In April, the government launched the National Oral Health Policy. It’s ambitious and innovative and it prioritises the needs of vulnerable people. That’s fantastic; the next step is to implement the policy and reduce oral health inequalities across the population, including vulnerable people.”
Her interest in improving care for vulnerable people probably has roots in childhood: "My older sister had an intellectual disability and, growing up, I was aware of the fight my parents had to make for her – there were few services available then. Eventually, she got a residential place as an adult, and I saw what a difference that made to her sense of independence."

The past three years have involved frequent travel for Professor Daly – "my husband and children stayed in London because my younger son was completing his education. My focus, the past few years, was my mother who needed care. I was lucky to have that time with her."

She is delighted to be back in Trinity, which she finds "much more socially diverse than when I studied here, thanks to the Trinity Access Programme, and I'm really pleased to see programmes to help people with dyslexia and other learning difficulties."

She appreciates the small group teaching enabled by the Dental School – "we have about fifty students a year who are incredibly smart and hardworking" – and the interdisciplinarity. "I'm working on a really interesting project here with the Department of Microbiology and with St James's Hospital, exploring the link between gum disease and diabetes. For me, in all my research, it's about putting the mouth back into the body. The two are integral."

She is full of praise for her predecessor as Professor of Special Care Dentistry, June Nunn: "She was very innovative and developed the speciality here in Ireland and the training programme; we owe a lot to her."

Undergraduates in the Dental School are "introduced to the concept of providing care to adults with disabilities and the issue of consent in 2nd year; then in 3rd year they go out to the community and in 4th year they see us treating people in the hospital with a range of disabilities. As general practitioners within the community, they should be confident about making reasonable adjustments to treat people with mild disabilities."

Professor Daly's priority for the next five years is to help with the implementation of the National Oral Health Policy by "ensuring that there are clear care pathways and sufficient specialists trained to meet the needs of people with complex disabilities."

She is on the committee of the Irish Society for Disability and Oral Health, which has carried out comprehensive studies into needs: "We reckon there are just under 13,000 people in Ireland with complex needs who can only be treated by specialists. There are a further 500,000 with mild to moderate needs who could be treated in local general dental practices, given the right adjustments and supports. Currently, the care pathways for people with disabilities aren't in place and there are only a few specialists, who are coming to the end of their careers. I've calculated that we need to train a cadre of thirteen specialists."

This could be done, she says, in the next five years: "It's the opportunity of a lifetime to develop the public dental services within the HSE to meet the oral healthcare needs of vulnerable people."