



Oral Healthcare in Canada for People with Autism: Mapping Gaps & Setting Standards

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The Canadian Society for Disability and Oral Health (CSDH), together with the Canadian Autism Spectrum Disorder Alliance (CASDA), held a virtual stakeholder engagement forum on May 21, 2020. This topic was identified by CSDH, as access to dental care for individuals with autism is severely limited and fragmented in Canada, with inconsistent coverage across provinces. Insufficient numbers of trained practitioners, limited funding, and a lack of continuity of care from childhood to adulthood contribute to the lack of access to dental care for Canadians with autism.

Background

In 2019, the federal government committed to developing a National Autism Strategy. The Canadian Autism Spectrum Disorder Alliance (CASDA) is an alliance of organizations and individuals working to ensure the implementation of a National Autism Strategy that addresses funding and policy gaps. CASDA is working with professional groups, including CSDH, to identify gaps and practices, and set national standards. Each province/territory differs in their practice and policies; standardization may lead to new knowledge and optimize advocacy efforts.

Research done by the Canadian Dental Association identified some of the main challenges associated with treating patients with special needs.

First, there are limited opportunities for formal training in dental school related to communicating with and treating patients with special needs (Beaudoin & English, 2019). Some training occurs during residency or internships; however, it is not standardized, leading to significant knowledge gaps. In addition to standardized formal training, specialty training focused on specific patient groups, such as individuals with Autism, would be welcomed by CDA members.

Second, differences in location between rural communities and urban areas also results in accessibility issues. Challenges for remote communities include limited access to



anesthetists and specialists and limited infrastructure. Dentists in these communities may therefore feel pressured to perform procedures they lack the appropriate training for.

Third, the challenge of increased time required to treat patients with special needs. More time is required to facilitate care with patients and/or caregivers, in obtaining consent, explaining procedures, and collecting medical history. Even for straightforward procedures, there is a need to build in extra time; existing fee structures do not necessarily take this into consideration, so this has real implications for the operations of a practice.

Forum Objectives

The goal of this forum was to map out existing dental care services available for people with autism across Canada to determine current needs and gaps in care. This information will be used to develop strategies and recommend policies to improve oral health for people with autism across the lifespan.

Stakeholder Engagement

The forum was held virtually via Zoom and consisted of short presentations by three panelists followed by small group breakout sessions. Throughout the session, additional information from the stakeholders was collected from Zoom polling. Questions from the polls and breakout sessions will be used to inform future stakeholder engagement opportunities.

About the Stakeholders

A total of 20 stakeholders, in addition to 3 panelists, participated in the forum, including dentists, hygienists, dental auxiliaries, and caregivers. Stakeholders were from eight provinces across Canada and reported practicing in public sector, private sector, and nonprofit settings. Most stakeholders had significant (20+ years) experience working with people with ASD.

Stakeholder Responses

The engagement led to the identification of five main themes as areas for consideration: improved access to care; increased and consistent federal funding; improved education related to communicating and treating patients with special needs; increased awareness of oral care among pediatricians and caregivers; and an improved network of health professionals, with a unified, collaborative approach led by organizations such as CSDH and CASDA.

Improved access to care:

- Universal access to qualified clinicians/practitioners
- Adequate number of trained dentists and multiple clinics in each region to serve this population with acceptable wait times
- Manage the transition from pediatric clinics to general dentist clinics using the transition documents created by CSDH



Increased funding:

- Federal funding to allow children and adults with autism to be seen in private clinics by individuals that have identified that they are willing and educated to treat spectrum disorders
- Consistent funding levels regardless of patient age
- Increased funding for GA and desensitization programs
- Adopt a case complexity program developed by CSDH with CDA, by aligning complications associated with each case to come up with an adjusted cost per case

Improved education:

- Integrate formal training related to communicating and treating patients with special needs in dental school
- More education for all health care providers (including dentists, RDH, PDA, MD, pediatricians, nurses, etc.) and parents, based on the WHO ICF classification
- Motivate family dentists to seek training to serve this patient population, to improve comfort level among dentists
- Appropriately train dental auxiliaries to complete the dental team in caring for patients with special needs

Increased awareness:

- Involve pediatricians, with a goal for the medical profession to start including oral care from day one
- Convey communication guidelines and training to help caregivers promote oral care and provide basic dental hygiene care to patients with special care needs

Improved network of health professionals:

- Create a more cohesive system, in which different disciplines work together towards a common goal, potentially by establishing a liaison for care.
- Work with national organizations, e.g. CSDH or CASDA, to help people with special needs access comprehensive services across the lifespan
- Work with CDA to determine 'best practice' guidance for treating patients with special needs

Next Steps

As a result of this positive engagement, further stakeholder engagement opportunities will be held, to identify practice resources and develop a strategic plan. The strategic plan will recommend key actions for individual practitioners, other professional disciplines, and policymakers, in working toward a powerful, empowering consensus strategy.

References

Beaudoin, M. & English, S. (2019). Patient Understanding Research. Canadian Dental Association.