Look Ma! Cavities & No Dentist, Too! Meeting Oral Health Workforce/Access Needs Through An Innovative Educational Model

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State of the Dental Workforce

• National Oral Health Status & Children’s Oral Health
  – IOM Dental Education at the Crossroads
  – ADA Future of Dentistry
State of the Dental Workforce

- National Health Policy Forum
  - Improving Oral Health: Promise and Prospects
  - ADEA President’s Commission
    - Improving the Oral Health Status of All Americans
      - Roles of Academic Dental Institutions
Surgeon General’s Report on Oral Health

• Oral diseases common and consequential

• Linked to overall health and well-being

• Profound disparities in oral health status

• Disparities
  – SES
  – Rural areas
  – Minorities

www.nidcr.nih.gov/sgr/sgr.htm
Societal Commitment

• “Economic market forces, societal pressures and professional self interest must not compromise the contract of the oral health provider with society.”

  – Report of the ADEA President’s Commission, March 2003
Societal Changes

- Public is increasingly well informed about their healthcare choices
- Patients want more active role in defining their healthcare needs
- Need for healthcare workers to respond to need for consumer participation and choice in healthcare

The Future of Primary Care, Editorial. Feb. 2003, 230-231
Societal Changes

• Emergence of older population
  – Need exists to coordinate chronic disease management and oral healthcare
  – Physicians, dentists, physician assistants, nurse practitioners and nutritionists must provide care in a collaborative manner
  – Need a more systematic approach to coordinating chronic disease care

The Future of Primary Care, Editorial. Feb. 2003, 230-231
Who to Engage in Making the Changes?

- Health care system executives
- Health Profession school deans
- Legislators/Policy makers
- The public

The Future of Primary Care, Editorial. Feb. 2003, 230-231
Paradigm Shift

- A move from primary care…
- To comprehensive care…
- To interdisciplinary care
• It is not what we have that will make us a great nation; it is the way in which we use it.
  – Theodore Roosevelt
  – Dakota Territory, July 4, 1886
Leadership is Required

• Leadership Style & Success
  – “Servant leaders”
    • Compassionate, humble, reverent, open, teachable, respectful, caring
  – They model authority through:
    • Service, humility, contribution
Confidence Builds Effective Leaders
Oral Health as a Part of Overall Health

- Pregnancy
- Coronary heart disease
- Diabetes
- Pneumonia
- Self esteem
- Stroke
The “Health Home”

- Not just a physical place
  - Accessible
  - Continuous and comprehensive
  - Family centered
  - Coordinated
  - Compassionate
  - Culturally effective

Oral Health Facts

• Dental disease is the most common unmet health need in U.S.

• General public more likely to lack dental insurance

• Access to dental care limited under Medicaid

• 52 million school hours lost annually to dental issues

www.nidcr.nih.gov/sgr/sgr.htm
Decreased Dental Insurance
Barriers

• Oral health absent from radar screen of non-dental faculty, residents, staff

• Providers busy – oral health not a priority

• Confusion about provider role as related to dentistry
Future of Dentistry

• Need for more comprehensive care in special and medically complex patients

• Treating patients with/without teeth – not just teeth!

• Integration, integration, integration….
The Future of Our Profession

• Whom We Select
Arizona School of Dentistry & Oral Health

Our Purpose:

– To educate caring, technologically adept dentists who become community and educational leaders, serving those in need
Arizona School of Dentistry & Oral Health

- **Needs Focused**
  - Educating competent, compassionate dentists for underserved communities

- **Service Education**
  - Coordinating student partnerships with communities of need

- **Leadership Training**
  - Educating dentists to become community health leaders
Special Care Clinic

- Meeting the needs of Arizona’s most fragile population
Dentistry in the Community

• Examples of ASDOH Student Involvement
  – Hurricane Katrina
  – Lost Boys of Sudan
  – Give Kids A Smile
  – South Africa Medical & Dental Mission
  – Guadalupe Project
  – Habitat for Humanity
  – Interdisciplinary Projects
    • Working with other health care programs within ATSU to promote oral health as a component of overall systemic health
4th Year External Rotations

– Goals:
  • To make a difference in the oral health of those we serve
  • To change the face of dental education, and in the process, improve access to oral health care across the nation

– Students are provided with the following:
  • Exposure to a variety of community and public health based clinical environments
  • An opportunity to be taught and mentored by excellent clinicians
  • A deeper understanding of the unique oral health challenges faced by many communities
4th Year External Rotations

– Community-Based Clinical Rotations

• Examples of the 60+ sites:
  – Arctic Slope, Alaska Native Association
  – Penobscot, Maine CHC
  – Phoenix Indian Medical Center
  – High Plains, Colorado CHC
  – Family Health Centers of Southwest Florida
  – Hopi Healthcare Clinic
  – Redwoods Rural Health Center
Lordsburg, NM

Millinocket, Maine
“Being someone that has always lived near a city I always wondered if I would feel right at home in a place that is more than 40-50 miles from the nearest town. I found that working in a community like this is an actual possibility for me.”
“So many things I had learned over the last 3 years finally congealed when I was up there. Never lose that rotation site. Culturally and professionally it provides a powerful meaningful place to work.”
Certificate in Core Concepts of Public Health

- Online coursework begun 2\textsuperscript{nd} year
  - Biostatistics
  - Epidemiology
  - Health Policy & Administration
  - Health Behavior & Health Education
  - Environmental Health Sciences
Hometown Project

• Hometown aids aspiring dental students by linking with a CHC:
  – Locating a CHC needing volunteers
  – Gaining ASDOH application endorsement
  – Understanding the CHC working environment
  – Learning from a CHC mentor
  – Assistance in seeking employment pathways in a CHC
  – Identifying loan assistance and repayment programs
Health care integration

Dental home

Health home

Medical home

Glick, 2009
Health care integration

Dental home

Health home

Medical home

BP

Oral screening

Glick, 2009
Health care integration

Dental home

Health home

Medical home

HbA1c → Varnish

Glick, 2009
Health care integration

Dental home

Referrals

Health home

Referrals

Medical home

Reimbursement

Reimbursement

Glick, 2009
Health care integration

Dental home

Medical home

Reimbursement

Health professional?

Glick, 2009
Health care integration

Dental home

Medical home

Health professional?

Referrals

Referrals

Glick, 2009
Health care integration

Patient-centered

Comprehensive

Coordinated

Glick, 2009
Integration and collaboration

Oral health care professionals

Identification
Referrals
Diagnosis
Treatment
Monitoring

Glick, 2009
What Can YOU Do For Your Colleagues?

- **Encourage change** within traditional healthcare education to reflect innovations in technology and pedagogy
- **Form partnerships** with local community-service organizations to provide treatment for their clients
- **Collaborate** with community professionals to become proactive in serving health care needs of underserved populations
What Can YOU Do For Your Colleagues?

• **Collaborate** with healthcare programs within your community to integrate oral health into their curriculum

• **Promote** leadership skills among students – our future leaders!

• **Promote** life-long community involvement

• **Initiate relationships** with dental schools to encourage full integration of every dental team member into the dental practice
Thanks for your attention & your great work!