

Interdisciplinary Collaboration

How Dentists Can Team Up with Social Workers



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The views expressed are those of the author and do not necessarily reflect the opinions or official policies of the Canadian Dental Association.

In many settings, dentists collaborate with nurses, doctors, dietitians and occupational therapists. Working with social workers can also improve oral health care for patients, especially in long-term care (LTC) facilities. As a social worker, I've seen first-hand the benefits—to both dentists and patients—of having a social worker as part of a health care team.

➤ Social workers can help you navigate a facility and introduce you to patients.

Social workers are often very familiar with an LTC facility, residents, and schedules. Where I work, a team from the University of British Columbia Geriatric Dentistry Program visits our residents. When the team arrives, I act as a guide and help them connect with the residents.

➤ Social workers can help patients deal with dental anxiety.

Oral health treatment can be stressful for many residents. Those with cognitive impairment may not be able to articulate or express their feelings of fear or anxiety. Social workers are professionally trained to provide socio-emotional support and communicate effectively with people with communication challenges. In the course of my work, I get to know residents well, so I often know in advance who may feel dental anxiety. I help residents prepare for

dental visits and sometimes accompany them during visits. I provide emotional support suited to each resident's individual needs, by, for example, holding their hand, giving them verbal reassurance, or asking them to express their feelings. Afterward, I follow up with residents about their experiences.

➤ Social workers can liaise with and support family members of patients.

For residents who can no longer make their own decisions about dental care and treatment, family members often step in. This can be difficult emotionally for family members, especially if treatments may cause discomfort or anxiety to residents. I often provide emotional support to family members and help them parse advice from dentists. Sometimes just discussing the pros and cons of an oral health treatment can be very helpful, both practically and emotionally, for a family member who needs to make a decision for a loved one.





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➤ **Social workers can provide information, especially related to decision-making and finances, that may be necessary to providing care.**

Social workers often know useful information about residents' legal, social, and financial circumstance that are pertinent to oral health care. Is a resident capable of making their own decisions about treatment or financial matters? If not, who makes those decisions? Family members, another representative, a social services organization or public guardian and trustee? Social workers will know. Often, social workers will also know about power of attorney, insurance, and whether a resident can afford services.

As a social worker, I also often know about (and can help navigate) complicated family dynamics that

influence decision-making regarding care. I also know residents' personal histories. Recently, I was able to help a dentist work with a non-communicative resident who had dental anxiety related to his trauma from World War II.

➤ **Social workers can facilitate other interdisciplinary collaboration.**

Social workers are expert relationship and team builders, system navigators and communicators. Do you need to bring in another health professional for input? Do you want to bring together a resident, their family, and a specialist? Ask a social worker. I often bring together and facilitate teams that include health care professionals from a variety of fields including ethics, palliative care and mental health. ♦



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jcda.ca/j8

Changes in Oral Health and Treatment Needs for Elderly Residents of Long-Term Care Facilities Over 10 Years

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