# Creating a dental home environment

Initiative Type

Model of Care

Status

Deliver

Added

06 November 2019

Last updated

15 July 2024

URL

https://cnxp3cuvtvrn68yjaibaht5ywrxspj7m.clinicalexcellence.qld.gov.au/improvement-exchange/creating-dental-home-environment

### Summary

The monthly oral health screening and fluoride varnish program creates an access point for Aboriginal and Torres Strait families within a familiar and culturally appropriate environment in addition to increasing the family's oral health literacy.

Key dates

Aug 2018

Jun 2020

Implementation sites

The Southern Queensland Centre of Excellence in Indigenous Health Care, Metro South HHS

Partnerships

The Southern Queensland Centre of Excellence in Indigenous Health Care.

# **Key Contacts**

Leah Hobbs

2422

william.vanheerden.ced

Advanced Oral Health Therapist

Metro South Oral Health

07 31824765

leahhobbs@health.qld.gov.au

To improve access to dental care for Aboriginal and Torres Strait children in a culturally appropriate environment in Metro South's western suburbs.

#### **Benefits**

- 1. Barriers are broken down for children about accessing preventive dental care
- 2. Children are placed on an appropriate dental recall
- 3. Parents and extended family are provided with information to increase their own oral health literacy
- 4. Children are provided with oral health education, toothbrush/toothpaste
- 5. Fluoride varnish application to decrease dental decay risk

# Background

Metro South oral health therapists realised that minimum referrals were coming from the Southern Queensland Centre of Excellence in Indigenous Health Care (SQCEIHC) clinic and decided to develop a project to measure if their attendance at the clinic would increase then number of referrals. That would result in the team observing first-hand what the issues are and establishing the connection between therapists and patients.

### **Solutions Implemented**

The oral health screenings at the clinic allow for children to be booked for dental care to a dental/oral health therapist, therefore creating a dental home for the child and their siblings.

# **Evaluation and Results**

At the end of October 2019, 73 children have had oral health screenings, application of fluoride varnish and have been provided with toothbrushes and toothpastes at the SQCEIHC since the commencement of the project in August 2018. Of these 73 children, more than 60% screened have had visible dental decay (dental decay detected without dental x-rays). At present, 37% of children have attended at a clinic with a therapist and are currently undergoing comprehensive dental care and some children are booked in for comprehensive dental examinations.

#### Lessons Learnt

 Engagement with staff at the SQCEIHC through their staff meetings enabled staff to be more aware of the onsite oral health screenings and increased the number of children who were booked in.
Extended members of the child's family may not value preventive dental care (attend for emergency only care) and to change this mindset will take time.

#### References

Slade GD, Bailie RS, Roberts?Thomson K, Leach AJ, Raye I, Endean C, Simmons B, Morris P. Effect of health promotion and fluoride varnish on dental caries among Australian Aboriginal children: results from a community?randomized controlled trial. Community Dent Oral Epidemiol 2011; 39: 29–43. © 2010 John Wiley & Sons A/S The Lancet

### **Further Reading**

program-2012-to-2016/contents/table-of-contents

PDF saved 01/06/2025