



**Oregon Health Authority
Dental Pilot Project Program**

Dental Pilot Project: Application #200

Abstract
Training Dental Hygienists to Place Interim Therapeutic Restorations
March 18, 2016

Applicant/Sponsor:	Oregon Health & Science University, School of Dentistry, 3181 SW Sam Jackson Park Road, Portland, OR 97239
Project Director:	Eli Schwarz, DDS, MPH, PhD Department of Community Dentistry, Oregon Health & Science University 3030 SW Moody Ave, Suite 135B Portland, OR 97201
Training Supervisor(s):	Eli Schwarz, DDS, MPH, PhD & Richie Kohli, BDS, MS

Sponsor Type:	Non-Profit Educational Institution
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Oregon Health & Science University is a nationally prominent research university and Oregon's only public academic health center. It educates health professionals and scientists and provides leading-edge patient care, community service and biomedical research.

The OHSU School of Dentistry shares the mission of the Oregon Health & Science University to provide educational programs, basic and clinical research, and high quality care and community programs. We strive to foster an environment of mutual respect where the free exchange of ideas can flourish. The dental school prepares graduates in general dentistry and the dental specialties to deliver compassionate and ethical oro-facial health care.

The mission of the Department of Community Dentistry is to promote critical analysis of social, behavioral, and policy-influenced factors that affect oral health outcomes in both individual patients and the entire population. These goals are achieved through a comprehensive didactic and experiential learning curriculum that begins in year one of the pre-doctoral program and culminates with the DS4 clinical rotations in community based dental clinics. We strive to develop curricula that lay the foundation for the student's life-time professional

development, commitment to service and community collaboration, and ensure awareness and cultural competency of the comprehensive and complex nature of health care for vulnerable populations.

Purpose:	<ul style="list-style-type: none"> Teaches new skills to existing categories of dental health care personnel.
	<ul style="list-style-type: none"> To train Expanded Practice Dental Hygienists (EPDHs) and demonstrate that EPDHs can successfully place “Interim Therapeutic Restorations” (ITRs) when directed to do so by a collaborating dentist. The ITR is an interim restoration designed to stop the progression of dental caries until the patient can receive treatment for that tooth by a dentist.

Proposed Project Period:	11/1/2015 – 9/1/2020
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Proposed Number of Sites:	Polk County: Central School District School: 5 School Sites
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Site Locations:	
Training/Didactic Phase:	<ul style="list-style-type: none"> Didactic training will be held via online management system called Sakai, webinars, and in-person meetings in the conference rooms at Capitol Dental Care. Didactic resources are available through University of the Pacific (UoP). Laboratory and clinical training will take place at Capitol Dental Care which has fully equipped dental clinics.
Utilization Phase:	<ul style="list-style-type: none"> Ash Creek Elementary, Independence OR. 492 total student enrollment, 243 K-2nd grade students. 64% free and reduced lunch population Independence Elementary, Independence, OR. 421 total student enrollment, 200 K-2nd grade students. 77.7% free and reduced lunch population Monmouth Elementary, Monmouth OR. 547 total student enrollment. 266 K-2nd grade students. 55.9% free and reduced lunch population. Falls City Elementary, Falls City, OR. 97 total school enrollment. 31 K-2nd grade students. 70.1% free and reduced lunch population.

	<ul style="list-style-type: none"> • Community Action Head Start-Independence Site. 40 children, age 3-5. OCDC Head Start-Independence Site. • In addition, we have also been meeting regularly with a Steering Group of those likely to participate in the pilot project, now and at a future time. These include representatives from: <ul style="list-style-type: none"> • Capitol Dental Care • Virginia Garcia Memorial Health Center • Advantage Dental • Kemple Memorial Children’s Dental Clinic
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Proposed Number of Trainees:	10-12
Proposed Number of Supervisors:	4
Number of Collaborating Dentists:	4
Proposed Number of Sites:	5

Application Chronology:

Application Submitted:	November 2, 2015
Application Approved for Completeness:	November 30, 2015
Application Received by Technical Review Board:	December 11, 2015
TRB Application Review Comments Due:	January 28, 2016
MOA Received by Program:	February 5, 2016
Applicants Notified of Intent to Approve:	February 19, 2016
Application Under 10 Day Period of Public Comment:	February 22, 2016 – March 4, 2016
Project Approved by Director:	March 8, 2016
Oregon Board of Dentistry Notified of Approval Status:	March 10, 2016

Estimated Cost and Funding Source(s):

Estimated Cost:	\$111,797.01
Funding Source(s) Committed:	<p>Three sources of funding have been identified:</p> <ol style="list-style-type: none"> 1) Oregon Health Plan (OHP) covers dental care for Medicaid members through capitated payments to the Dental Care Organization (DCO) to which the CCO has assigned the members; 2) The training, technical assistance, and evaluation will be funded in the initial year through a telehealth grant from the Oregon Health Authority through September 2016; 3) A group of funders of Oregon Oral Health Funders Collaborative that has supported the planning grant to

	develop the present application has expressed an interest to fund ongoing support of the evaluation and testing of the pilot project.
Total Committed:	\$111,797.01 for first 18 months

Background and History of the Project:
Selected Passages from the DPP #200 Application

Need for the Project:

Numerous reports within the last ten years have addressed workforce shortages in the dental field, lack of access to oral health care among low-income, rural, and other disadvantaged population groups, and the resulting profound oral health disparities experienced by these groups. Recent reports document that very slow progress is being made in improving the access to oral health care for these population groups. The health transformation process underway in Oregon has recently expanded access to the Oregon Health Plan for around 250,000 additional members. However, since the workforce situation has not been addressed, the existing dental workforce is under additional pressure and overall, access to dental care may further deteriorate. According to an Oregon Healthcare Workforce Institute analysis, the number of dentists practicing in Oregon decreased by 8% from 2010 to 2012 which may indicate a continuous trend. The traditional dental care delivery model of stationary dental offices or community health centers with dental practitioners and auxiliaries needs to be expanded to test alternative and sustainable models.

Studies in other states have shown that a remotely located dentist, working with an Expanded Practice Dentist Hygienist (EPDH), who is seeing a patient at a different location, can collaboratively deliver quality dental care. Led by an EPDH, Capitol Dental Care will implement telehealth-connected oral health teams to reach children who have not been receiving dental care on a regular basis and to provide community-based dental diagnostic, prevention and early intervention services, including ITR placement when indicated by the dentist.

Description of patients:

Demographic Data about Availability of Health Care Services

Polk County continues to show an increase in diversity, especially within the Hispanic population. 11.2% of the population considers themselves Hispanic compared to 10% in 2007. The Caucasian population has grown from 86% to 87.9% while the American Indian/Alaskan Native population has remained consistent at 1.9%. There were slight increases in the African American population from .4% to .5% and in the Asian/Pacific Islander population from 1.6% to 1.9% in 2009. According to the 2005-2009 US Census Bureau data, 11.4% of Polk County residents speak a language other than English in their home compared to 14% of Oregon residents and 19.6% of US residents.

Oral Health needs assessment suggested that 34.3% of the Polk County residents had no dental visit in the last 12 months. Currently, only about 20% of Oregon dentists accept Oregon Health Plan (OHP) members. In Marion and Polk Counties, there are 122 OHP enrolled dentists. This is approximately 1 dentist for every 550 members of the Willamette Valley Community Health (WVCH) Coordinated Care Organization. Although this may be considered an acceptable ratio issues remain of provider timely availability, appointment timing, and

insurance coverage; thus, there are still barriers for OHP members' access.

Oregon 2012 Smile Survey: This statewide survey gauges the health of the Oregon dental system by looking at the oral health, access, and overall quality of dental care for school children, aged 6 to 9. The survey examines the percentage of children who need urgent dental care, have any tooth decay, have rampant tooth decay (7 or more cavities), and have received dental sealants. The survey showed those with lower incomes, non-English speaking, and Hispanic background generally have worse dental health outcomes than those who have higher incomes, speak only English, and are white.

Purpose of the Project:

To train Expanded Practice Dental Hygienists (EPDHs) and demonstrate that EPDHs can successfully place "Interim Therapeutic Restorations" (ITRs) when directed to do so by a collaborating dentist. The ITR is an interim restoration designed to stop the progression of dental caries until the patient can receive treatment for that tooth by a dentist.

Oregon is in the midst of a dental health care crisis with more than 91 areas in the state designated as dental care health professional shortage areas (Kaiser Family Foundation study, April 28, 2014). This level of "deficiency" translates to more than 61% of Oregon residents not having their dental care needs met. One county where the need is particularly great is Polk County, and it is within this county - and the Polk County School District that a collaborative consisting of OHSU School of Dentistry, University of the Pacific Center for Special Care, and Capitol Dental Care (CDC) will implement its pilot project to train Expanded Dental Hygienists to place interim therapeutic restorations (ITR) within the context of a telehealth connected dental team.

This OHSU project has been planned and developed in collaboration with the University of the Pacific, Arthur A. Dugoni School of Dentistry (UoP) and Capitol Dental Care (CDC).

Project Description:

Under the dental pilot project program [Capitol Dental Care] CDC will build upon existing community outreach programs in Polk County by adding the telehealth model to existing preventive services, which include assessment, radiographs, intra-oral photographs, cleanings, sealants, fluorides, oral health instruction, and ITR if indicated. CDC's telehealth connected dental team of Expanded Practice Dental Hygienists, dental assistants, and supervising dentist, will visit three schools within the District, serving approximately 10 children per day~75 per month with a total expected population of 1200-1500 measurable encounters over the life of the 15-month project.

Those children with advanced disease in need of additional care will be referred for care either through CDC's mobile van operator, or directed to a dental clinic for restorative care, as needed.

This Dental Workforce Pilot Project (DWPP) will add one new duty to those currently permitted for Expanded Practice Dental Hygienists (EPDHs) that are part of a community-based telehealth connected team system of care already under way.

The Oregon Health and Science University will train Expanded Practice Dental Hygienists (EPDH) to perform a new duty in community settings to improve the oral health of underserved populations and demonstrate their ability to carry out this duty.

Project Objectives:

Short-Term Objectives:	<ul style="list-style-type: none"> • Train EPDHs and evaluate their competence to place ITRs.
Long-Term Objectives:	<ul style="list-style-type: none"> • Through the performance of these duties to allow EPDHs working in community settings with underserved populations to facilitate collaboration with a dentist and to develop an appropriate plan of care for the patient. The placement of ITRs when directed to do so by a collaborating dentist will allow EPDHs to stabilize patients' oral health from further deterioration until they can be seen by a dentist in an appropriate setting. • To facilitate the development of new models of care designed to improve the oral health status of underserved populations.

Laws and Regulations Pertinent to the Proposed Project:	<p>The Dental Practice Act governs the scope of practice for both dentists and dental hygienists operating in the state of Oregon. The key provisions can be found at Oregon Revised Statutes, Chapter 680 (680.010 – 680.210 and 680.990 (Dental Hygienists).</p> <p>Currently, an Expanded Practice Dental Hygienist (EPDH) may only perform the placement and finishing of direct alloy and direct composite restorations after the supervising dentist has prepared the tooth (teeth) for restorations (ORS 818-035-0072).</p>
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