

CE Course Handout

Transforming Dental Hygiene Part II

Thursday, June 9, 2016
9:30 a.m.-12:30 p.m.



adha **CLL2016**
93RD ANNUAL SESSION
JUNE 8-14, 2016 / PITTSBURGH, PA

Welcome!

Transforming Dental Hygiene Education-Part II: The Work Continues

Transforming Dental Hygiene Education: the Work Continues

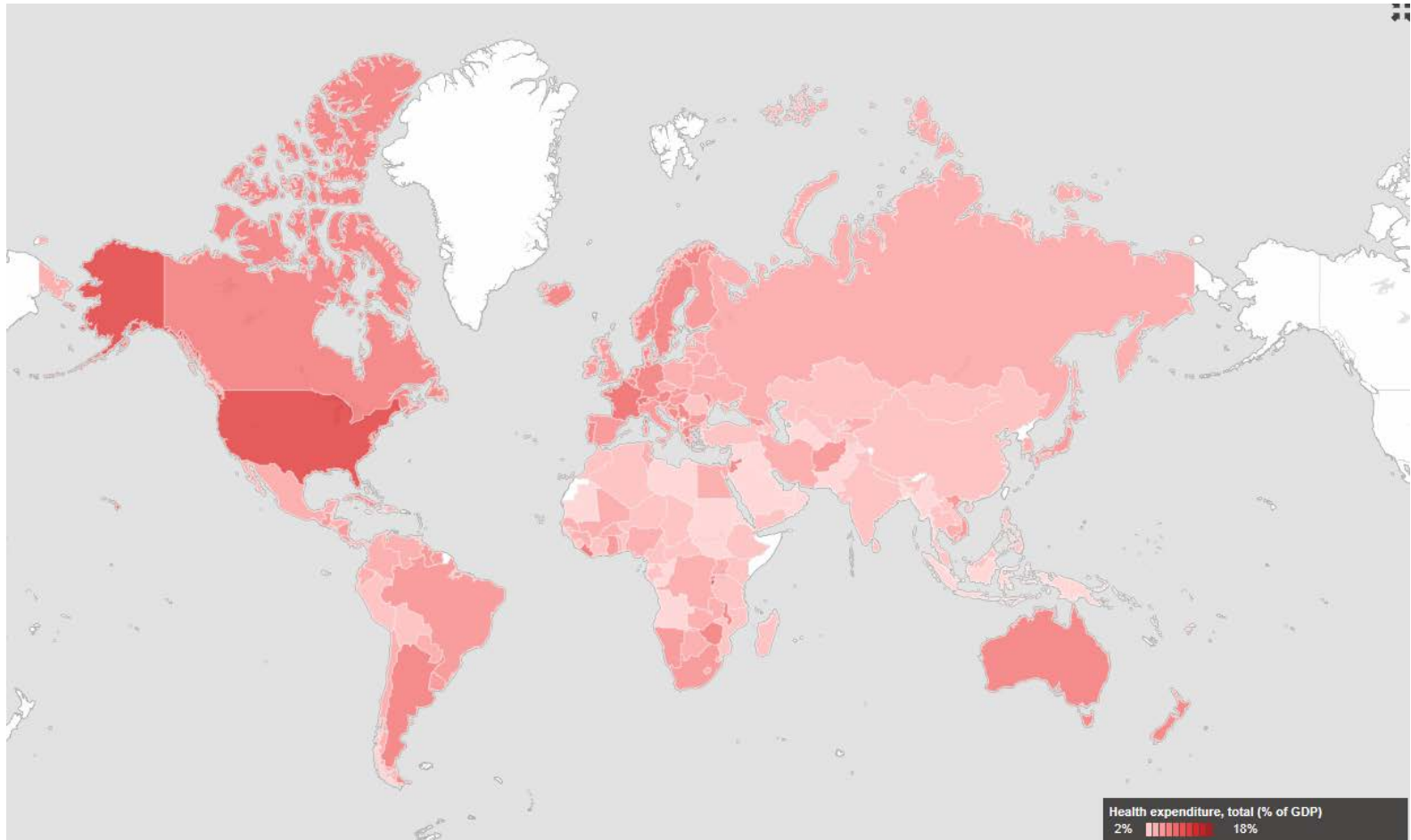
Facilitator: Pamela Overman, RDH, EdD



Goals

- Discuss the rationale for transformation of dental hygiene education
- Look at progress made by programs committed to transformation
- Develop a plan for transformation at your institution

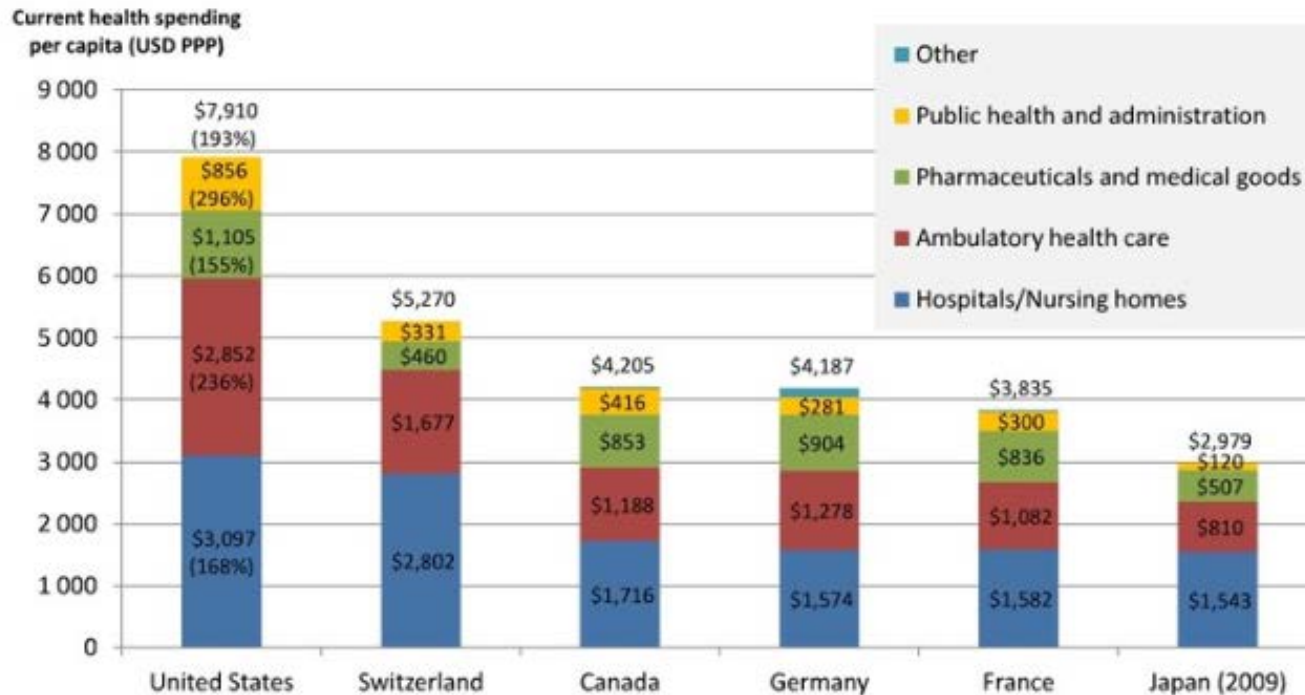
The Health Care Environment



The Health Care Environment

US health spending is much greater for all categories of care, particularly for ambulatory care and administration cost

2010 (or latest year available)

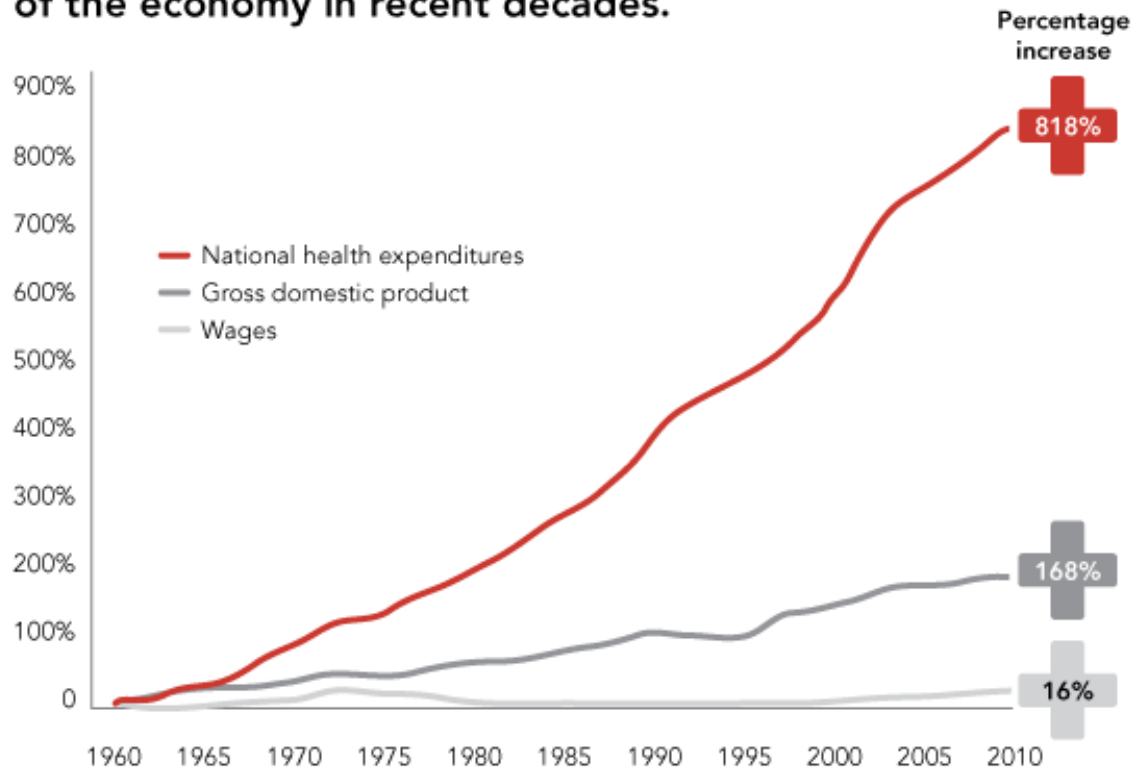


Note: Health spending excludes investments. The percentages in the US bar indicate how much more the US spends per category compared with the average of the five other OECD countries.
Source: OECD Health Data 2012.

6

The Health Care Environment

Health care spending has grown much faster than the rest of the economy in recent decades.



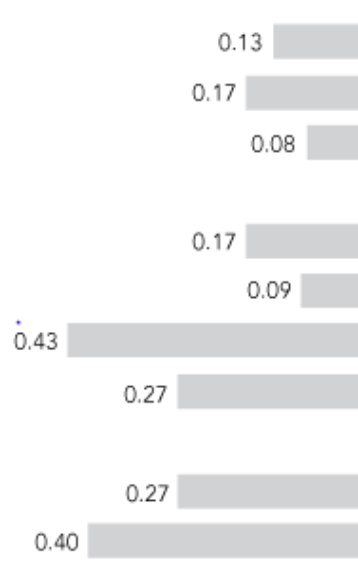
Sources: McKinsey, "Accounting for the Cost of U.S. Health Care" (2011),
Center for American Progress

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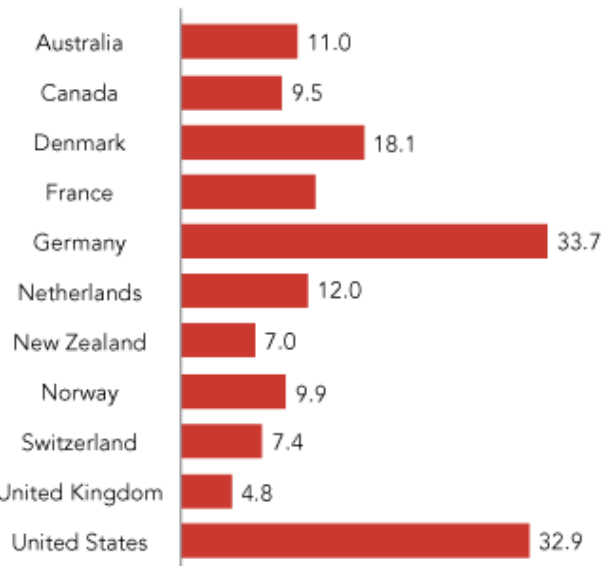
The Health Care Environment

Despite high rates of hospitalization for chronic conditions, outcomes in the U.S. aren't good.

Asthma mortality among ages 5 to 39 per 100,000 population



Diabetes lower extremity amputations per 100,000 population

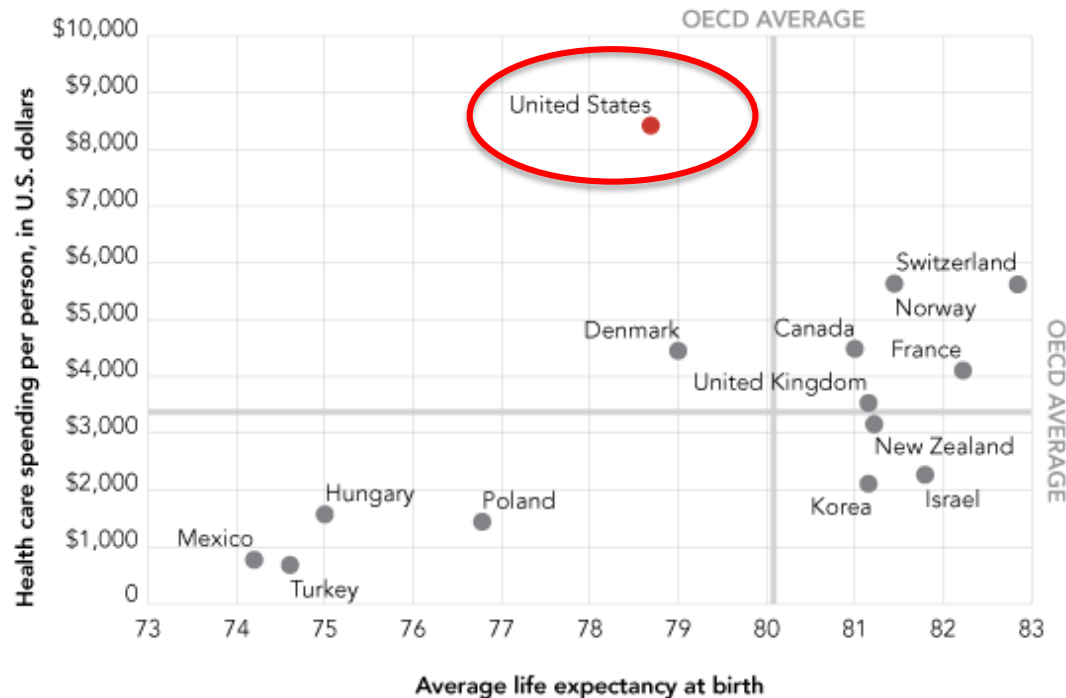


Notes: Rates are age-sex standardized. Data is from 2008 or nearest year.
Sources: OECD Health Data 2011, The Commonwealth Fund

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The Health Care Environment

Americans don't live longer than people in countries that spend much less on health care.

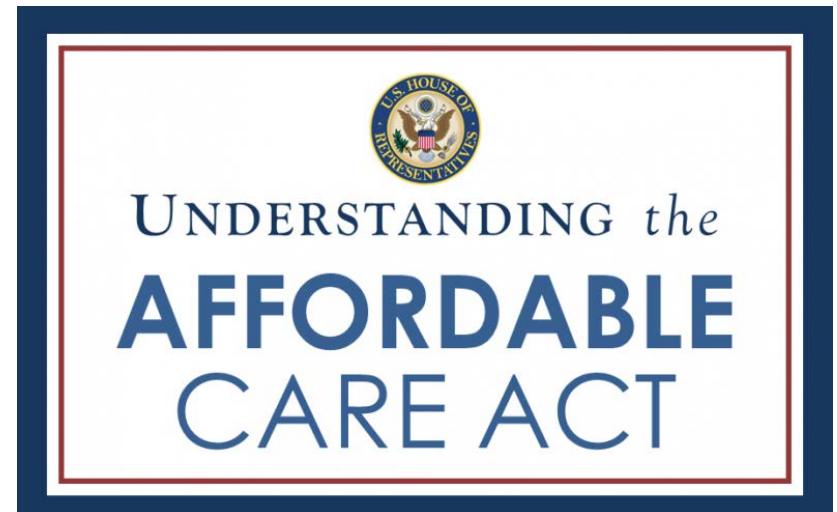


Notes: Data is from 2011 or nearest year. New Zealand numbers exclude investments. Not all OECD countries are included.
Source: OECD Health Data 2013

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The Health Care Environment

- Dramatic increases in the cost of health care
- Looming federal deficits
- Helped pass the Affordable Care Act (ACA)



The Health Care System is Changing...

- Increasing emphasis on public health and prevention
- Employer community will be more engaged to keep escalation of costs down as much as possible.
- Increased use of information technology.



The Health Care System is Changing...

The screenshot shows the 'Tools & Resources' page of the County Health Rankings & Roadmaps website. The header includes the site title 'County Health Rankings & Roadmaps' with the tagline 'Building a Culture of Health, County by County', and identifies it as 'A Robert Wood Johnson Foundation program'. Navigation links for 'Rankings', 'Roadmaps', 'TOOLS & RESOURCES', 'WEBINARS', 'BLOG', 'ABOUT', and 'FAQ' are present. A search bar is located in the top right. The left sidebar contains a 'Search Resources' box and a list of resource types with counts: Tools for Action (338), Webinar (26), Rankings Documentation (10), Video (8), Screencasts (6), Press Release (4), Image (3), and Presentation (1). Below this is an 'Action Steps' section with links to 'Act on What's Important (126)', 'Work Together (79)', 'Communicate (52)', and 'Evaluate Actions (52)'. The main content area is titled 'Tools & Resources' and lists three featured items: 1) '2014 County Health Rankings & Roadmaps Key Findings Report' (Tools for Action), described as a summary of key national findings; 2) 'County Health Rankings & Roadmaps 101 & New Website Tour' (Webinar), discussing the ranking model and project usage; 3) 'Beyond Ranks: Measuring Progress in Your Community' (Webinar), helping users understand and use ranking measures; and 4) 'Poised for Progress worksheet' (Tools for Action), a self-assessment tool for community readiness.

County Health Rankings & Roadmaps
Building a Culture of Health, County by County

A Robert Wood Johnson Foundation program

Rankings ▼ Roadmaps ▼ TOOLS & RESOURCES WEBINARS BLOG ABOUT FAQ

Home » Tools & Resources

Search Resources **GO**

Types

- Tools for Action (338)
- Webinar (26)
- Rankings Documentation (10)
- Video (8)
- Screencasts (6)
- Press Release (4)
- Image (3)
- Presentation (1)

Action Steps

- Act on What's Important (126)
- Work Together (79)
- Communicate (52)
- Evaluate Actions (52)

Tools & Resources

Tools for Action

2014 County Health Rankings & Roadmaps Key Findings Report

This report (from UWPHI) is a summary of the *County Health Rankings & Roadmaps* key national findings.

Webinar

County Health Rankings & Roadmaps 101 & New Website Tour

On this webinar we discuss: why we rank and why rankings are useful; the *County Health Rankings* model and measures; the 4 components of the *County Health Roadmaps* project; and how to use the *Rankings & Roadmaps* to...

Webinar

Beyond Ranks: Measuring Progress in Your Community

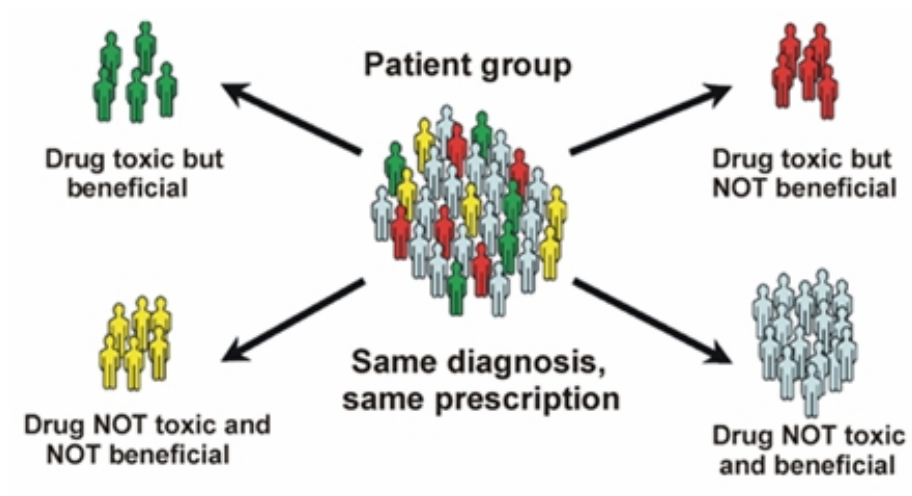
This webinar helps you understand how to use *Rankings* measures (12 of which have trend data), where to look for other data that can help you tell your community's story, and how to tell if your community is poised for making progress....

Tools for Action

Poised for Progress worksheet

This self-assessment tool (from UWPHI) will guide you in determining if you are poised for progress.

The Health Care System is Changing...



- *Consolidation of the health care system.* Silo-based delivery of care will end and a more integrated system will emerge.
- *Focus on comparative effectiveness.* Health care decisions based on evidence of the effectiveness, benefits, and harms of different treatment options.
- *Advances in personalized medicine.*

The Health Care System is Changing...

- *Health care systems will put more resources into care management to foster integration.*
- *Expanding role of non-MD providers. For example, physician assistants and nurse practitioners- and they will be in non-traditional locations like retail clinics.*

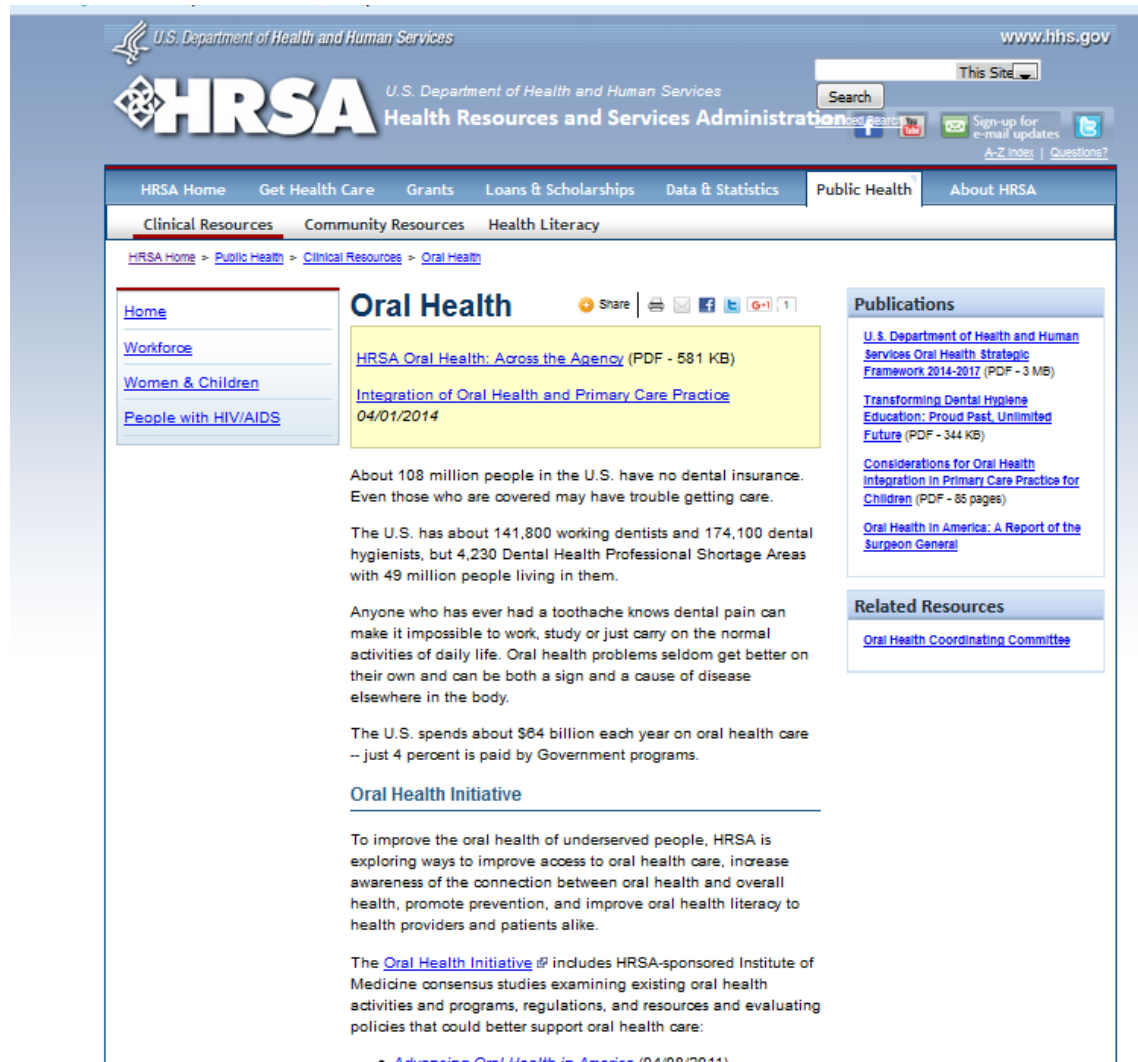


The Oral Health Care System



- Oral health care system is two parts: private delivery of care and the safety net system.
- About 4% of oral health care is paid by government programs.
- About 108 million people have no dental insurance.
- The US has 4,230 Dental HPSA's
- Little change since the Surgeon General called oral disease a *Silent Epidemic*.

The Oral Health Care System



The screenshot shows the HRSA (Health Resources and Services Administration) website. The header includes the U.S. Department of Health and Human Services logo and the HRSA logo. The main navigation bar has links for HRSA Home, Get Health Care, Grants, Loans & Scholarships, Data & Statistics, Public Health, and About HRSA. Below this, there are tabs for Clinical Resources, Community Resources, and Health Literacy. The left sidebar contains links for Home, Workforce, Women & Children, and People with HIV/AIDS. The main content area is titled "Oral Health" and features a yellow box with links to "HRSA Oral Health: Across the Agency (PDF - 581 KB)" and "Integration of Oral Health and Primary Care Practice 04/01/2014". Below this, there are three paragraphs of text discussing the oral health care system in the U.S., including statistics on dental insurance, dentist shortages, and the impact of dental pain. The right sidebar contains a "Publications" section with links to "U.S. Department of Health and Human Services Oral Health Strategic Framework 2014-2017 (PDF - 3 MB)", "Transforming Dental Hygiene Education: Proud Past, Unlimited Future (PDF - 344 KB)", "Considerations for Oral Health Integration in Primary Care Practice for Children (PDF - 85 pages)", and "Oral Health in America: A Report of the Surgeon General". Below this is a "Related Resources" section with a link to "Oral Health Coordinating Committee". At the bottom of the page, there is a link to "Advancing Oral Health in America (04/08/2011)".

U.S. Department of Health and Human Services
www.hhs.gov

HRSA U.S. Department of Health and Human Services
Health Resources and Services Administration

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Clinical Resources Community Resources Health Literacy

HRSA Home > Public Health > Clinical Resources > Oral Health

Home
Workforce
Women & Children
People with HIV/AIDS

Oral Health

Share

HRSA Oral Health: Across the Agency (PDF - 581 KB)
Integration of Oral Health and Primary Care Practice
04/01/2014

About 108 million people in the U.S. have no dental insurance. Even those who are covered may have trouble getting care.

The U.S. has about 141,800 working dentists and 174,100 dental hygienists, but 4,230 Dental Health Professional Shortage Areas with 49 million people living in them.

Anyone who has ever had a toothache knows dental pain can make it impossible to work, study or just carry on the normal activities of daily life. Oral health problems seldom get better on their own and can be both a sign and a cause of disease elsewhere in the body.

The U.S. spends about \$64 billion each year on oral health care – just 4 percent is paid by Government programs.

Oral Health Initiative

To improve the oral health of underserved people, HRSA is exploring ways to improve access to oral health care, increase awareness of the connection between oral health and overall health, promote prevention, and improve oral health literacy to health providers and patients alike.

The [Oral Health Initiative](#) includes HRSA-sponsored Institute of Medicine consensus studies examining existing oral health activities and programs, regulations, and resources and evaluating policies that could better support oral health care:

- [Advancing Oral Health in America](#) (04/08/2011)

Publications

[U.S. Department of Health and Human Services Oral Health Strategic Framework 2014-2017 \(PDF - 3 MB\)](#)
[Transforming Dental Hygiene Education: Proud Past, Unlimited Future \(PDF - 344 KB\)](#)
[Considerations for Oral Health Integration in Primary Care Practice for Children \(PDF - 85 pages\)](#)
[Oral Health in America: A Report of the Surgeon General](#)

Related Resources

[Oral Health Coordinating Committee](#)

The Oral Health Care System

Dental Therapist Hired by Native American Tribe in Washington

On Jan. 4 the Swinomish Indian Tribal Community in Washington State announced that it began offering its members the services of a dental therapist, making the Swinomish Indian Tribal Community the first tribe in the Lower 48 states to employ a dental therapist to provide certain oral health services.

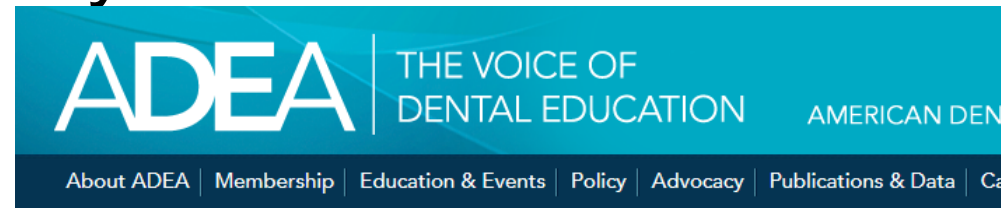
[Read More.](#)

North Dakota Meets on Access to Dental Care Issues During Interim Session

On Jan. 7, the Joint Committee on Health Services met to continue the discussion regarding access to dental care in North Dakota. [Read More.](#)

Massachusetts Advances a Dental Hygiene Practitioner Bill

On Dec. 14, the Massachusetts Joint Committee on Public Health sponsored S. 2076. The bill is a new draft of H. 249 and S. 1118, which established an advanced dental hygiene practitioner level of practice. [Read More.](#)



Information For: [Deans & Program Directors](#) | [Faculty](#) | [Current Students & Residents](#) | [Alumni](#)



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ADEA State Update

Maine Senate Sustains Governor's Veto of Dental Therapy Bill

State Policy, Education, Dental Therapist, Higher Education | [Permanent link](#) | [All Posts](#)

LD 1514, sponsored by Rep. Heather Sirocki, a dental hygienist, was **vetoed** by the Gov. Paul LePage (R-ME) on April 26. The bill as passed by both Chambers amended previously passed statutory language which created the category of a dental hygiene therapist and detailed educational and supervisory requirements. Specifically, the bill as amended by the Maine legislature does the following:

The bill corrects conflicts created by the enactment of Public Law 2015, chapter 429, which repealed and replaced the laws governing dental professionals. The bill makes the following changes to the provisions of law enacted in chapter 429:



The Oral Health Care System

NEWS FROM THE WHITE HOUSE

President Obama Signs Older American Act With Oral Health Screenings Provisions

President Obama signed into law the Older Americans Act Reauthorization Act of 2016, S. 192, which contains provisions for oral health screenings. The legislation authored by Sen. Lamar Alexander (R-TN), passed with considerable bipartisan support. [Read more.](#)

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CDC Annual Health Report Addresses Access to Dental Care

The Centers for Disease Control and Prevention (CDC) has released its annual study of the health of U.S. citizens. The 461-page volume also includes plenty of data on access to dental care and oral health care providers. [Read more.](#)

Update

Governor's Veto of Dental Therapy Bill

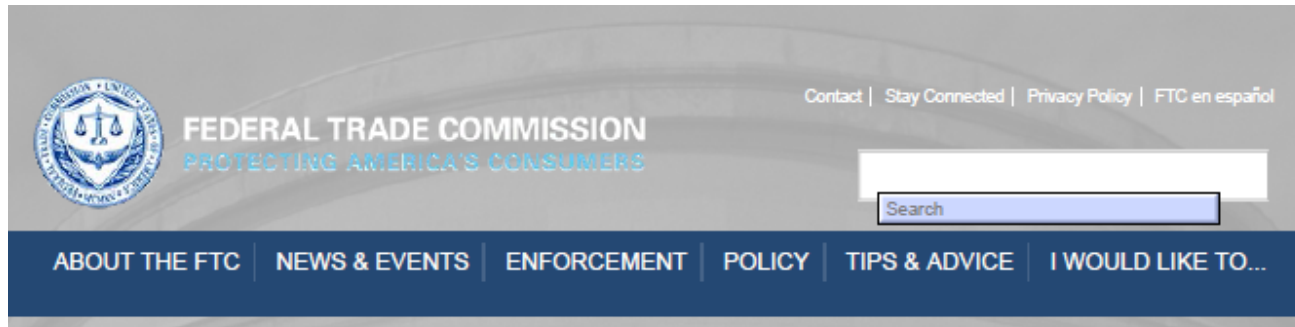
[Dental Therapist, Higher Education](#) | [Permanent link](#) | [All Posts](#)

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The Oral Health Care System



[Home](#) » [News & Events](#) » [Press Releases](#) » [FTC Staff Submits Comment to the Commission on Dental Accreditation Regarding its Proposed Standards for Dental Therapy Education Programs](#)

FTC Staff Submits Comment to the Commission on Dental Accreditation Regarding its Proposed Standards for Dental Therapy Education Programs

FOR YOUR INFORMATION

December 4, 2013

TAGS: [Health Care](#) | [Dentistry](#) | [Bureau of Competition](#) | [Competition](#) | [Nonmerger](#)



EVENTS CALENDAR

Related Resources

[FTC Staff Comment Before the Commission on Dental Accreditation Concerning Proposed Accreditation Standards for Dental Therapy Education Programs](#)

Federal Trade Commission December, 2013;

<http://www.ftc.gov/news-events/press-releases/2013/12/ftc-staff-submits-comment-commission-dental-accreditation>



How Does This Impact Dental Hygiene Education?



Dental Hygienists of the Future



Practitioners



Advocates



Managers



Collaborators



Scholars

How Does This Impact Dental Hygiene Education?



- **Transforming Dental Hygiene Education: Proud Past, Unlimited Future Symposium Fall 2013**
- ADHA & Santa Fe group
- Develop guidance for the future of the dental hygiene profession and the role it can play in improving the health of the public.

Symposium Learning Objectives

- Explore how the changes in the health care environment could inform the transformation of the profession of dental hygiene.
- Identify the broad range of roles that the dental hygiene profession could play and new models of health care within and beyond dental care.
- Consider the broad skills, attitudes and competencies needed by dental hygienists to meet the future needs of the public.

Next Steps: ADHA Strategic Plan

ADHA's core ideology is focused on leading the transformation of the dental hygiene profession to improve the public's oral and overall health.



ADHA's Mission



- The mission of ADHA is to advance the art and science of dental hygiene. We work to:
- Ensure access to quality oral health care

ADHA's Vision

Dental hygienists are integrated into the health care delivery system as essential primary care providers to expand access to oral health care.



ADHA Goals:

Education - Alliances - Advocacy

- Prepare dental hygiene professionals for the evolving scope of professional practice and settings.
- Better position the profession to be viewed as an integrated part of the healthcare system through strategic partnerships.
- Advance the profession of dental hygiene at the state and federal level.

ADHA's White Paper



Transforming Dental Hygiene Education and the Profession for the 21st Century

LISTERINE®
NOT JUST ORAL CARE...HEALTHCARING®.

Johnson & Johnson
CONSUMER INC.

Describe the future needs
of dental hygiene practice

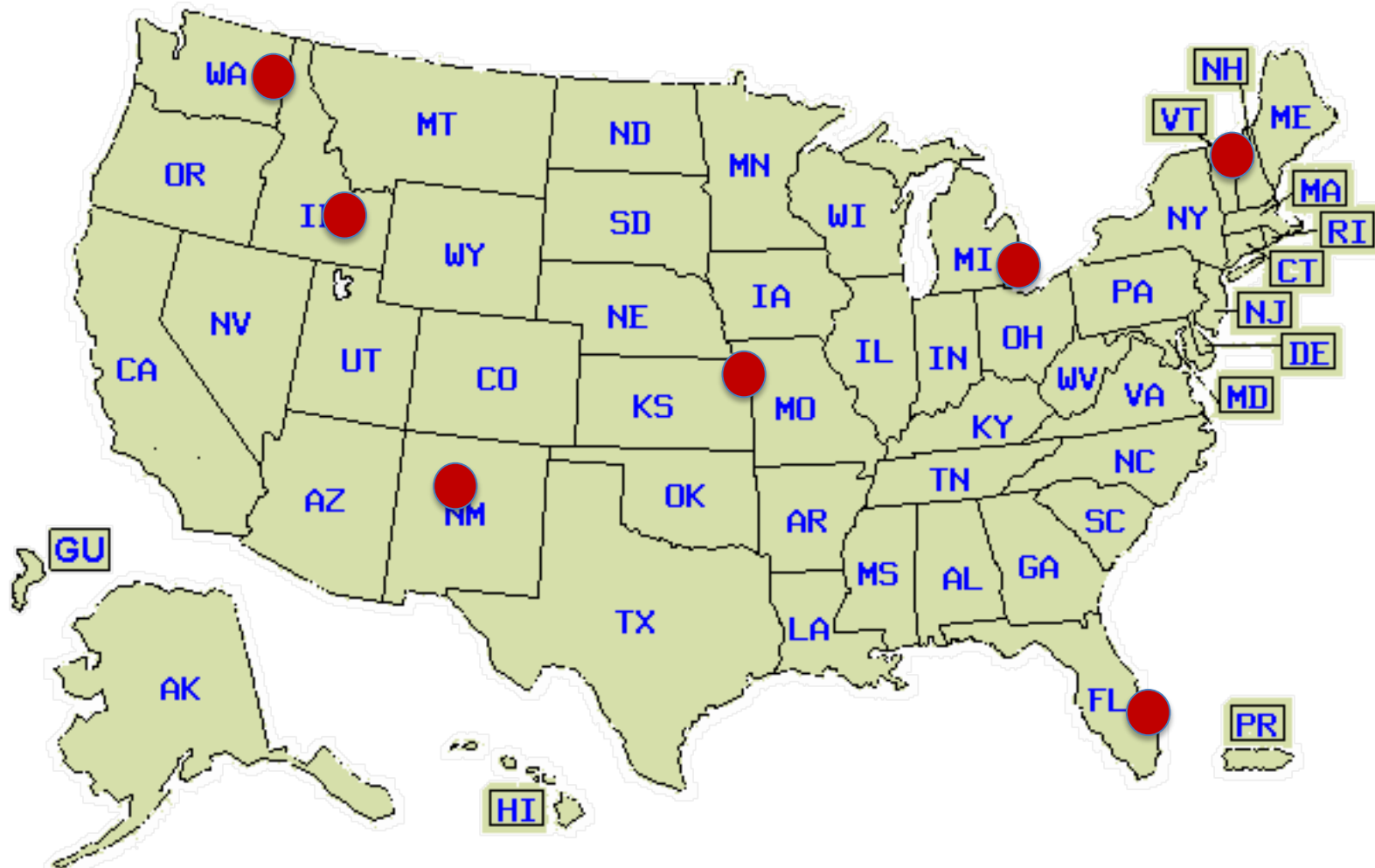
Framework for
transformation

Champions for change

Transforming Dental Hygiene Education: New Curricular Domains and Models

- Build on the vision developed during the Transformation Symposium
- Develop learning domains and curricula that could serve as transformative models for Dental Hygiene Education
- Recognizing the various environmental influences in various states, one or more models may emerge
- Foster change in Dental Hygiene programs

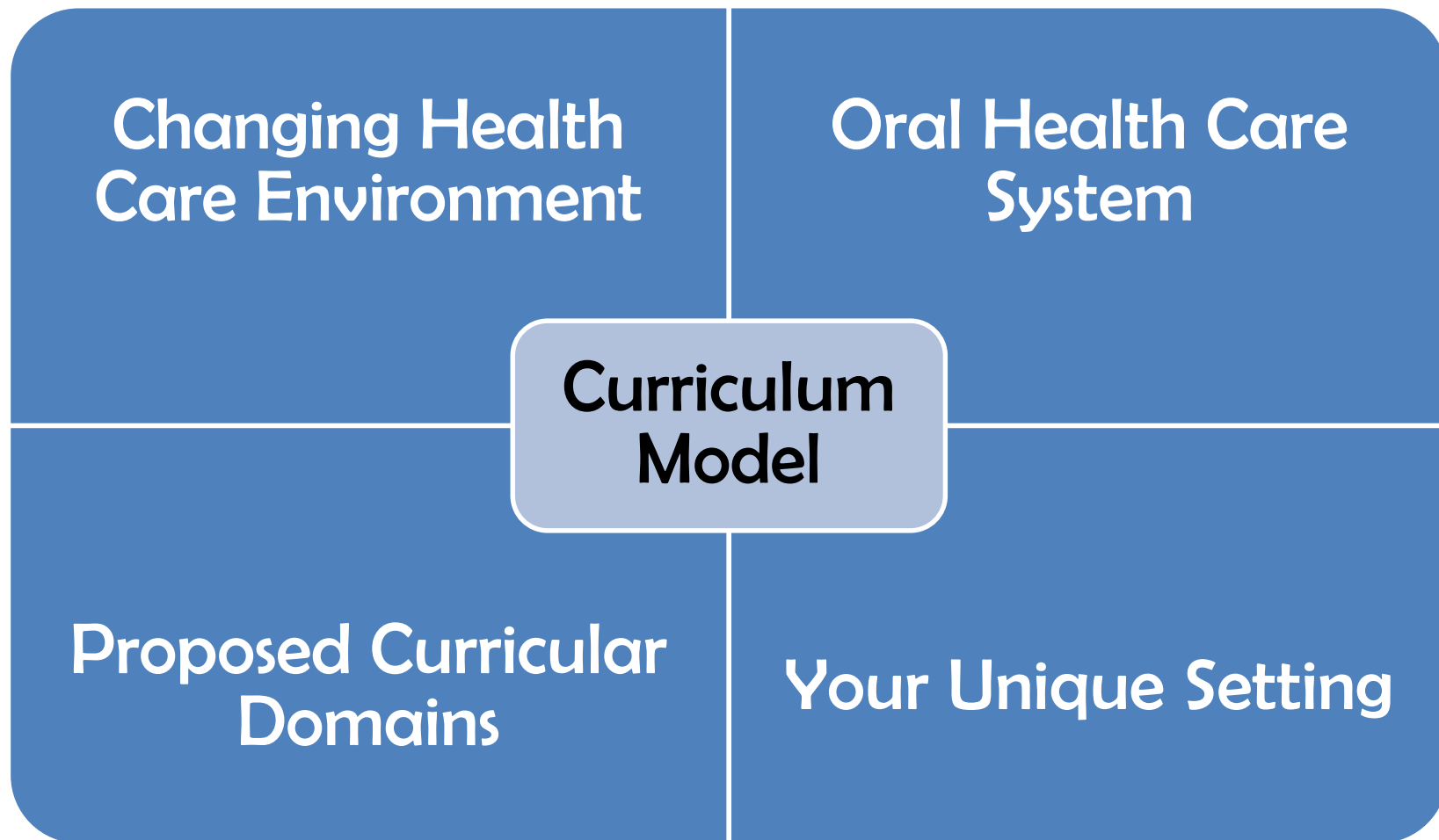
2013-2014 Pilot Programs



2013-2014 Pilot Programs

- Rebecca Stolberg, RDH, BS, MSDH; Eastern Washington University
- JoAnn Gurenlian, RDH, PhD; Idaho State University
- Christine Nathe, RDH, MS; University of New Mexico
- Kim Bray, RDH, MSDH; University of Missouri-Kansas City
- Kathi Shepherd, RDH, MS; University of Detroit Mercy
- Susan Kass, RDH, EdD; Miami Dade College
- Sheila Bannister, RDH, Med; Vermont Technical College

The Challenge

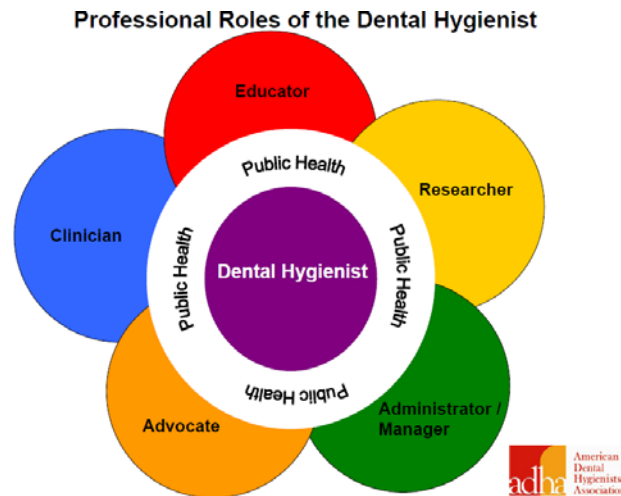


Curricular Domains for Health Professions

- Englander R. et al. 2013. Toward a common taxonomy of competency domains for the health professions and competencies for physicians. *Academic Medicine* 88 (8):1088-1094.
- Patient Care
- Knowledge for Practice
- Practice-Based Learning and Improvement
- Interpersonal and Communication Skills
- Professionalism
- Systems-Based Practice
- Interprofessional Collaboration
- Personal and Professional Development

Proposed Curriculum Domains for DH Education

- ❑ Foundation Knowledge
 - ❑ Customized Patient-Centered Care
 - ❑ Health Care Systems
 - ❑ Communication and Collaboration
 - ❑ Professionalism
 - ❑ Critical Thinking and Research
- Use domains in conceptualizing curriculum transformation?
 - How do they complement future professional roles of the dental hygienist?





Dental Hygiene AS Program

Susan H. Kass, Ed.D

Alicia Abreu, D.D.S.

Alwyn Leiba, M.B.A.

LaKisha Moss, M.S.

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Duran Mootry, M.S.

Ileana Pino, M.S.

Rebecca Smith, Ed.D.

Current Description of the Program

- The current program is traditional in nature: strong clinic based with emphasis on employment in a private practice setting.
- Although the program is VERY community minded throughout the two years, the message is more directed towards “giving back” rather than employment.

It's Time to Change

- Job market is suffering
- New workforce models are being developed (Yes, even in Florida!)
- Moving towards a 2 + 2 program
- To meet changes in healthcare

Description of New Model

- Become more public health oriented
- Become more interdisciplinary
- Adding the following courses:
 - Health Literacy
 - Professional Identity/Inter-Professional Education Lab
- Changed the following course titles to reflect content:
 - Oral Health for Special Populations
 - Dental Hygiene Practice Management & Leadership

Challenges and Action Plan

- State changed core curriculum
 - General education requirements
- Obtaining State approval for a BAS Program
 - Changed degree to BAS in Health Sciences rather than BAS in Dental Hygiene
- Obtaining rotation sites in public health settings
- Creating opportunities for IPE

Next Steps (as of June 2014)

- College Curriculum Committee to approve course/curricula changes
- State approval for the BAS Program
- Marketing

Miami Dade College **Progress Since 2014**

Dr. Susan Kass (skass@mdc.edu)

New courses have been implemented in the curriculum:

- Oral Health Literacy
- Inter-Professional Education

Completing statewide documentation for the Applied Bachelor of Science degree completion program



SCHOOL OF
DENTISTRY

Dental Hygiene Program

Kathi R. Shepherd, RDH, MS

Kathi Shepherd

shephekr@udmercy.edu

Description of Model

2 + 2 Model:

- Years One and Two- Prerequisite, University Core courses
- Years Three and Four- Dental Hygiene Courses at Dental School
- Courses:
<http://dental.udmercy.edu/programs/hygiene/professional/curriculum/index.htm>
- Course Descriptions:
<http://www.udmercy.edu/catalog/undergraduate2013-2014/courses/link.php?sub=DHY#DHY8200>

Student Program Experience

- 100% ADHA faculty membership to serve as role models for students; ADHA student delegate, MDHA student delegate
- Advocacy writing requirement
- School Based pediatric care under supervision of PA 161 DH (Direct Access care provided)
- Research poster requirement
- Community service, community oral health education requirements/scientific manuscript, community DH care in VA, FQHC
- Explorations student teaching program

Certificate/BS Program

- Total number of minimum BS degree hours is 146.
- The DH program is categorized by the University as a Certificate/BS degree program.
- ALL students for the past several years have graduated with a BS degree majoring in dental hygiene.

Time to Change

- Why Keep “Certificate” in Program Classification?
- Where is content/experiences in broader health care system?
- Where is business management experience? (tracking production, etc.)

Current and Next Steps

- Deletion of “Certificate” in program category
- Development of business management module including students tracking clinic productivity, etc.
- Expansion of IPE experiences in community clinics
- Expansion of post competency clinical tracks in health care system areas

University of Detroit Mercy Dental Hygiene Program-Progress Since 2014

- DH Class of 2016-first class to no longer be considered Certificate/BS graduate. ****BSDH degree only
- Business management module implemented
 - includes tracking of clinical productivity
 - second year of mock interviewing in dental offices in community; hope to expand mock interviews in FQHCs and other public health clinics with interprofessional collaboration models
 - transition from hard copy portfolio to e portfolio to allow electronic evidence for prospective employers
 - IPE Day fluoride varnish clinic and round table discussion expanded to include additional health care provider students





EASTERN
WASHINGTON UNIVERSITY

start something **big**

Dental Hygiene Practitioner Program

Rebecca L. Stolberg, RDH, MSDH

Why is it time to change?

- 2/3 of patients going to emergency rooms are for dental related issues
- Only 25% of dentists accept Medicaid
- 35/39 Washington Counties are short dental providers
- Missing person in the dental workforce (like physician assistant, nurse practitioners)
- ADHA vision
- Dental hygienists are well prepared
- 52 other countries have a form of mid-level dental provider
- Quality of care has been documented in Alaska, Canada and Australia
- Minnesota Therapists are showing excellent outcomes

Description of New Model

Curriculum Overview

- 1 year post-BS degree
- Admissions based on prior dental hygiene experience, interview, dental hygiene restorative skills, demonstrated desire to serve the underserved.
- 8 students admitted each year
- Courses Include:
 - Operative Dentistry
 - Advanced Health Assessment and Diagnostics
 - Advanced Pharmacology
 - Management of Dental Emergencies and Urgent Care
 - Community Based Primary Oral Healthcare

Clinical Services

- Oral health education
- Minimally invasive restorative services:
 - Cavity preparation and placement
 - Placement of temporary restorations
 - Pulpotomies
- Extractions of primary teeth and permanent teeth with class 3 or 4 mobility--In consultation with dentist
- Administration of local anesthesia and nitrous oxide without supervision
- All of the DHP services plus the full scope of dental hygiene services

Curriculum Layout

Post Baccalaureate Graduate Certificate in Dental Hygiene: *DENTAL HYGIENE PRACTITIONER*

Summer Quarter
(required for those
students not passing
admissions competency
exam)

	Fall Quarter	Winter Quarter	Spring Quarter	Summer Quarter
DNHY 557 Advanced Anesthesia (1)	DNHY 572 Intro to Operative Dentistry Technique (5)	DNHY 575 Pharmacological Principles of Clinical Therapeutics (4)	DNHY 661 Community Based Primary Oral Healthcare II (3)	
DNHY 559 Basic Restorative Procedures (5)	DNHY 570 Advanced Health Assessment and Diagnostic Reasoning (3)	DNHY 660 Community Based Primary Oral Healthcare I (3)	DNHY 675 Advanced Specialty Fieldwork (3)	DNHY 680 Supervised Community Externship (3) <i>Followed by 1,000 hour externship requirement in order to be <u>un</u>-supervised. Externship required at an Indian Tribal Clinic or other Public Health type clinic that is identical to where they will be working</i>
			DNHY 670 Management of Dental Emergencies and Urgent Care (2)	
5-6	8	7	8	3

Total Credits: 26 credits (+5-6 if competency needs to be obtained in basic restorative and anesthesia procedures)

Challenges and Solutions

- Legislators concerned about the impression of “college creep”
- State budget downturn and financial distress
- Unfamiliarity with post-bacc programs
- Is 1 year enough?
- Masters degree changed to Post Baccalaureate Certificate
- Self-support program requires no state appropriations.
- EWU has similar program in speech and hearing therapy.
- WA state having a solid foundation in restorative dentistry since 1971.

Next Steps

- Get bill passed
- Send admissions information to interested listserv
- Enroll students
- Start impacting access to care in WA state

Eastern Washington University/Progress since 2014

Rebecca L. Stolberg, RDH, MSDH



- Since 2014 -trying to get a dental therapy/mid-level provider bill passed in Washington State
- Will never give up as the listserv of folks interested in pursuing such a degree continues to grow
- Washington State tribes have begun sending their own residents to the Dental Health Aid Therapist (DHAT) program in Alaska. These residents are now coming back to WA state and providing care on the tribal lands. It is hopeful that data collected from these initiatives will help our efforts
- No lawsuit yet by ADA for this practice



Entry Level Doctoral Program in Dental Hygiene

Brooke Agado, RDH, MS

Karen Portillo, RDH, MS

Leciel Bono, RDH, MSc

Monica Colleen Stephenson, RDH, MSc

Courtney Perrachione, RDH, BS

Jann Zollinger, RDH, BS

Kristin Hammon Calley, RDH, MS

JoAnn R. Gurenlian, RDH, PhD

Ellen Rogo, RDH, PhD

Tara Johnson, RDH, PhD

Jacqueline Freudenthal, RDH, MHE

Kandis Garland, RDH, MS

Current Description of the Program

- Students enter the program with a baccalaureate degree
- Will complete a four year curriculum in entry level dental hygiene education
- Will complete practicum experiences in all six roles of the dental hygienist
- Will be prepared to function in a variety of roles and settings in addition to clinical practice
- Will graduate with a Doctorate of Dental Hygiene (DDH)

Description of New Model

Prerequisites

Fall Semester – Year 1	Spring Semester – Year 1
Principles of Dental Hygiene (3) English Composition (3) Biology 1101 and Lab (3) Time Management (2) Sociology (3)	Critical Reading/Writing (3) Microbiology (4) Introduction to Ethics (3) Sociology 2248 (3) Math 1108 – Intro to Algebra (3)
Total Credits = 14	Total Credits = 16

Prerequisites

Fall Semester – Year 2	Spring Semester – Year 2
General Chemistry (4) Psychology (3) Spanish I (3) Anatomy & Physiology (4) Nutrition (3)	Organic Chemistry/Biochemistry (4) Introduction to Statistics (3) Cultural Diversity (3) Speech (3) Anatomy & Physiology II (4)
Total Credits = 17	Total Credits = 17

DDH Curriculum Year 1

Fall Semester (Y1)	Spring Semester (Y1)	Summer Semester (Y1)
<p>Methods and Design/Learning Theories (3)</p> <p>Business Management/Marketing Strategies (3)</p> <p>Risk Assessment for Public Health and Communities (3)</p> <p>Research Methods I/Critical Appraisal of the Literature (3)</p> <p>Public Health Systems (3)</p>	<p>Introduction to Health Care Practices, Management and Administration (3)</p> <p>Evaluation, Test and Measurement (3)</p> <p>Research Methods II/Biostatistics (3)</p> <p>Epidemiology (3)</p> <p>Disease Prevention and Behavioral Health & Change (3)</p>	<p>Translational Research & Dissemination/Scientific Writing (3)</p> <p>Leadership & Organizational Change (3)</p>
Total Credits = 15	Total Credits = 15	Total Credits = 6

DDH Curriculum Year 2

Fall Semester (Y2)	Spring Semester (Y2)	Summer Semester (Y2)
Anatomical Sciences (4) Medical Emergencies (3) Ethics and Law (3) Professional Identity/Foundations of IPE (3) Health Literacy (3)	Clinical Care I (3) Physiological Sciences (3) Dental Hygiene Diagnostic Methods & Evaluation (3) Preventive Strategies (3) Pharmacology (3) Cariology (3)	Clinical Care II (3)
Total Credits = 16	Total Credits = 18	Total Credits = 3

DDH Curriculum Year 3

Fall Semester (Y3)	Spring Semester (Y3)	Summer Semester (Y3)
Clinical Care III (3) General & Oral Pathology (3) Pain/Anxiety Management (3) Customized Care (3) Evidence-Based Dental Hygiene Practice (3)	Clinical Care IV (3) Special Needs Populations (3) Periodontology (3) Interprofessional Activities (3) Health Policy & Advocacy/Governmental Affairs (3)	Clinical Care V (3) Practicum (3) Proposal Development/Grant Management (3)
Total Credits = 15	Total Credits = 15	Total Credits = 9

DDH Curriculum Year 4

Fall Semester (Y4)	Spring Semester (Y4)
Advanced Dental Hygiene Practice I (3) Health Informatics (3) Practicum (3) Practicum (3)	Advanced Dental Hygiene Practice II (3) Practicum (3) Practicum (3)
Total Credits = 12	Total Credits = 9

Challenges and Action Plan

- The faculty at ISU share a vision of progressive change for entry level dental hygiene education

HOWEVER

- Proposing a doctoral program may meet with resistance from dental and dental hygiene communities
- The profession will need to assume responsibility for accreditation, licensure, and regulation of this new credentialed health care provider.

Next Steps

- Create a comprehensive report about the change from a BSDH to a DDH
- Submit the proposed curriculum to the Graduate Curriculum Council at ISU
- Submit the proposed curriculum to the Dean's Council at ISU
- Present the comprehensive report to the Idaho State Board of Education

Idaho State University Task Force on Doctoral Dental Hygiene Education

Progress Since 2014

- Doctoral Entry Level Program
 - Placed on hold to allow focus on PhD Program in Dental Hygiene
 - Will pursue Entry Level Doctoral Degree after PhD Program commences
- Status of PhD Program in Dental Hygiene
 - Proposal approved by Graduate Council at ISU!
 - Currently under review by ISU upper administration
 - If approved by University President, proposal will be submitted to Idaho State Board of Education
 - If approved by SBOE, anticipated start date Fall, 2017



THE UNIVERSITY *of*
NEW MEXICO

BSDH & MSDH Degree Programs

Christine Nathe, RDH, MS

Academic Programs Changes

- Entry level BSDH Degree Program
 - Educating entry level dental hygienists so they can practice in all settings upon graduation
- BSDH Degree Completion Program
 - Providing practicing RDH with skills sets to make them competitive in all settings
- MSDH Program
 - Developing leaders to transform the art and science of dental hygiene

Description of New Model

- Entry Level BSDH Program
 - Adding topics to existing curricula
- BSDH Degree Completion Program
 - Adding courses to curricula
- MSDH Degree Program
 - Adding skill sets as needed

Challenges & Action Plan

- Budget Issues
- ✓ Grant writing
- ✓ Integration with expanded functions curriculum being developed to have a package to propose

Next Steps

- Faculty input
- Faculty adoption
- Budgetary changes
- Implementation

Progress since 2014



- Interprofessional Education (IPE) pilot program; case development & community service with medical, physical therapy, occupational therapy, pharmacy & nursing students
- Professionalism component added from our School of Medicine
- Enhanced special needs training with HRSA grant of 2.5 million and renovations to special needs clinic
- Pilot program with the two community colleges which includes the possibility to graduate with an Associate's Degree and the Bachelor's Degree in Dental Hygiene simultaneously



Bachelor of Science Program

Kimberly Krust Bray, RDH, MS

2 + 2 Bachelor of Science Program

- Established in 1954
- Located in a School of Dentistry
- Offers 3 degree programs
- Campus general education modified from course based to student outcomes based focus
- Opportunity to engage in Inter-professional Education

Inter-professional Collaborative Practice Model

- Communicate with patients, families, communities, and other health professionals in a responsive and responsible manner that supports a team approach to maintaining health and treatment of disease.
- Use the knowledge of one's own role and the roles of other professions to appropriately assess and address the health care needs of the patients and populations served.

Challenges

- Incorporate 6 credit hours Community and Civic Engagement
- Establish Didactic IPE experience
- Establish Clinical IPE experience

Action Plan

- Modify two existing service learning courses to meet campus criteria
- Participated in inaugural All School Inter-professional Education Class Feb. 21, 2014
- Collaborate with School of Medicine Sojourner Clinics

UMKC-Progress since 2014

- Offered new interdisciplinary General Education courses
- UMKC Health Sciences Faculty recently attended the Fourth Annual Interprofessional Education Symposium: Building a Bridge Between Education and Practice
- Spring 2016 3rd annual IPE event at UMKC
 - Complete Pre-Readings
 - Watch the Orientation Video
 - Complete Pre-test (10 questions)
 - Review the Video by Sue Sheridan
 - Day of IPE Activity:
 - Class IMPACT case based interaction
 - Complete Post Test (points tied to your grade)
 - Complete Interprofessional Education Survey



A.S. Degree & BSDH Programs

Sheila Bannister, RDH, M.Ed

Description of Current Program

- Two year A.S. degree
- Focus is on Foundation Knowledge, Patient Care, and Professionalism
- Limited focus in proposed domains of Critical Thinking and Research, Collaboration and Communication, and Health Care Systems
- Current curriculum adequate but does not fully support evolution and movement of dental hygiene profession
- For Vermont, time constraints of two year program place unavoidable limitations on producing a more well-rounded health care specialist

Proposed Model: CODA Compliant

- **3 year A.S. degree or 4 year BSDH degree**
 - Critical Thinking and Research, Collaboration and Communication, and Health Care Systems courses introduced in third year
- **Completion of some BSDH courses in year 3**
 - Above mentioned domains
 - Encouragement toward one year online BSDH completion
- **Additional clinical experience**
 - Introduction of external rotations (Health Care Systems/ Collaboration and Communication)
- **One (1) year online BSDH completion**
 - Eight of 9 courses fall into above mentioned domain categories
 - Two courses also shared with Licensed Dental Practitioner curriculum (mid-level based on dental hygienist) that Vermont Technical College will be offering

Challenges

- Resistance to change
- Faculty time constraints
- Cost
- Possible enrollment decline
- Possible student attrition
- Interdisciplinary program
- Limited physical space
- Institutional inability to confer MSDH degree

Action Plan

- Education of benefits
- Perception of benefits
- Strategies for risk reduction
- Strategies to compensate
- Strategies for risk reduction
- Networking/communication
- Creative use of space/time
- Partnership with conferring institutions for now

Next Steps

- Program launch Fall 2014
- Continued faculty discussion
- Continued contact with Vermont Technical College administration
- Review and revise program as proceed
- Continued movement toward future MSDH completion
- Continued movement toward mid-level completion program

Vermont Technical College

Sheila Bannister RDH, M.Ed

- **Progress Since 2014**
- **3 year A.S. degree implemented (change from 2 year A.S. degree)**
 - Critical Thinking and Research, Collaboration and Communication, and Health Care Systems courses introduced in third year
- **Completion of some BSDH courses in year 3**
 - Above mentioned domains
 - Encouragement toward one year online BSDH completion
- **One (1) year online BSDH completion**
 - Eight of 9 courses fall into above mentioned domain categories
 - Two courses also shared with dental therapist curriculum that Vermont Technical College will be offering. Dental therapist legislation signed into law May 2016. Provider will be based on a dental hygienist and work side by side with dental hygiene students in clinical setting
- **Additional clinical experience**
 - Introduction of external rotations in Fall 2016 at UVM Medical Center (Health Care Systems/ Collaboration and Communication)

Preparing for our Future...

- Prepare dental hygiene professionals for the evolving scope of professional practice and settings.
- Better position the profession to be viewed as an integrated part of the healthcare system through strategic partnerships.
- Advance the profession of dental hygiene at the state and federal level.

Themes from the 2013-2014 Pilot Group

- Define a strategic theme that excites people
- Build coalitions
- Stay on message
- Can move forward without the agreement of all
- Pilot projects
- IPE

Your Turn

- How can we...?

Prepare dental hygiene professionals for the evolving scope of professional practice and settings?



- Foundation Knowledge
- Customized Patient-Centered Care
- Health Care Systems
- Communication and Collaboration
- Professionalism
- Critical Thinking and Research

History of the Future

- Imagine your program 5 years into the future.
- Transformation is well underway.
- You are widely recognized as the innovator who has lead the transformation of dental hygiene education to improve the public's oral and overall health.



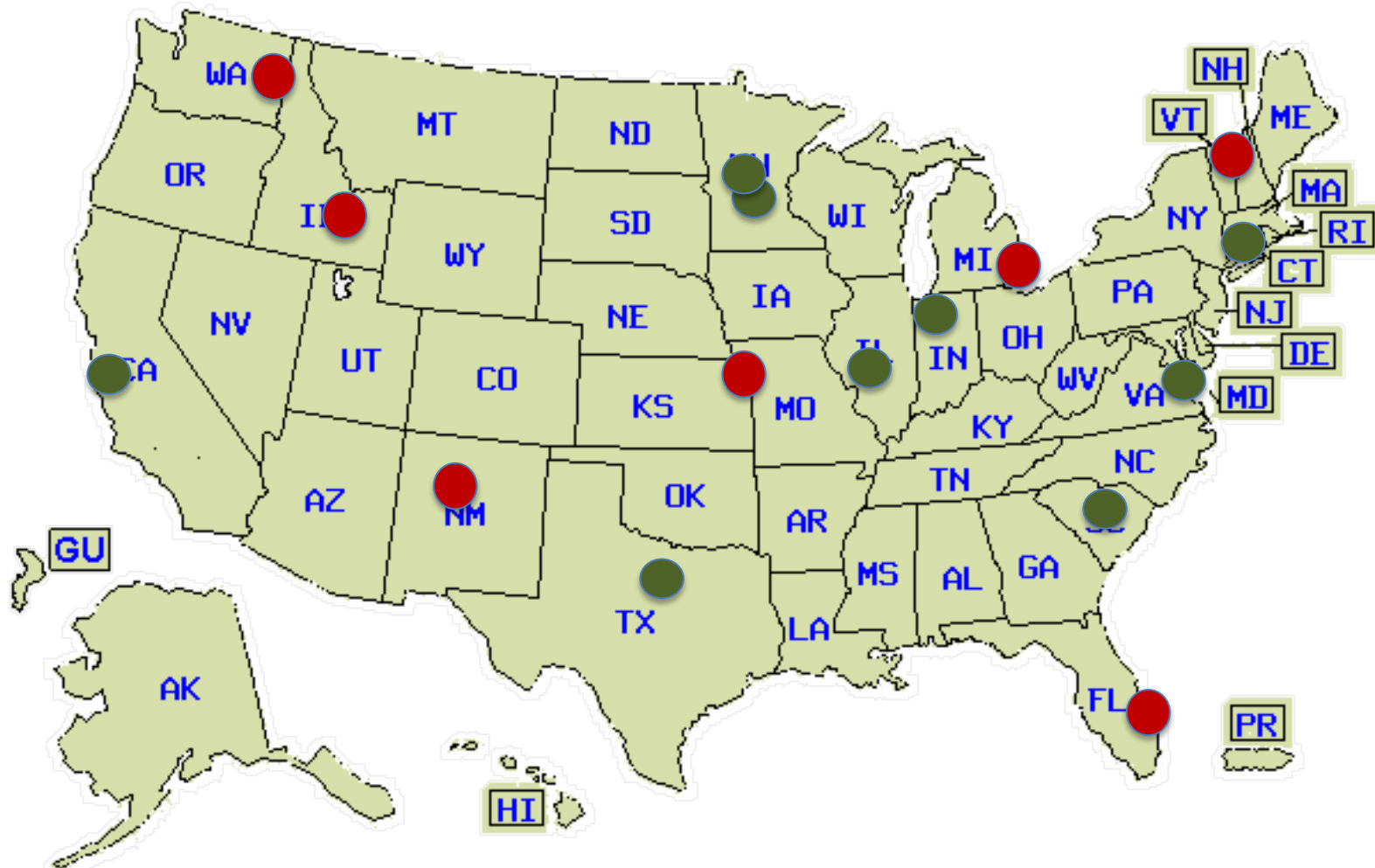
History of the Future-How has your program transformed in 2021?

- What is different at your program? Institution?
- How has this been portrayed in the local press? The college web site? The state health department?
- What are your graduates saying? Your applicants? Employers?
 - Spend a five minutes creating your vision of this future.
 - Share your thoughts with a partner. Partner, give feedback and suggestions. Switch roles.
 - Be prepared to report out.

History of the Future-How has your program transformed in 2021?

- Write down your vision for your program.
- What are three steps you can take this year to make this future a reality?
- Tell you partner and exchange e-mails to you can check in with each other over the year.

13-14 and 15-16 TDHA Pilot Programs



2015-2016 Pilot Programs and Leaders

- Wendy Garcia *et al*, Fones School of Dental Hygiene-University of Bridgeport
- Phyllis Spragge & Patti Chan, Foothill College
- Joyce Hudson, Ivy Tech Community College-Anderson
- Lee Muthig & Elizabeth Marchi, Midlands Technical College
- Debra Sidd, Normandale Community College
- Susan Daniels & Denise Claiborne *et al.*, Old Dominion University
- Faith Miller & Jennifer Sherry, Southern Illinois University
- Amy Teague, Texas Women's University
- Lisa Ahmann, University of Minnesota



Fones School of Dental Hygiene University of Bridgeport, CT

WENDY M. GARCIA, RDH, BSDH, MSED, EDD

LAURA GRECO, RDH, BSDH, MSED

DEIRDRE CLOONAN, RDH, BSDH, MSDH

KAREN S. WILLIAMS, RDH, BSDH, MS

KRISTIN ANDERSON, RDH, BSDH, MSDH

Current Description of the Program



The Fones School of Dental Hygiene offers the following programs:

- ASDH, BSDH, BSDH Online Degree Completion and MSDH Online programs
- Focus of the Fones transformation is on providing curricula that prepares all graduates with the knowledge and skillsets to advance the profession of Dental Hygiene



Description of new model

- Participation in Mission of Mercy and Oral Health Lobby Day-annual events for all DH students
- Increased use of portable equipment in the community offering complete Dental Hygiene treatment
- Tisdale Elementary – 101 prophys including Special Needs classes
- Early introduction of ultrasonic scaling for biofilm disruption in 1st year clinic and the use of Loupes during their Spring semester
- Clinical Skill assessment at the beginning of each semester
- Use of the WAND in 2nd year clinic
- Expanding Integrative Clinic experience to include Nursing and Physician Assistant programs, DH students participation in Grand Rounds
- Combining DH Education and Public Health tracks in MSDH program so all students graduate with knowledge and experiences from both tracks starting with 2016 cohort
- Incorporating international dental hygiene through the annual Summer Institute with Sun Moon University, South Korea Dental Hygiene students
- Discussing Inter-professional Education (IPE) between Nursing and Dental Hygiene



Challenges

- Utilization of portable equipment in community settings – site agreements needed so portable equipment can be used for patient treatment.
- Decreased employment opportunities has lead to RDH earning BS degrees on other disciplines – continue to focus on expanding the RDH scope of practice and including needed knowledge in the entry level curriculum and CE courses
- Implementation of a midlevel provider – continue to pursue this model of care delivery in the state



Next Steps

- Maintain student involvement in the pursuit of the midlevel provider through supporting the Legislative Committee of the Connecticut Dental Hygienists Association
- Making the Fones Clinic a presence to more communities and populations in need of oral health care

Foothill College Dental Hygiene AS to BS program transformation

PHYLLIS SPRAGGE, RDH, MA

PATTI CHAN, RDH, MS



Current Description of the Program (Why is it time to change?)

- Grant Bachelor of Science degree
 - Legislation allowing community colleges to offer baccalaureate degree as pilot program
 - Workforce needs in the state of California
 - Teledentistry and scope of practice: RDH & RDHAP
 - Employment opportunities for graduates

Description of new model

- Added units and restructured curriculum
 - Upper division general education
 - Research Methods for Health Professionals
 - Health Across the Lifespan
 - Year long research/capstone courses
 - Communication & cultural issues course
 - Healthcare management course
 - Education Theory, practice & administration course

Challenges faced (with resulting Action Plans)

- External
 - College accrediting body
 - California State University concerns
 - New for California Community Colleges – no model
- Internal
 - College curriculum approval process
 - Integration of college systems to accommodate and implement the BS-DH program

Next Steps

- Hire additional adjunct faculty
- Create the materials/content for courses
- Continue campus conversations and coordination
- Prepare for ACCJC site visit
- Professional development for faculty
- And lots more!

Dental Hygiene Program Ivy Tech Community College – East Central Region

FACULTY MEMBERS INVOLVED (WITH DEGREES LISTED)
JOYCE C. HUDSON, RDH, M.S.

Current Description of the Program (Why is it time to change?)

- The dental hygiene program at Ivy Tech Community College is a two-year dental hygiene program.
- Graduates are awarded an Associate of Applied Science Degree.
- Various factors have prevented the inclusion of IPE as a more integral part of our curriculum.

Description of new model – Step One

- Our plan is a two-step process.
- Step one involves incorporation of an IPE component as part of the community program planning and evaluation project that is completed during spring semester.
- Each phase of the project has a specific rubric.
- Each rubric was modified to include criteria to assess the inclusion of IPE during each phase.
- This was completed during spring 2016.

Description of new model – Step Two

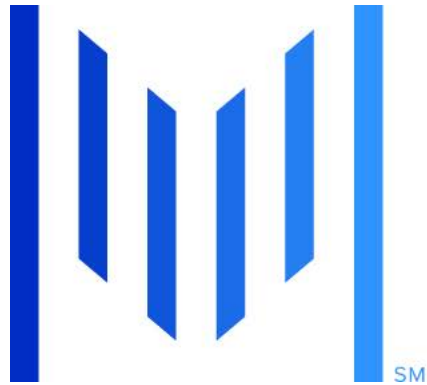
- The dental hygiene program has a partnership with Open Door Health Services. Currently the dental hygiene students complete a clinical rotation at Open Door.
- Open Door is a federally qualified health center located in Delaware County, Indiana.
- The dental hygiene program is located in Madison County, Indiana.
- Step two will involve working with Open Door to develop a new clinical rotation for the dental hygiene students. The dental hygiene students will work in conjunction with health care professionals at Open Door who treat individuals with diabetes and also those who work in child and maternal health.

Challenges faced (with resulting Action Plans)

- Open Door Health Services recently received a HRSA grant to expand services from Delaware County to Madison County, including dental services.
- Open Door staff will provide the restorative dental services in the dental hygiene clinic at Ivy Tech Community College.
- This is a huge project for both Open Door and myself. Unfortunately our focus has been on the implementation of this project and we've had limited time to further refine the IPE project.

Next Steps

- Continue to work with Open Door Health Services to have step two of our plan implemented during fall semester 2016.
- Development of an in-service for health care professionals at Open Door who will be working with the dental hygiene students.
- Development of an orientation session for dental hygiene students prior to working with the various health professionals at Open Door.
- Development of appropriate feedback and evaluation tools.



MIDLANDS

TECHNICAL COLLEGE

LEE H. MUTHIG, RDH, BA, MSDH
ELIZABETH MARCHI, RDH, BS, ED.M

Current Description of the Program



- A 2 year Associate of Applied Science in Dental Hygiene
- Students must complete 1 year of pre-requisite courses
- Program is a total of 84 Credit Hours
- There is currently not a BSDH program in the state.
- Would like to offer the dental hygiene students the opportunity to earn a BSDH
- Only need 120 credits for a BS degree. Our students need 36 more hours.



Description of new model

- Students would be concurrently enrolled at MTC as well as the University of South Carolina (USC).
- Students would be able to transfer 72 credits to USC towards the BSDH.
- 45 credits would have to be taken at USC.
- Students would be awarded an AAS degree from MTC and then within 2 semesters complete the BSDH degree at USC.

Challenges faced (with resulting Action Plans)



- Administrative changes within our own College and getting “buy in”
- Opening lines of communication with the USC
- Competition from new BS in Healthcare Studies from MUSC



Next Steps

- Meet again with our Department Chair, AVP for Career Programs and bring in the VP for Academic Affairs
- Establish support from our own school as well as the dental hygiene programs within the state.
- Begin discussions with both the School of Nursing as well as the School of Public Health at USC

Transforming Dental Hygiene Education

Minnesota collaboration abounds - innovative dual enrollment momentum...

Program Chair, Debra J. Sidd



NORMANDALE
COMMUNITY COLLEGE

YOUR COLLEGE. YOUR COMMUNITY.



A Partnership leading the way...



Normandale Community College
and
Metropolitan State University

establishes the ground work and pathway
for other MN Dental Hygiene programs!

Achieving a Goal:

Simultaneous, seamless, flexible pathway for all MN DH associate degree seeking students to earn a baccalaureate degree... A partnership leading by example and engaging students in online coursework emphasizing leadership, advocacy, communication, integrated health care and research.



BSDH courses



Designing and managing Teams in health care

Current and relevant topics for the Dental hygienist

management of Oral health care Delivery

DH Care for Culturally diverse & special needs populations

Evidence-Based Dental hygiene practice

Restorative functions Theory and lab

Educational concepts in dental hygiene

Dental Hygiene Capstone



Preparing future dental hygienists with the knowledge, skills and values to meet the challenges of today's health care needs and to be instrumental in effectively integrating Dental Hygiene into interprofessional health care systems...



Multifaceted efforts, unity and commitment

Required of:

students

educators

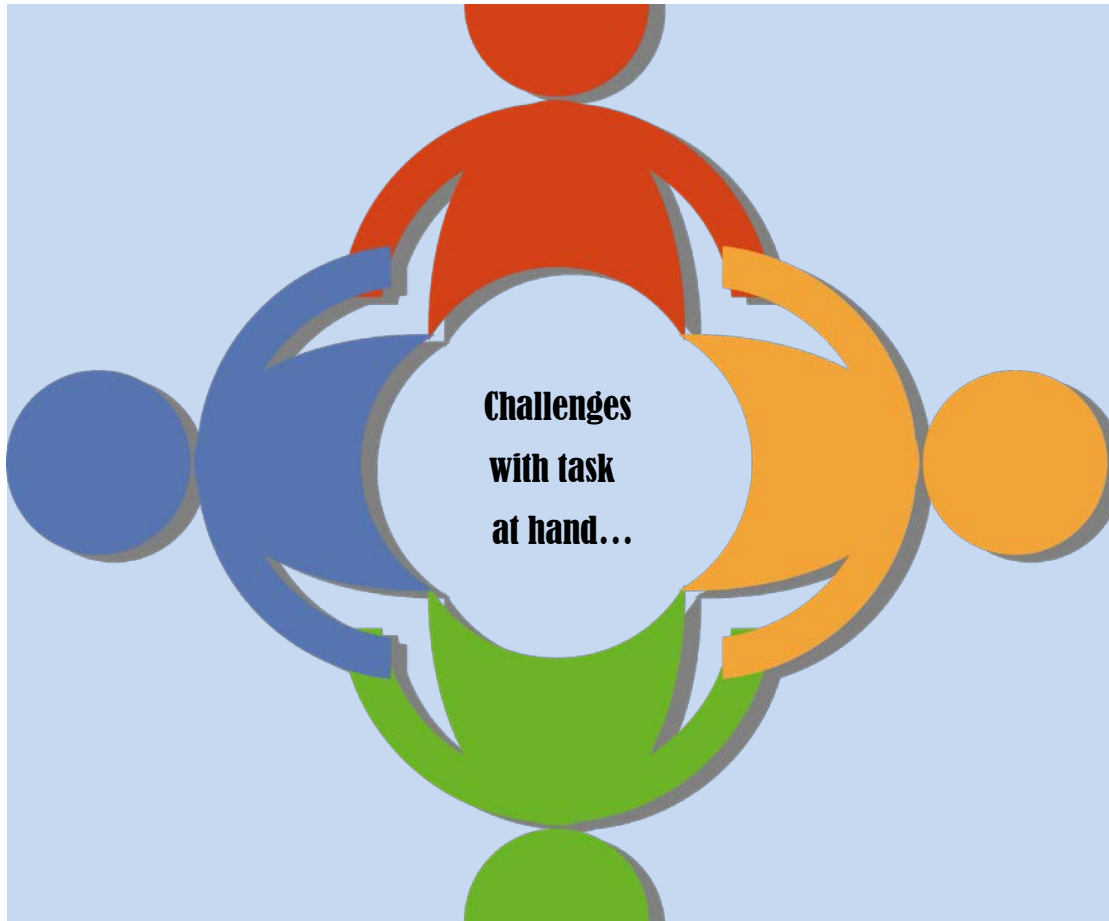
administrators

admissions

enrollment

counseling/advising

financial aid

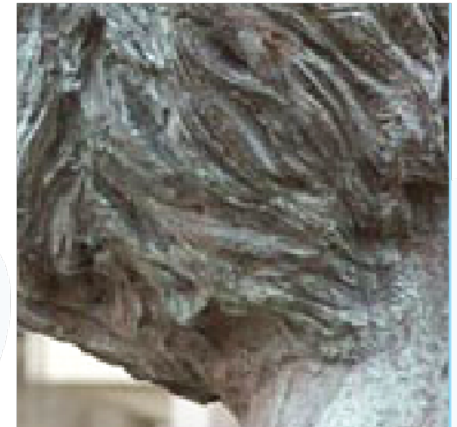
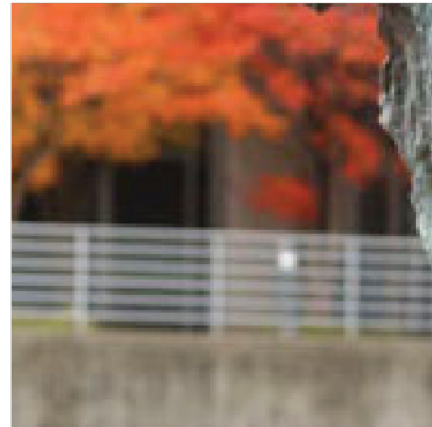
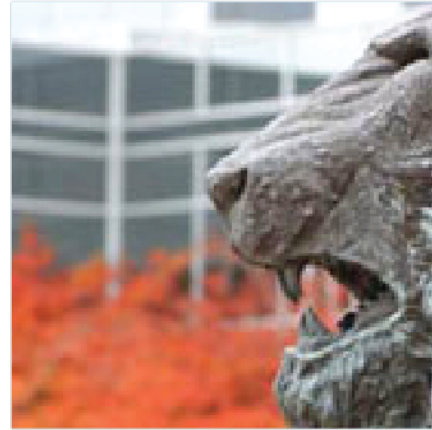




OLD DOMINION
UNIVERSITY

IDEA FUSION

Gene W. Hirschfeld School of Dental Hygiene



Susan J. Daniel RDH, PhD- Project Lead
Denise M. Claiborne BSDH, MS, PhD(c)- Project Lead
Ann Bruhn BSDH, MS
Joyce Flores BSDH, MS
Walter Melvin DDS
Gayle McCombs RDH, MS
Tara Newcomb BSDH, MS
Sharon Stull BSDH, MS
Lynn Tolle BSDH, MS

Current Description of the Program (Why is it time to change?)



- Gene W. Hirschfeld School of Dental Hygiene, Old Dominion University has three distinct programs.
- Transformation will focus on BSDH Entry-level program for project.
- Modifications are timely due to:
 - ✓ Cultivation within the institution to support an IPE and entrepreneurial atmosphere.
 - ✓ The state of Virginia legislative and scope of practice changes for the dental hygiene profession such as remote supervision and use of lasers.

Description of new model



- Curricular modifications will incorporate business, entrepreneurial and IPE threaded throughout the curriculum.
- Some specific examples:
 - IPE efforts with student physician assistants, nurse practitioners, counseling and medical residents.
 - More inclusion of telehealth and mobile oral care within the curriculum.
 - Implement curriculum related to laser use in oral care.
 - Incorporate knowledge, skills, and preparation to function under remote supervision
 - Support and promote ADHA recommended curriculum domains for advancing the profession into current competencies.

Challenges faced (with resulting Action Plans)



Challenges Faced	Action Plans
Scheduling and space within the institution.	Work with appropriate institution personnel to address scheduling and space concerns.
Identifying clinical sites outside the of SODH.	Identify potential clinical sites outside of SODH and seek the appropriate accreditation approval.

Next Steps



- Review/modify SODH vision and mission statements.
- Revise curriculum mapping, add program competencies related to the ADHA proposed curriculum domains for each course.
- Determine overlaps, repetitive and missing content.
- Obtain the appropriate personnel needed to develop faculty knowledge and skills in use of lasers.
- Work with other health care programs within and outside the university to foster interprofessional education.



The School of Dental Hygiene at
Old Dominion University would like
to thank ADHA and ADEA for this
opportunity



CARBONDALE

Southern Illinois
University

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Changes



1. Online degree completion program approved Fall 2015.
2. Final memo to “affected officers” received March 6, 2016

Description of the new model



- ❖ SIU has an approved online degree completion program with anticipated enrollment beginning Summer 2016.
- ❖ *“The primary focus of the education and management specialization is to allow students who wish to enter either dental hygiene education or management the opportunity to learn and develop the skills necessary for success in these two environments. Thirty one credit hours of management/education coursework are required as well as the general education and senior institution requirements for the university. A total of 120 credit hours are required for the baccalaureate degree.”*

<http://sah.siu.edu/undergraduate/dental-hygiene/dh%20online%20management%20education/>

Challenges faced



1. Funding to promote the online program
2. Partnership with IDPH to implement the Oral Health Workforce Grant
 - A. The program is to help integrate the ADA CDHC model into existing DH curriculum.
 - B. Because the program is online, SIUC is looking at a cost-effective way to implement into the newly created online DC program without the need for additional faculty.
3. “Always and forever”: the Illinois state budget...

Next Steps

1. Discuss the role of the SIU DHP with the OHWG
2. Implement the online DC program
3. Continue to promote program
4. (Short & Long-term) survey participants and use feedback to make improvements if needed
5. Increase collaborations with other allied health and non-allied health professionals (IPE)
6. Evaluate after first cohort completes the curriculum.

Texas Woman's University

AMY TEAGUE, RDH, MS
ASSOCIATE CLINICAL PROFESSOR

Current Description of the Program (Why is it time to change?)

- Recently integrated this new model of “just in time teaching”
- Revamping the Professional Entry Pathway (our onsite students)
- Created a new Dual Enrollment Pathway (affiliation agreements with AAS DH programs). Currently 4 programs have joined and 2 additional are seeking partnership.

Description of new model/Professional Entry

- It is currently in the “new” transition: “Professional Entry Program” has implemented IPE across our curriculum with Catch 1, and is working on a new one with the TWU Stroke Center in Dallas, Tx where our PT, OT, Nursing work currently. There is a possibility of implementing dental chairs into this clinic, as well.
- In addition we have just been approved to adjust hours in our program to include lab hours for our Orofacial course and a Research addition enabling hands on research projects.

Description of new model/Dual Enrollment

- As showed on articulation agreement, 30 hours of upper division online DH courses are taught to “distance-AAS, DH students” while they are simultaneously enrolled in the AAS program. TWU awards their DHYG hours as “block” credit (up to 30 hours) and the 2nd year clinicals are accepted at TWU as “upper-division” credit. This student obtains TX core completion, along with prerequisites of AAS DH program and TWU DH program @ AAS site, and transfers up to 60 hours of these in to TWU to arrive at the 120 hour BSDH requirement. 60-transfer in for Core and pre-req, 30 hours block from DHYG 6 of these are upper division (for most, this can vary slightly) then the 30 hours of online DH courses at TWU complete the 120 hours.

Challenges faced (with resulting Action Plans)

Prof Entry:

- Time, as we consider whether it will be best to lose hours in other areas while incorporation IPE.

Dual Enrollment:

- The biggest challenge is that while we are teaching some of the courses for the AAS, others have some overlap. This is a challenge in that the AAS site sometimes has been taught the information, so it is “doubling” on the information obtained. We do our best to related the objectives to the “higher” level of learning, as these are upper level courses to enhance the “critical thinking” for these students.
- Group work can be a challenge with “off-site” students

Next Steps

Professional Entry:

- To continue moving to integrate IPE.
- This year we were just approved to edit out Professional Entry hours/courses. We added a lab for our Orofacial Biology course, a Research application course, so plan will be to implement these courses/edit the existing hours.

Dual Enrollment:

- We are now striving to integrate “best” practices for online education, which will improve delivery/effectiveness of learning styles.



Division of Dental Hygiene University of Minnesota

LISA AHMANN BSDH, MED

PRESENTED BY BETHANY PALMSTEIN LDH, BS



- Inter-Professional Education (IPE) is a priority at the University of Minnesota.
- Plans are now in place for dental hygiene/dual curriculum students participate in IPE with other Academic Health Center students and Professionals.

Goals:

- Increase Inter-professional learning experiences for students in the Division of Dental Hygiene.
- Improve overall health of School of Dentistry patients.

Description of the new models



Pharmacist Collaboration: (Implemented fall 2015)

- Inter-professional collaboration with pharmacist in clinic over semesters 2-5.

Rotations in health care settings: (Implemented spring of 2016)

- Hospital transplant floor, Obstetrics floor, Cleft Palate Clinic

Community Teacher (CT): (fall 2016)

- The CT is a person who has one or more chronic health conditions. This person interacts with the health care students to teach them about living with chronic disease.
- Pairs second year medical students, pharmacy students, masters of nursing students, dental hygiene students and dual curriculum dental therapy students to act as a collaborative health team while interacting with the Community Teacher (CT).

Challenges Faced



- The primary challenge is to be recognized as a valued member of an IPE team.

PLAN

- DH faculty will work closely with faculty from other health professional programs.
- Implement the IPE programs with faculty supervision to insure inclusion.
- Evaluate outcomes from all stakeholders perspectives.

Next Steps



- Implement the Community Teacher IPE experience fall 2016



- Evaluation of all three phases.

The End or the Beginning?

- Most dental hygienists know the history of dental hygiene; what we don't know is the future.
- Opportunities abound.
- The goal is to transform dental hygiene education so that dental hygienists are integrated into the healthcare delivery system as essential primary care providers to expand access to oral health care.

Thoughts? Questions?

Resources

- U.S. Department of Health and Human Services, Health Resources and Services Administration, Transforming Dental Hygiene Education, Proud Past, Unlimited Future: Proceedings of a Symposium. Rockville, Maryland: U.S. Department of Health and Human Services, 2014..
- ADEA State Updates 2013-2016; www.adea.org.
- IOM (Institute of Medicine). 2011. *Advancing Oral Health in America*. Washington, DC: The National Academies Press.
- Hall K and Diehm J. Why US Health Care is Obscenely Expensive, Huffington Post, Oct 3, 2013.
- Federal Trade Commission, December, 2013
- Englander R. et al. 2013. Toward a common taxonomy of competency domains for the health professions and competencies for physicians. *Academic Medicine* 88 (8):1088-1094.
- Transforming Dental Hygiene Education and the Profession for the 21st Century. ADHA.org

Save the Date!



94TH ANNUAL SESSION

JUNE 14-20, 2017 / JACKSONVILLE, FL

