

CITY OF HAMILTON

PUBLIC HEALTH SERVICESClinical & Preventive Services

то:	Mayor and Members Board of Health
COMMITTEE DATE:	November 14, 2016
SUBJECT/REPORT NO:	Seniors Oral Health (BOH16040) (City Wide)
WARD(S) AFFECTED:	City Wide
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RECOMMENDATION

- (a) That the proposed Seniors Dental Treatment and Outreach Program models be implemented within existing approved budget and with the following adjustments to the complement:
 - i) Decrease Clinical Dentist from 0.8 FTE to 0.4 FTE
 - ii) Delete 0.6 FTE Dental Assistant
 - iii) Increase Dental Hygienist from 0.5 FTE to 1.5 FTE
- (b) That Staff report back on the Seniors Dental Treatment Model and the Seniors Oral health Program in one year; and

(c) That Board of Health send a letter to the Ontario Minister of Health and Long-Term Care with copies to the Chief Medical Officer of Health and all Ontario Boards of Health to call on the provincial government to expand public oral health programs with consideration for low income adults and seniors.

EXECUTIVE SUMMARY

Seniors' access to oral health care was identified as an area of need in the 2013 Oral Health Status Report (BOH13015) to the Board of Health. The Board of Health approved the Seniors Oral Health program proposal (BOH15010) funded from the municipal net levy portion of Children In Need of Treatment (CINOT) and CINOT Expansion in anticipation of the new 100% provincially funded Healthy Smiles Ontario program.

Seniors oral health services vary widely across the province due to lack of a sustainable funding source. Some public health units (PHUs) offer financial assistance to seniors either with local funds or partnerships with outside agencies, while other PHUs have treatment options through locally funded clinics, community health centres or partnerships with local dentists. Several PHUs offer outreach services that include screening, education, and resources.

Seniors requiring oral health treatment can receive services at both the Public Health Services (PHS) Clinic and the Dental Health Bus. However, their needs are better served at the PHS Clinic as they frequently present with complex medical histories and benefit from set appointment times. The number of seniors who received treatment at the Dental Clinic has increased since the Seniors Oral Health program launched in August 2015.

Best evidence recommends preventive dental care, including proper instruction on dental hygiene and professional teeth cleaning, significantly reduces the incidence of dental decay and periodontal disease in adults. This model has been effective for serving Low-Income Adults in the Dental Clinic for many years. The proposed model would apply the same model of preventive care and treatment to seniors, which are essential to the improvement of oral health.

Currently there are three aspects to the outreach portion of the seniors' oral health program, including collaboration with Personal Support Worker (PSW) programs, participation in community events that focuses on senior populations and a pilot partnership with Macassa Lodge.

Partnership with PSW programs to develop and present an oral health education module to students has been effective in improving knowledge and skills of PSWs as they begin providing care to individuals, including seniors, in community and long-term care (LTC).

Collaboration with community groups has increased awareness of the importance of oral health and the availability of services for seniors, such as the Dental Clinic and Dental Bus.

The partnership with Macassa Lodge to pilot an oral health initiative included assessments, topical fluoride, temporary restorations and education for PSW staff. The current design of the pilot requires a level of involvement from all parties, including PHS staff, families and LTC staff that are currently beyond the capacity for Macassa or other LTC facilities. The pilot provided important feedback and data to inform long term planning for seniors in LTC and home care settings.

Macassa Lodge has expressed interest in continuing the partnership with PHS and facilitating opportunities for joint training with other LTC facilities. It is recommended that the previous pilot be adapted and changed to support more residents within LTC. The Registered Nurses Association of Ontario (RNAO) Best Practice Guideline (BPG) and Oral Care Community of Practice is a model of care that is designed specifically for LTC. This model can be adapted and scaled to support continuous quality improvement at a sustainable pace to provide services to more residents in LTC and home care settings. The model is based on building knowledge and skills for all staff that care for residents in LTC so that all residents receive the oral health care that is important to maintain health.

Alternatives for Consideration – Not Applicable

FINANCIAL – STAFFING – LEGAL IMPLICATIONS (for recommendation(s) only)

Financial: The recommendations can be achieved within existing approved budget. The 2016 approved budget for Seniors Oral Treatment and Oral Health Outreach program is \$245,020.

Staffing: Approved Seniors Oral Health program staffing for 2016 included 0.8 FTE Clinical Dentist, 0.6 FTE Dental Assistant and 0.5 FTE Dental Hygienist. Given that the Dental Bus and Preventive Clinics are not suitable for seniors with complex medical needs, this report recommends an adjustment to the Dental Clinic FTE in order to reinvest into Oral Health Outreach programming to LTC and Home Care settings.

Provision of dental treatment and preventive care in the Dental Clinic can be provided by a 0.4 FTE Clinical Dentist and 0.5 FTE Dental Hygienist. The Clinical Dentist will provide basic treatment, including examination, x-ray, filling, uncomplicated extraction, and limited root canal therapy. The Dental Hygienist will provide cleaning and other preventive services.

This report recommends increasing the Dental Hygienist FTE from 0.5 FTE to 1.0 FTE within existing budget and approved overall FTE. The Dental Hygienist will continue to work with PSW Schools, community seniors groups and will have an increasing capacity to work with LTC and home settings using the RNAO BPG for Oral Health.

Legal: No legal implications.

HISTORICAL BACKGROUND (Chronology of events)

- February 19, 2015 Seniors Oral Health (BOH15010)
- August 11, 2015 Information Update Seniors Oral Health Update
- January 11, 2016 Seniors Oral Health Outreach Program BOH15010(a)

Dental Clinic and Dental Bus

The longstanding focus of the City of Hamilton dental clinic services has been clients and families in financial need who are unable to access other financial support for dental care. Over the years, the demand for service has evolved and now most clients of City clinics are adults, including seniors.

Eligibility criteria for the clinics were established by Council in 2006 (Dental Clinics - PH06003). Staff utilizes the low income cut-off (LICO) to determine eligibility for all new clinic clients. The clinic is staffed with dentists, hygienists, dental assistants, a lab assistant and a receptionist. Services include basic oral health care: examinations, x-rays, treatment planning, cleaning, fluoride treatments, fillings, uncomplicated extractions and some limited root canal therapy.

The Dental Bus also delivers dental care to residents of the City of Hamilton in response to urgent dental issues. There are some limitations to the services that may be provided through this mobile clinic approach, some more complicated procedures must be referred to specialists in the community. Service is provided on a first-come, first-served basis, with priority given to emergencies. The only criterion for eligibility of dental services on the Dental Bus is residency within the City of Hamilton. The treatment rendered on the bus generally addresses urgent issues for clients who would otherwise be unable to access dental treatment.

On April 22, 2013, PHS presented its Oral Health Status Report (BOH13015) to the Board of Health describing the oral health status and outlining the existing programs and services that address the oral health needs of Hamiltonians, including those of seniors. The report cited that 61% of adults aged 65 years and older had no dental insurance.

In the summer of 2013, PHS conducted an environmental scan of dental services provided by other health units in Ontario, as well as other provincial jurisdictions. The review highlighted that a few health units offered specific dental programs and services for their senior's population, including Toronto, Peel and Halton. There are no public health programs that specifically work with LTC given the lack of sustainable funding sources.

During the summer and fall of 2014, PHS explored options for improving seniors' oral health, including enhanced dedicated days and hours at its Dental Clinic specifically for seniors, as well as an outreach program such as those offered by Halton and Toronto. Further development of these options was put on hold until financial resources to support these strategies were identified.

Effective January 1, 2016, the Ministry of Health and Long-Term Care contracted with Accerta to pay all claims to dental providers for services to children under 18. The 75% funding portion for the former CINOT and CINOT Expansion has been re-invested into the new Healthy Smiles Ontario. The remaining 25% municipally funded portion was approved to address oral health for seniors (BOH 15010).

Seniors Outreach Program

In fall 2015, a situational assessment was conducted to determine what other health units across the province provide for seniors to support positive oral health. Many health units do not provide any programs or services to seniors, mostly due to limited financial and human resources. Some PHUs offer financial assistance to low-income seniors with local funds or through partnerships with outside agencies. Other PHUs have treatment options through locally funded clinics, community health centres or partnerships with local dentists. Some offer outreach services that include screening, education and resources. Many PHUs had experienced limited success in long-term care (LTC) facilities.

In Hamilton, local community agencies were also consulted to explore collaborative partnerships and alliances that could improve access to oral care services for low-income seniors and improve oral care for seniors in LTC facilities. The Seniors Advisory Committee was also consulted to provide input for outreach.

Personal Support Worker Schools

Partnerships have been established with five PSW programs within the City of Hamilton. PHS staff developed an oral health module for PSWs that includes the importance of oral health, how oral health contributes to overall health and oral health issues specific to seniors and residents of LTC facilities. Education also focuses on current guidelines around oral care practices, techniques and tools for care of natural teeth and dentures,

time management strategies, and approaches for care of residents with cognitive and functional impairments.

Community Outreach

Partnerships have been established with agencies that focus on low-income, high needs seniors, such as Catholic Family Services, Wesley Urban Ministries and St Matthews House. Community events have included educational workshops, health fairs, facilitation of dental clinic applications and navigation to City-run programs. A poster was developed that highlighted the importance of senior's oral health, with the message that dental programs are available. Posters are displayed in food banks, City housing sites, community centres and other neighbourhood sites.

Macassa Lodge Pilot

Initial assessments were conducted at Macassa Lodge in May 2016. Residents of a selected wing were invited to participate in the pilot. Dental hygienists assessed residents' oral health, provided topical fluoride treatments and recommended strategies to promote oral health to families and staff. Oral health education sessions were conducted at Macassa Lodge by PHS staff for five groups of PSW's over two afternoons.

Oral Care Community of Practice

In 2015, the RNAO initiated the Oral Care Community of Practice. RNAO supports collaboration between caregivers and families to improve oral health care for seniors by implementing BPG in LTC and home care settings. A collaborative approach will provide an opportunity to improve current practices around the oral care of seniors. PHS dental hygienists have been invited to join the Oral Care Community of Practice and become Oral Health BPG champions to support this work in Hamilton.

POLICY IMPLICATIONS AND LEGISLATED REQUIREMENTS

Not Applicable

RELEVANT CONSULTATION

Karen Allcroft, Director of Nursing for Macassa Lodge and Shawn Gadsby, Administrator for Macassa Lodge met with PHS staff to discuss the pilot project, outcomes and future collaboration.

 Both parties agreed that the RNAO Oral Care Community of Practice was a good model for Macassa and PHS to support oral health practices in LTC across Hamilton. In supporting the RNAO Oral Care Community of Practice Macassa will encourage PHS collaboration and partnerships with other LTC facilities across the City of Hamilton.

Ibo MacDonald, RN and LTC Best Practice Coordinator, RNAO recommended that a PHS Dental Hygienist could support the RNAO BPG in Hamilton. RNAO has offered guidance and support to develop partnerships with LTC and home care settings in Hamilton.

Dr. Sonica Singhal, Public Health Dentist, Public Health Ontario. PHS staff consulted Dr. Singhal for her advice on the best way to meet the oral health needs of seniors in the City of Hamilton with limited funding and provide the right mix of treatment and prevention to have the greatest positive impact. She provided the following advice:

- Limited resources are best used with a targeted population. A universal plan is not within the scope of municipal funding.
- Use a train-the-trainer model to increase the reach of the program.
- All PHUs should advocate to the province for oral health coverage for adults and seniors.

ANALYSIS AND RATIONALE FOR RECOMMENDATION (Include Performance Measurement/Benchmarking Data if applicable)

Oral Health Needs of Seniors

As previously reported in PHS Oral Health Status Report (BOH13015), oral health is an important health issue for seniors. As people age, their oral health may become worse due to medications, other medical conditions and limited mobility that affect their oral hygiene habits. In addition, seniors face additional barriers to accessing dental care due to cost, limited physical and cognitive abilities and transportation.

The longstanding focus of the City of Hamilton dental clinic services has been clients and families in financial need who are unable to access other financial support for dental care. Over the years, the demand for service has evolved and now most clients of City clinics are adults. Only 39% of Hamiltonians aged 65 or older have dental insurance. Those that do have dental insurance have higher incomes, with only 28.4% of seniors with low-income having dental insurance.

Historically, seniors made up approximately 10% of Dental Clinic clients and 13% of Dental Bus clients treated in 2015. With the introduction of the Seniors Dental Treatment program in August 2015, the number of seniors receiving treatment has increased at the Dental Clinic. Of the 2,157 clients seen in the Dental Clinic for the first three quarters of 2016, 463 seniors' appointments (22%) were preventive and/or dental

treatment. Of the 1,501 clients seen on the Dental Bus for the first three quarters of 2016, 205 seniors' treatment sessions (13%) were provided.

Oral Health Treatment for Low-Income Seniors in Hamilton

There is no provincial oral health treatment services offered to seniors. In Hamilton, the municipal net levy provides access to oral health services for adults (18+) including seniors:

- Special Support Program: City of Hamilton residents who require dental care can apply for funding for treatment. Must meet low-income criteria, and have no dental insurance or government coverage.
- **Dental Health Bus:** Residents with limited finances and no coverage who require dental care can access this mobile outreach unit.
- **PHS Dental Clinic:** Residents who meet low-income criteria, have no dental insurance or government coverage, but who are not eligible for the Special Support Program.

Proposed Dental Clinic Model

Seniors requiring oral health treatment are welcome at both the PHS Clinic and the Dental Health Bus. However, their needs are better served at the PHS Clinic as they frequently present with complex medical histories and benefit from set appointment times.

Best evidence recommends preventive dental care, including proper instruction on dental hygiene and professional teeth cleaning, significantly reduces the incidence of dental decay and periodontal disease in adults. In addition, individuals who are diagnosed with severe periodontal disease can be treated, and with proper preventive/maintenance care, they are able to maintain significantly improved periodontal health. Both preventive care and treatment are essential to the improvement of oral health.

Overall cost of preventive care and treatment is significantly less than individuals who receive treatment without preventive dental care. Following the best evidence to provide both treatment and prevention, it is proposed that the open four days in the PHS Dental clinic be used as follows: 0.4 FTE (2 days/week) dental hygienist for preventive treatment (cleaning etc.); 0.4 FTE (2 days/week) Clinical Dentist to provide basic treatment. The increased capacity will provide services for an additional 30 seniors/week and approximately 1,400/year.

PROPOSED SENIORS OUTREACH PROGRAM

Personal Support Worker Outreach

Oral health was recognized as an area where education is often lacking within the PSW curriculum. Expert opinion recommends a train-the-trainer model as an effective strategy to increase knowledge and skills of caregivers that provide oral health daily care. PHS staff developed an oral health module for PSWs that includes the importance of oral health, how oral health contributes to overall health and oral health issues specific to seniors and residents of LTC facilities. Education also focuses on current guidelines around oral care practices, techniques and tools for care of natural teeth and dentures, time management strategies, and approaches for care of residents with cognitive and functional impairments.

Partnerships have been established with five Personal Support Worker (PSW) programs within the City of Hamilton. Eight education sessions have been conducted at the five schools, with students and school administrators expressing great satisfaction with the oral health module. Student evaluation indicates that the presentations have been very useful in increasing knowledge around oral health and building confidence in providing care.

Community Seniors Outreach

Partnerships have been established with agencies that focus on low-income, high needs seniors, such as Catholic Family Services, Wesley Urban Ministries and St Matthews House. Community events have included educational workshops, health fairs, facilitation of dental clinic applications and navigation to City-run programs. A poster was developed that highlighted the importance of senior's oral health, with the message that dental programs are available. Posters are displayed in food banks, City housing sites, community centres, and other neighbourhood sites to increase awareness of oral health services for seniors.

LONG-TERM CARE PROPOSED MODEL

Macassa Lodge Pilot

The Macassa Lodge Pilot was proposed in BOH15010(a) to identify strategies to assess the needs of residents and provide recommendations to promote oral health care practices to staff, families and caregivers. The current design of the pilot requires a high level of involvement from all parties, which has been challenging to implement given many other competing priorities at Macassa.

Macassa Lodge Pilot Findings

Initial assessments were conducted at Macassa Lodge in May 2016. Residents of a selected wing were invited to participate in the pilot. Dental hygienists assessed residents' oral health, provided topical fluoride treatments and recommended strategies to promote oral health to families and staff. Oral health educations sessions were conducted at Macassa, by PHS staff for five groups of PSW's over two afternoons.

Strengths

- PHS staff connected with families to let them know what dental care is needed for LTC residents.
- PHS staff developed a greater understanding of the magnitude and complexity of oral health needs of seniors in LTC.
- PHS staff found that PSW staff showed genuine enthusiasm to provide good oral health care for their residents.

Challenges

- Providing individual client care to a small number of residents was not cost-effective given the staffing resources allocated to the Oral Health Outreach program.
- Competing priorities for care of residents at Macassa based on limited resources and provincial regulations.
- Inconsistent availability or residents for fluoride treatments, including attrition of sample size and daily resident appointments reduced the efficacy of the protocol.

RNAO Long-Term Care Best Practice Guidelines

A more sustainable and evidence informed approach using RNAO BPG will help long term care facilities and home care providers implement procedures for oral health care. Within the BPG, the RNAO has developed an Oral Health Toolkit for use in Long term care and home care settings. The Oral Health toolkit includes specific practice recommendations which help LTC and home care settings identify their priorities, facilitate changes and evaluate the sustainability of the change to improve the oral health of residents. This model can be adapted and scaled to support continuous quality improvement at a sustainable pace within LTC priorities.

RNAO has offered to provide guidance to PHS to support the development of partnerships with LTC in Hamilton. PHS dental hygienists have been invited to join the Oral Care Community of Practice and become Oral Health BPG champions to support this work in Hamilton. Success requires a coordination of efforts at multiple staffing levels within LTC facilities and home care agencies. This collaborative approach provides an opportunity to improve current practices around the oral care of seniors.

Macassa uses the RNAO BPG's to support and guide their work in other areas of care within their facility and would like to incorporate the Oral Health BPG's into their practice. Macassa will continue to collaborate with PHS to encourage learning and partnerships within and across LTC in Hamilton.

ALTERNATIVES FOR CONSIDERATION

(Include Financial, Staffing, Legal and Policy Implications and Pros and Cons for each alternative)

Not Applicable

ALIGNMENT TO THE 2016 - 2025 STRATEGIC PLAN

Healthy and Safe Communities

Support the vision to be the raise a child and aging successfully.

Hamilton is a safe and supportive city where people are active, healthy, and have a high quality of life.

APPENDICES AND SCHEDULES ATTACHED

Not Applicable