

Supplementary Submission for the Senate Inquiry into Provision of and Access to Dental Services in Australia

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20 October 2023

In February 2021 the Royal Commission into Aged Care Quality and Safety presented their final report, Care, Dignity and Respect. The report unveils the complex issues leading to widespread substandard care. This report recognises the neglect of oral health care in residential aged care facilities.

The report emphasises the importance of oral health in 5 of the 148 recommendations:

- **Recommendation 19: Urgent review of the Aged Care Quality Standards, in particular best-practice oral care, with sufficient detail on what these requirements involve and how they are to be achieved.**
- **Recommendation 38: Residential aged care to employ or retain allied health professionals, including oral health practitioners.**
- **Recommendation 60: Establish a Senior Dental Benefits Scheme for people who live in residential aged care or in the community.**
- **Recommendation 79: Review Certificate III and IV courses to consider including oral health as a core competency.**
- **Recommendation 114: Immediate funding for education and training to improve the quality of care, including oral health.**

<https://agedcare.royalcommission.gov.au/publications/final-report-list-recommendations>

A report released this morning, Friday 20 October 2023, outlines progress in implementing the Aged Care Royal Commission's recommendations - Office of the Interim Inspector-General of Aged Care July 2023 Progress Report: Implementation of the Recommendations of the Royal Commission into Aged Care Quality and Safety. Please see the link to the Report below.

<https://www.health.gov.au/sites/default/files/2023-10/progress-report-implementation-of-the-recommendations-of-the-royal-commission-into-aged-care-quality-and-safety.pdf>

I have tracked the progress of the five specific oral health recommendations.

Recommendation 19: Urgent review of the Aged Care Quality Standards, in particular best-practice oral care, with sufficient detail on what these requirements involve and how they are to be achieved.

<https://www.health.gov.au/sites/default/files/2023-05/strengthened-aged-care-quality-standards-pilot-program.pdf>

Oral health

5.5.6 The provider implements processes to maintain oral health and prevent decline by:

- a) facilitating access at the commencement of care to oral health assessments and regular review by a dentist or other oral health practitioner
- b) monitoring and responding to deterioration in oral health and providing timely referral to specialist oral and medical care when required
- c) assisting with daily oral hygiene needs
- d) providing access to and use of required products, aids and equipment.

Sadly, the new oral health standard that is included in the Revised Aged Care Quality Standards Draft for Pilot March 2023 are so vague that any facility will be compliant. In short, the new standard for oral health has no teeth.

‘Facilitating access’ to assessments just means that a nurse or carer “suggests” a dental assessment by a dental practitioner – it does not pay for it, it does not have a localised dental referral pathway to appropriate dental practitioners, and it does not provide transport to a dental surgery. If the partner or adult son/daughter of the older person says “no” to the suggestion, then the older person will not receive an oral health assessment, let alone a regular review by a dentist or other oral health practitioner.

‘Monitoring and responding to deterioration in oral health and providing timely referral to specialist oral and medical care when required’ is also useless when the staff are not trained to assess and monitor older persons with complex dental needs. And again, ‘referral to specialist oral and medical care’ won’t happen if there is no localised dental referral pathway to the appropriate dental practitioners for the older person’s specific dental needs – dentists, special needs dental specialists, dental prosthetists, oral health therapists, dental therapists, and dental hygienists.

‘Assisting with daily oral hygiene needs’ is useless if the nursing and caring staff have not been trained in oral hygiene techniques for older persons with complex dental needs. Older persons now have extensive restorations, crowns, crown and bridgework, implants, implant-over-dentures, and orthodontic fixed and removable retainers. Persons with partial and full dentures need to be need to be assessed for fit, cleanliness and condition of the dentures. With little or no knowledge and skills in oral health care, the nursing and caring staff are working blind.

‘Providing access to and use of required products, aids and equipment’ is also meaningless if the nursing and caring staff have no knowledge and skills in dental and oral health products (high fluoride toothpaste and dry mouth products), aids (denture brushes and broad-handled toothbrushes), and equipment (electric toothbrushes). An oral health care plan which includes specific dental and oral products, aids and equipment for an older person needs to be completed by a dental practitioner.

Rec	Title	Department view of Government - Position	Department view of Government - Status	Department view of Government - Delivery	Additional information on implementation drawn from material provided by the Department and the Aged Care Quality and Safety Commission.	Stakeholder views	Interim Inspector-General comment
19	Urgent review of the Aged Care Quality Standards	Accepted	Ongoing	Partially implemented	Public consultation on a set of draft strengthened Quality Standards occurred from October to November 2022. The strengthened Quality Standards have been updated in response to feedback and are being piloted by the ACQSC from April to September 2023. Implementation of the new Standards will occur via the subordinate Rules that will accompany the new Act.	Stakeholder feedback varied significantly for this recommendation. While some expressed support for the progress that has been made on this measure, others identified gaps. These included a focus on the dignity of the consumer, dementia care and allied health inputs.	The IIG considers this 'Accepted', 'Ongoing' and 'Partially implemented', noting that the body delivering 19-21 is the Department with the advice of the Australian Commission on Safety and Quality in Health Care.

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Recommendation 38: Residential aged care to employ or retain allied health professionals, including oral health practitioners.

Sadly, there is no progress on employing or retaining dental and oral health practitioners in aged and home care settings. There is no way that registered nurses, enrolled nurses, assistants in nursing and personal carers can provide all the health needs of older persons with polypharmacy and co-morbidities. Dental practitioners must be part of the integrated health team to provide best-practice care for older Australians.

38	Residential aged care to include allied health care	Accepted in part	Ongoing	Partially implemented	The 2023-24 Budget saw a change in policy for the provision of residential aged care on-site pharmacists. The Government decided to enable community pharmacy owners to provide pharmacists to work on-site, whereas the previous Government supported the model of providing funds directly to aged care homes to employ or engage pharmacists to work on-site. A commencement date has not been confirmed. The Quarterly Financial Report (QFR) collects information on the volume of service provision and expenditure on allied health services (meets parts d.iii & iv). Rec 38(b)(i) - (d)(i) & (iv) would be partially delivered through the on-site pharmacists measure. Delivery of particular allied health services is not being considered, as care needs of the resident determine required allied health services. 38(c)(i) & (ii) - alternative funding models not being considered, with the commencement of AN-ACC from 1 October. ACFI allied Health funding rolled into AN-ACC.	Stakeholders are concerned about the AN-ACC funding model achieving the intent of the recommendation. The exclusion of allied health was strongly criticised. Several stakeholders recommended including allied health in care minute requirements as a potential solution.	The IIG considers this 'Accepted in part', 'Ongoing' and 'Partially implemented'. The community pharmacy measure in the 2023-24 Budget is intended to enable access to pharmacists, an allied health professional, in residential aged care homes.
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Recommendation 60: Establish a Senior Dental Benefits Scheme for people who live in residential aged care or in the community.

Sadly, there is also no progress with the funding and establishment of a Senior Dental Benefits Scheme. Older persons, their families and those living alongside side them are wanting a Senior Dental Benefits Scheme. Older persons deserve better, and we can do better.

Interim Inspector-General observations

Stakeholders have expressed strong support for the establishment of a SDBS that reflects the intent of recommendation 60.

The IIG supports the establishment of a SDBS to address the acute health risks that older people face as a result of poor oral health, particularly for those in aged care. While it is the intention that progress towards implementing a SDBS be made in the context of broader dental reforms, it is unclear what timeframes have been attached to this work. Strategies to expedite implementation of this recommendation may be necessary (page 38).

The Department has done some preliminary analysis of options for a Seniors Dental Benefit Program. Options are being considered as part of the Long-Term Dental Reform work (page 67).

Most stakeholders who responded to this recommendation acknowledged its overall importance and need to be treated as a priority. A number expressed concerns about current workforce shortages as a barrier, and issues with publicly available dentistry and cost disincentives. Others noted a lack of information surrounding the implementation of the recommendation (page 67).

The IIG considers this 'Subject to further consideration', 'Ongoing' and 'Not implemented' (page 67).

60	Establish a Senior Dental Benefits Scheme	Subject to further consideration	Ongoing	Not Implemented	The Department has done some preliminary analysis of options for a Seniors Dental Benefit Program. Options are being considered as part of the Long-Term Dental Reform work.	Most stakeholders who responded to this recommendation acknowledged its overall importance and need to be treated as a priority. A number expressed concerns about current workforce shortages as a barrier, and issues with publicly available dentistry and cost disincentives. Others noted a lack of information surrounding the implementation of the recommendation.	The IIG considers this 'Subject to further consideration', 'Ongoing' and 'Not implemented'.
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Recommendation 79: Review Certificate III and IV courses to consider including oral health as a core competency.

Minister Brendan O'Connor and his Department have made significant progress towards including oral health in VET training packages – this includes updating the Certificate III in Individual Support to ensure oral health skills were addressed more prominently; new units added to the Certificate II and IV training packages that also include oral health requirements; adding or updated units in the elective bank in Certificate III and Cert IV to ensure oral health skills were addressed more prominently; and the existing unit HLTOHC007 - Recognise and respond to oral health issues - was also added to general electives of all three qualifications. Sadly, none of this excellent work and progress is mentioned in the Progress Report: Implementation of the Recommendations of the Royal Commission into Aged Care Quality and Safety. The Minister for Health and the Minister for Aged Care should be kept up to date with the progress happening in other government departments and ministerial portfolios to improve oral health care for older persons.

However, *“the IIG considers 79 'Accepted in part' as the review Certificate IV in Ageing has not yet been completed per 79(1)(a) and (b).”* (page 75).

Rec	Title	Department view of Government - Position	Department view of Government - Status	Department view of Government - Delivery	Additional information on implementation drawn from material provided by the Department and the Aged Care Quality and Safety Commission.	Stakeholder views	Interim Inspector-General comment
79	Review of certificate-based course for aged care	Accepted	Finalised	Partially Implemented	<p>Following a review by the relevant Industry Reference Committees (IRCs), including the Aged Care Services IRC, Skills Ministers endorsed the revised Certificate III in Individual Support in November 2022. The updated qualification takes into account significant changes to the nature of care work and recommendations made by the Aged Care Royal Commission.</p> <p>From July 2023, the new Jobs and Skills Council (JSC) for the early educators, health and human services sectors, HumanAbility, will have responsibility for reviewing and updating health and care related qualifications, including considering the Certificate IV in Ageing and any future updates to the Certificate III and associated skill sets.</p> <p>Yet to be delivered are 79(1)(a) and (b). A review of the Certificate IV in Ageing has not yet been completed and is anticipated to be considered by the new JSC for the early educators, health, and human services sectors (HumanAbility) once it is established.</p>	<p>Stakeholders raised concerns with the implementation of this recommendation, citing limited progress. Some advocated for a worker registration and accreditation scheme as a means to professionalise the workforce, deliver career pathways and raise the quality of jobs and care.</p> <p>One stakeholder expressed frustration that the reform work is not focusing on minimum qualifications, continued professional development, accredited qualifications and training, and an English proficiency requirement. They are 'deeply concerned' that implementation will fall short of the intent of the recommendation.</p> <p>Another stakeholder raised the importance of co-design in course content, picking up on the lived experiences of people in care and their diverse backgrounds and needs.</p>	<p>The IIG considers this 'Accepted in part', 'Finalised' and 'Partially implemented'.</p> <p>The IIG considers 79 'Accepted in part' as the review Certificate IV in Ageing has not yet been completed per 79(1)(a) and (b).</p>

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- **Recommendation 114: Immediate funding for education and training to improve the quality of care, including oral health.**

Sadly, there is very little progress to date involving immediate funding for education and training to improve the quality of care, including oral health. Providers like me – Seniors Dental care Australia – are ready, willing, and able to provide oral health care training but, as there is no funding, aged and home care providers will not engage our services. Furthermore, because there are no binding standards or reporting requirements for oral health, aged and home care providers have personally told me that this is why they will not engage our services. In short, aged, and home care providers

will not provide oral health care training for their nursing and carer staff because there is no funding and because there is no requirement to do so. The persons with lived and living experience that I interviewed via Aged Care Reform Now for my submission for the public hearing in Brisbane, called for better oral health care training of staff who cared for their loved ones. This needs to be actioned now.

Apart from the VET sector, oral health also needs to be made a compulsory part of the tertiary training of nurses, allied health practitioners, pharmacists, social workers, and medical practitioners. This will provide a 'fit-for-purpose' workforce for the aged, home and disability sectors in Australia.

114	Immediate funding for education and training to improve the quality of care	Accepted	Finalised	Implemented	As part of the 2022-23 Budget, the Australian Government committed \$493 million (matched by States and Territories) to support the delivery of training places across a number of areas of priority, including aged care and other care sectors. Fee Free TAFE is prioritised for young people, First Nations Australians, people who are out of work, unpaid carers and women facing economic security and people with disability.	Stakeholders consider that the current measures in place for this recommendation may not be sufficient due to having a narrow scope for training funding. A service provider indicated there currently is no training for food staff included in these measures, while another peak stakeholder indicated work relating to funding education or training courses for care skills and their reimbursement of additional staffing hours to enable course attendance has yet to occur.	The IIG considers this 'Accepted in part', 'Finalised' and 'Partially implemented'. 114 is about ensuring all aged care workers can undertake a Cert III in Individual Support at no cost. The IIG does not have information that Fee-Free TAFE or funding of places implements 114. Future progress reports will investigate further.
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