

Kimberley Dental Team E- Flyer 8.August 2011

Dear Team member and Supporter,

We have now completed our statistics and reports to our major supporters of the Kimberley Dental Team which include Dental Health Services, HTCSirona, McCusker Charitable Foundation, National Dental Foundation and the University of Western Australia. A report is also forwarded to Mr Warren Olsen, CEO, Halls Creek Shire Council.

Our Major sponsors contributed grants and in kind for this seventh and longest trip, to the sum of \$47,000 towards the total cost of \$72,000.

Jan has listed all the Team members for this trip elsewhere, but special thanks to Dr Daniel Cocker and DA, Krystal Nettle who both have now completed three tours of duty with the Team. Dr Sue Anderson, Dr Moses Lee and Dental Hygienist Sabrina Weaver have now completed two tours. To all first timers, we hope you enjoyed the Dentistry, the Communities and the camaraderie that comes about from pitching in and making a difference. I hope I have not misrepresented the town of Halls Creek, often referring to it as "Club Med for Dentists"

A sincere thank you to the all Team members who assisted, mentored and supervised the four final year students.

As with the Students from last year, Naomi Kohan and Moses Lee, this year's students, Yeshani Chandraweera, Sarah Lam, Jilen Patel and Ho-Jin Yoo, all worked for two weeks each. They were of great assistance and were excellent ambassadors for our profession.

The main objectives for UWA student involvement in the Kimberley Dental Team include,

- Expose the final year students to the vastness and remoteness of our large state and the political and social issues that exist.
- Introduce them to indigenous communities in a respectful and reciprocating manner,
- Broaden their appreciation of the cultural fabric of communities and the affects of complex socio economic circumstances.
- Focus on long term outcomes when providing oral hygiene and general health information including diet, tobacco use, alcohol consumption, substance abuse and lifestyle decisions,
- Expose and encourage them to interact with all age groups from children in the care of the Department of Child Protection to residents of the Frail Aged and Disability facilities.
- Expand their scope of practise and clinical experience in unconventional environs,
- Broaden their diagnostic and treatment skills addressing an wide range of acute, chronic and complex, dental and medical conditions.
- Facilitate and assist them provide first world health care, often in third world conditions,
- Facilitate working in close association with senior practitioners, both general and specialist.
- Encourage close professional relationship building to assist the soon to be graduates, transition into the profession.
- Develop responsible and productive professional relationships with other dental co-workers, allied health and medical colleagues.

All four students grew considerably in all areas. KDT and its volunteer dentists, encourage “them to have the confidence to get into trouble as well as get out of trouble”.

Three of the four have volunteered to be part of KDT in the future in the capacity of mentor as did Dr Moses Lee do this year. Dr Naomi Kohan is now employed with DHS, based in Meekatharra, which she has stated to us, that without KDT experience last year, she could have not contemplated such a challenge in her first year of graduation. She had also volunteered to assist this year, but was unable to get time off from her government position.

More specific to the clinical procedures in clinics, (Halls Creek Hospital, Yuri Yungi, and Frail aged), Kalumburu, Gibb River, Ringers Soak, Yiyili, Balgo Hills, Billiluna and Mulan).

413 patients were seen over 575 appointments for 1,138 services.

This included 413 Examinations and charting, 312 Extractions (significant number surgical), 173 restorations, 70 extensive scale and cleans, 95 radiographs, 32 multiple Duraphat applications, 18 patients numerous fissure seals, 5 anterior RCTs (requiring 13 visits), 4 partial dentures (9 visits), 1 Stainless steel crown and 2 dry sockets / alveogel. Numerous extended oral hygiene instruction sessions, provision of AB covers and radiographic / OPG referrals.

The monetary amount for this treatment / care, based on Treasury Fees is approximately \$116,000. The “dentist time” for this trip equates to a 0.35 full time equivalent (FTE) dentist. The other way of looking at this is, this is the amount of work a single, full time dentist (with an assistant) would be able to achieve in 18 weeks of work.

Screening in all combined schools was undertaken on 430 children. (no financial calculation) In Halls Creek District High School, 207 children were screened with 74 (36%) caries free, 71 (34%) 71 required treatment within six months and 62 (30%) required urgent care. Urgent care rate was down from 38% (51 of 133 Children) in May 2009.

Sadly, the urgency rate has increased in the communities. We believe this is due to two main factors.

Firstly, we see more really remote kids now, many who are very irregular attendees at school and so previously missed being screened, but are now brought to us, as the community message stick “knows” when we are in “town”.

Also increased is the number of urgent problems each child has. We can only address under local anaesthetic, one or two emergency issues per week per child, usually extractions, but these children still remained “classed” as urgent as although we get them out of crisis and immediate pain, we hardly dent their overall poor dental health to achieve a balanced, long term improvement or outcome.

Of the 223 children screened in the Communities, 120 (54%) urgent, (44% in May 2010), with 89 (40%) caries free and only 14 (6%) moderate care required, ideally within six months.

We have a minimum of 15 children that should be in Princess Margaret Children’s hospital now, most if not all, requiring general anaesthetics’, but realistically, closer to 60-70 children, if we wish to actually treat the next group that are going to be in this situation within 6-12 months.

Community stores have much improved produce and products as we believe the actual overall oral hygiene and awareness has improved significantly.

The stores sell toothbrushes at \$8 each which is excessive. We are looking at obtaining acceptable brushes and provide at 50 cents each to stores, IF they will sell them for 1\$ each.

We are making inroads with Aboriginal Medicals Services (Yuri Yungi) supplying two aircraft flights to Ringers Soak, so we could take four volunteers plus equipment and material than what the helicopter could take. WACHS are happy to discuss flights to Balgo Hills and Billiluna next year from Broome. Our most recent news is, the Kimberley Aboriginal Medical Services Council, has received Federal Government funding to support an Oral Health Project Officer, to be appointed to assist with logistics and coordination of dental care in the region over the next two years. Additional funding has been received for the provision of a special purpose Dental Truck / Clinic, which we are currently designing and fabricating with the assistance of DHS.

It is planned for this to be ready for the 1st Feb. 2012.

The Team again makes special mention of the \$35,000 grant from Dental Health Services and the \$8,400 support UWA has paid towards airfares, accommodation and road transport for our 26 volunteers and four students. This support has been invaluable for all concerned and we hope to continue these close relationships in 2012.

Thank you to the National Dental Foundation who sponsored Dr Dennis Gregory, Oral and Maxillofacial Surgeon, to very ably assist the students and the Team in our last week.

Kind regards and thank you for your support of the Kimberley Dental Team

Jan & John

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