



Central Northern Adelaide Health Service

# **Aboriginal-Specific Oral Health Program in Coober Pedy South Australia**

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of South Australia**

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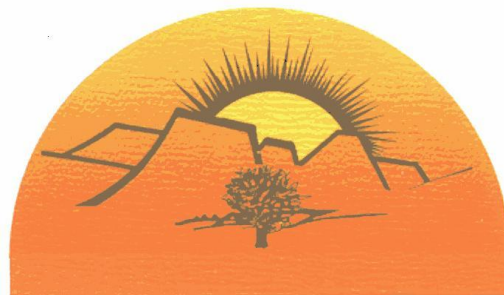
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**ABORIGINAL HEALTH DIVISION**



**Aboriginal Health Council**

of South Australia Inc.



UMOONA TJUTAGKU HEALTH SERVICE INC.



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# CHALLENGES

> A suitable facility?

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# INFRASTRUCTURE

- > Where would be the best place to provide the program?



# INFRASTRUCTURE



**BEFORE**  
be



**AFTER**

# INFRASTRUCTURE



# WORKFORCE

- > What would encourage dentists and dental assistants to participate?



# WORKFORCE

- > How would we ensure that what was promised to visiting dental staff would be delivered?





# WILL PEOPLE USE IT?

- > Marketing through other local health programs
- > Help patients to make it to their appointments
- > Coordination with other programs
- > No cost barrier

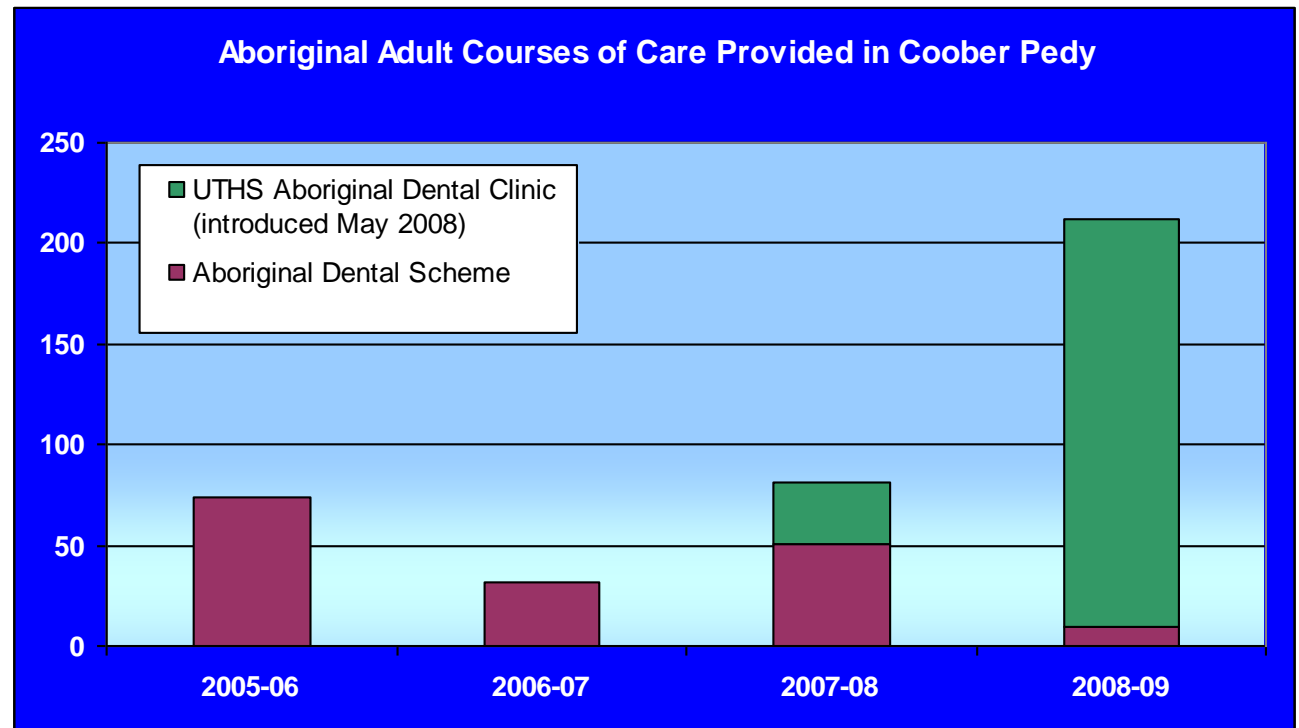


# “WORTHWHILENESS”

- > How would we gauge success of this program?
- > Would the health of the local Aboriginal community be improved?
- > Would the program be viewed positively by the funders?

# “WORTHWHILENESS”

Positive health outcomes?



# “WORTHWHILENESS”

Positive reviews?





# WHAT'S NEXT?

- > Sustainability of Coober Pedy clinic
- > Replication of program to optimise system efficiencies
- > Program improvements
- > State-wide expansion – dependent on positive evaluation of pilot sites



# **TAKE HOME MESSAGES OR “WHAT DOES THIS MEAN FOR REFORM?”**

1. Traditional dental clinic set-up is not required
2. Pool of dentists and assistants may help sustainability
3. Local expertise for getting patients to use the service
4. Long-distance expertise to make sure the program runs well



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