

# DENTAL HYGIENE IN PRIMARY CARE

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## Key Principles

- Dental hygienists are primary health care providers with expertise in oral health promotion, disease prevention and therapeutic care.
- Oral health is inseparable from overall health. British Columbians have the right to accessible, quality, equitable, and comprehensive dental hygiene care.
- Preventing complications resulting from oral diseases minimizes pain, and unnecessary or inappropriate expenses for both individuals and the health care system.
- Dental hygienists work collaboratively in interdisciplinary settings, have the knowledge to make appropriate referrals, and have the capacity to respond and adapt their skills to public health crises such as the COVID-19 pandemic.<sup>1,2,9</sup>
- Dental hygienists have the skills, expertise and education to take on even more exciting roles in primary health care.

## Background on Primary Health Care

In 1978, the World Health Organization (WHO) and its member nations put forward the Alma Ata Declaration for Primary Health Care (WHO, 1978) as the conceptual basis for bringing health and well-being for all.<sup>3</sup> Core elements include:

1. Accessibility
2. Public Participation
3. Health Promotion, Disease Prevention, and Therapeutic Care
4. Evidence Based & Socially Acceptable
5. Interdisciplinary Collaboration
6. Intersectoral Action

The provincial government has been working to advance British Columbia's health care system by incorporating core elements of primary health care principles.<sup>4</sup> While the province has provided dedicated resources to open and operate primary care centres, oral health care remains excluded. As a result, dental hygienists are not part of most primary health strategies in British Columbia, limiting their ability to provide chronic disease screening, oral health education, oral disease prevention and management at population, community, and individual levels. Dental hygienists are perfectly situated to be the first point of contact into the health care system for many patients and they recognize that good oral health is often indicative of the overall wellness of an individual.

Poor oral health is associated with an increased risk of complications to those with systemic conditions such as diabetes, cardiovascular diseases, respiratory diseases, inflammatory diseases, and increased risk of pregnancy-related complications. Not all British Columbians have chronic diseases, but British Columbians across all stages of life have the right to live without oral or dental pain and minimize the risks of complications for associated systemic diseases. A comprehensive and equitable primary health care system cannot be realized if oral health is not seriously

considered a determinant of health.<sup>3</sup> Dental caries and periodontal diseases are underestimated prevalent chronic diseases impacting children and adults, respectively.<sup>4,5</sup> British Columbians accessing routine private dental hygiene care, or public dental hygiene programs know the value of routine and timely care.<sup>6</sup>

Dental hygienists in Canada are increasingly expanding in-person and virtual service delivery models, including stand-alone clinics and mobile services, which provide services to under-served, northern, rural and remote populations and the homebound, frail elderly and disabled populations.<sup>7</sup> Dental hygienists are collaborative professionals with capacity to provide resources and promote access to specialized care of dentists, denturists or other health professionals (nurse practitioners, physicians, nutritionists, social workers, psychologists, dieticians, speech language pathologists, physiotherapists, occupational therapists, etc). Dental hygienists can practice independently and safely in a variety of care settings outside of the traditional dental practice.

### **BCDHA Recommendations**

- Primary care restructuring must integrate dental hygienists in primary health care to meet the needs of underserved populations such as children, seniors, economically depressed, new Canadians, visible minorities, Indigenous Peoples, and those with disabilities.<sup>3</sup>
- The definition of 'dental care' should be expanded to 'oral health care' to encompass all oral health care professionals as part of health strategies.
- Government should collaborate with BCDHA to develop long-term, sustainable programs that fund dental hygienists to work in primary care settings and clinics.
- Dental hygiene students should be included in health care student loan forgiveness programs, particularly those who are willing to work in rural and remote or Indigenous communities.<sup>8</sup>

### **Vision of Dental Hygienists in Primary Health Care (CDHA, 2008)<sup>7</sup>**

Dental hygienists will:

- Be integral members of interprofessional teams as they provide oral health education, health promotion, disease prevention, clinical therapy associated with oral health and general health and well being.
- Provide screening assessments for underserved Canadians with regard to oral cancer and other oral and chronic diseases through salivary and swab tests, new adjunctive technology as well as biopsy techniques.
- Provide the oral health perspective within behavioural surveillance, disease surveillance and risk reduction programs.
- Provide the oral health perspective to chronic disease prevention and management programs.
- Act in the capacity of "oral health brokers" to assist underserved Canadians in understanding oral health care, and the diverse and most cost-effective opportunities they have for accessing oral and general health services.
- Provide educational, health promotion, preventative and therapeutic oral health services in diverse settings to individuals and groups that commonly do not have access to our current dental delivery model.
- Assist in the management of pandemic events in coordination with other health professionals.
- Be members of research teams as equal partners based on their research credentials and experience.

## References

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