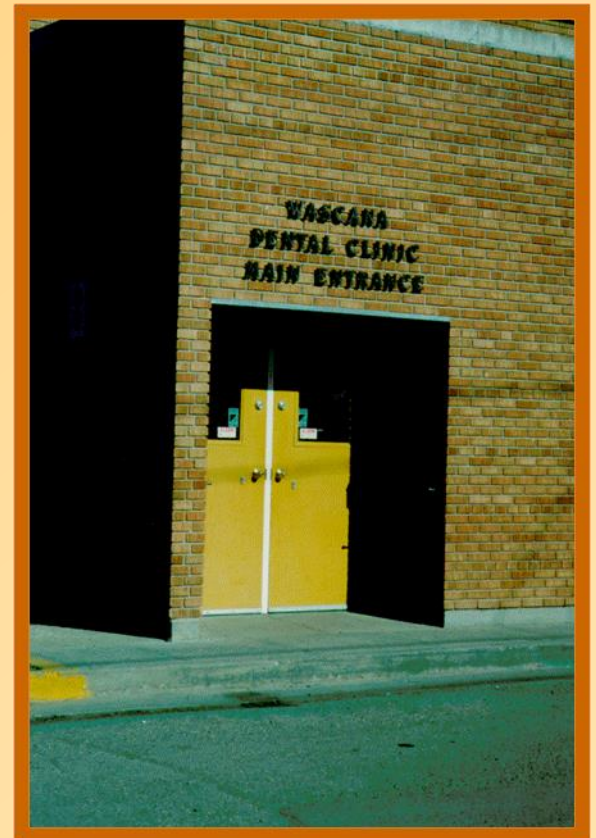


History of the Saskatchewan Health Dental Plan 1972-2022 A Reflection

Saskatchewan Oral Health Coalition Inc.
November 7, 2022

2022 marks 50 years since dental therapist training began in Canada!!



- Long before the SDP, Saskatchewan lead the way in innovative public policies
- This included municipal doctors and the establishment of Union Hospital Districts circa 1920's
- By 1939, the McKillop Municipality had a tax supported health insurance program
- In 1946, the Swift Current Medicare program was established; it included dental services for children.
- Saskatchewan wide universal health care became North America's first in 1962.

1962

- Government of Saskatchewan sent representatives of the College of Dentistry and the Department of Health to New Zealand to observe the training of dental nurses and the New Zealand program.



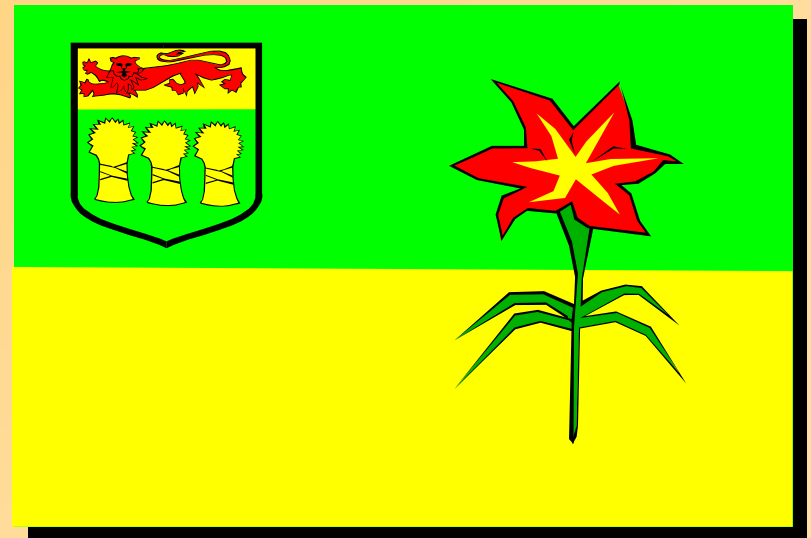
1964



- A report was issued in 1964 that attempted to address the shortage of adequate dental services and of dental manpower.

1966

- Government of Saskatchewan - Department of Health set up a Dental Advisory Committee and an Ad-hoc Committee on Dental Auxiliaries.



1968



- Each committee submitted a report to the Department of Health.

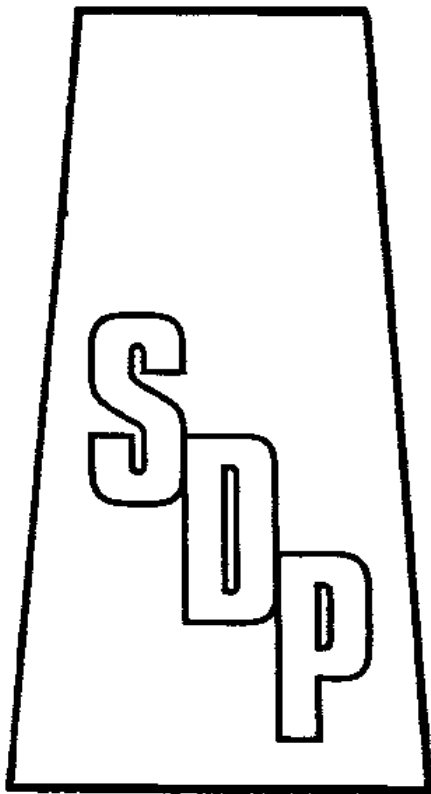
1969

- The Oxbow Project was set up, using Federal funding, to pilot the delivery of dental care services for children using a team of dental auxiliaries.
- Two dental therapists from New Zealand provided services to children ages 3-12.

1971

- June 23 - The New Democratic Party (NDP) was elected to office. One of the NDP's health care promises was to provide an insured dental care program for children up to age 12.

**Department of Public Health prepared “A
Proposal for a Dental Program for Children in
Saskatchewan” - November 1972**



**SASKATCHEWAN
DENTAL
PLAN**

“The dental health of children in Saskatchewan is poor. There is an insufficient number of practicing dentists in Saskatchewan to provide all the dentist services needed. Moreover, dentists are distributed throughout the province in such a way that a large number of people do not have adequate access to dental services. If the widespread incidence of dental disease is to be controlled in this province, it is clear that a **bold and imaginative plan** must be designed to attack the health problem, and that the public, the dental profession and the government must act cooperatively and deliberately to meet the dental health challenge in this decade.”

1971 Oral Health Status

- Age 7 children had deft 5.5
- 76% required restorations
- 39% required extractions

1971 Oral Health Status

- Age 11 children had DMFT 4
- 75% children required restorations
- 26% children required extractions



1971

- 185 practicing dentists with a population ratio of 1:5000
- about one half (94) in Regina and Saskatoon serving 30% of the Saskatchewan population

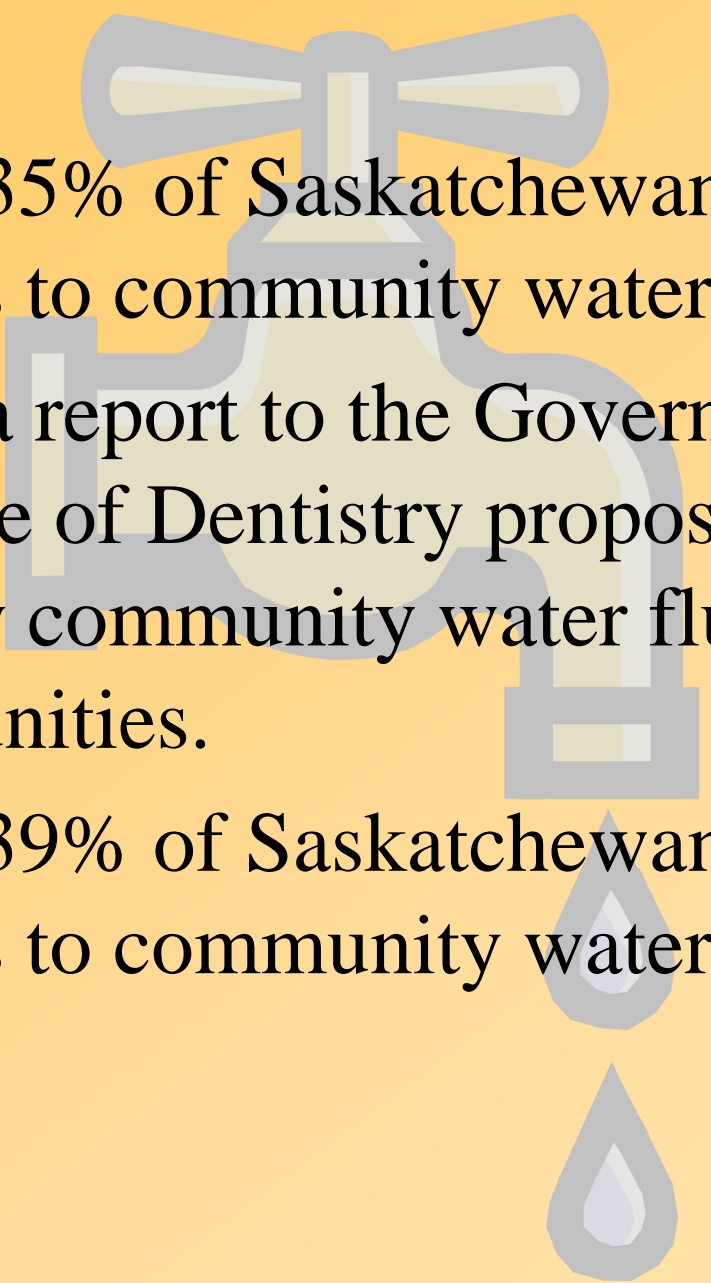


1971

- High Training Costs
 - \$11,000 per dentist
 - \$4,500 per dental nurse
 - \$4,000 per hygienist

- Under-utilization of private dental services by public due to financial burden/economic conditions

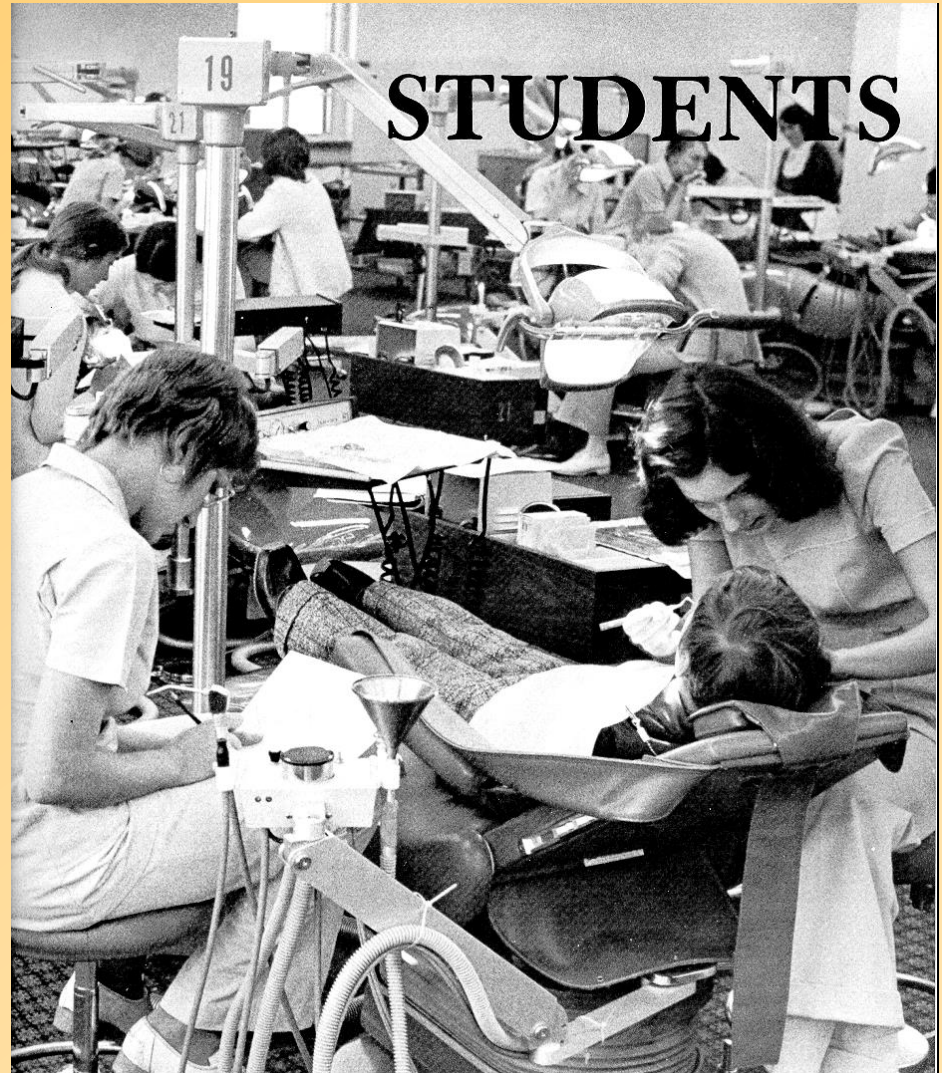
SDP

- 
- In 1971 - 35% of Saskatchewan population had access to community water fluoridation.
 - In 1973 - a report to the Government from the College of Dentistry proposed mandatory community water fluoridation of all communities.
 - In 2022 - 39% of Saskatchewan population had access to community water fluoridation.

Challenges/Issues for the Government

Supervision

- The College of Dental Surgeons of Saskatchewan proposed direct supervision.
- A 1972 survey indicated 94.8% of dentists wanted direct supervision.



Supervision

- Quality of work
- Mandibular block
- Time efficiency
- Productivity
- Children's behaviour/pain management

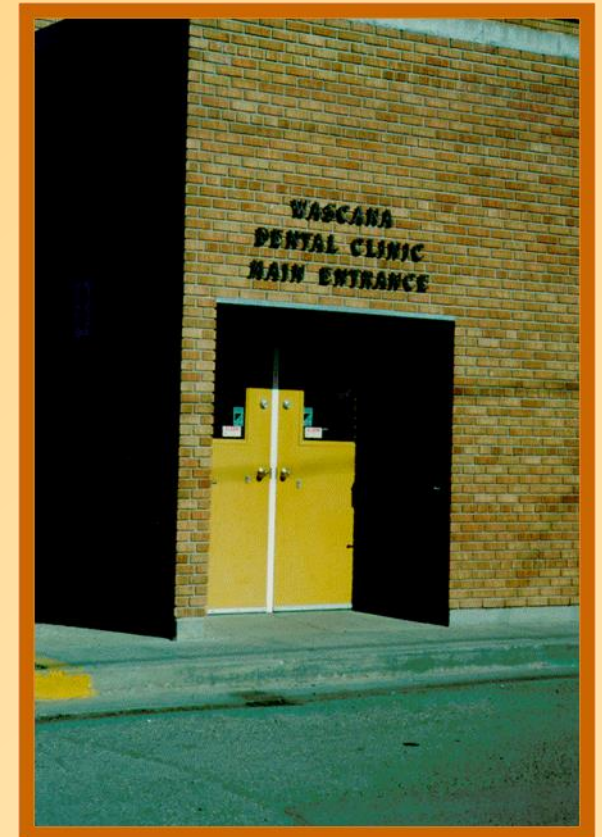
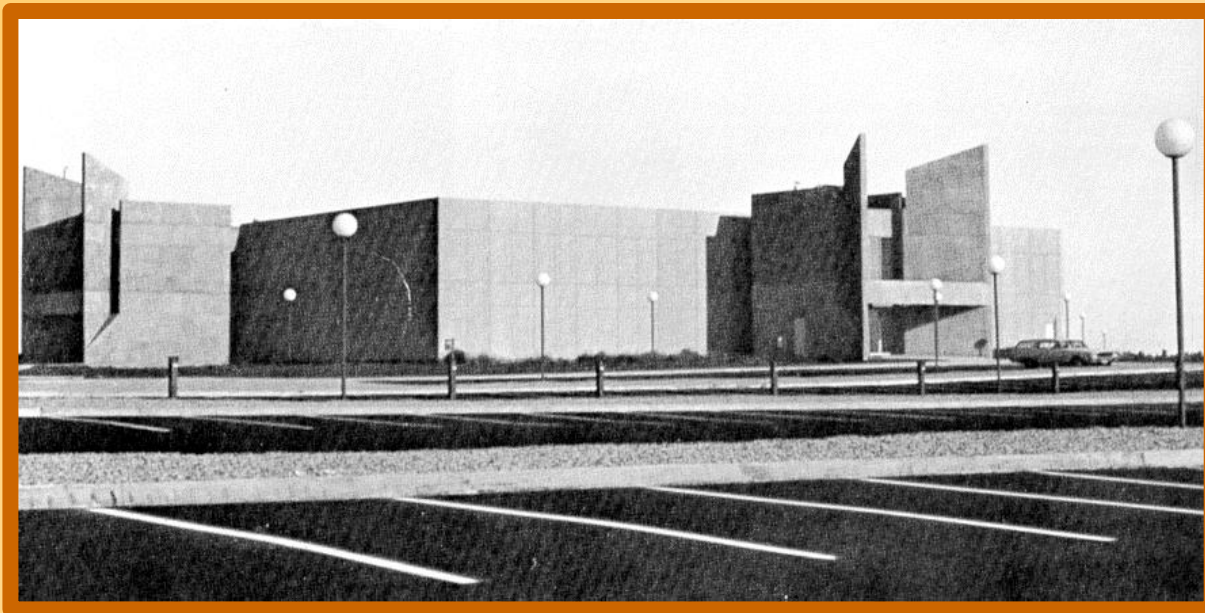
Children's Dentistry



The College of Dentistry had concerns and stated that “Children’s dentistry - done properly, is not easy - in fact, it is one of the most difficult and challenging areas in dental practice area.”

1972

- Training of dental nurses began in September at the Wascana Institute of Applied Arts and Science (WIAAS) in Regina.



- Dental Nursing Training Program (WIAAS)



1973

The College of Dental Surgeons of Saskatchewan report to the government stated **“The profession won’t settle for a substandard plan for Saskatchewan’s Children --- we want the best. We want a plan that is so good it can and will be adopted as a model by other provinces and countries. In short, we want the best for our children, and will not rest until it is attained.”**

SHDP

- Established in September 1974
- In the 1974-75 school year there were 53 dental therapists
- 34 WIAAS graduates and 19 from Great Britain were employed

- In 1972, the National School of Dental Therapy (NSDT) was established in Fort Smith, NWT
- In 1982 the NSDT moved to Prince Albert
- The training was similar to the training provided at WIASS/SIAST
- The goal was to provide dental services to remote/isolated populations who were underserved
- In 2010, the Federal government cut funding to the NSDT stating post-secondary education was a provincial responsibility.



**Health and Welfare
Canada**

**Santé et Bien-être social
Canada**

**Medical Services
Branch**

**Direction générale
des services médicaux**

**National School
of Dental Therapy**

**École nationale
de dentothérapie**

Canada







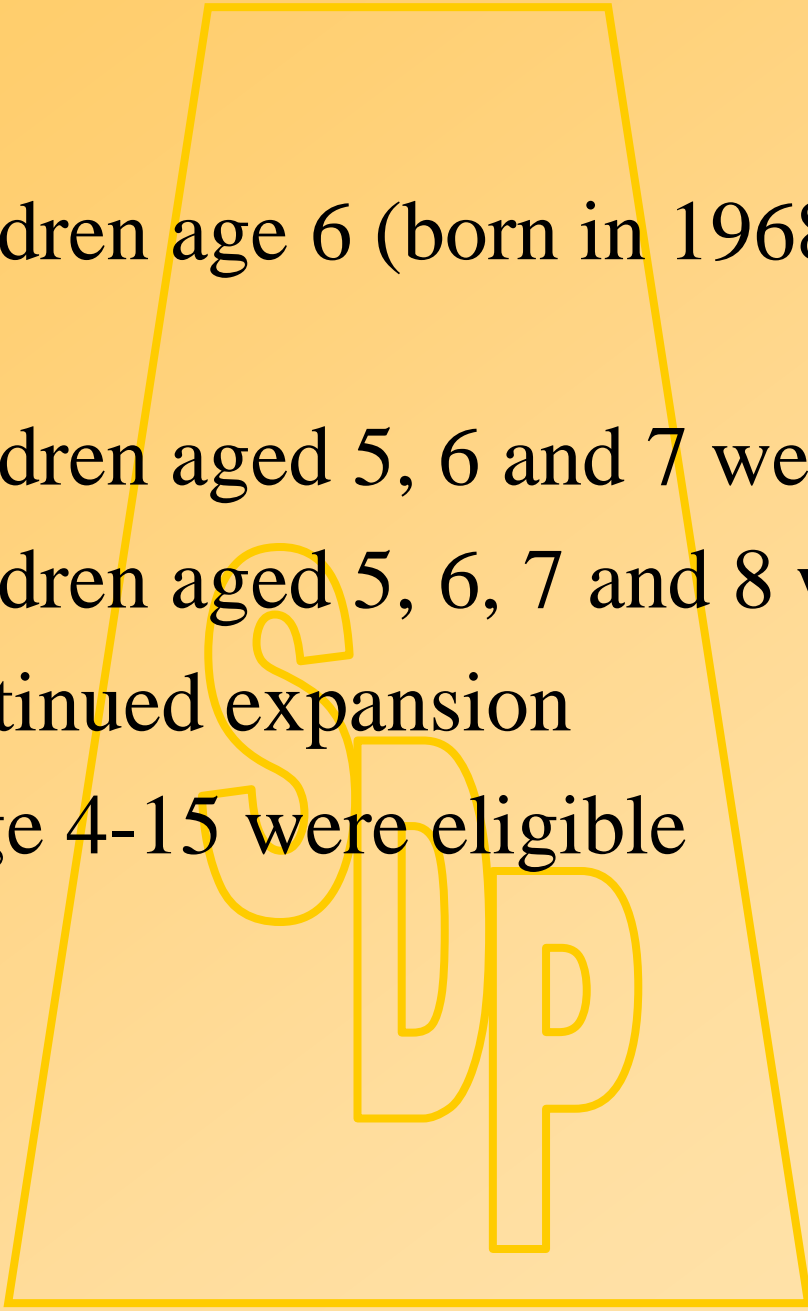




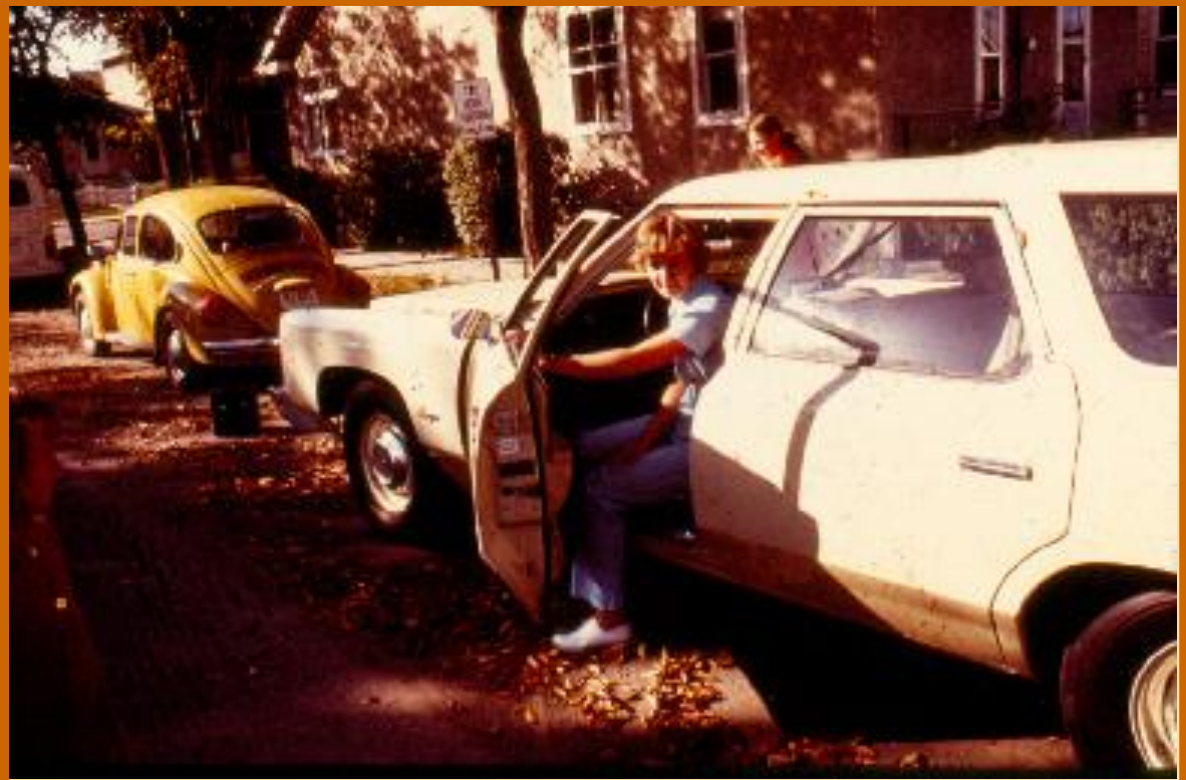




- A dental therapist and dental assistant worked as a team to deliver preventive, diagnostic and restorative services to children in school-based dental clinics in all elementary schools of Saskatchewan
- Most clinics were permanent and some were portable. In the early years transportation of children to clinics was done by SDHP staff.
- In 1974 there were 215 permanent clinics; the remainder used portable equipment.

- 
- 1974 - children age 6 (born in 1968) were eligible
 - 1975 - children aged 5, 6 and 7 were eligible
 - 1976 - children aged 5, 6, 7 and 8 were eligible
 - SHDP continued expansion
 - Overall, age 4-15 were eligible

- Dental therapist and dental assistant teams moved from school to school.

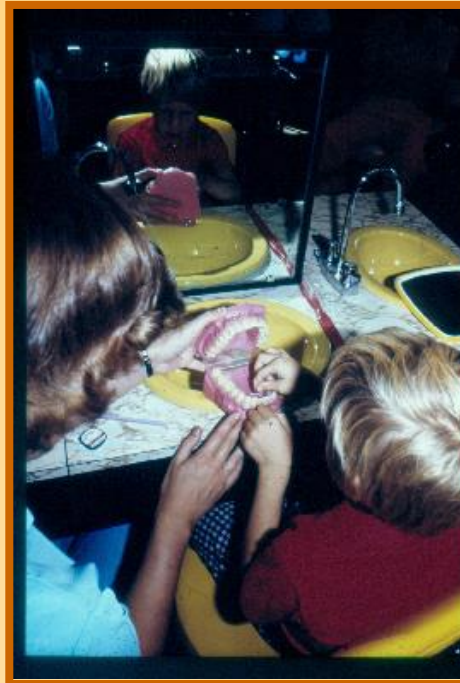


- In the early years, portable equipment was moved in “G” cars which were assigned to the team
- By 1987, the majority of school dental clinics had full size chairs/compressors that remained on site

Teaching Resources Used



- Prevention was a foundational element of the SDP
- Dental therapist in the Prevention Room at WIAAS























All done! Packing Up the G car to move to the next school!



A Quality Evaluation of Specific Dental Services Provided by the Saskatchewan Dental Plan-

Dr. Ambrose, Dr. Hord and Dr. Simpson; February 1976, found the following:

- Kindergarten, Grade one and Grade two students (410) in 29 schools in five health regions were examined.
- Amalgam Restorations, Stainless Steel Crowns and Radiographs were evaluated.
- 2107 amalgam fillings were evaluated: Sask. Dental nurse placed amalgams that, on average, were better than those placed by dentists.
- 97 crowns were evaluated: There was no noted quality difference between SDN's and dentists.
- 80% of radiographs were acceptable; no comparable data for dentists.
- The combined quality and coverage of the SDP after two years of operation was impressive.

<https://saskohc.ca/images/documents/PDF//Saskatchewan-Health-Dental-Plan-Archives//History//A-Quality-Evaluation-of-Specific-Dental-Services-Provide-by-the-Saskatchewan-Dental-Plan.pdf>

Nov. 74
Dental plan

Kids like dentists!

By Bryan Getchell
of the Star-Phoenix

Six-year-old Melissa Irvine says she is looking forward to going back to the Wilson school dental clinic to get her teeth fixed.

And Ryan Klashinsky, of 1132 King Cres., a grade one pupil at Wilson school, said he was not afraid when he had his teeth filled.

For them and other children enrolled in the Saskatchewan dental plan at Wilson, going to the dentist means a short walk down the hall to the clinic in the nurse's room.

For the past two weeks, a team of a dentist, a dental nurse and certified dental assistant has been working at the small, one-chair school clinic.

Other dental plan teams have been working in city schools since the middle of the month.

"I liked it when I saw the filling part," Melissa said. She was shown the filling compound before it was put in a tooth.

Melissa's mother, Ann Irvine, of 722 5th Ave. North, said in an interview the free dental plan will probably save the family about \$60 a year in dental expenses.

Mrs. Irvine said she went with her daughter to one of the first appointments and was shown the work to be done. She said the team was thorough and her daughter has not complained about the work done so far.

"I really think it is one of the best things that has happened. I think they should have had it long ago," Mrs. Irvine said.

Dr. Tore Stoltenberg said the team has had no trouble with the children at the clinic and there have been no major problems to cope with.

The equipment at the Wilson school clinic is permanent, he said, although the plan has portable equipment for use in schools where a permanent clinic is not established.



—S-P Photo by Gary Tamnyan

Six-year-old Russell Sheppard of 1415 2nd Ave. North has a tooth filled by dental nurse Gretchel Croucher (right), who is being assisted by certified dental assistant Jean Sharman.

Dr. Stoltenberg said before work is done, x-rays are taken, an oral examination is made, preventive techniques are taught to the child and there is a short interview with a parent to explain the dental work.

Wilson school principal Garry Armstrong said the children are often excited on their first visit to the clinic.

He said with the clinic in the school it reduces the amount of time a child may be absent on a dental visit. If a child had to go to a dentist's office it

could mean a half-day absence. With the clinic the children may be out of class for only three-quarters of an hour.

Jim Seamer, the grade one teacher at the school, said none of the children returning from the dental clinic have complained about the treatment, or are restless.

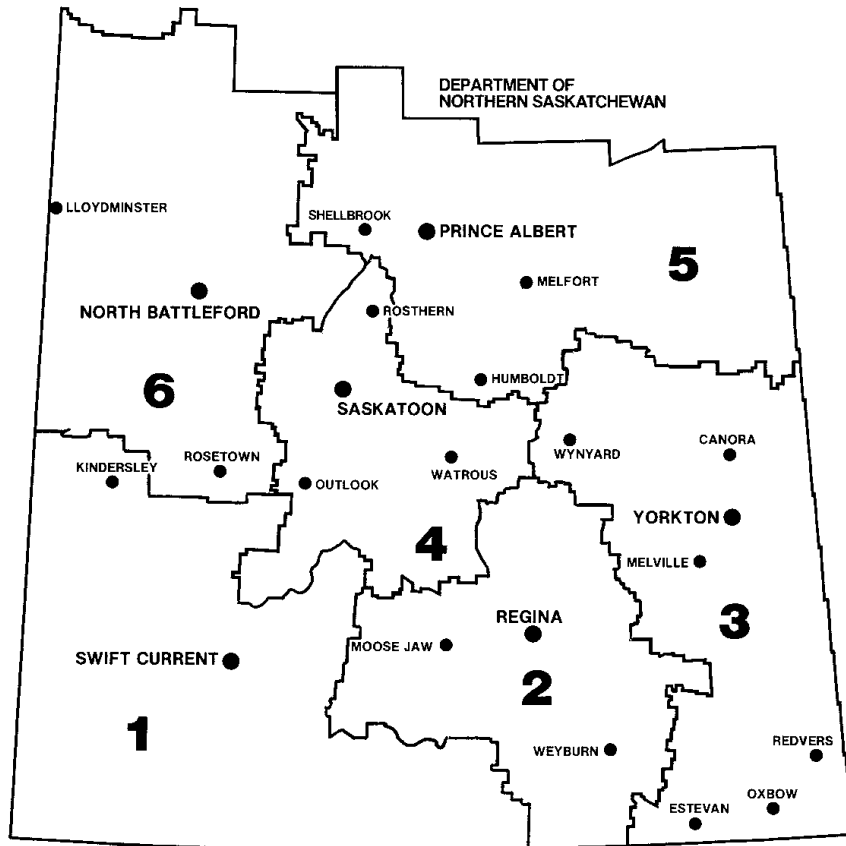
He and the nurses must still complete time arrangements so the children who get their teeth fixed may not miss important lessons.

"It hasn't been a major problem," he said.

Magnitude

- 90% participation rate in the SHDP in 1987.
- 4 year olds were added in 1977.
- Hygiene services were added in 1981 for adolescents.
- 578 permanent dental clinics in schools throughout Saskatchewan.

SASKATCHEWAN DENTAL PLAN ADMINISTRATIVE REGIONS



KEY TO ADMINISTRATIVE REGIONS

NO. 1 SWIFT CURRENT	NO. 4 SASKATOON
NO. 2 REGINA	NO. 5 PRINCE ALBERT
NO. 3 YORKTON	NO. 6 NORTH BATTLEFORD

- Saskatchewan Dental Plan employed over 400 staff in 6 regions (dental therapists, dental assistants, dentists, administrators, support staff, dental technicians and head office staff).

- 3 external evaluations concluded that:
 - work done by dental therapists was “**superior**” to work done by private practice dentists
 - children had no fear of the dental clinic or personnel and considered it a “routine” part of school
 - dental therapists were well trained to provide prevention and treatment services
 - it was considered the best “**public health dental program in the world**”

Outcomes

- 1974 deft of a 6 year old 5.61
- 1987 deft of a 6 year old 2.63
- 2.98 reduction in def

Outcomes

- 1974 6 year old DMF + DEF = 0 (12%)
- 1987 6 year old DMF + DEF = 0 (39%)
- 27% increase in cavity free children

Outcomes

- 1974 average cost per child \$158.29
- 1986 average cost per child \$91.98

Study 10 years ago gave top marks to dental plan

What a difference a decade makes! It was barely over 10 years ago that a quality evaluation of the then two-year-old Saskatchewan Dental Plan gave the scheme top marks. Now, according to Premier Grant Devine speaking at a press conference in Saskatoon a month ago, the plan had to be overhauled because parents didn't want dental assistants looking after the children's teeth.

It's an interesting contrast. The 20-page final report of a three-member evaluation team, engaged by the director of the dental plan and made up of three highly-qualified dentists from out of the province, actually scored the performance of dental assistants higher than that of full-fledged dentists in some categories of work.

The three examiners were team chairman Dr. E. R. Ambrose, dean and former chairman of operative dentistry at McGill University, Dr. A. B. Hord, chairman of restorative dentistry at the University of Toronto and Dr. W. J. Simpson, chairman of children's dentistry at the University of Alberta.

They began their report by explaining that the use of dental nurses dated back to 1921 in New Zealand. By 1970, they said, 19 countries were either experimenting with this method of providing dental care or actually utilizing it. That included the Yukon where, the report said, a little-known program using dental nurses had become "an essential part of the total dental care system."

The evaluation was carried out using a "blind" technique, where the examiners used whole classrooms as sampling units, but only after all were examined and results recorded would they know which of the children were enrolled in the dental care plan.

The components of treatments selected were "amalgam restorations in primary or secondary

**Verne
CLEMENCE**

S-P Forum Editor



teeth" (I assume that means fillings in lay terms), stainless steel crowns on primary teeth and diagnostic X-rays.

There was a great deal more detail of a technical nature in the actual report, which was obviously designed for those who understood the terms. But the general and specific conclusions were clear enough.

After about 2,100 fillings were assessed and 410 children were examined from 29 schools, the dental care program "must be considered very acceptable," the report said.

This result, it was observed, was consistent with experiences elsewhere with similar programs, including those in two other provinces and four American states.

"... The Saskatchewan dental nurses placed amalgam fillings that on average were better than those placed by dentists," said conclusion No. 1.

A second said there was no quality difference between dental nurses and dentists on the basis of 97 steel crowns evaluated. A third rated 80 per cent of X-rays by the nurses as acceptable, a figure the examiners took to be high though no comparable figures for dentists were available.

The report, not surprisingly, looked into possible reasons why the nurses rated higher in fillings and equal in other areas of dental work to dentists. The high quality of their training program was given

as one possible reason. Another was that "it seems likely the ability differences between the two types of personnel compared is less important than is the different degree of structure found in the respective work settings."

As for concerns about lack of supervision in the province's dental plan, the report suggested this factor was probably of less importance than the way the program was organized.

So, what does it all mean, more than 10 years later? That's difficult to assess. For one thing, there is no updated version of the evaluation, at least none that I'm aware of, so one can't be certain there weren't changes in the quality.

Adverse public reaction, however, since the Department of Health fired most of the dental assistants who had been doing the work and announced that the children would be going to dentists' offices in future suggests that the dental plan in the schools was highly valued.

However, one would have to be more familiar with the complaints the premier was hearing to be able to even guess at whether there was substantial criticism of the program. Indeed, his assertions came as somewhat of a surprise.

What this 10-year-old report does suggest strongly is that the dental program was certainly top notch when it started. Interestingly enough, there is nothing in the newspaper files around the time it was issued to suggest the evaluation was made public. Maybe, since some of its content could be construed to be less than complimentary to dentists, it was seen to be the better part of valor to keep it in a file.

Whatever the circumstances then, this report adds to the fear that the recent changes in the Saskatchewan Dental Plan will prove to be a step backward.

July 30/87

Legislative and Regulatory Authority

- The Dental Care Act - 1974
- The Saskatchewan Dental Nurses Act - 1973
- The Saskatchewan Dental Therapists Act -1981
- The Dental Disciplines Act - 1997

1987

- Progressive Conservative (PC) government privatized SHDP
- This became the Children's Dental Plan (CDP)
- 425 SDP staff were fired in June 1987
- 18 dental therapists were retained as dental health educators
- All dental equipment/supply inventory was sold

1993

- **NDP government eliminated the CDP.**

Children's Dental Plan



35 Years Later

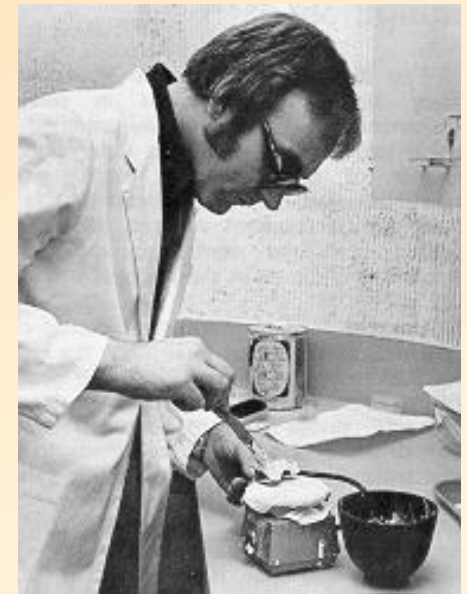
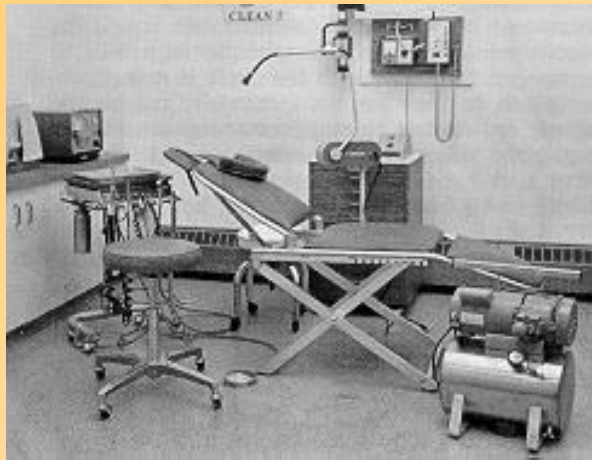
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1974 1990 1975 2001 1996
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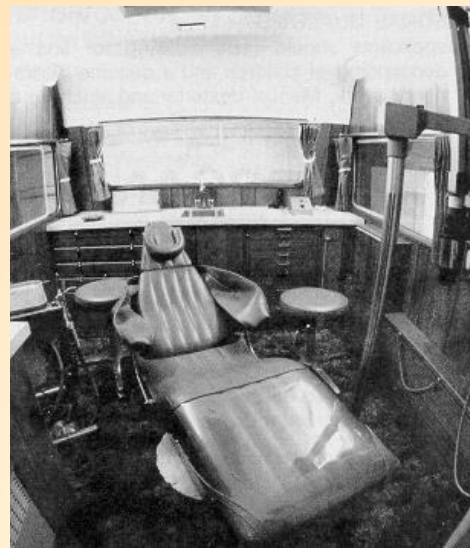
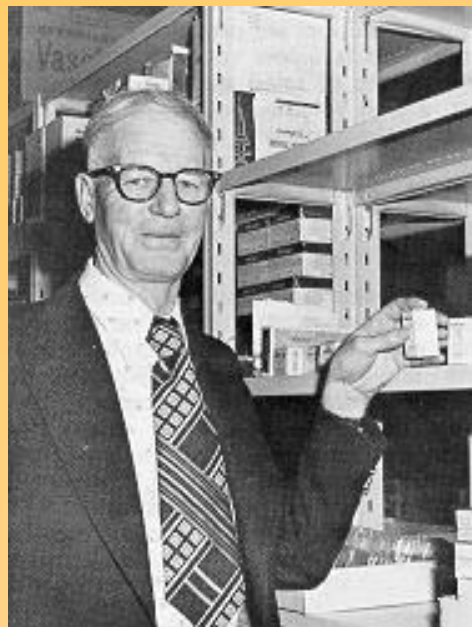
2022

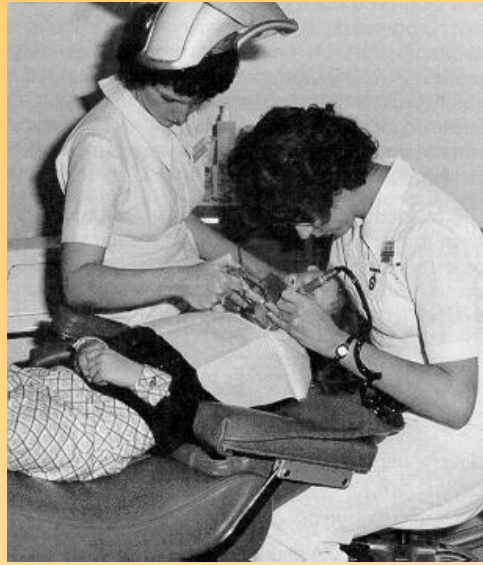
- School-based and/or Primary Health Care dental programs/clinical services delivered by dental therapist/dental assistant teams still continue in:
 - Athabasca Health Authority
 - Indigenous Nations
 - Saskatchewan Health Authority

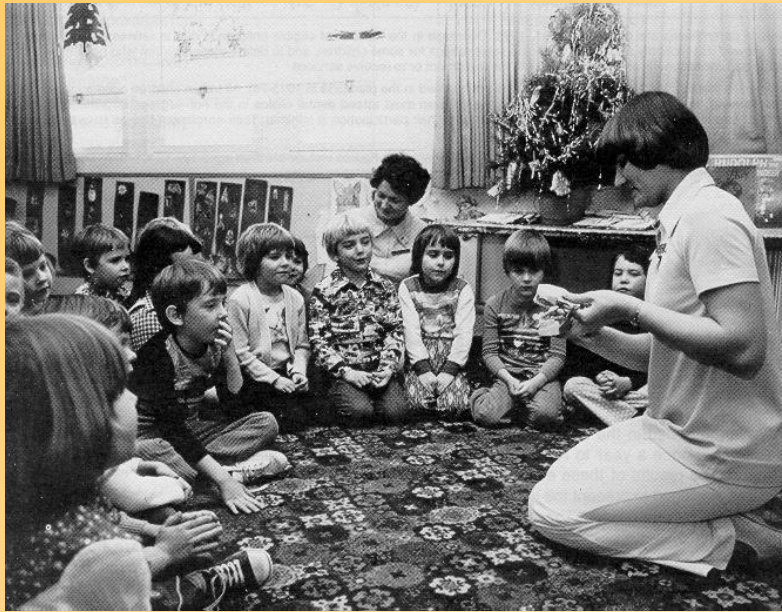
2022

- 169 licensed dental therapists
- 185 total registered dental therapists
- Dental therapists are working:
 - in private practice
 - at the University of Saskatchewan and Saskatchewan Polytechnic
 - in health regions as clinicians, health educators and administrators
 - for Indigenous Nations
 - for Indigenous Services Canada

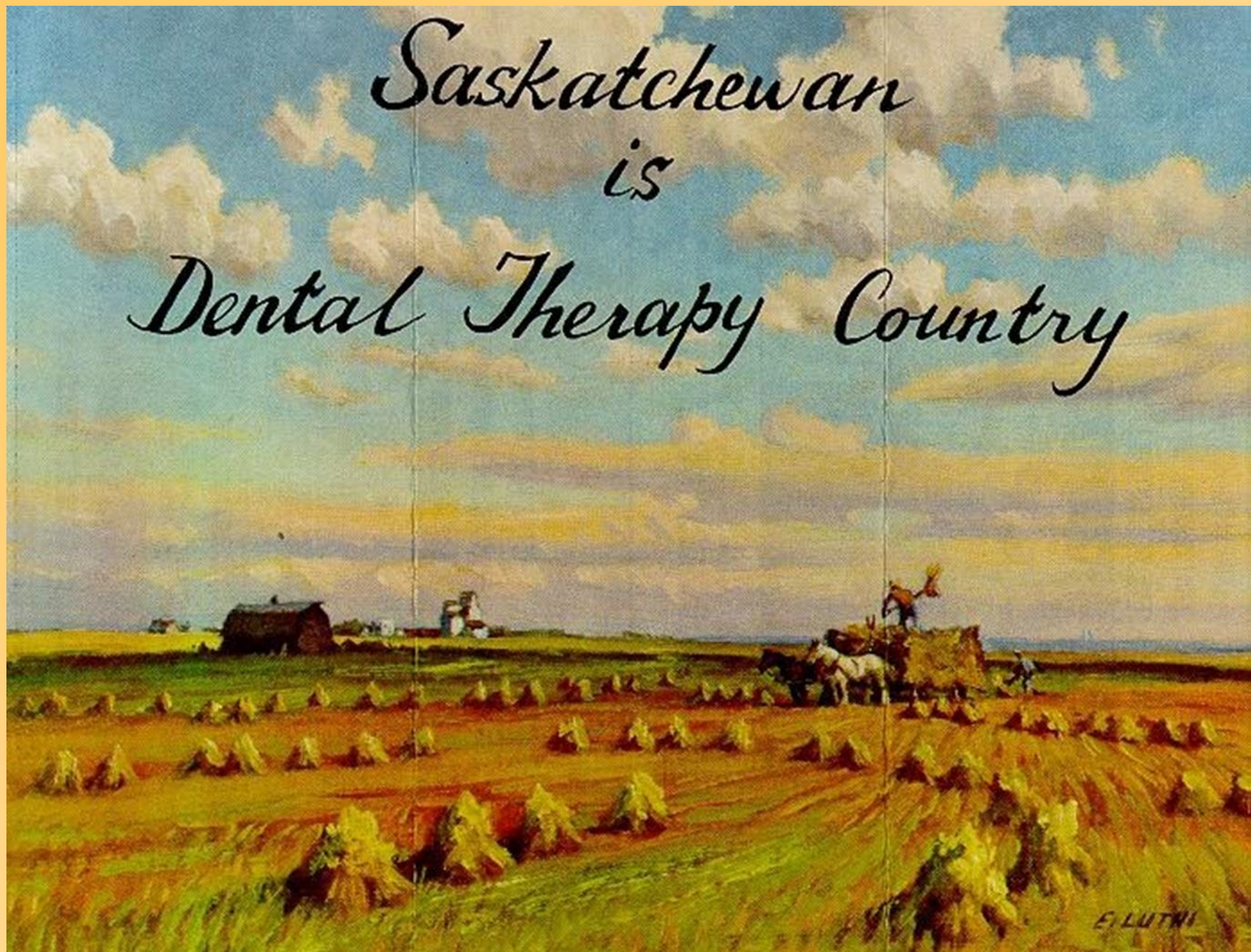








*Saskatchewan
is
Dental Therapy Country*



Historic SDP Annual Reports and
SDP evaluations are available on the
SOHC Inc. website-

https://saskohc.ca/resources#History_807254910_2

References

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- Saskatoon *Star-Phoenix*, July 30, 1987



Thank you!

Any questions?

