

SUBMISSION TO THE HOUSE OF COMMONS STANDING COMMITTEE ON FINANCE

2018 PRE-BUDGET CONSULTATIONS

SUMMARY

The Canadian Dental Hygienists Association (CDHA) supports the federal government in its commitments to help Canadians be more productive. CDHA believes that the key to a successful population and prosperous Canada lies in the health of our people. Oral health is fundamental to overall health and, ultimately, to productivity. For this reason, CDHA believes that all Canadians should have access to professional oral hygiene services, particularly vulnerable populations who experience greater burdens of disease and are the least likely to be able to pay out of pocket for oral health care.

The federal government can ensure a healthy, prosperous population by reallocating funds from existing programs. A focus on preventive oral care is the most effective way to improve the overall health of Canadians, while reducing costs to the federal government and to the public for treating oral diseases that are largely preventable. Research shows that lost productivity due to dental disease costs the Canadian economy. Each year, over 40 million hours are lost due to dental problems and treatment in Canada, with subsequent potential productivity losses of over \$1 billion dollars. Through targeted investments in preventative care, the federal government will be able to dramatically decrease the amount of time Canadians are missing work days for oral health-related issues.

Dental hygienists are primary oral health care professionals specializing in services related to health promotion and disease prevention strategies. There are over 28,000 dental hygienists across the country who play a critical role in the oral health of Canadians. CDHA requests to appear before the Standing Committee on Finance and urges the Committee to consider the following enhancements to existing federal programs and the creation of a curriculum for an increased scope of practice for inclusion in the 2018 Federal Budget:

Recommendation 1 – Ensuring Oral Care is reflected in Homecare Programs

CDHA recommends that the federal government improve the quality of life of Canada's aging population by ensuring oral care is included in funded home care programs.

¹ Hayes A, Azarpazhooh A, Dempster L, Ravaghi V, Quiñonez C. Time loss due to dental problems and treatment in the Canadian population: analysis of a nationwide cross-sectional survey. BMC Oral Health. 2013;13:17



Recommendation 2 – Optimizing Health Human Resources

CDHA recommends that the federal government provide a grant of \$95,00.00 to fund the development of a 1-year degree completion curriculum for existing dental hygienists to expand their scope of practice in traditional dental therapy abilities, which would help reduce health expenditures, address human resource shortages experienced by employers, and meet the significant health needs of Indigenous and other underserved groups in Canada. ²

Recommendation 3 – Enhancing Loan Forgiveness Initiatives

CDHA recommends that the federal government help improve the overall health and well-being of those living in designated rural and remote communities, increasing their participation in the workforce, by extending the existing student loan forgiveness programs to dental hygienists through Canada Student Loans.³

Recommendation 4 – Aboriginal Health Human Resources

CDHA recommends that the success of the Aboriginal Health Human Resources Initiative (AHHRI) reaches far more Indigenous peoples by extending the program to include Indigenous learners pursuing a career in dental hygiene (Stream 1), and practicing dental hygienists working in Indigenous communities (Stream 2).⁴ The expansion of the AHHRI will have a direct impact on productivity and prosperity, as it will increase the number of Indigenous peoples entering health careers, and promotes culturally appropriate care in Indigenous communities to keep these workers healthy.

² This model integrates the 3-year dental hygiene diploma and the former 2-year dental therapy diploma into a baccalaureate degree, which is considered to be the most cost-effective, accessible, and realistic approach to the reestablishment of dental therapy abilities in Canada. This model builds off the current oral health workforce, as it supports degree-completion pathways, and aligns with international trends to combine dental therapy abilities with dental hygiene abilities.

³ Canada Student Loans Act Section 11.1 Family Physicians, Nurses and Nurse Practitioners in Under-Served Rural or Remote Communities. This will help more Canadians get the health care they deserve.

⁴ AHHRI has two streams: 1- Scholarships and Bursaries for Indigenous Students pursuing post-secondary health education which aims to increase the number of Indigenous students entering health and dental careers and 2- Training for community-based workers which aims to provide community-based workers and health managers with training to improve the quality and consistency of healthcare services provided in First Nations and Inuit communities.