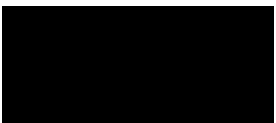




Advanced Dental Hygiene Practitioner

National Primary Oral Health Care Conference
December 2007

American Dental Hygienists' Association
Ann Battrell, RDH, MSDH, Executive Director

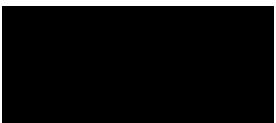




ADHA Mission

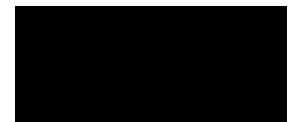
Mission Statement

Helping dental hygienists to
achieve their full potential as they
seek to improve the public's total
health.



ADHA Goals 2007-2010

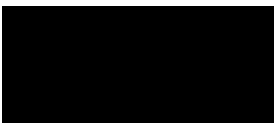
ADHA and its members will work in partnership with dentists to advance the oral health of patients.






Historical Perspective

Why is ADHA pursuing this?

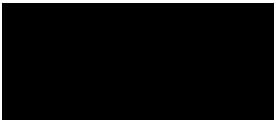
- Access to oral health care crisis in the U.S.
 - Shortage of dentists
 - Maldistribution of dentists
 - Heightened awareness for the need for a “mid-level practitioner”
 - Compliments ADHA’s commitment to resolve health care disparities
- 

Why create the ADHP?



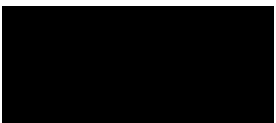
Oral Health in America:
A Report of the
Surgeon General

Department of Health and Human Services
U.S. PUBLIC HEALTH SERVICE

- Reports note the current system in the U.S. does not ensure oral health for all populations
 - Identified need to enhance the oral health workforce capacity
- 

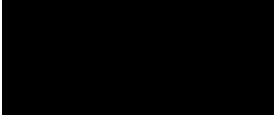


National Call to Action

- Landmark reports suggest that the current dental care system in the United States is not effectively ensuring optimal oral health for all populations
 - Identified the need to enhance oral health workforce capacity in the United States
- 



ADHA HOD RESOLUTIONS, June 2004

- Adopted the following definition:
 - A dental hygienist who has graduated from an accredited dental hygiene program and has completed an advanced educational curriculum, approved by the American Dental Hygienists' Association, which prepares the dental hygienist to provide diagnostic, preventive, restorative and therapeutic services directly to the public.
- 



U.S. Dept. of Labor, Bureau of Labor Statistics: DENTISTS (general)

Industry	2004 employment	Projected 2014 employment	Change, 2004-2014	
	Number	Number	Number	%
Total employment, all workers	128,000	145,000	17,000	13.5

<http://data.bls.gov/>

Retrieved 12.21.05

Last updated 12.21.05





U.S. Dept. of Labor, Bureau of Labor Statistics: DENTAL HYGIENISTS

Industry	2004 employment	Projected 2014 employment	Change, 2004-2014	
	Number	Number	Number	Percent
Total employment, all workers	158,000	226,000	68,000	43.3

<http://data.bls.gov/>

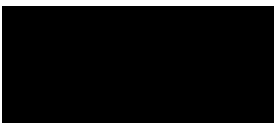
Retrieved 12.21.05

Last updated 12.21.05



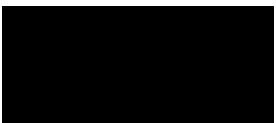


Dental Hygiene Projections

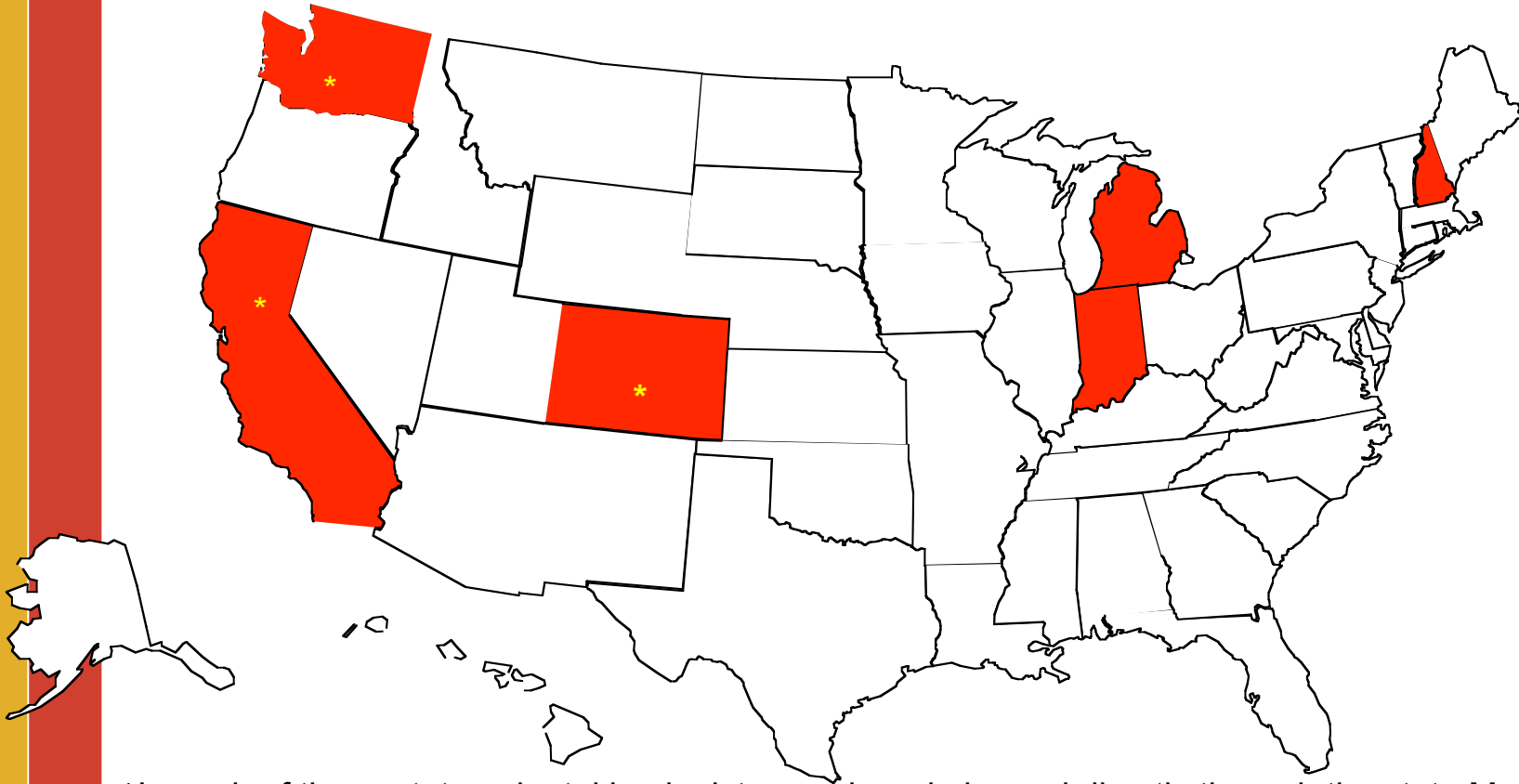
- U.S. Department of Labor, Bureau of Labor Statistics:
 - Occupational Outlook Handbook
 - **Dental hygienists** noted within the **top 10 fastest growing occupations** and occupations having the largest numerical job growth from 2004-2014
 - Noted by level of education and training
 - <http://www.bls.gov/oco/ocotjt1.htm>
(retrieved 12.21.05)
- 



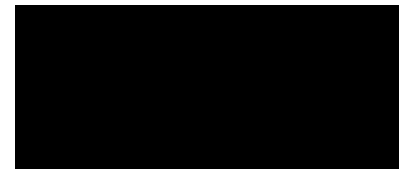
Legislative Success...

- **20** states without overly restrictive supervision requirements
 - **12** States with Medicaid provider status
 - **43** States with general supervision
 - **40** States that allow dental hygienists to administer local anesthesia
 - **25** States that allow dental hygienists to administer nitrous oxide
- 

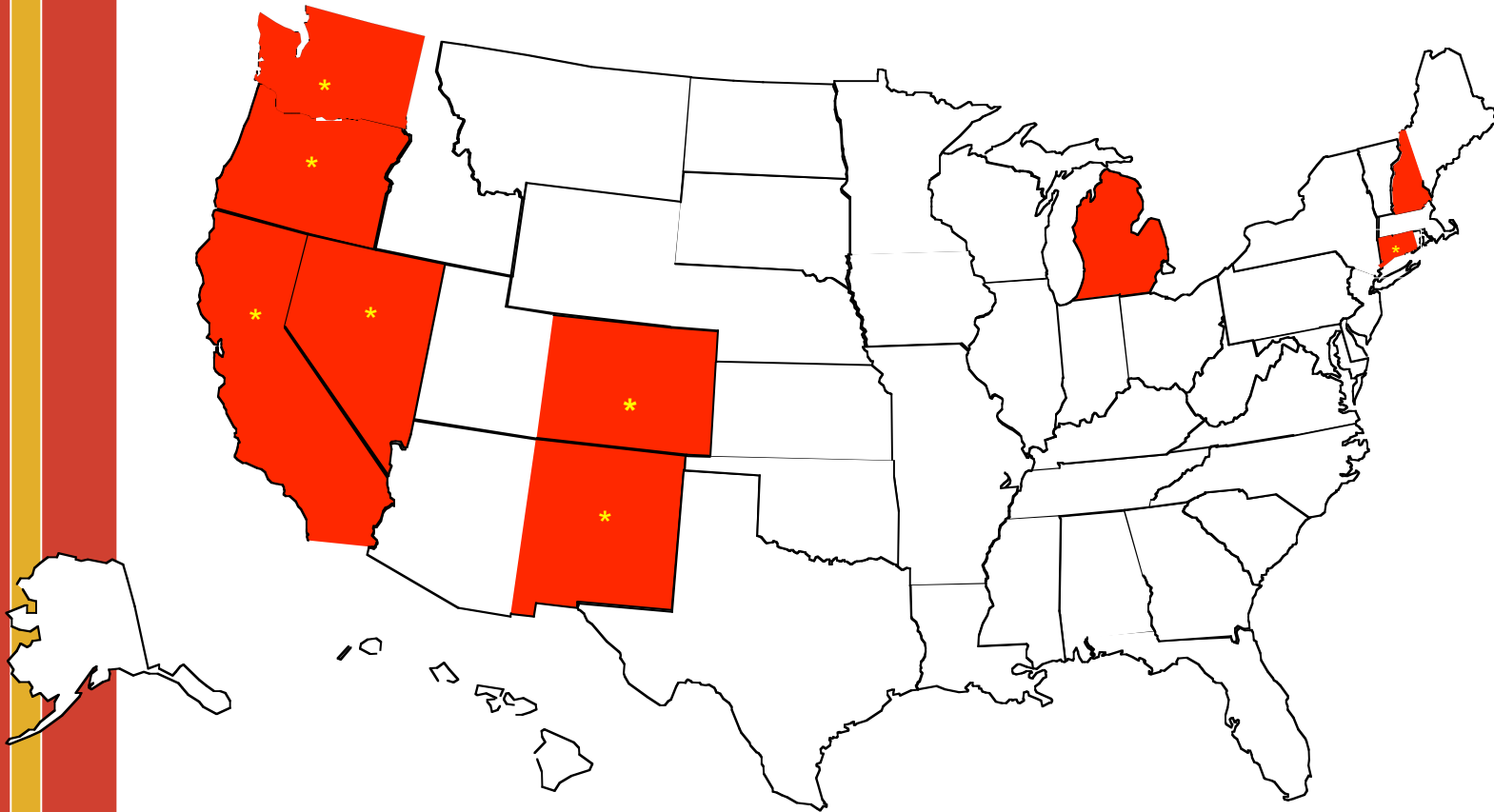
Direct Access - 1995



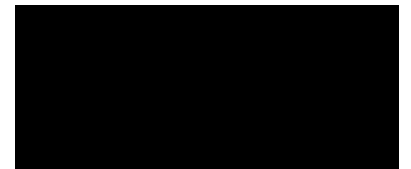
*In each of these states, dental hygienists may be reimbursed directly through the state Medicaid program for services rendered.



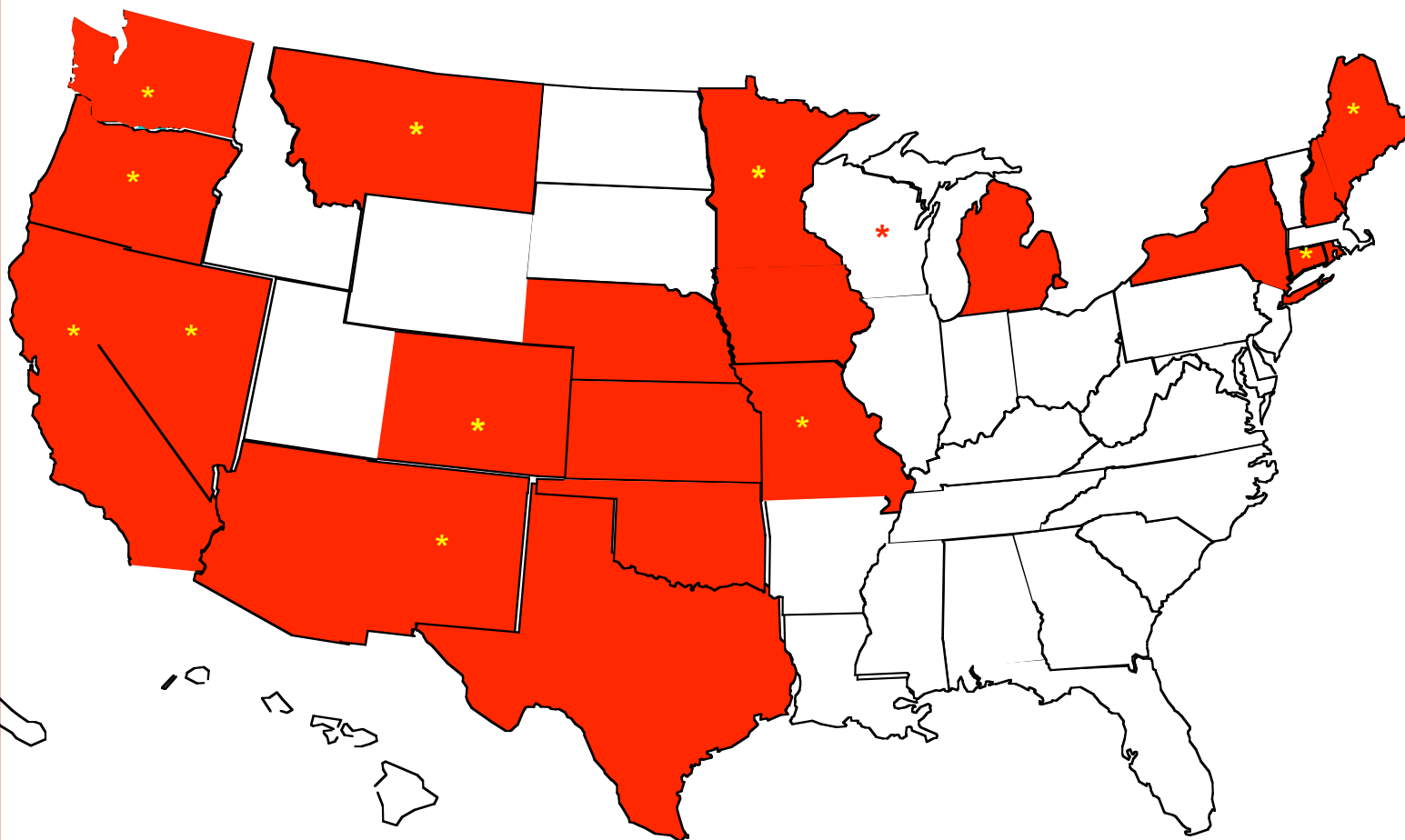
Direct Access-2000



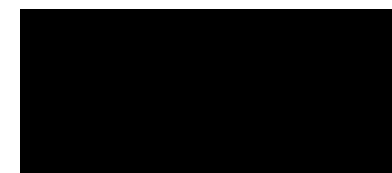
*In each of these states, dental hygienists may be reimbursed directly through the state Medicaid program for services rendered.



Direct Access-2007

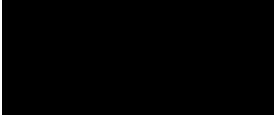


*In each of these states, dental hygienists may be reimbursed directly through the state Medicaid program for services rendered.



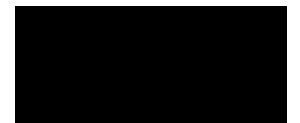


The ADHP...

- Follows the Rapid Practice Changes in the DH Profession:
 - Affiliated Practice (AZ)
 - Registered Dental Hygienist in Alternative Practice (CA)
 - Extended Care Permit RDH (KS)
 - Public Health Permit (ME)
 - Collaborative Practice RDH (MN)
 - Limited Access Permit with Public Health Supervision (MT)
 - Public Health Supervision (NH)
 - Collaborative Practice RDH (NM)
 - Public Health Endorsement (NV)
 - Public Health Supervision (IA)
 - Limited Access Permit (OR)
 - School Sealant Programs (WA)
- 



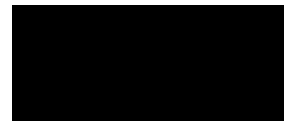
Workforce Model





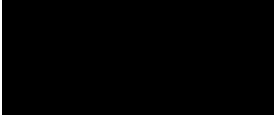
ADHP Advisory Committee

- Gain input and feedback on the ADHP concept
- “Sounding board”
- **Meetings:**
 - October 2005
 - March 2006
- Consists of the major oral health care organizations, federal government, advocacy groups, and other health-related entities






ADHP Advisory Committee

- Hispanic Dental Association
 - National Dental Association
 - National Association of Dental Plans
 - National Rural Health Association
 - Medicaid/SCHIP Dental Program Association
 - Indian Health Service
 - National Association of State Health Policy
 - Association of State and Territorial Dental Directors
 - Special Care Dentistry Association
 - National Dental Hygienists' Association
 - National Association of Community Health Centers
 - American Dental Education Association
 - American Association of Public Health Dentistry
 - American Academy of Pediatrics
 - Observers:
 - American Academy of Periodontology
 - American Association of Dental Examiners
 - American Dental Association
- 




Presentations to the Communities of Interest

- ADA
 - Council on Dental Practice
 - Council on Education and Licensure
- American Dental Education Association (ADEA), Board of Directors
- Commission on Dental Accreditation (CODA)
- American Association of Dental Examiners (AADE)
- National Oral Health Conference:
 - American Association of Public Health Dentistry (AAPHD)
 - Association of State and Territorial Dental Directors (ASTDD)
 - Special Care Dentistry Association (SCDA)
- National Association of Dental Plans (NADP)
- Association of Academic Health Centers (AAHC)
- American Public Health Association (APHA) 



Examples of questions from the Communities of Interest:

- Will the programs be accredited?
 - Where will they work?
 - Why wouldn't they become a dentist?
 - Will this provider require an additional license?
 - What does this mean for a Board of Dentistry?
 - What is the cost-effectiveness of this provider?
 - Could the CDHC and the ADHP work together?
- 

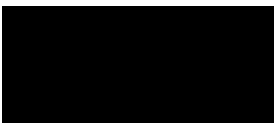


Common ADHP Misperceptions

ADHP would work independently of a dentist

Page 7, Line 279-81

“The advanced practice model, **with its emphasis on dentist and advanced dental hygiene practitioner collaboration**, has the potential to serve populations characterized as low-income, underserved and unserved.”





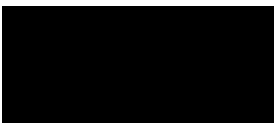
ADHP / Dentist Collaboration and Partnership

Page 6, lines 207-08

“The ADHP will work in partnership **with dentists** to advance the oral health of patients”

Page 6, lines 222-224

“In a collaborative model, **the dental hygienist can serve as the liaison to the dentist** for patient treatment that requires a higher level of expertise.”



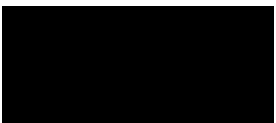


ADHP/Dentist Collaboration and Partnership

Page 11, lines 433-435

3. Case Management

“Establish partnerships with dentists and other healthcare providers for the management of patients with conditions requiring services beyond the scope of advanced dental hygiene practice.”





Coalition Building

Support Pilot Project Funding through HRSA

- National Rural Health Association
 - National Rural Education Association
 - American Public Health Association
/Oral Health Section
- 



ADHP Commentary

“The ADHP, a role comparable to the nurse practitioner, presents a timely and appropriate way to explore new approaches to oral health care delivery...”

Oral Health Section, American Public Health Association, March 2006

“It is time to find a new way to deliver oral health care services; it is time to test the feasibility of the ADHP concept.”

National Rural Health Association, January 2005





ADHP Commentary


“Additional flexibility and capacity of the oral health care workforce is sorely needed.”

*A National Call to Action to Promote Oral Health,
Office of the Surgeon General, June 2000*

“The APHA actively supports innovative programs and practices to help alleviate the great unmet oral health need...”

American Public Health Association, December 2005






“The idea that got the broadest support was expansion of scope of practice to include simple restorative procedures for dental hygienists.”

--Policy Issues in Dental Workforce Diversity and Community-Based Dental Education, November 2004





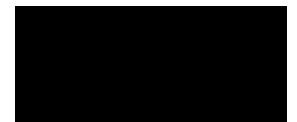
“Current workforce and enrollment trends indicate a strong demand for dental hygienists that will likely continue into the foreseeable future. Dental hygienists will increasingly augment the productivity of the dental team and extend the accessibility of oral health care.”

ADEA Institute for Public Policy and Advocacy,
Dental Education At-A-Glance, 2004



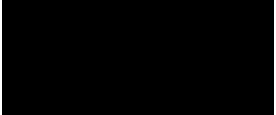
Other Health Professions

- **Occupational therapy – MOT, MA, or MS**
- **Physical therapy – MS, Ph.D**
- **Pharmacy – Pharm.D.**





Level of education for the ADHP

- **Master's Degree**
 - High degree of accountability
 - Recognition for skills and knowledge
 - Societal and professional value
 - Point of entry for all licensed hygienists
 - Flexibility
 - National curriculum framework
 - Credentialing process
- 



ADHP Competencies

ADHP Task Force



ADHP Vision and Mission

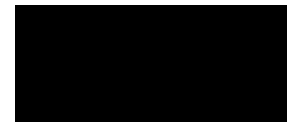
- **Vision Statement**

- Extending primary oral health care to all.

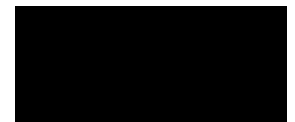


- **Mission Statement**

- To improve the underserved public's health, the advanced dental hygiene practitioner provides access to early interventions, quality preventive oral health care and makes referrals to dentists and other health care providers.



ADHP Draft Competencies





ADHP Draft Educational Domains

- I. Provision of Primary Oral Healthcare
 - II. Healthcare Policy and Advocacy
 - III. Management of Oral Healthcare
Delivery
 - IV. Translational Research
 - V. Professionalism
- 



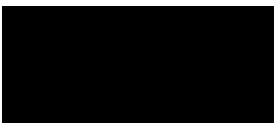
Draft Competencies

- **Tenets:**
 - Multidisciplinary
 - Partnerships
 - Collaboration
 - Referral
 - Consultation
 - Coordinate care
 - Quality assurance
 - Assume responsibility and accountability
 - **Establish partnerships with dentists and other health care providers**
 - **Develop strategic relations with community stakeholders**
- 



Domain I: Provision of Primary Oral Healthcare

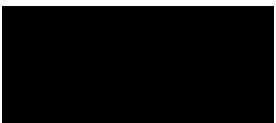
The advanced dental hygiene practitioner demonstrates competence in providing primary oral healthcare and case management for diverse populations. Practitioners use the process of care and target the underserved including those with special needs using a multidisciplinary approach.





Restorative Competency

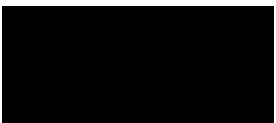
2-7 Provide restorative services that treat infection, relieve pain, promote function and oral health:

- Preparation of cavities and restoration of primary and permanent teeth using direct placement of appropriate dental materials
 - Placement of temporary restorations
 - Placement of pre-formed crowns
 - Temporary recementation of restorations
 - Pulp capping in primary and permanent teeth
 - Pulpotomies on primary teeth
 - Referral
- 



Prescriptive Authority Competency

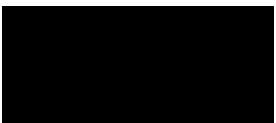
2-13 Prescribe pharmacologic agents for prevention, control of infection, and pain management utilizing established protocols or in consultation with a dentist or physician





Domain II: Healthcare Policy and Advocacy

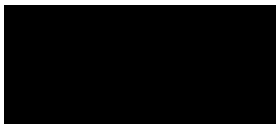
The advanced dental hygiene practitioner contributes to health policies that address disparities in oral health and access to care for the underserved. The practitioner supports and applies health policy at the institutional, local, state, regional, and national levels.





Domain III: Management of Oral Healthcare Delivery

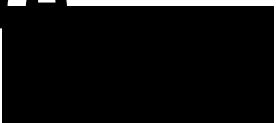
The advanced dental hygiene practitioner integrates practice management, finance principles, and health regulations to analyze, design and develop initiatives that will improve clinical outcomes and the quality and safety of care. The practitioner demonstrates effective business skills for health care and practice environments.





Domain IV: Translational Research

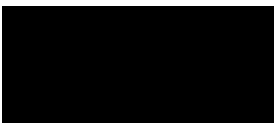
The advanced dental hygiene practitioner uses sound scientific methods and accesses evidence-based information when making decisions and providing patient care. The ADHP translates research findings into practical applications during patient care.





Domain V: Professionalism

The advanced dental hygiene practitioner demonstrates professional behaviors consistent with dental hygiene parameters of care, legal regulations and the ADHA Code of Ethics. The advanced dental hygiene practitioner possesses the values and exhibits behaviors that embody service to the public, professional involvement, and lifelong learning.



	Dental Health Aide Therapist ¹	Registered Dental Hygienist ²	Advanced Dental Hygiene Practitioner ³	Dentist ⁴
Education	<p>New Zealand:</p> <ul style="list-style-type: none"> • Certificate in dental therapy and approved experience in the provision of dental therapy services, OR • Diploma in dental therapy, OR • Bachelor of Health Sciences, OR • Undergraduate dental therapy degree or diploma. • 2400 hours of classroom education and clinical experience • 400 hour preceptorship (or 3 months of experience, whichever is longer) 	<ul style="list-style-type: none"> • Minimum of two academic years of full-time instruction at the post-secondary college-level (or its equivalent) • Certificate, Associate or Baccalaureate degree • 2007: 269 programs (2 certificate-only programs) in the United States 	<ul style="list-style-type: none"> • 18-24 months of full-time instruction (post-baccalaureate) • Master of Science degree 	<ul style="list-style-type: none"> • At least four academic years of instruction (or its equivalent) (post-baccalaureate) • Doctor of Dental Science (DDS) or Doctor of Medical Dentistry (DMD) degree • 58 dental schools in the United States
Preventive Scope	<ul style="list-style-type: none"> • Obtaining medical histories and consulting with other health practitioners as appropriate • Examination of oral tissues • Oral health education and promotion • Scaling (to remove deposits in association with gingivitis) • Polishing • Fluoride sealants 	<ul style="list-style-type: none"> • Obtaining medical histories and consulting with other health practitioners as appropriate • Examination of oral tissues • Oral health education and promotion • Fluoride sealants⁵ • Oral health education and preventive counseling, health promotion • Community dental/oral health • Medical and dental emergencies • Infection and hazard control management • Dental hygiene care for all types of classifications of periodontal disease including patients who exhibit moderate to severe periodontal disease • Fluoride administration 	<ul style="list-style-type: none"> • In addition to RDH scope, see information regarding prescriptive authority. 	<ul style="list-style-type: none"> • Competent in providing oral healthcare within the scope of general dentistry, as defined by the school, for the child, adolescent, adult and geriatric patient including health promotion and disease prevention and periodontal therapy (CODA, Standard 2-25 (c and h))

1-Dental Council of New Zealand, Code of Practice, May 2007

2-Competency Standards and Performance Measures for Dental Therapists, Dental Council of New Zealand

3-Commission on Dental Accreditation, Standards for Dental Hygiene Education Programs

4-Commission on Dental Accreditation, Standards for Predoctoral Dental Education Programs

5-ADHA, Practice Act Overview Chart of Permitted Functions and Supervision Levels by State, 4-4-07, ADHA, Chicago, IL, www.adha.org

6-ADHA, Sealant Application – Settings and Supervision Levels by State, 9-05, Chicago, IL, www.adha.org

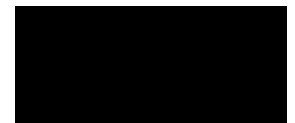
7-ADHA, Direct Access States, March 30, 2007, Chicago, IL, www.adha.org

8-ADHA, Settings Where Dental Hygienists Can Work Other Than the Dental Office, 9-05, Chicago, IL, www.adha.org

The ADHP will...

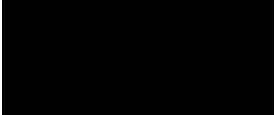


- ...provide diagnostic, preventive, therapeutic, and minimally invasive restorative services to the underserved public and **connect those in need with more advanced care.**



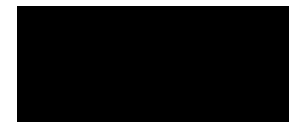


The ADHP will ...

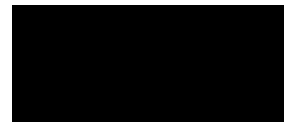
- Provide primary oral health care.
 - Be competent in working with **populations with special needs.**
 - Be able to evaluate oral health needs of **populations with limited access to care.**
 - Develop, implement and monitor dental hygiene care programs for these populations.
 - Participate as a member of a comprehensive health care **team.**
- 

Collaborations...

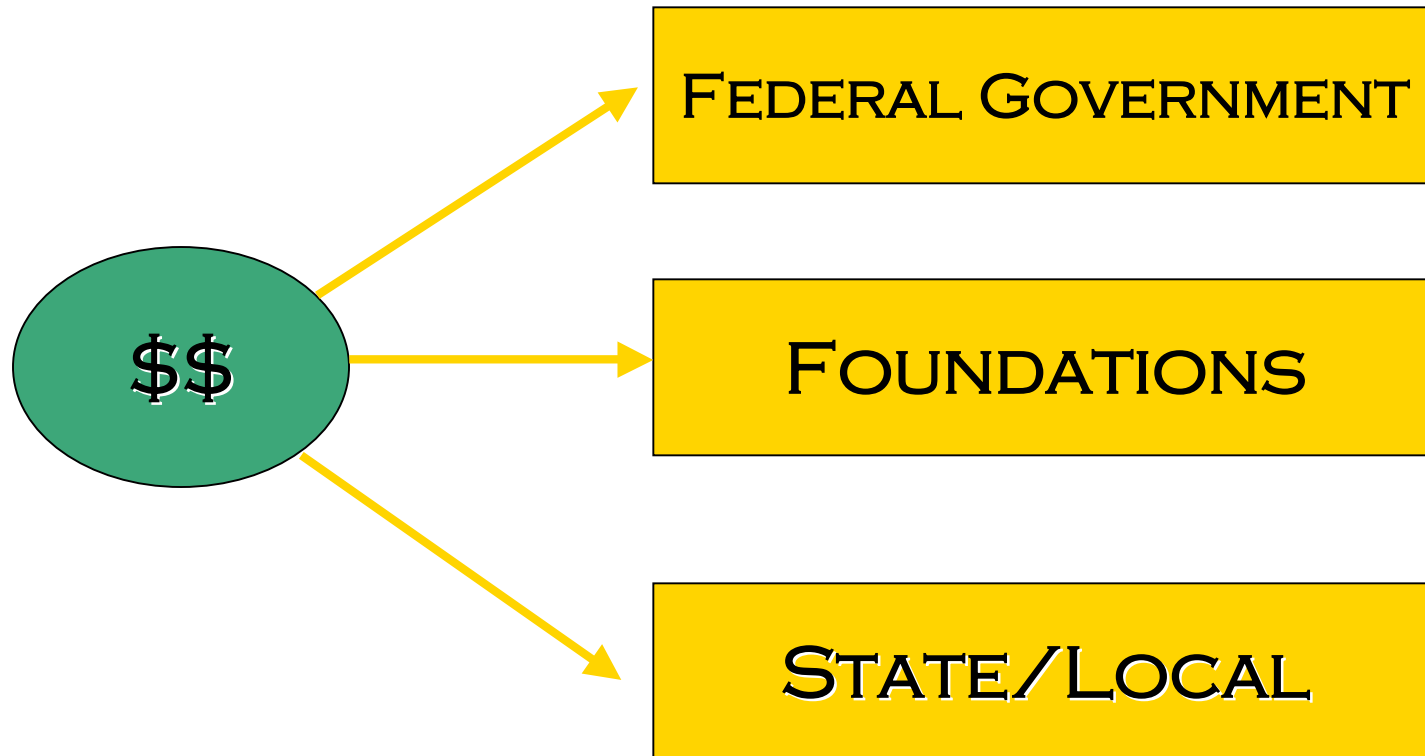
“...the allied health education system must change if it is to produce allied health professionals who can work across all care settings; provide treatment, education, and consultation; and assist in controlling the demand for services, thus containing costs.”



Next Steps...

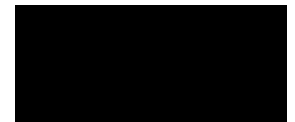
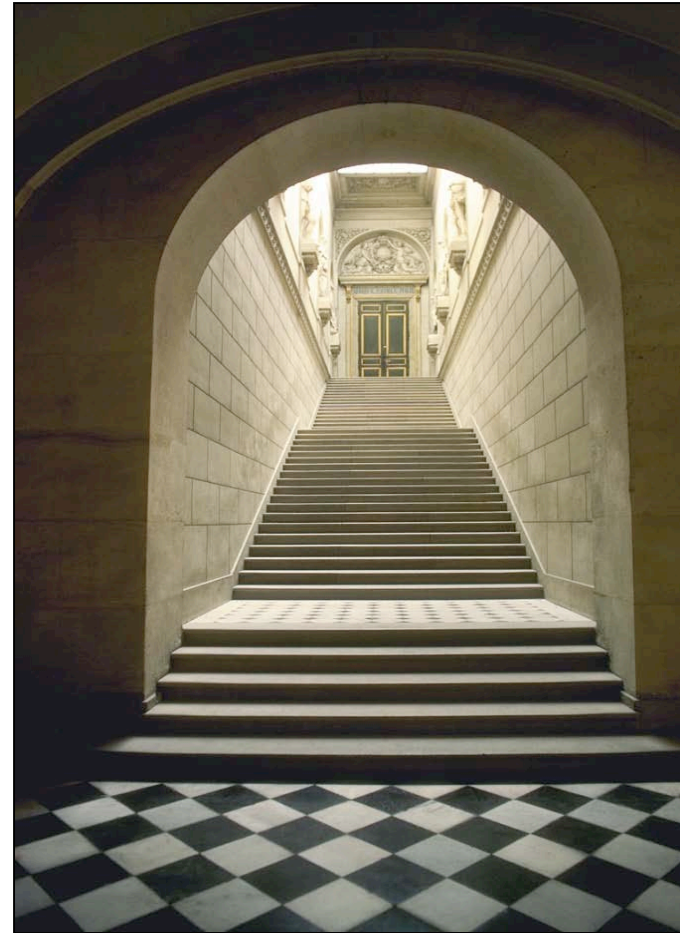


PILOT PROGRAM FUNDING



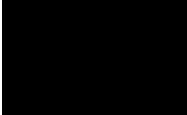
Next Steps ...

- **Response from the Communities of Interest**
- **ADHP Task Force finalization of competencies**
- **Pilot project funding**
- **ADHA BOT**





ADHA Contacts

- Jean Connor – President
 - Diann Bomkamp – President-Elect
 - Ann Battrell – Executive Director
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 - AnnB@adha.net
 - Megan Fitzpatrick – Director, Govt. Affairs
 - 312-440-8942
 - Meganf@adha.net
 - Colleen Schmidt – Director, Education
 - 312-440-8936
 - ColleenS@adha.net
- 



Thank you!

