Oral health workforce optimisation project Initiative Type Model of Care Status

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Summary

The Oral health workforce optimisation project is a team-based model of care developed to see patients off the general waiting list. Each patient is booked a comprehensive exam with an extended scope OHT, who prescribed a personalized oral health promotion plan using a form developed by the project team. This form is given to the dental assistant, who provides a tailored oral health education,

dietary advice, and smoking cessation counselling (if applicable) in the adjacent surgery immediately after the examination. Treatment is then allocated to a dentist, OHT and/or prosthetist as required. Every patient is asked to complete a patient experience survey, and the project team recorded patient flow through the new model of care. Productivity, cost-effectiveness and treatment mix are assessed from the Information System for Oral Health database. By redistributing clinical responsibilities, the model aims to provide new opportunities for dental assistants with a Certificate IV in Health Promotion, extended scope Oral Health Therapists (OHTs), and dental prosthetists to utilize their full scope of practice. The project has successfully navigated healthcare system challenges to deliver change, improvement and innovation in the health service and has presented at the Clinical Excellence Queensland Showcase 2019.

Key dates

Jan 2019

Jun 2019

Implementation sites

West Moreton Hospital and Health Service

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Aim

The new model of care aimed to better utilize the clinical expertise of all members of the dental team to improve the quantity and quality of oral health care provided to patients.

Benefits

The project focused on three priority areas for service delivery improvement:

- 1. Access to general course of care.
- 2. The proportion of preventative dental care.
- 3. The provision of high-value prosthodontic services.

Background

West Moreton Hospital and Health Service deliver oral health services at our dedicated oral health facilities, hospitals, community outreach clinics and schools, which are conveniently located across the region.

Evaluation and Results

147 patients were seen using the new model of care. Of these, only 2 (1.4 per cent) required treatment with a dentist exclusively while 53 (36.1 per cent) could have all their care completed by an extended scope OHT. Nearly half (42.2 per cent) of patients required the services of a prosthetist. These results highlight the importance of using an appropriate workforce mix at the top of their scope of practice for service efficiency.

Lessons Learnt

The model utilized the scope of dental assistants and prosthetists very effectively, but the complex

treatment needs of our patient cohort were often beyond the scope of the OHT. This meant that most patients were rebooked to a dentist for treatment planning of extractions (65.3 per cent) and/or dentures (40 per cent). Operating a tandem appointment system with a dentist and a dental assistant may be more efficient in the long term.
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