# Policy Statement 2.3.3 – Delivery of Oral Health: Special groups: Older People



## **Position Summary**

All older people should be able to access adequate and timely oral healthcare. Government must address the needs of an older, frail, and care-dependent population through adequate funding to ensure that dental practitioners and aged care facilities are able to provide appropriate oral health care.

### 1. Background

- 1.1. The number of older people in Australia is increasing. In 2015 3.5 million (15.1% of the population) were older than 65 years of age. This is estimated to increase to 8.8 million in 2051 (22%) and to 12.8 million in 2097 (28%).
- 1.2. With changes in societal norms and advances in dentistry, Australians are keeping their natural teeth for longer.
- 1.3. Geriatric dentistry is part of the specialty "Special Needs Dentistry".
- 1.4. Expectations of good oral health with advancing age are increasing.
- 1.5. With a growing older population there is an increasing number of frail and care-dependent people retaining their teeth into older age.
- 1.6. Medical status, polypharmacy issues, oral diseases and co-morbidities are usually more complicated and cumulative in older people contributing to frailty and care-dependence.
- 1.7. Potential physical, cognitive & sensory impairments associated with ageing may reduce the effectiveness of home oral care and make acceptance of dental treatment challenging.
- 1.8. Behavioural problems and attitudes in older people affect treatment requirements and treatment planning.
- 1.9. People with dementia have special needs requiring further research and planning.
- 1.10. Diminished mobility among aged persons, especially those who are homebound, institutionalised or hospitalised, may inhibit their access to and the ability for the provision of oral health care.
- 1.11. Dentists have both the depth and breadth of oral health training to appropriately manage, as the team leader, the complex oral health needs of aged persons. The optimal delivery of oral health care involves a team of dental and other health practitioners led by a dentist or dental specialist who have the required training and scope of practice to effectively manage the full spectrum of oral health needs of older Australians.
- 1.12. Providing nutritious food in residential aged care facilities supported by a daily oral hygiene routine is important to achieve and maintain good oral health, general health and wellbeing.

#### **Definitions**

- 1.13. OLDER PEOPLE are those over 50 for Indigenous Australians and 65 years old for Non-Indigenous Australians (Australian Bureau of Statistics).
- 1.14. SPECIAL NEEDS DENTISTRY is the branch of dentistry that is concerned with the oral health care of people with an intellectual disability, medical, physical or psychiatric conditions that require special methods or techniques to prevent or treat oral health problems or where such conditions necessitate special dental treatment plans.
- 1.15. DENTAL PRACTITIONER is a person registered by the Australian Health Practitioner Regulation Agency via the Board to provide dental care.

#### 2. Position

- 2.1. All older people should have equitable access to timely and appropriate oral health care.
- 2.2. All new permanent residents of aged care facilities and intermediate or high home aged care packages should have a referral pathway to a dentist or dental service recorded by their aged care provider.
- 2.3. Frail and care-dependent older people in residential aged care facilities, particularly those who have limited ambulation or who are non-ambulatory, should have access to oral health care onsite by a domiciliary care dental provider.
- 2.4. Larger aged care facilities, or those with specialist dementia care units should provide dedicated dental surgeries onsite with establishment costs supported by government funding.
- 2.5. Government should support private dental practitioners to cover any significant travel costs that may be associated with the provision of domiciliary dental treatment in residential aged care facilities or homebased frail and care-dependent older people.
- 2.6. Staff in residential aged care facilities should have appropriate training and an appreciation of the need for dental care of older people and should ensure the maintenance of oral hygiene of residents.
- 2.7. Nutritious and dentally healthy foods should be provided in aged care facilities.
- 2.8. Dental practitioners, the community, educational institutions, aged care providers and government must recognise the increasing proportion of older people in the community, their changing needs and expectations for appropriate oral health care.
- 2.9. Entry-to-practice Dental Practitioner programs should prepare graduates to manage the oral health of frail and care-dependent older people.
- 2.10. Mechanisms should be put in place to ensure adequate enrolment in specialist training in Special Needs Dentistry.
- 2.11. All health care workers involved in the care of older persons should be educated on the basic oral health care needs of older people.
- 2.12. Aged care qualifications should include core education and training in the provision of daily preventive oral hygiene measures including clients with more complex needs, including those with dementia, other cognitive or communication related disabilities, dysphagia or other complex medical conditions.
- 2.13. Governments should implement a Seniors Dental Benefits Schedule as outlined in the ADA's Australian Dental Health Plan.

#### **Policy Statement 2.3.3**

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