

# **Position Summary**

Dentists should be available to provide dental care in locations other than at a dental clinic. Those providing treatment should be adequately trained, funded and provided with appropriate equipment.

# 1. Background

- 1.1. Most dental care in Australia is provided by dentists in well-equipped surgeries. However, there are some circumstances where this is not possible, and the dentist must travel to the patient to provide dental care.
- **1.2.** The mainly dentate population of Australia is ageing and will require ongoing dental care. These services may have to be provided in patients' homes, hospitals or residential aged care facilities.
- **1.3.** Many remote areas of Australia with low population density are some distance from a dental clinic.
- **1.4.** The lack of full facilities available when providing dental treatment outside a dental clinic can limit the range of treatment options available which may compromise the provision of care.
- **1.5.** The health of the patients will often dictate the dental treatment provided and, for the very frail, services may be of a palliative nature only.
- **1.6.** There is a range of portable dental equipment available to facilitate dental care outside of the normal dental clinic.
- 1.7. Some areas of Australia are so remote that dentists visit the location periodically, bringing their own equipment. Some remote communities have a basic dental surgery which is available for visiting dentists.

### Definitions

- **1.8.** BOARD is the Dental Board of Australia.
- 1.9. DENTAL PRACTITIONER is a person registered by the Australian Health Practitioner Regulation Agency via the Board to provide dental care.

### 2. Position

- 2.1. Dentists should be available to provide dental care in locations other than at a dental clinic.
- 2.2. Careful planning is required to provide appropriate care at these locations. Assessment of the dental clinic should be undertaken prior to the treatment session.
- 2.3. There must be a balance between the benefit the patient gains from that dental treatment which can be provided and the potential risk to general health in moving the patient to a dental clinic for more complex treatment.
- 2.4. Appropriately trained and supervised allied dental personnel should be able to participate in the dental treatment plan developed by a dentist.
- 2.5. Specialised equipment appropriate for domiciliary care should be available to facilitate dental treatment at locations outside dental clinics.
- 2.6. Research and development of portable dental equipment should be encouraged.
- 2.7. Remote communities should consider establishing dental facilities to encourage dentists to visit them,

This Policy Statement is linked to other Policy Statements: 2.1 National Oral Health, 2.2.1 Community Oral Health Promotion: Fluoride Use, 3.3 Allied Dental Personnel & 3.14 The Role of Non-Dental Practitioners in Oral Health

and governments should support these initiatives.

- 2.8. Funding agencies should provide adequate reimbursement for travel and to recompense dentists' time.
- 2.9. Residential aged care facilities should plan for an increased demand for dental care by providing designated areas and equipment for dental treatment. Larger aged care facilities should provide a fully equipped dental surgery.
- 2.10. Government regulations should require residential aged care facilities to ensure that residents maintain good oral health by having access to the provision of daily oral hygiene as well as a dental examination.
- 2.11. Residential aged care facilities should ensure that staff have training enabling them to understand the oral health consequences of the care provided by the facility to its residents and to provide oral health promotion, dental screening and an oral health care plan.
- 2.12. Residential aged care facilities should comply with legislated quality of care principles including ensuring residents are treated by dental practitioners.
- 2.13. Accreditors of residential aged care facilities should consult the ADA regarding the appropriate dental standards for quality care and safety.
- 2.14. Programs emphasising the prevention of oral disease must be maintained within the local community and residential aged care facilities.
- 2.15. Government funding directed to assist dental care for individuals with disabilities and special needs should be directed to utilise private practices as set out in the ADA's Australian Dental Health Plan.

#### Policy Statement 2.3.7

Adopted by ADA Federal Council, November 10/11, 2005. Amended by ADA Federal Council, April 16/17, 2009. Amended by ADA Federal Council, April 12/13, 2012. Amended by ADA Federal Council, November 14/15, 2013. Amended by ADA Federal Council, November 10/11, 2016. Editorially amended by Constitution & Policy Committee, October 5/6, 2017. Amended by ADA Federal Council, August 21,2020 Amended by ADA Federal Council, August 18, 2023