Dental Therapy/Advanced Dental Therapy and Dental Hygiene

Model For Dual Licensure

Responding to an Access Need

Colleen Brickle, RDH, EdD  Suzanne Beatty, DDS  Jayne Cernohous, DDS

Introduction

POLITICS & POLICY HIGHLIGHTS

2009 Session: Two Bills Introduced
1. Safety Net Coalition: "Nurse Practitioner" model to provide treatment under the direction of a Collaborative Management Agreement (CMA) when dentists are not available
2. MDAAJ of M: "Physician Assistant" model with dentist on site to do diagnosis and supervise treatment; stated only the School of Dentistry could train/educate

LEGISLATIVE COMPROMISE

• Licensed/Certified by the Board of Dentistry
• Two levels: Basic Dental Therapist (licensed) and Advanced Practice (certified)
• Education programs approved by the BOD
• Basic: Baccalaureate degree
• Advanced: Master’s degree
• Supervised by a dentist through a CMA
• Practice limited to underserved patients and populations

STATE LAW PARAMETERS

• Dental Therapist (DT): Select services allowed under general supervision
  - Services allowed under indirect supervision with a CMA
  - Basic: Baccalaureate Degree required
  - Advanced: Master’s Degree required
• Advanced Dental Therapist (ADT): All DT services under general supervision
  - Additional services under general supervision with a CMA
  - Master’s Degree required

Planning

MS: ADT PROGRAM DISTINCTIONS

• Dental hygienists: licensed, experienced and practicing in the profession
  - Students begin program already mastered in a wide range of competencies
• Educated to have sound public health perspective, to be competent in care management as well as perform specific oral procedures
  - Teledentistry is incorporated into the clinical course competencies to prepare for general supervision
  - Communication with dentists in alternative practice settings

ADMISSION CRITERIA

• Baccalaureate degree, dental hygiene licensure, prerequisite courses, essay, portfolio and an interview by invitation

EDUCATIONAL PROGRAM

• Degree: Master’s of Science: Advanced Dental Therapy
  - Curriculum leads to dental therapy licensure and certification in advanced dental therapy
• Forty-six credits: Length: 26 months*
• Full-time commitment expected

*Additional 2000 clinical hours and a certification exam for ADT credential

CLINIC LOCATIONS:

Each clinic setting has calibrated community faculty members who use the same evaluation criteria for each clinic session

Results

BOARD OF DENTISTRY PROGRAM APPROVAL

• August 2010 the DT component of the MnSCU program received initial provisional approval
• February 2011 the ADT component of the MnSCU program received initial provisional approval

MOST COMMON DT/ADTSERVICES PROVIDED

Cohort One students provided care during 1114 visits. The most common procedures:

<table>
<thead>
<tr>
<th>PROCEDURE</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oral Evaluation /Assessments</td>
<td>470</td>
</tr>
<tr>
<td>Individualized Treatment Plans *</td>
<td></td>
</tr>
<tr>
<td>Class 1-5 restorations</td>
<td>1692</td>
</tr>
<tr>
<td>Amalgam, Composite, Glass Ionomers</td>
<td></td>
</tr>
<tr>
<td>Stainless Steel Crowns Preparation and Restoration</td>
<td>113</td>
</tr>
<tr>
<td>Pulpotomies</td>
<td>23</td>
</tr>
<tr>
<td>Extraction of Primary Teeth</td>
<td>96</td>
</tr>
<tr>
<td>Extraction of Permanent Teeth *</td>
<td>94</td>
</tr>
<tr>
<td>Grand Total</td>
<td>2490</td>
</tr>
</tbody>
</table>

Other DT procedures:

Emergency palliative treatment of dental pain, traumatic restorations, placement and removal of space maintainers, cavity preparation and restoration, indirect and direct pulp capping, stabilization of reimplanted teeth, brush biopsies, repair of defective prosthetic devices, recementing of permanent crowns

Other ADT procedures:

Provide, disperse, and administer analgesics, anti-inflammatories, and antibiotics

Cohort Two – Graduate May 2013

WORK TO BE DONE

Program Evaluation
The Minnesota Department of Health and the Minnesota Board of Dentistry to begin evaluation activities by the end of 2011

Challenges
• Acceptance by practicing professionals and the public
• Support for educational institutions
• Accreditation
• Student scholarships
• Third party payers
• Engage in continuous communication and education

Future cohorts at other MnSCU Campuses
• Expand DT/ADT program to out-state MnSCU dental hygiene programs to meet rural needs
• Strong applicant pool for Cohort Three

Conclusion

STRENGTH OF METROPOLITAN STATE UNIVERSITY AND NORMANDALE MODEL

Dual Licensure
• Licensed as both a dental therapist and a dental hygienist
  - General Supervision with a CMA and teledentistry are critical components

Expansion of the dental team
• Serve communities and treatment settings with a CMA
  - General Supervision with a CMA and teledentistry are critical components

Of all the forms of inequality, injustice in health care is the most shocking and inhumane.
—Martin Luther King Jr., 1966