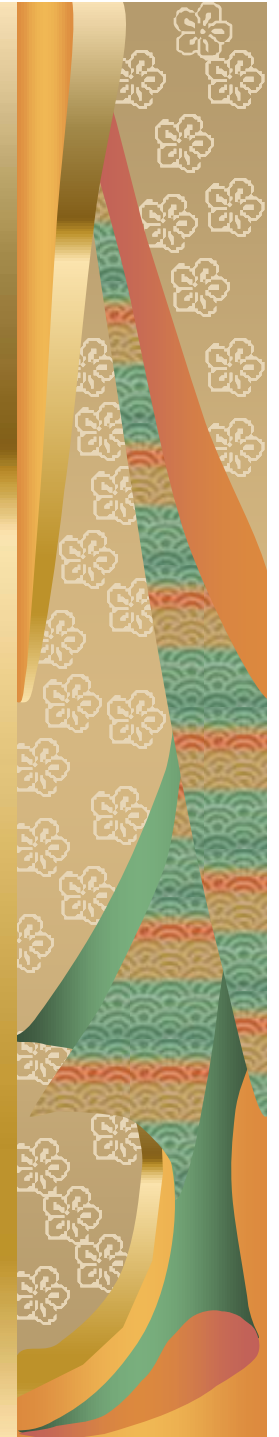


# Filling the Dental Workforce Shortage by Helping Families Enter the Workforce

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# Outline

- Current workforce crisis
- History of developing program
- Program design
- Lessons learned
- Conclusion



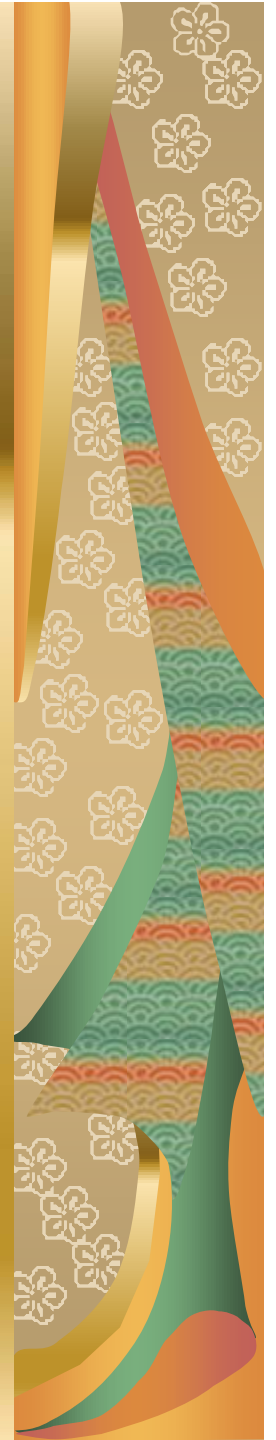
# Current Crisis in Recruiting Oral Health Professionals

# National Crisis

- US faces serious oral health workforce shortage
- Too few dentists to care for publicly funded and special needs patients
- 6,610 - 9,228 oral health practitioners needed to serve nearly 31 million underserved people live

# RI Dental Workforce Shortage

- No dental school in the state
- Only dental hygienist school in state closed
- RI needs 614 additional dental assistants by 2012
  - 88 new dental assistants needed each year
- Two in-state programs trained dental assistants.
  - CCRI has a nine-month program with graduation rate of 24 /year.
  - New for-profit program opened in 2005 with tuition at \$11,000/year.





# RI Dental Assistants

- Act as a dentist's "third hand"
  - Pass instruments and materials during the procedure
  - Keep the patient's mouth dry and clear
  - Help patients feel comfortable before, during and after dental treatment.
- RI does not require any certification or licensing for dental assistants to practice
  - The state only requires licensing to use radiology equipment.
  - Many dentists simply train interested individuals themselves.



# History of Program



# 3-Year Development

- In 2003, RI Department of Human Services Center for Child and Family Health (CCFH) won RWJF grant
  - One component to expand dental workforce
- CCFH, RIté Works, RI Kids Count, RI Foundation met in 2003 to develop program to train dental assistants
- Planned to recruit students from RIté Works' Family Independence Program (FIP)
  - Federally funded grant program that provides employment and retention services for up to 24 months for families receiving Medical Assistance
- Originally set up as training project in which dentists would have to hire students after internship completed



# Locating a Site

- Leading obstacle throughout the development of the program
- Program's existence hinged on the use of a facility, since so much of the training would be hands-on.
- Originally the workgroup planned for CCRI to be the site.
  - ❖ CCRI bowed out of the program, stating that it had liability concerns
  - ❖ Safety net providers encouraged the program, but their operatories were too consistently in use
  - ❖ Cranston Adult Ed agreed to be the site, but backed out
- Group decided to build operatory
- Built at the RI Free Clinic which provides free care
  - ❖ It would use the operatory and provide free dental care



# Building an Operatory

- The room to house the clinic was dilapidated, with old carpeting and peeling wallpaper.
- It did have a sink, was large enough, was on a bus line, and the building was around the corner from the Rite Works office.
- CCFH put up another \$6000 to rehab the room and found and negotiated with contractors.
  - Building permit had to be obtained,
  - Walls had to be stripped and painted,
  - Carpet had to be ripped up and new flooring put down,
  - Insulated closet had to be installed,
  - Complicated plumbing system for the chairs had to be designed and installed,
  - Dental equipment had to be installed
- Since there would be no further funding from CCFH, CCFH staff stripped and painted the walls, pulled up the carpeting, and arranged to have paint donated from a local hardware store.



# Numerous Partners

- CCFH: Coordinated the project, located and set up the clinic, supplied bulk of funding, located additional funding, brought in partners
- Rite Works: Provided strategic direction and guidance, provided students, supplied funding, taught portion of course
- RIC Outreach Programs: Coordinated logistics of pilot class, including instructor and dental internships
- Rhode Island Free Clinic: Provided space for class and operatory, paid contractors
- Rhode Island Dental Association: Provided advice, did outreach to members, facilitated grant and equipment donations
- Rhode Island Foundation: Provided guidance and advice, held grant funds
- Rhode Island Kids Count: Provided guidance and advice
- CCRI: Enrolled students and DAPP instructor into radiology class
- St Joseph's Dental Clinic: Provided internship site for two students
- Samuels Dental Clinic: Provided guidance and advice
- Crossroads: Conducted students' final clinical exam
- Providence Rescue Mission: Provided guidance and advice

# Program Design



# Dental Assistant Partnership Program (DAPP)

- Pilot project
- 8-week course
- Designed to help parents from low-income families enter the workforce as dental assistants.
- Classroom and lab work in an operator
- Internships in volunteer dentists' dental offices.
- Each intern received a stipend for their work in the dental offices.
- Interns recruited from the Family Independence Program (FIP)
  - Dentists recruited from RI Dental Association members, safety net providers, and newspaper ads.
- Pilot class graduated in June 2006



# Funding for the Pilot

- Most funding (\$25,380) came from the CCFH.
- Central Rhode Island AHEC donated a grant of \$4,000.
- Sullivan-Schein Dental Equipment Company donated equipment of \$15,000 plus labor.
- Rlte Works covered the cost of CCRI's radiology course.
- New England Dental Equipment donated equipment and labor worth over \$2000.
- Adler's Paint and Hardware donated paint and painting supplies.
- Private practices donated equipment and supplies worth over \$20,000.



# Division of Labor

- RIC was in charge of finding and hiring the instructor, ordering supplies (list provided by CCFH), lining up dentist for internships and paying rent.
- Rite Works would find and screen the interns and teach a portion of the class.
- CCFH would provide funds, prepare the clinic, develop a supply list, and locate additional equipment.



# Supplies

- Cost of buying supplies for a private practice could run up to \$10,000
- Supply budget set at \$1500
- Private dental offices, the Providence Rescue Mission, and the New England Dental Equipment Services donated supplies and equipment.
- Donations included a wall x-ray, a panorex x-ray, a dental chair, handpieces, tabletop vibrator, dentist and assistant stools, a dental cart, an autoclave, two sterilization units, curing lights, a model trimmer, and an ultrasonic cleaner.
- All donations were made to the RI Free Clinic, which made the donations tax deductible.



# Schedule

- Week 1:
  - 30 hours classroom—  
job/life skills, M-F
- Week 2:
  - 30 hours classroom and  
lab, M-F
- Week 3:
  - 30 hours classroom and  
lab, M-F
- Week 4:
  - 30 hours classroom and  
lab, M-F
- Week 5:
  - 18 hours classroom and  
lab, M, W, F
  - 12 hours internship in  
dental office, T, Th
- Week 6:
  - 18 hours classroom and  
lab, M, W, F
  - 12 hours internship in  
dental office, T, Th
- Week 7:
  - 18 hours classroom and  
lab, M, W, F
  - 12 hours internship in  
dental office, T, Th
- Week 8:
  - 18 hours classroom and  
lab, M, W, F
  - 12 hours internship in  
dental office, T, Th



# Tests

- Weekly written quizzes
- No final written exam.
- Practical final exam with a practicing dentist and a certified dental assistant.
  - ❏ Instructor prepared charts with x-rays for different procedures.
  - ❏ Dentist came in, looked at the chart, and said “we need an MOD” and then the intern did what was required for that procedure, including PPE.
  - ❏ Interns either passed or failed.
  - ❏ Two students did very well, two students were fair, and one student was poor.

# Weekly Quizzes

- Charting quizzes administered at random for reinforcement.
- Charting, anatomy of the tooth, definitions, dates of eruption
- Written description of setting up trays, questions on use of amalgam
- Landmarks of the face and oral cavity via fill in the blank and multiple choice
- Disease transmission and infection control via fill in the blank and multiple choice
- Principles and techniques of disinfection via fill in the blank and multiple choice
- Principles and techniques of sterilization via fill in the blank and multiple choice
- Overview of the dentitions via fill in the blank and multiple choice
- Principles and techniques of sterilization via fill in the blank and multiple choice
- Clinical proficiency evaluations were generally performed weekly on an informal basis.



# Budget

## Program Budget

Staff	\$2,702
Utilities (rent)	\$3,000
Student Supp.	\$6,041
Uniforms, shoes, books	
lab supplies	\$1550
graduation supplies	\$200
Student stipends	\$6,075
<i>Program total</i>	<i>\$19,568</i>

## Contractor Budget

Plumber	\$2,850
Electrician	\$345
Carpenter	\$2,438
Supplies	\$537
Equipment	\$4,000
<i>Contractor total</i>	<i>\$10,170</i>

**Grand total**      **\$29,738**



# Screening & Requirements

- At least a 9th grade reading level
- Clean criminal background check
- Documentation of MMR vaccinations and Tb testing
- Strongly encouraged to receive tetanus and hepatitis vaccinations.
- Costs of all vaccinations were covered by Medical Assistance
- Tb testing was given at a free clinic.



# Student Profiles

- 7 students started Program
  - End of week 1, one student dropped out
  - Beginning of week 5, one student asked to leave
- Single mothers on FIP
- Ranging in age from 18 years old to the mid-thirties
- All reported looking on the DAPP as an important opportunity.
  - One said on the first day of class that she planned to be off “welfare” in eight weeks, the length of the program.





# Outcomes of Graduating Students

- Two left the state within a month of graduation
  - Both reported planning to get jobs as dental assistants in their new state.
- Remaining three:
  - One was hired as a dental assistant within two months of graduation.
  - Second student interviewed and reported finding work
  - Third dropped out of touch with the program

# Lessons Learned



# Challenges

- Most groups involved had never worked together before
  - Time had to be spent developing trust and working relationships.
- Finding a site was an enormous obstacle.
- Original focus of “training” locked the program into several conditions that were untenable.
  - Dentists did not sign up because of their reluctance with the “pre-hire” condition.
  - By changing the focus from “training” to “work readiness,” many of these problems were resolved.
- Once the Cranston Adult Education Program backed out, it was necessary to find alternative funding for the pilot and another vendor.
- Liability was a huge concern at first, which dissipated once RIC became the vendor and covered liability.

# Challenges, cont.

- The class was too short at 8 weeks
  - ❏ They hit all the topics but could not go in depth.
  - ❏ There was some wasted time in class, as questions took them off tangent.
  - ❏ To stay on track and on time, prepare syllabus for each class.
- Some students were physically too big for the stools
- No time was allotted to do lesson prep.
  - ❏ Instructor invested a lot of time setting up the operatory and organizing
  - ❏ 35 hours per week: 30 hours teaching and 5 hours lesson prep.

# Lesson: Internships

- Internships are critical
  - Gives real-world work experience
- Make the internship process as painless as possible for dentists
- Do not require that dental practices hire the interns.
- Screen dentists to find those who are willing to teach.
- Ensure that students know which vaccinations and screening they must obtain and where to get them
- Include as much hands-on work for students as possible before they go on their internships



# Lesson: Budget

- Use a fully functional clinic and include repair costs in the budget.
- If you must build a clinic, figure supply and equipment costs into the budget.
- Clarify before the equipment is donated whether installation costs will be included.
- Dentists are happy to give away used equipment

# Lesson: Testing & Policies

- Bring in a dentist to do a midterm to watch each intern and gauge where each one is performance-wise
- Give the class the grading and homework policies from the start.
  - Determine how many tests they would have to pass in pass the class.
  - Set other rules, such as attendance policy, right away when the class starts.

# Lesson: Support Network

- Support systems will be critical to their success.
- Those who had a support network, such as family or friends, were more successful.
  - One intern had support and the other did not.
  - Both interns were smart and determined to do well, but the support made it easier for one of them to really shine.
- Strong screening for this is imperative
- Lack of reliable transportation was a problem
- Students may take advantage of instructor and other staff





# Miscellaneous Lessons

- The books were fabulous: Elsevier
  - Each student should have an instrument flip book.
- Order supplies early enough to set them up before classes begin
- Be careful not to have too large a class
  - 6 students ideal
- Assign one person to shepherd the project through the obstacles from pre-implementation to graduation

# Conclusion

- DAPP brought together many groups that had either not worked together or had only been loosely connected.
- Five women on FIP received skills that can help them obtain well paying jobs with good employment options.
  - Taught them that they could perform well in professional and school settings.
- The pilot showed where changes were needed, such as lengthening the course and performing a more rigorous screening of interns and dentists.
- RI Free Clinic has a dental clinic it can use in the future
  - Uninsured adults with nowhere else to turn will be able to obtain good dental care.