Clinical Outreach: Developing a Self-Sustaining Model

W. Piskorowski, DDS
M. Fitzgerald, DDS, MS
H. Hammerink, DDS
M. Lantz, DMD, MSD, PhD
Paul Rouseau, Administrative Specialist
A Diversified Portfolio of Outreach Experiences

Private Sector
- Generalist
- Specialists
- Hospitals

Local/State/Federally Supported
- FQHC
- MCDC
- IHS
- Migrant programs
- School based
- Dental Hygiene programs

International
- Alumni Sponsored
- Group/Organization Sponsored
- School Partnership Sponsored

Special Programs
- Acute managed care
- Special needs patients
- Veterans
- Homeless

Internal Rotations
- Restorative dentistry
- Public health
- Oral surgery
- Periodontics
- Prosthodontics
- Orthodontics
- Research
- Hospital dentistry

Revenue Sharing

Grant Supported Pilot Programs

Affiliation Agreement
- Same for all sites
- Describes:
  - Term
  - Financial commitments
  - Definition of responsibilities
  - Service to communities

Volunteerism
Strategic Planning for Your Program

Mark Fitzgerald, DDS, MS
Outcomes

• Understand the strategic planning cycle and how it relates to outreach program development

• Discuss strategic planning challenges common for outreach programs

• Begin a strategic plan for your outreach program
Strategic Planning Cycle

Assessment → Goal Setting

Goal Setting → Strategies

Strategies → Implementation

Implementation → Measurement

Measurement → Assessment
Goals

• Will your Outreach Program:
  • Supplement existing experiences/skill development or augment experiences/skill development?
  • Develop skills or refine skills?
  • Expand capacity of school clinic space?
  • Provide similar experience for all participants?
    • All students?
    • A select few?
  • Provide tailored experience for participants?
  • Assess competency in key areas?
Goals

- Types of goals
  - Programmatic
    - Meeting mission of School / University / State
    - Addressing needs of School / University / State
  - Curricular
    - Key component of the curriculum or just “nice to have”
    - Needed to address or meet specific CODA Standards?
Goals

• Things to consider when looking at goals
  • Are they consistent with the mission of the school or program?
  • Is quality of experience important?
  • Are resources required worth the value gained?
  • Are they achievable? If so – how will you know?
  • Are they time delimited?
Strategies

• How will you implement your goals?
  • Who are the players?
    • What are their needs?
    • Where are the Win-Win opportunities?
  • What resources do you have or need?
    • Time
    • Money
    • Facilities
  • How will you measure your outcomes?
Implementation

• Is there a logical sequence?
  • Most important first?
  • Easiest to achieve first?
  • Greatest gains first?

• Are there goals that are inter-dependent?
  • Can’t achieve one without the other
  • Must achieve one before the other
Measurement

• What are you going to use as evidence that you have achieved your goals?

• Key ingredients:
  • Specific – closely associated with goal
  • Measurable (quantitative rather than subjective)
  • Ease
  • Reliability
  • Reproducible
  • Time Delimited
Measurement

• Challenge: Developing ideal measurements

• Solutions:
  • Write goals with measurement in mind
  • “Reverse Engineer” the goal - Re-write the goal to make it measurable
  • Create benchmarks that can be used to track progress towards goal achievement
    • “Proxy” indicators of achievement
    • Can help “quantify” otherwise subjective measurements
Measurement

- Can they be realistically measured?
  - How much effort should you put into measurement?
    - Time
    - Money
  - Do you have the ability to measure?
    - Access to the information
    - Technology to collect and retrieve
Measurement

• Common instruments:
  • Tally of procedures completed and patients seen
  • Pre- and Post- experience measurements
    • Perceptions – Surveys (PPI)
    • Knowledge – Tests, Surveys (PPI)
    • Clinical skills – Competency tests
  • Student reflective essays on experience
Assessment

• Once you have all the measurements, what are you going to do with them?

• Common mistake: Collect the data then worry about what you will do with it
  • Decide HOW you will look at the data when you choose WHAT you will be collecting.

• Helps to reduce common errors:
  • Collecting too much or not enough data
  • Collecting the wrong data, data at the wrong time or data in the wrong format
Some examples:

• Goal: Students will be prepared to succeed in their Outreach Rotations
  • Measurement: Survey of students after rotation
  • Benchmark: 85% or “Agree” or “Strongly Agree” responses to question regarding preparedness
  • Results: 93% responded “Agree” or “Strongly Agree”
  • Assessment: Goal achieved
Some examples:

• **Goal:** Outreach experiences will increase # of students choosing dental practice opportunities dedicated to serving the underserved as first career paths after graduation
• **Measurement:** Survey of students 1 year after graduation
• **Benchmarks:** 50% increase over baseline career path choice prior to start of Outreach Program
• **Results:** Increase from 2% baseline to 7% after year 4
• **Assessment:** Goal achieved
Some examples:

- **Goal:** Outreach experiences will increase student confidence in treating underserved patients
  - **Measurement:** Survey of students before (baseline) and after rotation
  - **Benchmarks:** 50% increase over baseline
  - **Results:** Increase from 52% confidence rating at baseline to 82% after rotations
  - **Assessment:** Goal achieved
Completing the Loop: Goal Setting

- **Successes**
  - Expectations too low?
  - Easier ways to achieve?

- **Failures**
  - Expectations too high?
  - What is missing?

- **Missed opportunities**
Putting it to work

• **Group activity:**
  
  • *List two goals for your outreach program*
  
  • *Develop one strategy to measure attainment of each goal.*
    
    • *Define a measurement for each goal*
    
    • *Define a benchmark for each measurement*
How did it go?