



Government of **Western Australia**
Department of **Health**

Stakeholder survey results regulation of deep IV sedation in dental practices

Licensing and Accreditation Regulatory Unit
January 2024

health.wa.gov.au

Overview

Survey period

The survey opened on 11 October 2023 and respondents were given until 10 November 2023 to submit a response (however the survey has remained open following a Ministerial request, but no new responses have been noted at this date (19 January 2024)).

Survey versions

There were two versions of the survey, the initial 'dental' version and a second 'anaesthetist' version which was released later. The latter had modified questions tailored to anaesthetists who serve in this space. The anaesthetist version results are separated in the analysis results below.

Respondents

To date, of the 1635 surveys sent out, 65 per cent were viewed/opened and there has been 96 responses (93 dental version, 3 anaesthetist version). However, 10 responses in the dental version were not completed (i.e., responses were saved in a partially completed state but were not fully submitted). Of these, 4 provided their name and 6 did not provide any contact information. Furthermore, 2 respondents of the dental version appeared to be from anaesthetists.

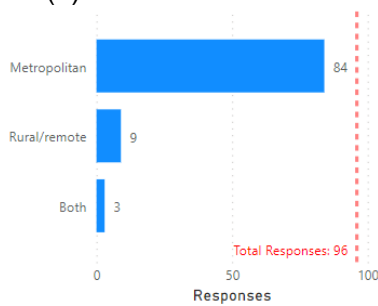
Of the 96 respondents, 42 dental respondents and 3 anaesthetist respondents completed the section regarding the use of deep IV sedation.

The analysis considers all responses from both dental and anaesthetist surveys.

Dental clinic location

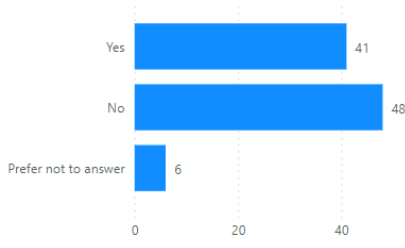
Majority of respondents were Metropolitan (88%; 84/96)

All (3) Anaesthetists indicated they serviced both Rural/remote and Metropolitan regions.



Support for licensing dental practices carrying out procedures under deep IV sedation

43% (41/96) of respondents support licensing

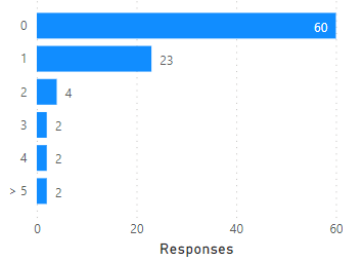


Conscious sedation endorsement

Approximately two thirds of respondents do not have a dentist within their practice with a conscious sedation endorsement (65%, 60/93).

Approximately a quarter have a single dentist within their practice with endorsement (25%, 23/93).

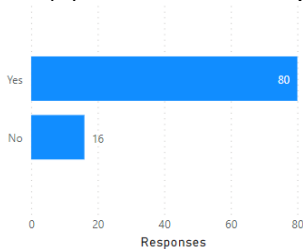
Approximately a tenth have more than one dentist within the practice with endorsement (11%, 10/93).



Use of mobile anaesthetic service

Most respondents use a mobile anaesthetic service (86%, 80/93).

All (3) anaesthetist respondents indicated they are a mobile anaesthetic service.

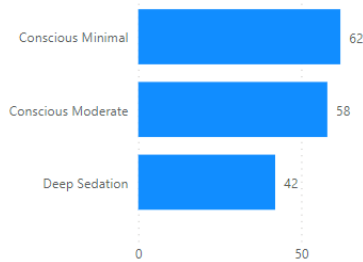


Sedation category

Approximately half of respondents indicated they do deep IV sedation (45%, 42/93).

A large number of respondents indicated they do conscious moderate (62%, 58/93) and conscious minimal (67%, 62/93) sedation.

All (3) anaesthetists indicated they do deep IV sedation, 2 indicated they do conscious moderate but none indicated they do conscious minimal.



Only respondents who indicated deep IV sedation (dental version-42, anaesthetist version-3) proceeded to complete the next section of the survey.

Patient category that are provided deep IV sedation

- Almost all respondents treat adults.
- Less than a quarter serve paediatric patients (24%, 10/42).
- Over a third indicated they serve older adults (43%, 18/42).
- A third (33%, 14/42) indicated they treat patients with special or additional medical needs.

All (3) anaesthetists indicated they serve all patient categories.

Who administers deep IV sedation

Most indicate that the anaesthetist administers Deep IV Sedation:

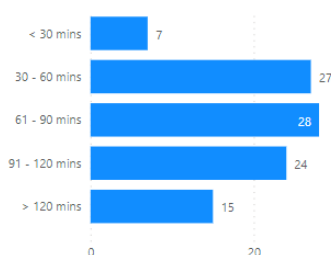
- 32: anaesthetist
- 6: sedationist
- 1: doctor
- 1: General Practitioner.

Type of practitioner that recovers patient post procedure

- 60% by anaesthetist/sedationist.
- 29% by registered nurse.
- 9% by dental assistant or dental nurse
(note the location of recovery post procedure was not explored during the survey).

Duration of dental procedure during deep IV sedation

Procedures range from less than 30 minutes to over 120 minutes:



Equipment used to support administration of deep IV sedation

Anaesthetists indicated that they provide their own equipment for deep IV sedation, and that the clinic does not when they provided the anaesthetic to a dental practice.

Top 3 impact categories that regulating deep IV sedation would have on practice/patients

Impact on patient care

- Patients would not be able to receive care comfortably, leading to use less effective alternatives.
- Patients prefer to receive sedation in dental practice rather than hospitals.
- Patients with advanced periodontal disease or those needing complex dental work might not receive effective treatment, leading to systemic health issues.

Constraints on service provisions

- The inability to provide deep IV sedation may limit the types of procedures offered, affecting treatments for highly anxious or phobic patients.
- Patients will be pushed into the hospital system with long waiting periods in an already overloaded system.

Financial and accessibility concerns

- Additional expenses related to regulation, increased costs for patients without private health insurance, and longer waiting times for treatment.
- Potential for reduced services and increased costs for dental practices, affecting their ability to treat certain patient groups.
- Increased reliance on hospital-based treatments could overload an already strained system.
- More stringent regulations could add layers of bureaucracy and expense making it difficult for practices to continue offering certain services.

Top 4 perceived barriers to implementation of regulation of deep IV sedation for dental procedures

Patient care and accessibility

- Emphasising that regulation might lead to longer waits for treatment in a hospital setting and reduce the availability of sedation as option for patients.
- Limiting patients' ability to choose their preferred provider and the potential restriction of services were highlighted.
- Worries were expressed about how regulation might affect patients with special needs or high anxiety.

Financial and operational impacts

- Concerns there will be increased costs, potential feasibility for small businesses, and for substantial investments to comply with regulations.
- Possibility of increased treatment costs passed onto patients and the challenge of maintaining profitability under new regulations were emphasised.

Safety and efficacy of alternatives

- Apprehensions regarding the shift to oral sedation, perceived as riskier than IV sedation.
- Concerns were raised about the safety of oral sedation, with references to past incidents in WA, and the potential risk increase associated with its use (no actual examples given).

Regulatory clarity and feasibility

- Highlighted the need for clear definitions and realistic expectations in the regulations
- Need for differentiation between minimal, moderate, and deep sedation in regulation language, and concerns about the feasibility of converting practices to meet new standards.

Overall, the responses regarding concerns and perceived barriers reflect a spectrum of views, ranging from patient care and safety concerns to potential financial burdens or operational challenges. The respondents emphasise the need for clear, practical and feasible regulations that adequately address the diverse needs and contexts of dental practices and their patients.

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