that are not limited to direct supervision.
# Australian Program Development

<table>
<thead>
<tr>
<th>Institution</th>
<th>Program</th>
<th>Year commenced</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gillies Plains TAFE</td>
<td>Dental Hygiene</td>
<td>1974</td>
</tr>
<tr>
<td>Melbourne Uni</td>
<td>Dip DH &amp; DT, BOH</td>
<td>1996, merged 2005</td>
</tr>
<tr>
<td>UQ/QUT</td>
<td>BOH</td>
<td>1999</td>
</tr>
<tr>
<td>Adelaide Uni</td>
<td>BOH</td>
<td>2002</td>
</tr>
<tr>
<td>Griffith Uni</td>
<td>BOH</td>
<td>2004 – closed</td>
</tr>
<tr>
<td>Sydney and Newcastle Uni</td>
<td>BOH</td>
<td>2005</td>
</tr>
<tr>
<td>LaTrobe Uni</td>
<td>BOH</td>
<td>2006</td>
</tr>
<tr>
<td>CSU</td>
<td>BOH</td>
<td>2008</td>
</tr>
<tr>
<td>Curtin Uni</td>
<td>ADDH, DT, BOH</td>
<td>1974, 2011</td>
</tr>
<tr>
<td>CQU</td>
<td>BOH</td>
<td>2012</td>
</tr>
<tr>
<td>RMIT, Holmesglen</td>
<td>New programs</td>
<td>2013</td>
</tr>
</tbody>
</table>
Special Needs Dentistry

What is special needs dentistry:

‘Is that part of dentistry concerned with the oral health of people adversely affected by intellectual disability, medical, physical, or psychiatric issues.’

Ettinger et al. Journal of Dental Education August 1, 2004 vol. 68 no. 8 803-806
Special Needs Dentistry

• We know that:
  – Ageing population
  – People are retaining their teeth throughout life
    • Increased risk of periodontal disease and caries
  – People are living longer with chronic illnesses
  – Polypharmacy is common, particularly in the elderly, and has a huge impact on the oral cavity
  – Increased success in cancer management
Special Needs Dentistry

Many groups of people within Australian society are at a high risk of being defined as special needs, but who may not be presently covered by traditional definitions:

- Indigenous communities
- Homebound Elderly
- Head and neck cancer survivors
- Low socio-economic families seen at maternal and child health centres
- Hospitalised patients of all ages, particularly ICU
- Generally underserviced populations
Special Needs Dentistry

• These groups have in common:
  – A lack of dental tradition
  – Poor dental attendance
  – Long time on public dental waiting lists
  – Urgent need for oral health education
    • *Through appropriately developed and targeted oral health promotion programs*
  – Need for preventive and simple restorative dental services
Special Needs Dentistry

• The points made thus far are common knowledge

• Why rehash?

• Is an area of dentistry that is most suited to the integration of the DH, DT and OHT
  – Reported underutilisation of hygienists

• Dentists involvement, motivation
Let’s look at the education
Undergraduate education

• Regularly reported that OHTs, DHs and DTs can fill the gap by moving into aged care and special needs

• Current BOH models tend to be a merging of the two qualifications

• Difficulty getting access to clinic space and patient care in all Aust programs
Undergraduate education

- Dentists have reported feeling inadequately educated throughout their program in medically complex and geriatric patients
- Registration and scope of practice have led education
  - Current DBA scope of practice enables direct access to DHs, DTs and OHTs
  - Under review
Undergraduate education

• DHs, DTs, OHTs graduate, similarly to dentists with enough skill and knowledge to get through successfully in general practice

• DHs, DTs and OHTs should also have enough skill to work in perio, paedo and ortho specialty areas
Undergraduate education

• All undergrad students within dental programs should be given clinical rotations in special needs:
  – Rural and regional – Indigenous
  – Aged care
  – Acute care hospital setting
  – Children and schools
  – Maternal and child health centres

• Learning medically complex and special needs on the job is difficult and potentially life-threatening
Undergraduate education

• At Sydney Uni
  – Students get a rotation through SCU in 2\textsuperscript{nd} and 3\textsuperscript{rd} year

• At Adelaide Uni
  – 3\textsuperscript{rd} year students get a rotation through SNU and outplacement clinics

• At Melbourne Uni
  – Students were rotated through the Dom Unit
Division of Special Care in Dentistry

The School of Dental Medicine makes a direct impact on thousands of lives through the various programs facilitated by the Division of Special Care in Dentistry. The division takes a proactive role in providing quality, locally-based clinical services and aggressive preventive education programs to under-served populations.

Without the division’s outreach, most of these patients would not otherwise receive dental health care, due to issues such as the difficulties that characterize treatment of disabled individuals and the decreasing number of dentists who accept state-provided health insurance. By bringing specially-trained dentists, hygienists and other dental health care providers directly to patients who need treatment the most, the division has set a national benchmark for serving the special needs population.
Postgraduate training

• This is a necessity

• We are a profession expanding too quickly

• DHs, DTs and OHTs engaged in important research throughout Australia

• Concern over branding as specialist, rather than specialised
Postgraduate Training

• Further education required in:
  – Medical and scientific knowledge
    • Related to our work
    • Major diseases that can have an impact on the mouth
    • Syndromes, Cancers, other chronic diseases
    • Pharmacology
  – Reading of blood test results – understanding what they indicate in relation to treatment
  – Sequencing of treatment
    • Medical, Dietetics, Speech Pathology, Dental
  – Anatomy and physiology
  – Counselling
    • Management of patients with terminal disease
  – Education
    • Provision of adult education to other members of the medical profession – RNs, GPs and medical specialists.
  – Nutrition
Postgraduate Training

• Not possible to learn everything at the undergraduate level

• Need comprehensive clinical dental and patient management skills to work in the field

• Opportunity for expansion of the employment opportunities to wards in major hospitals to support oral med and special needs specialists
Post-graduate education

Online Master of Science in Geriatric Dentistry

This three-year, 30.5-unit online program is designed for practicing dentists who wish to greatly improve their skills in addressing the unique dental needs of older adult patients within the context of their medical and physical conditions. Students must be able to commit 10 to 20 hours per week to the program, which includes streaming video lectures, online quizzes, weekly video conferences regarding patient cases, and the preparation and presentation of a research article on a geriatric dentistry topic. Students must also visit the USC campus four times during the course of the program, including for one week at the
Post-graduate education

Cost of Attendance

This program does not provide a stipend. These charges are estimated at this point, and will be set in April of each year. All these fees are estimated costs until paid.

<table>
<thead>
<tr>
<th>Direct Costs</th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition</td>
<td>$22,095</td>
<td>$15,467</td>
<td>$7,365</td>
</tr>
<tr>
<td>Health Insurance*</td>
<td>$TBD*</td>
<td>$TBD*</td>
<td>$TBD*</td>
</tr>
<tr>
<td>Student Health Center Fee</td>
<td>$253</td>
<td>$253</td>
<td>$253</td>
</tr>
<tr>
<td>Disability Insurance</td>
<td>$72</td>
<td>$72</td>
<td>$72</td>
</tr>
<tr>
<td>Total Direct Costs</td>
<td>$22,420</td>
<td>$15,792</td>
<td>$7,690</td>
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</tbody>
</table>

Allowances for Indirect Costs

<table>
<thead>
<tr>
<th>Allowances</th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Room and Board (2 weeks in summer)</td>
<td>$2,500</td>
<td>$2,500</td>
<td>$2,500</td>
</tr>
<tr>
<td>Transportation</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Personal/Misc</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
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<tr>
<td>Estimated Cost of Attendance</td>
<td>$24,920</td>
<td>$18,292</td>
<td>$10,190</td>
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</table>

*Student health insurance fee to be determined. Fee can be waived with proof of health insurance that meets USC's requirements by filing a waiver with the Student Health Center. Please check deadlines and documentation necessary to waive the Student Health Insurance.
Post-graduate education

Special Care Dentistry MSc

This MSc provides relevant education and training to meet the oral health care needs and demands of persons with special needs. A key feature of the programme is the opportunity to discuss the care of patients with complex disease and learn of the latest appropriate dental health care methods.

The programme provides a detailed understanding of the common systemic disorders likely to be of implication for routine dental care, alongside an understanding of the appropriate management and the ability to undertake clinical investigations (phlebotomy, biopsy, cranial nerve assessment) for patients with systemic disease likely to complicate dental treatment.

Why study Special Care Dentistry at UCL EDI?
The Eastman is a major centre of excellence, at the forefront of evidence-based clinical service, research and development, and education in the oral health care sciences. It is the largest academic postgraduate dental centre in Europe, and has a world-wide reputation for its specialist training delivered through clinically intensive postgraduate programmes.

Contact
Eastman Registry
academic@eastman.ucl.ac.uk

Invest in your career
Successful graduates of this programme have progressed to:
- Entry to the GDC specialist list in Special Care dentistry
- Senior Academic appointments in Special Care dentistry in Europe, South America and New Zealand
- Senior clinicians within UK Special Care Dental services
- The establishment of new Special Care dentistry units
Postgraduate education

Background

The professional doctorate in Special Care Dentistry runs over three years, full time. It is possible for the course to be offered part-time, over five years. In their first year, in addition to modules in the Dublin Dental University Hospital, students follow selected modules as part of the MSc in Rehabilitation and Disability Studies, in the School of Psychology in University College Dublin. Clinical rotations take place in partner hospitals in Dublin. The teaching and learning will be apportioned broadly as follows: 60% clinical, 40% didactic. The didactic component will include a research dissertation. The total ECTS to be applied to this course is 270 credits of which 90 will be attributed to the research dissertation.

Programme

The three-year specialist training programme in Special Care Dentistry will include experience and study in the following key areas:

- Concepts of health, impairment and disability
- Conditions leading to impairment and disability
- Sociology of health, impairment and disability
- The impact of impairment and disability on oral health, general health and quality of life
- The impact of oral health on impairment/disability, general health and quality of life
- Planning and management of health and related service delivery
- Management and delivery of oral health care
- Development of oral health care promotion programmes
- Provision of appropriate dental care based on the development of skills for history taking, examination, diagnosis, treatment planning and delivery of clinical dentistry
- The use of behaviour management, local analgesia, conscious sedation and general anaesthesia
- Links with other specialties and inter-professional and interdisciplinary working
- Life support skills and management of medical emergencies
- Legislation and ethics relevant to dental practise and, in particular, to Special Care Dentistry
- Clinical governance, audit and research
Continuing education

• Appropriateness
  – Given the discussion around u-grad and p-grad
• People doing it for ‘hours/points’
• Requires structure and potentially recognition from the Board
• Lots of international opportunities for increasing knowledge, limited in Australia
Continuing education

Welcome to the OPWDD Talent Development and Training Online Resource Library. This site provides various instructional resources for agencies interested in delivering their own training, as well as resources for individual learners interested in developing their professional education.
Training Materials

Powerpoint Presentations

- Special Care Dentistry Introduction
- Special Care Dentistry Legal and Ethical Issues
- Special Care Dentistry Treatment Modalities and Planning
- Special Care Dentistry Genetic and Congenital Disorders
- Special Care Dentistry NeuroMuscular Disorders
- Special Care Dentistry Learning Disabilities
- Special Care Dentistry and Autism
- Special Care Dentistry and Seizure Disorders
Continuing education

Course 1:
The Relationship of Oral to Systemic Health

Instructions

Navigation

**Back and Next:** Click the Back and Next buttons at the top and bottom of each screen to navigate linearly through the course.

**Page Counter:** In the lower left hand corner of each page, a page counter indicates how far you have progressed through the course.

**Save & Close:** This action will bookmark your progress and close this browser window. Smiles for Life home site is still open in another window.

**Page List Navigation:** Use the chapter and page lists on the left of each screen to navigate to a specific topic. Clicking on a chapter title opens the chapter’s page list. Clicking on a page title will open the page.

**More Information:** Clicking the bold links with a small "*" sign will open additional text. To close this text click the "*" sign.

Optional Clinical Cases

We recommend you complete the optional clinical cases. Launch buttons for each are located at the start of the chapter that corresponds with that case. You can also open these cases at any time by clicking the links that will appear at the top of each page. Each clinical case opens in its own window.

Post Assessment

A required assessment will be given at the end of the course. If you score less than 80% correct, you will need to go back and re-take it before receiving credit.

Course Evaluation

An evaluation form will appear after you've passed the assessment. We welcome your recommendations for improving the training.

A Product of:  
Endorsed by:
Continuing education

The American Dental Hygienists' Association
Continuing Education Series

Oral Health and Older Adults
Christina B. DeBiase, BSDH, MA, EdD
Shari L. Austin, BSDH, MS

This continuing education course is sponsored by:

Laclede, Inc.

Two Credit Hours

If you are familiar with the program, proceed to the INDEX

If this is your first time, please read the PROGRAM INSTRUCTIONS

*Must use Netscape or Internet Explorer 4.0 or HIGHER

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American Dental Hygienists' Association
Reminder

Dental hygienists, dental therapists and oral health therapists exercise autonomous decision making in those areas in which they have been formally educated and trained. They may only practice within a structured professional relationship with a dentist. They must not practise as independent practitioners. They may practise in a range of environments that are not limited to direct supervision.

In practice
In practice

• Skills that vary from the dentist
• Support team approach to dentistry
• More appropriate utilisation of all members of the team
• Affordable
• Transportable
In practice

• **Employment opportunities**
  – Whilst it is nice and at times appropriate - people wanting to make a career in SND, shouldn’t have to volunteer their time
  – Expansion of DHs, DTs and OHTs in the public sector
  – Treating patients with chronic illness and polypharmacy in the private sector
  – A change in the delivery of dentistry, make the DH, DT and OHT the first point of call
  • *Allows for screening, triage, prevention, education*
Summary

• There is a need for DHs, DTs and OHTs in Special Needs Dentistry
• The education needs to be appropriate and post-graduate opportunities need to more readily available
• Considerations for unique models of dentistry that best suit the patient and the community
Thank you for your time

cclare.mcnally@adelaide.edu.au
References


References


