



Orange Aboriginal
Medical Service

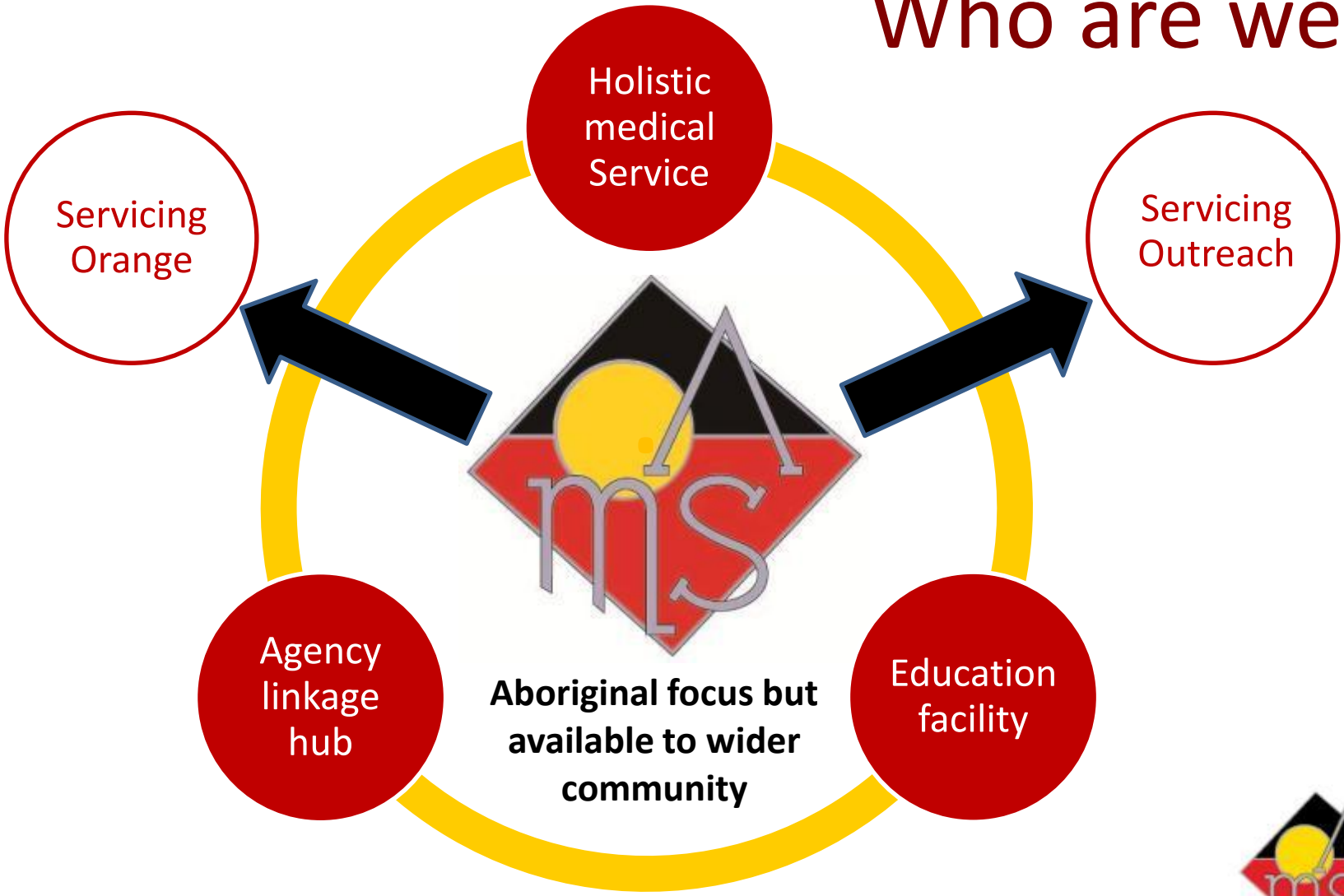


Orange Aboriginal Medical Service

Presentation to: “Close the Gap”
Workshop

Date: 17 & 18 August 2011

Who are we?

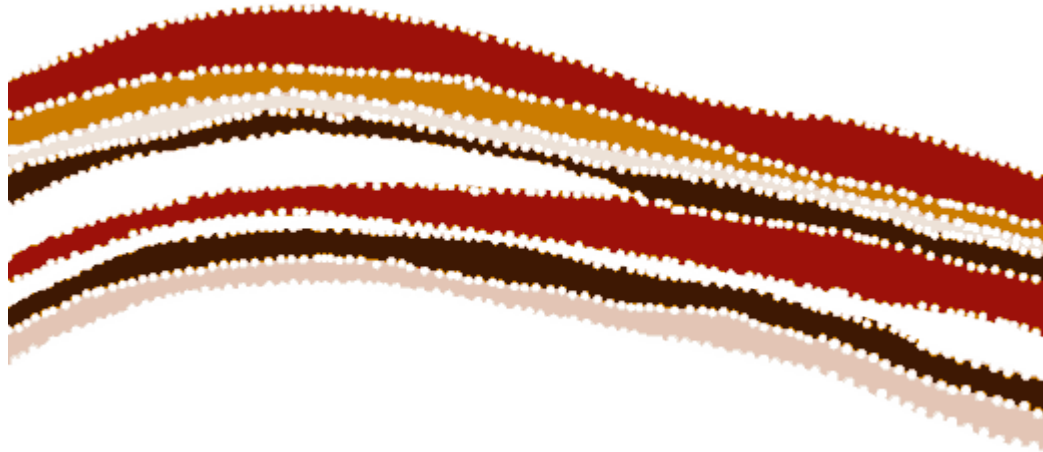


We deliver health outcomes with a difference!



Our Vision

‘To lead in the delivery of culturally sensitive, holistic and professional health care for Aboriginal people and the wider community’



Our Values

Cultural
sensitivity

Honesty &
openness

Visionary &
innovative

Respect &
trust

Community
spirit

Self
determination

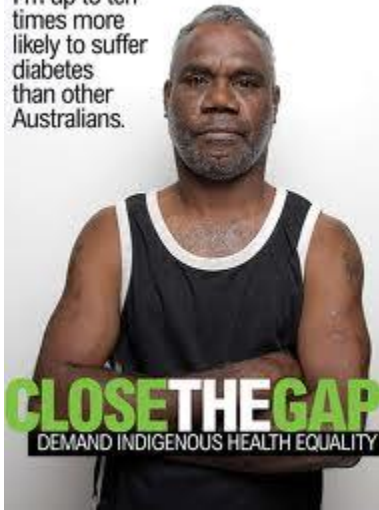
Leadership

Empowerment
& ownership



What drives us?

I'm up to ten times more likely to suffer diabetes than other Australians.



The strategy behind OAMS is derived from the 'Closing the gap' health outcomes namely:

- To close the gap in life expectancy within a generation
- To halve the gap in mortality rates of Aboriginal children under five within a decade

My life expectancy is 17 years less than other Australians.



Our facilities

- New premises in August 2010



Our facilities

- New premises



Who we service



- We have a client base of approx 5000 people
- 60-65% Aboriginal
- Actively involved with the Sudanese community
- Outreach services to Cowra, Bathurst, Forbes & Parkes



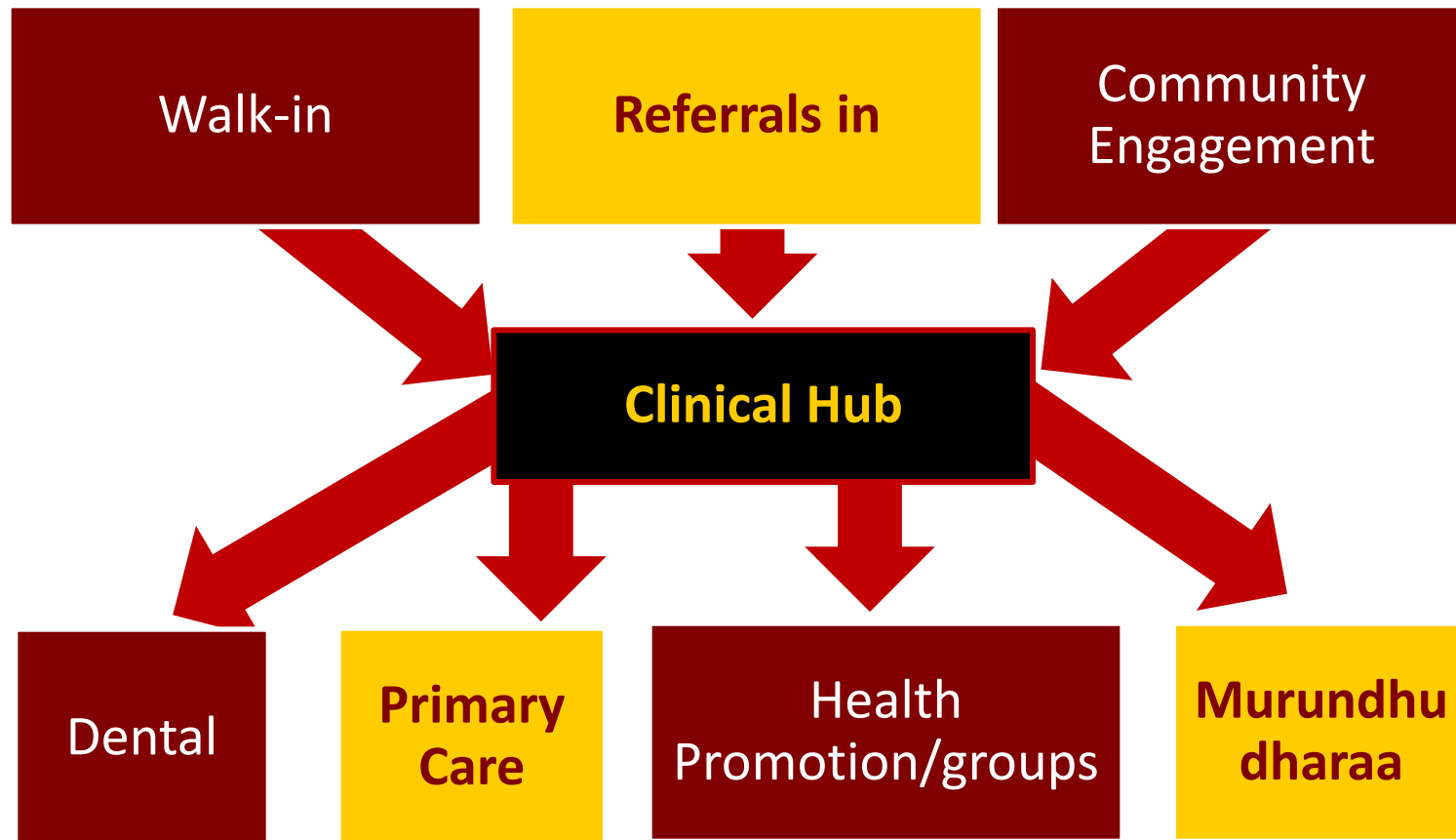
Our team



- Clinical Team – GPs, Registrars, nurses & midwives
- Dental – Dentist, dental Assistant
- Support team including access Coordinator, Aboriginal health workers & transport officers
- Administrative staff



Our model of care – a difference



Services Offered

Primary health
care

Hospital
related care

Adult & child
health checks

Maternity
services

Home Visits

Transport

Health
promotion
groups

Specialist visits

Dental

Industry
health checks





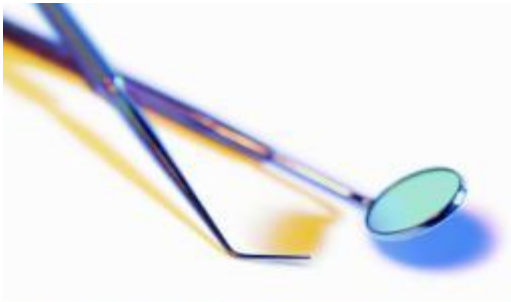
Dental & Oral Health program

A unique service to our local and
neighbouring communities.



The Services

- Dental
 - Oral examinations
 - Fillings
 - Extractions
 - Root canal therapy
 - Specialist services (CSU, SDH & AHS)



- Oral health
 - Education
 - Brushing
 - Choosing the right foods
 - Dental packs



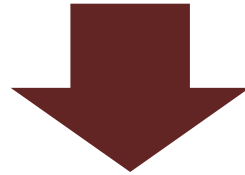
Why Dental?

- A significant health component to contribute to Closing the Gap
- Dental is often out of reach to our clients because of the cost
- An important component of holistic primary health care



How were we able to do Dental?

Federal initiative to put one dental chair in SELECTED AMS



OAMS received
2 CHAIRS



How were we able to do Dental?

**TWO
permanent
chairs**

Why?



Linkages to
educational facilities
Recurrent funding
for own dental team

OAMS

**2 DENTAL
CHAIRS**



**ONE mobile
chair**

Why?



Establishing
outreach services
to surrounding
areas



Why combine Dental with Oral Health?

- Prevention is better (and more cost effective) than cure!
- Established support services already in the region for Oral Health –working with each other brings better outcomes
- Long-term health capacity building



Our Dental & Oral Health vision

5 day working week

3 days

Dental

.....

1 day

Oral health
promotion

1 day

Outreach

..

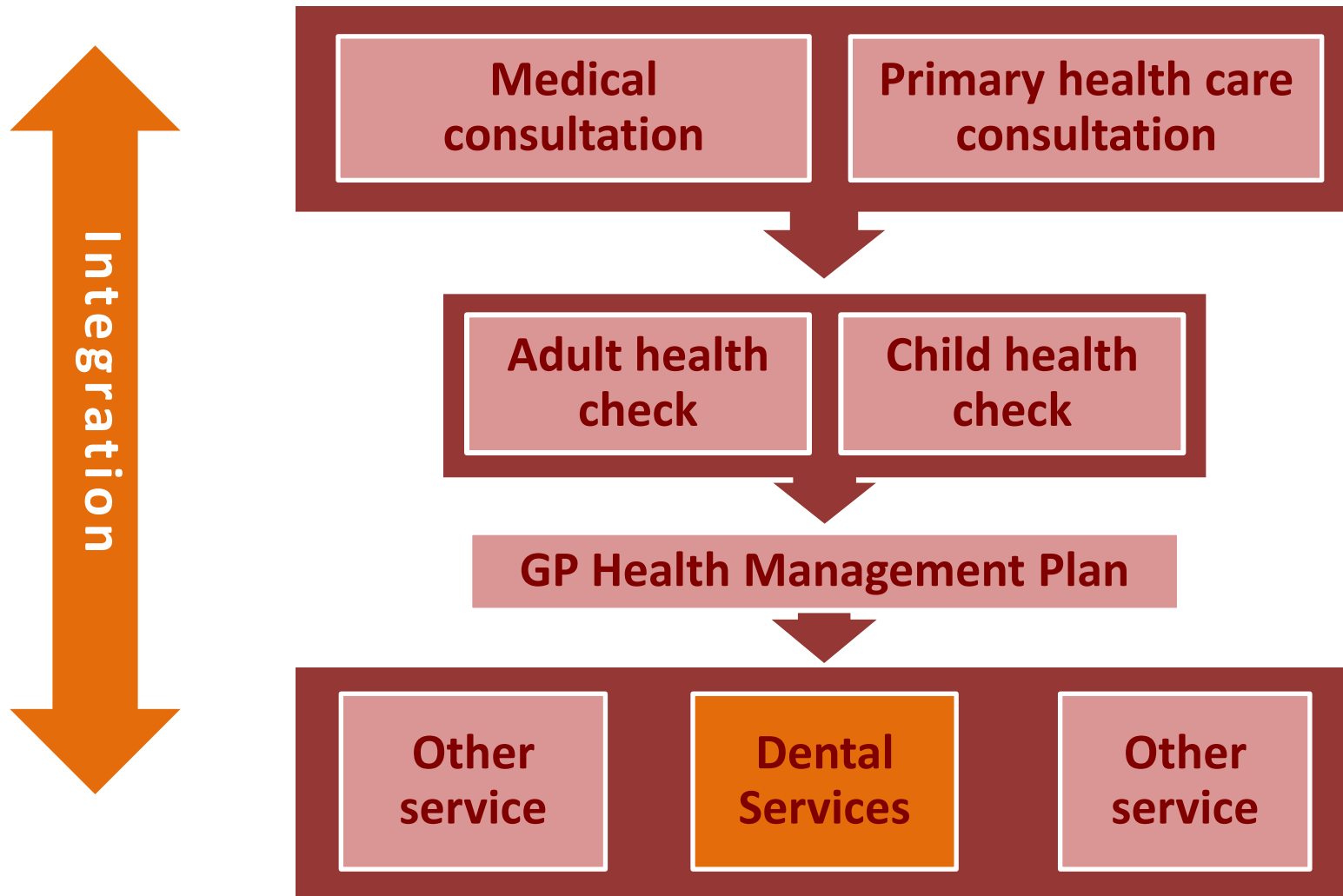


The Dental Team

- Stage 1:
 - Dental Officer
 - Dental Assistant
- Our model of care allows us to then employ:
 - Dental hygienist
 - Trainee Aboriginal dental assistant



Model of care – Dental



Model of care – Dental

- A focus on holistic care
 - Integrated with other services provided by OAMS
 - Integrated with external services eg CSU Dental School, WLHD Dental Health, Sydney Dental Hospital
- A focus on on-going care
 - Each patient has 3 – 4 follow up visits which delivers a better dental outcome



Model of care – Dental

- Ensuring the service gets to those who need it
 - Our policy is to see all in the community, however dental services are high in demand – regular clients and those who really need the service could miss out



Model of care – Dental

- Ensuring the service gets to those who need it
 - Interim policy
 - Aboriginal people (including non-Aboriginal partners) have full access to the service
 - Non-Aboriginal clients can access the service if they have been regular clients for the past 12 months
 - Consideration on a needs basis, case by case.



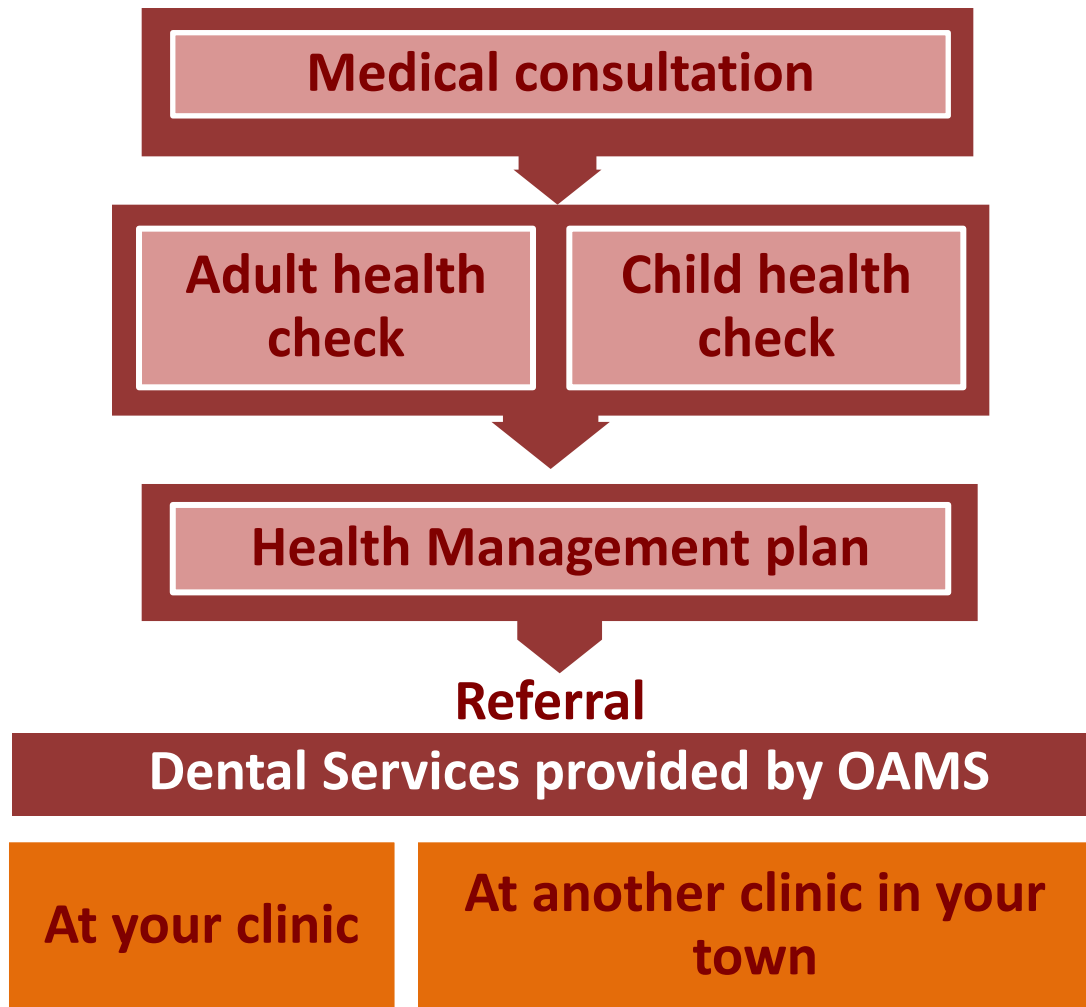
Dental outreach



Visiting each town monthly



Model of care - Dental Outreach



Dental Outreach

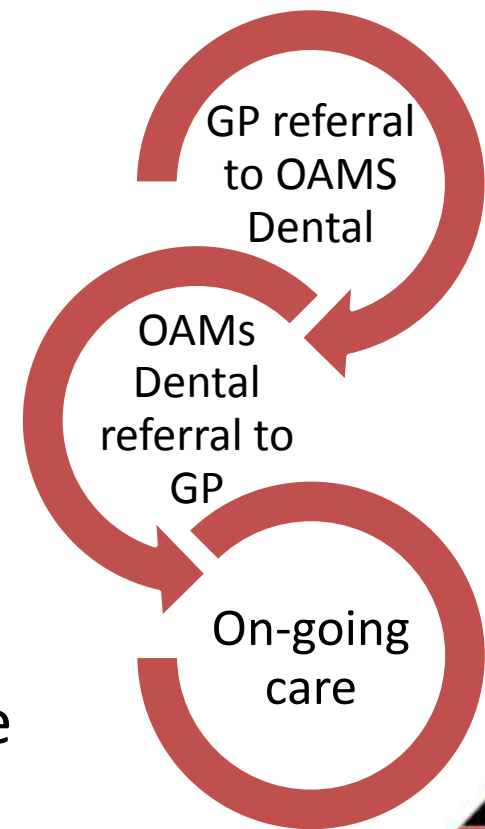
- Critical factors for success:
 - Strong partners
 - Central West Division of General Practice - Aboriginal Health team.
 - Bila Muuji Oral Health Promotion Officer
 - General Practitioners
 - Schools
 - Community
 - Active promotion of service by partners
 - Promotional material supplied by OAMS



Dental Outreach

- Critical factors for success:
 - On-going continuum of care
 - Two-way referral pathway ⇔
 - On-going care
 - Appropriate location
 - A clean private room with reception, waiting room and staff facilities
 - Transport to and from venue for the client

Two-way referral



Dental outreach

- Why become involved?
 - Access and contribute to the health outcomes of the Aboriginal population of your local area
 - Become a client of the practice and receive free dental treatment
 - Build capacity of the service offer of your practice



Dental outreach

- Why become involved?
 - Financial incentives provided through Medicare benefits
 - Adult health check (715)
\$200.12
 - GP Management Plan (721)
\$136.05
 - TCA's (723)
\$107.80



Health linkages – Dental



Dental & Oral Health

Strong
linkages



Health
Services



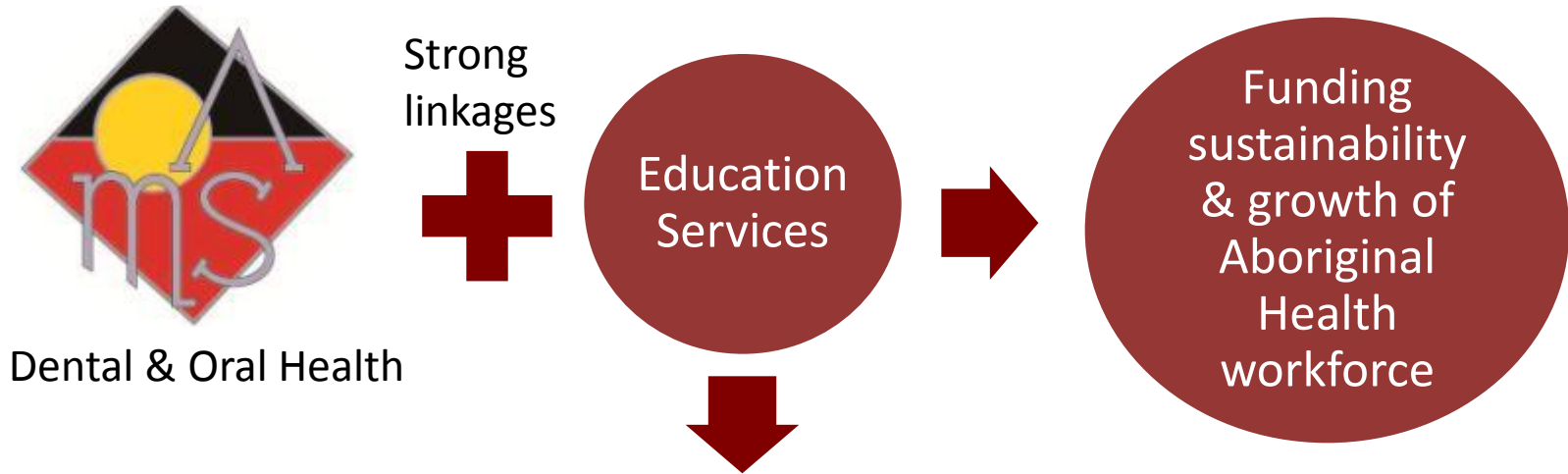
Continuity
of care &
successful
health
outcomes



- Western Local Health District Dental Health program
- The Centre for Oral Health Strategy
- Sydney Dental Hospital
- Central West Division of General Practice
- Local General Practitioners
- Orange Health Service
- Bila Muuji Oral Health program



Education linkages – Dental



Dental & Oral Health

Strong
linkages



Education
Services



Funding
sustainability
& growth of
Aboriginal
Health
workforce



- Charles Sturt University
- TAFE
- Primary & Secondary Schools (oral health programs)



How OAMS dental is funded

- Capital \$200K
 - NSW Health, made available by the Commonwealth under the National Partnership Agreement.
- Recurrent funding \$300K/pa
 - NSW Health, made available by the Commonwealth under the National Partnership Agreement.
- Projected Shortfall \$150K
 - Health Checks, GPMPs & TCA's
 - Investigating other medicare benefit options
 - Increased C'wealth / State funding



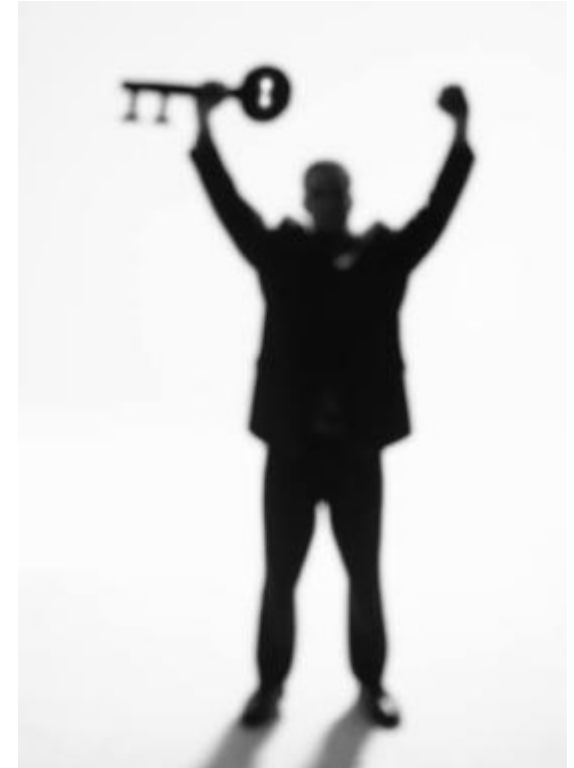
The Future – Dental

- Further linkages around specialist care
- Student Placements from Universities
- Further Aboriginal employment
- More involvement with the Dental schools
- Expansion of OAMS dental service



OAMS dental success formula

- Integrated model of care
- Integration with all health care services/agencies
- A holistic approach to on-going care
- Strong linkages with health and education providers
- Outreach



Thankyou

