

Emerging Oral Health Workforce Models

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Healthcare Management Strategies

Emerging Workforce Models

- Expanded Function Dental Auxiliary - EFDA
- Community Dental Health Coordinator - CDHC
- Dental Health Aide Therapist – DHAT (Alaska model)
- Dental Therapist/Advanced Dental Therapist – DT/ADT (Minnesota model)
- Advanced Dental Hygiene Practitioner - ADHP

Emerging Workforce Models

- Emerging is the key concept
- Based on an understanding of core needs
- Often drawn from successful roles in other disciplines
- Identifying appropriate applications
- Developing model programs
- Building training and certification

Emerging Workforce Models

- Members of the Dental Team
- Integrated into delivery system
- Recognize backlog of basic needs
- Recognize existing value system of the patients
- Each member working to the top of their scope of practice and training

Expanded Function Dental Auxiliary (EFDA)

- EFDAs have been around for 4 decades
 - principally in two venues – the Indian Health Service (IHS) and the United States Armed Forces
- Duties vary from state to state
- Most “significant” of expanded functions:
 - Place and contour amalgam, composite and other restorative materials prior to the final setting and/or curing of the material

What is an EFDA?

- Training requirements vary from state to state
- Typically must be CDA; in some states RDH also eligible; no national certification at present
- Educational requirements
 - Community and/or technical colleges
 - Typically certified through ADA /CODA
 - Frequently requires participation of sponsoring dentist
 - Classroom and chair-side training required
 - Nights/weekends

Community Dental Health Coordinator CDHC

- Model developed by ADA (2006)
- National Coordinating and Development Committee (NCDC) established to create training program
- Focus on FQHCs, Indian Health Service, public health clinics, and private practices in underserved areas
- Curriculum focus on health promotion, oral health literacy, community field experience
- Training program approximately 18 months
- Launched in 3 target areas: urban, rural, Native American reservation

What is a CDHC?

- Community health workers with dental skills
- Member of the dental team
- Candidates drawn from communities where they will work
- Focus on education and prevention
- Provide limited clinical services and help connect patients to dentists
- Develop and implement prevention and health promotion programs

Dental Health Aide Therapist

DHAT – Alaska Model

- Program initiated in 2007
- Member of dental team
- Remote/tribal areas of Alaska
- Strong emphasis on prevention
- Recognizes existing value system of the patients
- Local people trained locally
- Two years post high school

What is a DHAT?

- DHATs provide services to patients of all ages
 - Prevention
 - Basic Hygiene
 - Diagnosis and Treatment Planning
 - Radiographs
 - Infection Control
 - Basic Restorative
 - Basic Pediatric
 - Urgent Care
 - Uncomplicated Extractions
 - Community Projects
 - Clinic Management
 - Equipment Repair and Maintenance
 - Referral Process
- CHAP Certification; not licensed

Dental Therapist

(Minnesota Model)

- Two levels of practitioners
- Dental Therapist – Bachelor's prepared
- Advanced Dental Therapist – Master's prepared

Dental Therapist

- Basic preventive services
- Limited restorative services
- Extractions of primary teeth
- Bachelor's degree required
- Collaborative management agreement
- All restorative services, extractions would require the presence of a dentist

Advanced Dental Therapist

- Master's degree required
- Administer all services of a Dental Therapist without requirement for onsite supervision
- Clinical practice required (2000 hours)
- Patient evaluation
- Assessment (not diagnosis)
- Treatment planning
- Perform non-surgical extractions of permanent teeth

Advanced Dental Hygiene Practitioner (ADHP)

- ADHA is working to establish the ADHP
- Must be dental hygienist (licensed)
- Educated at the Master's degree level
- ADHP will require licensure
- Provide both preventive and limited restorative services
- Provide care in public health settings—schools, clinics, and long-term care facilities, etc.

Emerging Workforce Models

- Selection and implementation of a model should be based on:
 - Individual regional/community needs
 - Availability of infrastructure to support practice
 - Access to resources for education
 - Cost of training
 - Availability of reimbursement for services
 - Ability to evaluate impact

