CONFERENCE ABSTRACT

Access to Public Oral Health Services – A new frontier towards holistic care

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Introduction: Integrated models of care provide improved care and patient outcomes. Sydney Local Health District Oral Health Service (SLHDOHS) targets vulnerable populations with poorer social determinants of health and therefore higher dental and other social needs. To provide more holistic care, SLHDOHS has partnered with other services and developed integrated pathways for prioritising care.

Short Description of practice change implemented: Streamlined access to OHS for vulnerable patients and patients accessing other services has been developed within SLHDOHS. Patients can now access care through a single point of contact within the service, removing any barriers or the possibility of patients slipping through gaps due to lack of coordination or miscommunication. The pathways provide support services, assisting patients in keeping appointments and undertaking comprehensive care. Comprehensive care, rather than episodic care, is provided for at-risk patients, moving from a reactive to a proactive system. These pathways also provide opportunities to link patients to other health/social services.

Aim and Theory of Change: To fast-track vulnerable populations to our services and provide streamlined, holistic approaches for managing their care by removing access barriers to services.

Targeted population and stakeholders: The target population are those at risk of social exclusion, isolation, discrimination or neglect. Stakeholders include service providers across health, social services, NGOs, NFP organisations, Medical Practitioners, Child and Family Services and the Justice System.

Timeline: Pathway sustenance is a continuous process which requires consistent monitoring and evaluation. Innovations are constantly implemented based on outcomes of the initial pathway.

Highlights: SLHDOHS is transforming its services from a dental-need oriented and acute symptom-based service to a holistic patient centred model.

Large numbers of urban infield patients experience homelessness and social exclusion. SLHD also has a large urban Aboriginal population. To cater to their demands, SLHDOHS created patient-centred models of care and introduced Patient and Family Experience Officers who support patients throughout their journey.

SLHDOHS has multiple new pathways for access which include Homeless/At-Risk, Refugee/Asylum seeker programs, Young Children, Youth and Family programs, ATSI Pathways and Mental Health Pathways. We have evaluated some outcomes for patients utilising these pathways through case studies and patient journeys.

Comments on Sustainability: To ensure sustainability, SLHDOHS has embedded these pathways into practice with strong and fenced governance around them.

Comments on transferability: Pathways can be implemented in other public OHSs and with clinical justification to eligibility requirements, could be adapted by other public services.

Conclusions: The streamlined approach and collaboration between services is effective in supporting vulnerable patients' access to comprehensive care which has a positive impact on their overall health outcomes.

Discussions: Some patient needs are more challenging and require further support from external organisations, peer support workers and social workers. Additional and continued refinements are required to engage effectively with patients and their partners in care.

Lessons Learned: Patient needs are multifaceted and require multidisciplinary approaches to provide holistic patient-centred care. Services must adapt and change to meet the needs of vulnerable populations. Existing restrictive structures of public services must evolve to bring positive change to the new frontier.