



2024 National Combined Councils Virtual Meeting

*National Oral Health Council (NOHC)
Leveraging Human Capital to Improve Health*

March 19, 2024, 1:00 – 2:30 EST

THE NATIONAL ORAL HEALTH COUNCIL

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- Dr. Flauryse Baguidy (Great Plains)
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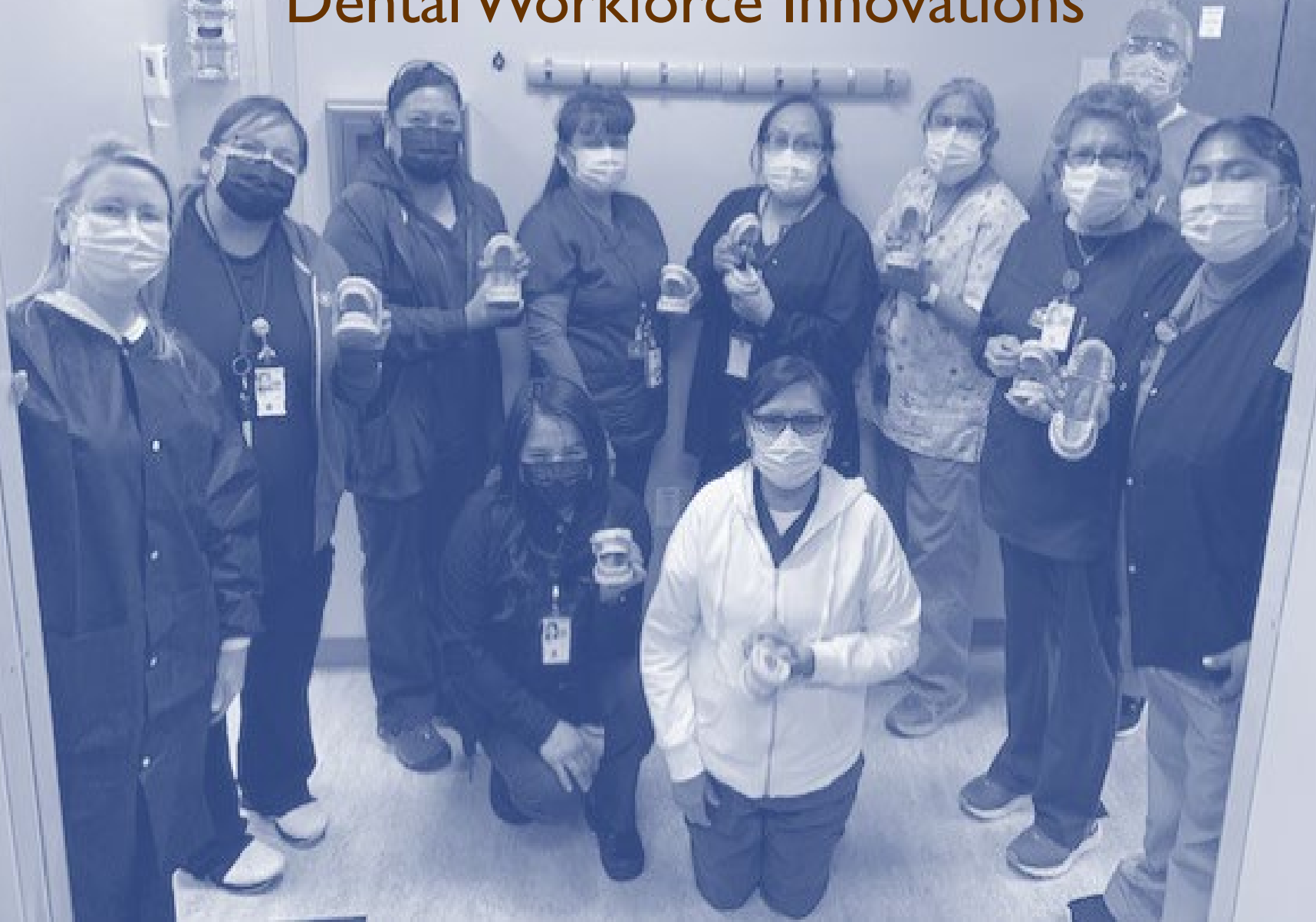


Overview

- Leveraging Workforce to Improve Access to Dental Care: Dental Workforce Innovations
- Leveraging Workforce to Implement Multi-Directional Integration of Oral Health, Behavioral Health, and Primary Care

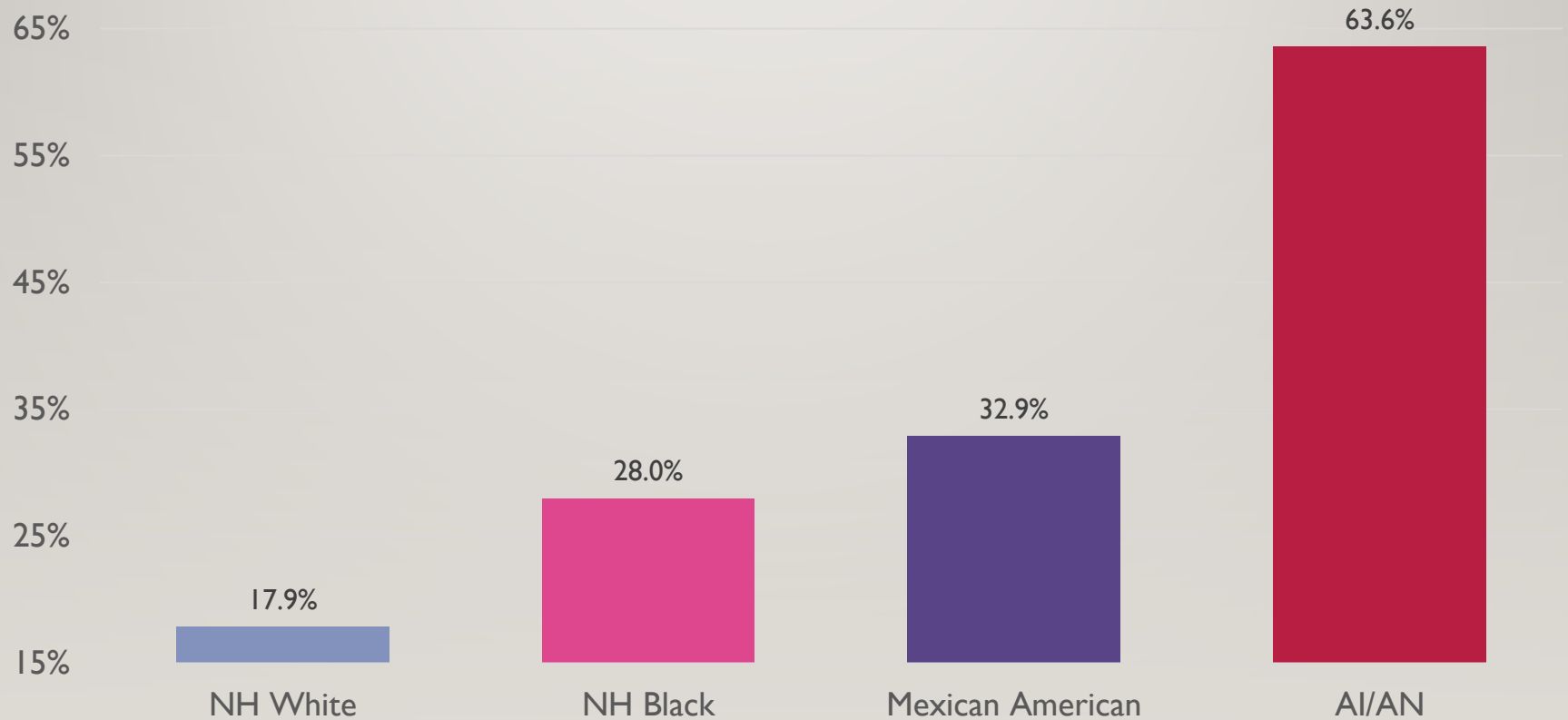


Dental Workforce Innovations



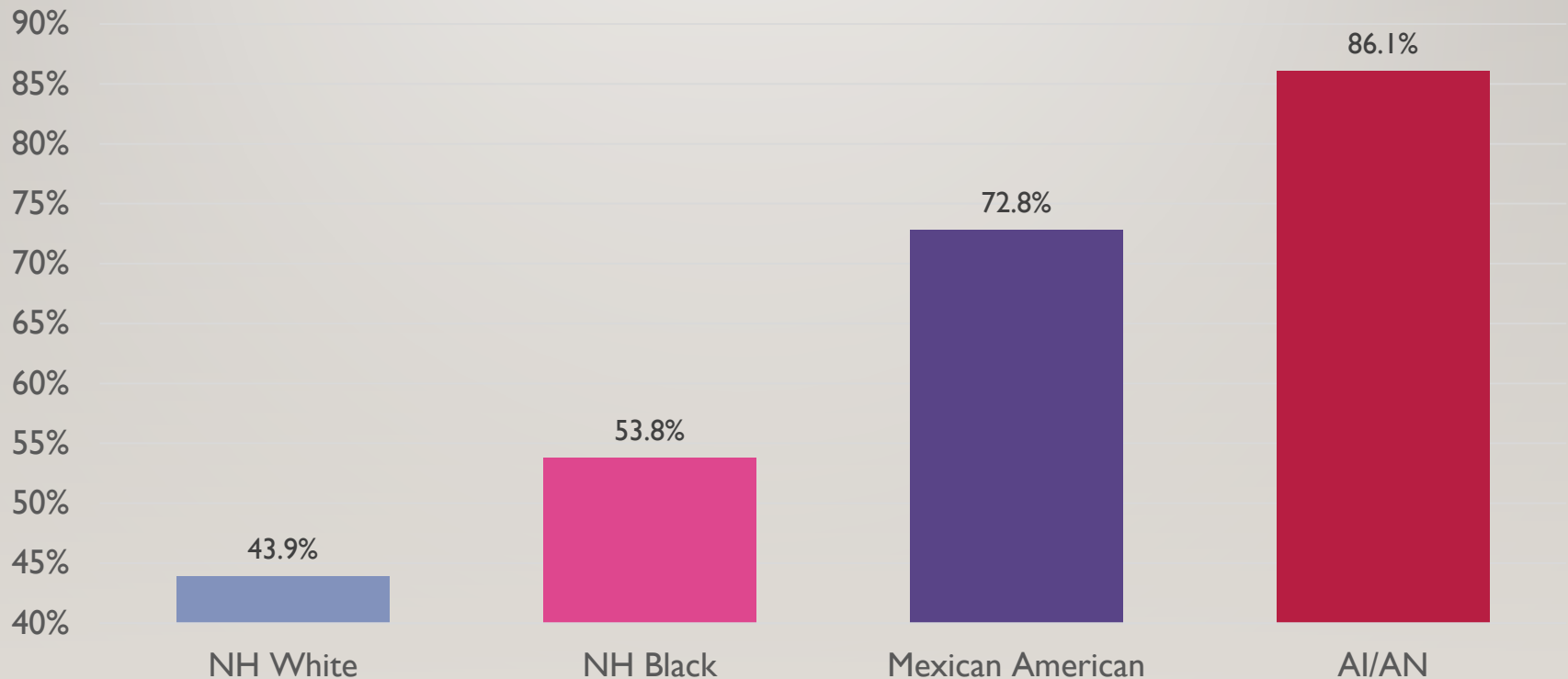
Why do we need workforce innovations?

Percentage of children ages 2-5 with dental caries, 2011-2016 (AI/AN 2019)



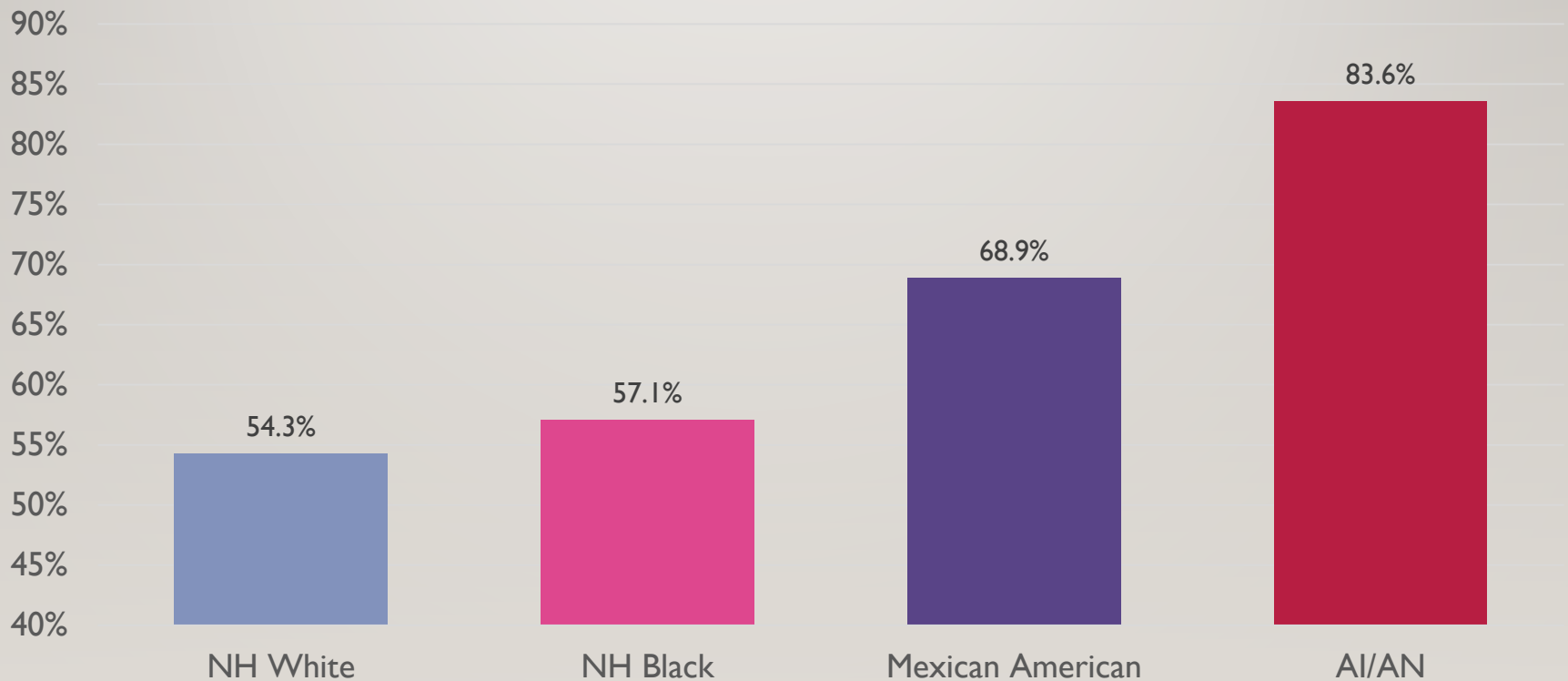
Why do we need workforce innovations?

Percentage of children ages 6-8 with dental caries, 2011-2016 (AI/AN 2017)



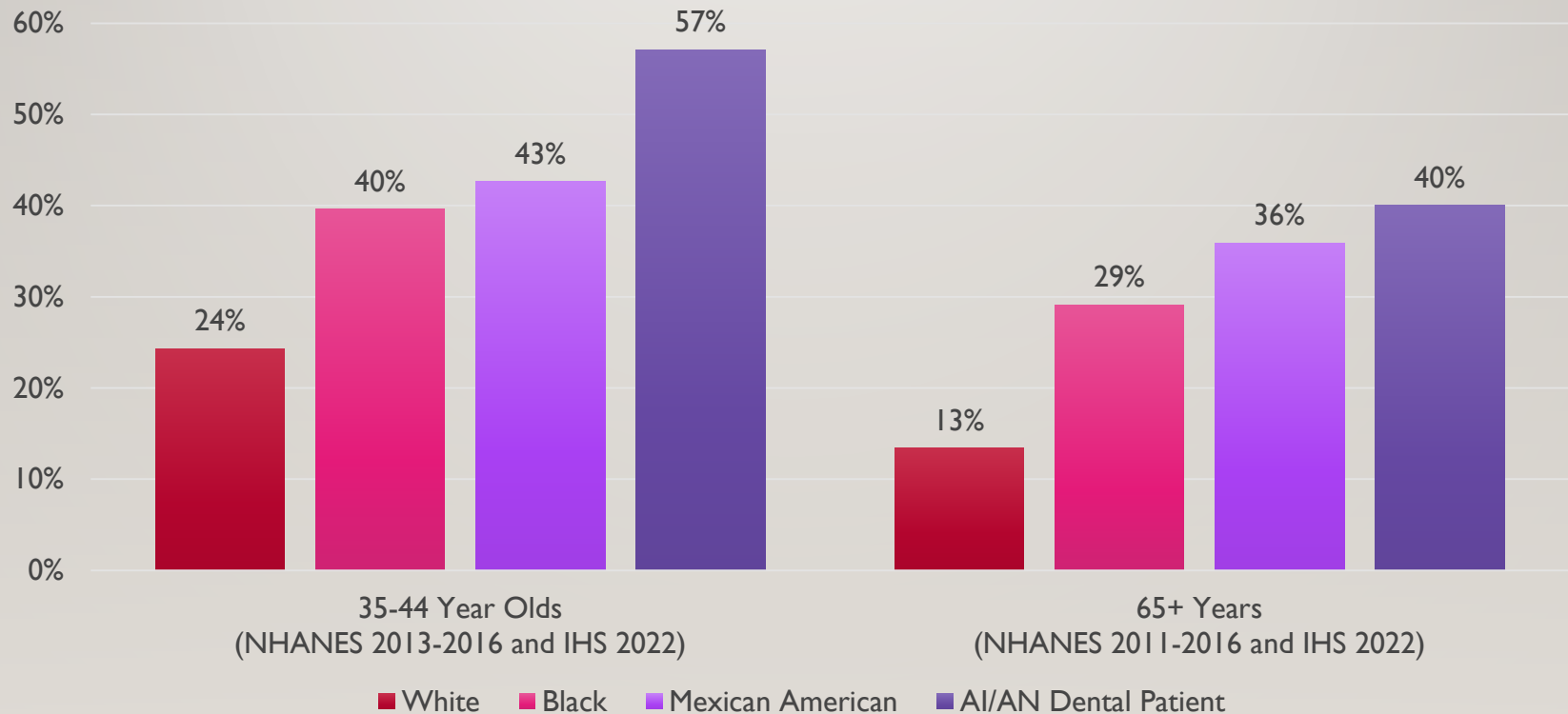
Why do we need workforce innovations?

Percentage of youth ages 12-15 with dental caries, 2011-2016 (AI/AN, 13-15 2020)



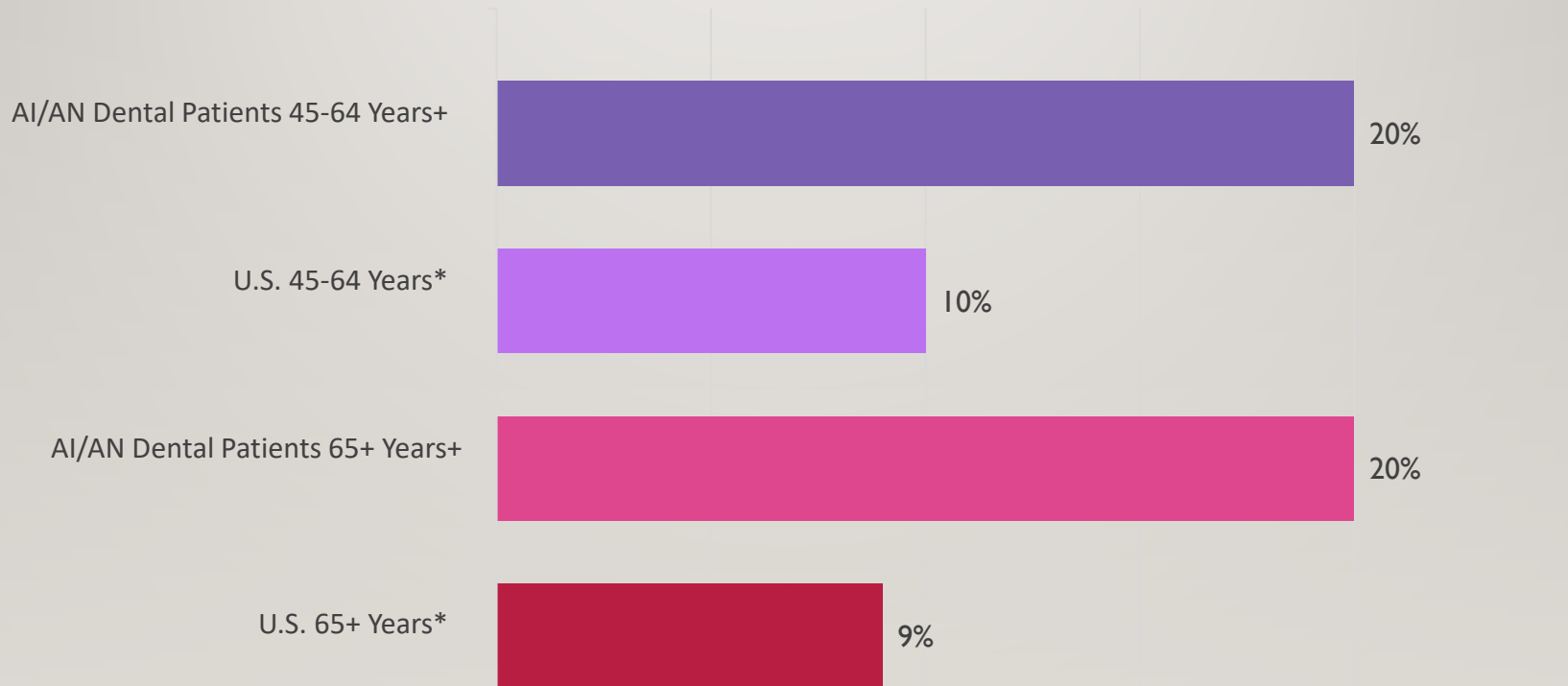
Why do we need workforce innovations?

Percentage of Adults with Untreated Dental Caries by Age Group and Race/Ethnicity



Why do we need workforce innovations?

Percentage of Adults with Severe Periodontal Disease by Age Group



IHS Dental Workforce Models

1961-present
Expanded Function Dental
Assistants (Perio and
Restorative
EFDAs)

2004-present
Dental Health Aides
(DHAs)

1980-present
Community Health
Workers &
Representatives (CHRs)

2022-present
Community Dental Health
Coordinators
(CDHCs)

1990s
Associate/Collaborative
Practice Dental Hygienists

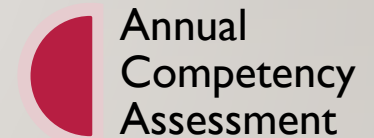
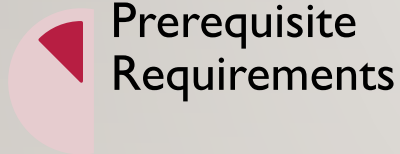


Expanded Function Dental Assistants (EFDAs)

- **Periodontal EFDA:** adult and child dental cleanings using an ultrasonic instrument
- **Restorative BASIC EFDA:** Basic dental fillings, mostly using dental amalgam (silver fillings)
- **Restorative ADVANCED EFDA:** Advanced dental fillings, including larger dental amalgam (silver) fillings and composite resin (tooth colored) fillings
- **Restorative COMPOSITE-ONLY EFDA:** Advanced composite resin (tooth colored) fillings



EFDA Training Requirements



Online Modules

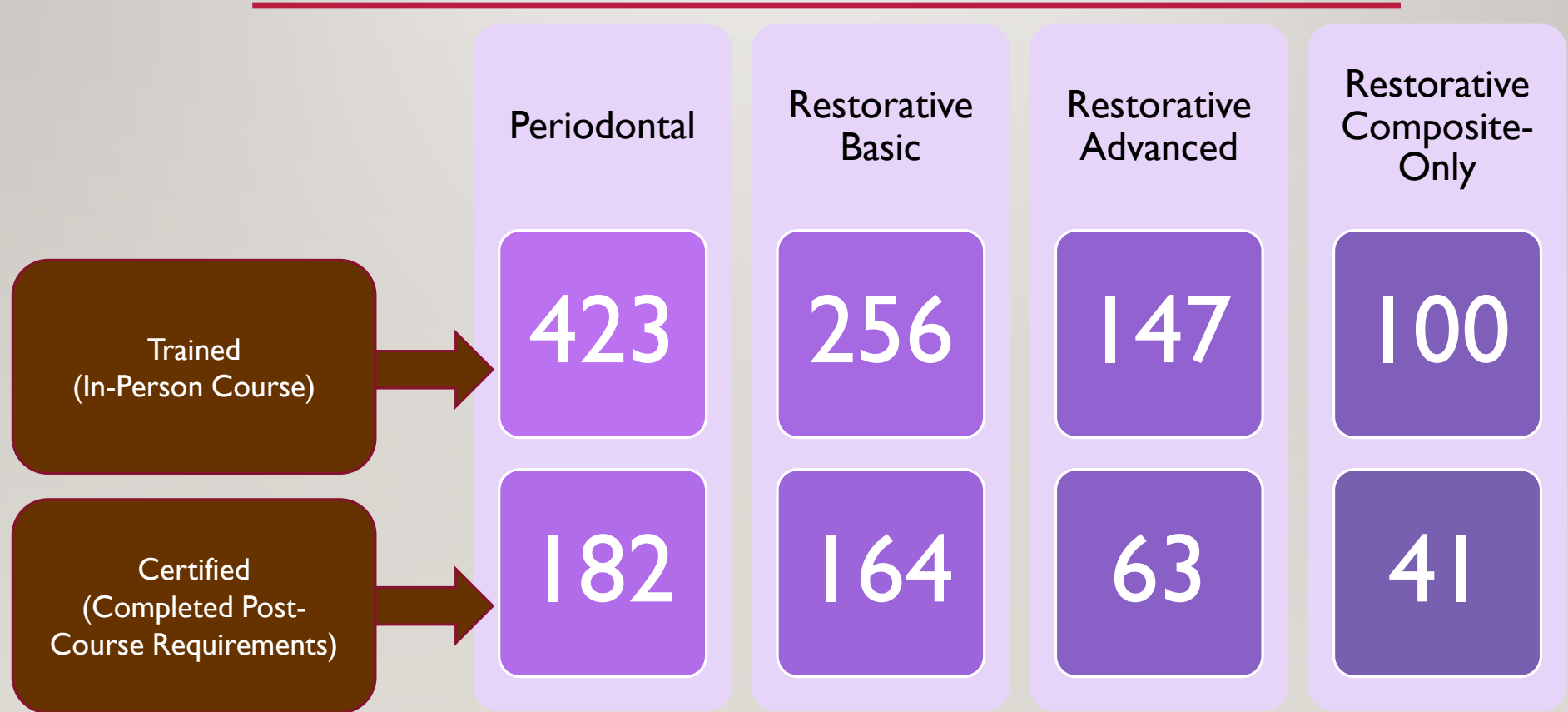
Didactic and
Hands-On

Patient Care
(Direct Supervision)

Certification



EFDA Trained Since 2016



How have EFDA's impacted dental care?

Metric	Periodontal EFDA's	Restorative EFDA's
Access to Dental Services/Utilization	+ 0.7%	+ 3.0%
Total Services	+ 5.1%	+ 4.0%
Preventive Dental Services	+ 6.5%	NA
Restorative Services (Fillings)	NA	- 1.0%
Overall Productivity	+ 1.8%	- 2.0%
Services per Patient	- 3.1%	+ 1.0%
Services per Dental Visit	+ 7.5%	+ 14.0%



Community Dental Health Coordinators (CDHCs)

- 9-month online curriculum culminating with 2-month prevention project
- Provide oral health education, prophylaxis, sealants, and fluoride varnish to patients
- 2023: 6 dental assistants trained
- 2024: 10 being trained: 5 dental hygienists, 5 dental assistants



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Community Dental Health Coordinator (CDHC)

Informational posters on the display board include:

- Community Dental Health Coordinator (CDHC) - Overview
- Community Dental Health Coordinator (CDHC) - Roles and Responsibilities
- Community Dental Health Coordinator (CDHC) - Application Process
- Community Dental Health Coordinator (CDHC) - Benefits
- Community Dental Health Coordinator (CDHC) - Contact Information



Dental Health Aides

- New Zealand model brought to ANTHC, with first graduates in 2004
- Four levels:
 - Primary Dental Health Aides I & II
 - Expanded Function Dental Health Aides I & II
 - Dental Health Aide Hygienist
 - Dental Health Aide Therapist



Dental Health Aide Therapists (DHATs)



- Works under the general supervision of a licensed dentist providing a limited range of services
- Services include patient and community-based preventive dental services, basic restorations and uncomplicated extractions
- Currently in Alaska, Idaho, Washington, and Oregon
- 14 states have passed dental therapy legislation.
- IHS DOH is working with the CHAP Expansion Team to expand DHA potential to all I/T/U programs



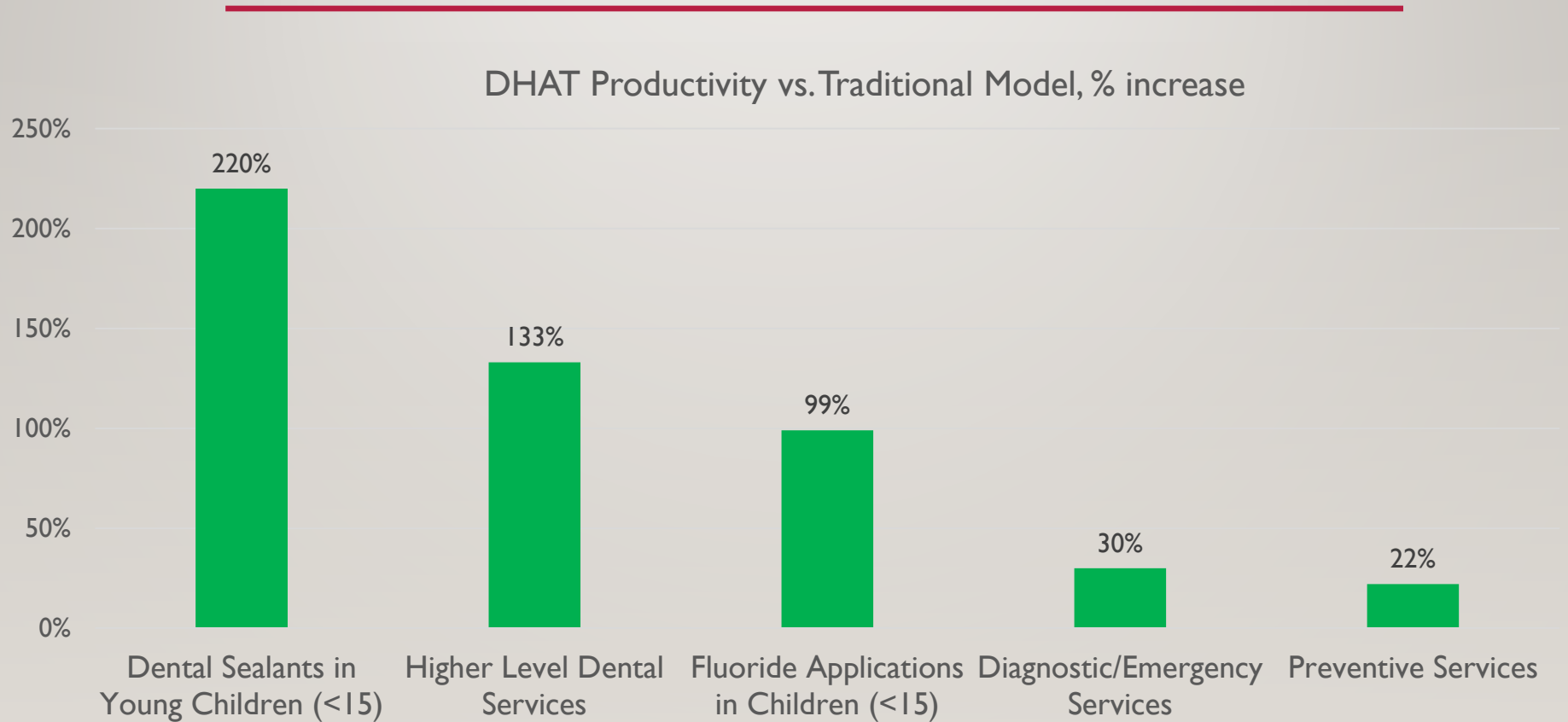
DHATs Compared to PAs



Characteristic	Dental Health Aide Therapist (DHAT)	Physician's Assistant (PA)
Created	2004	1960s
Degree	Associate's	Master's
Length of Program	24 months	26 months
Clinical Hours	3,000	2,580
Preceptorship	400	?
Recertification	Every 2 years	Ever 10 th year



Effectiveness of DHATs

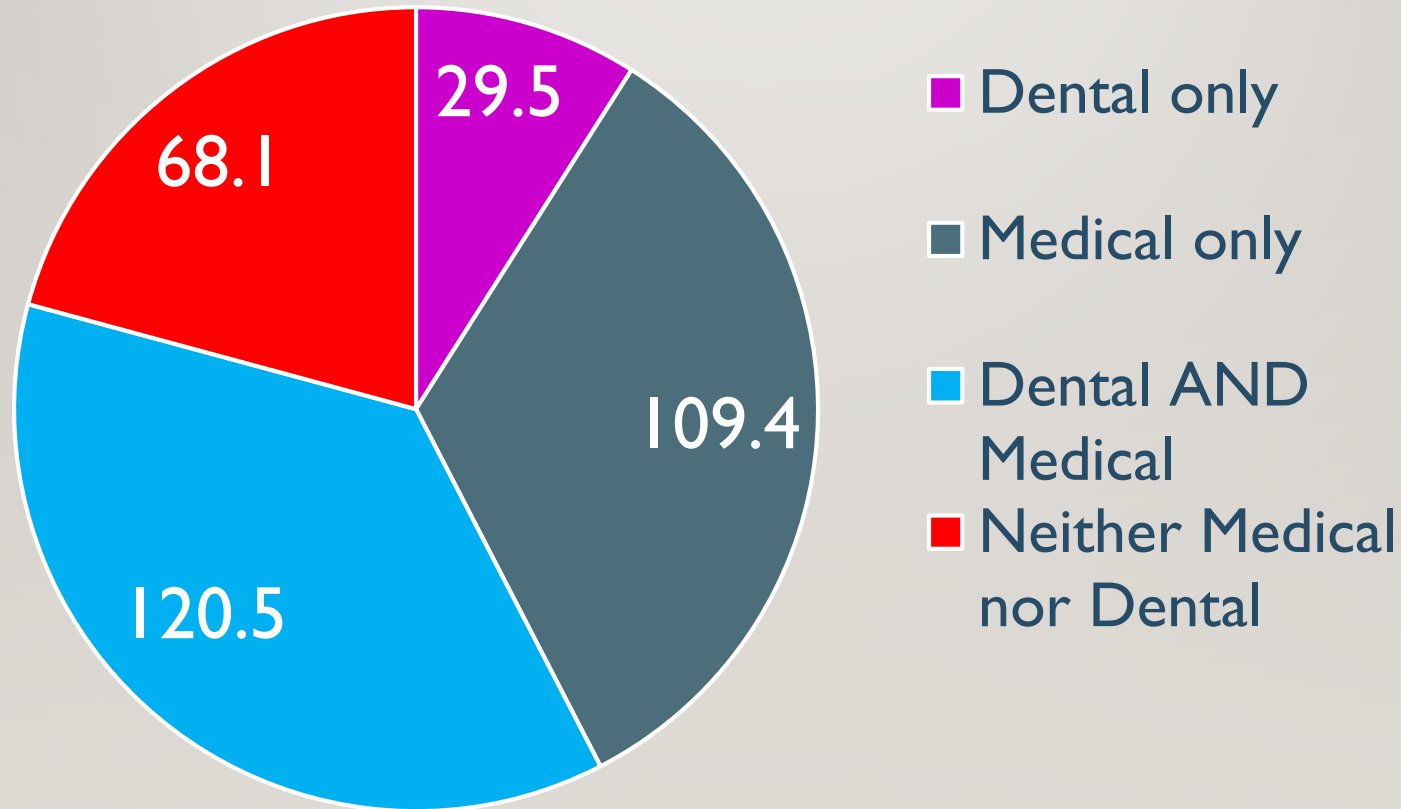


Multi-Directional Integration

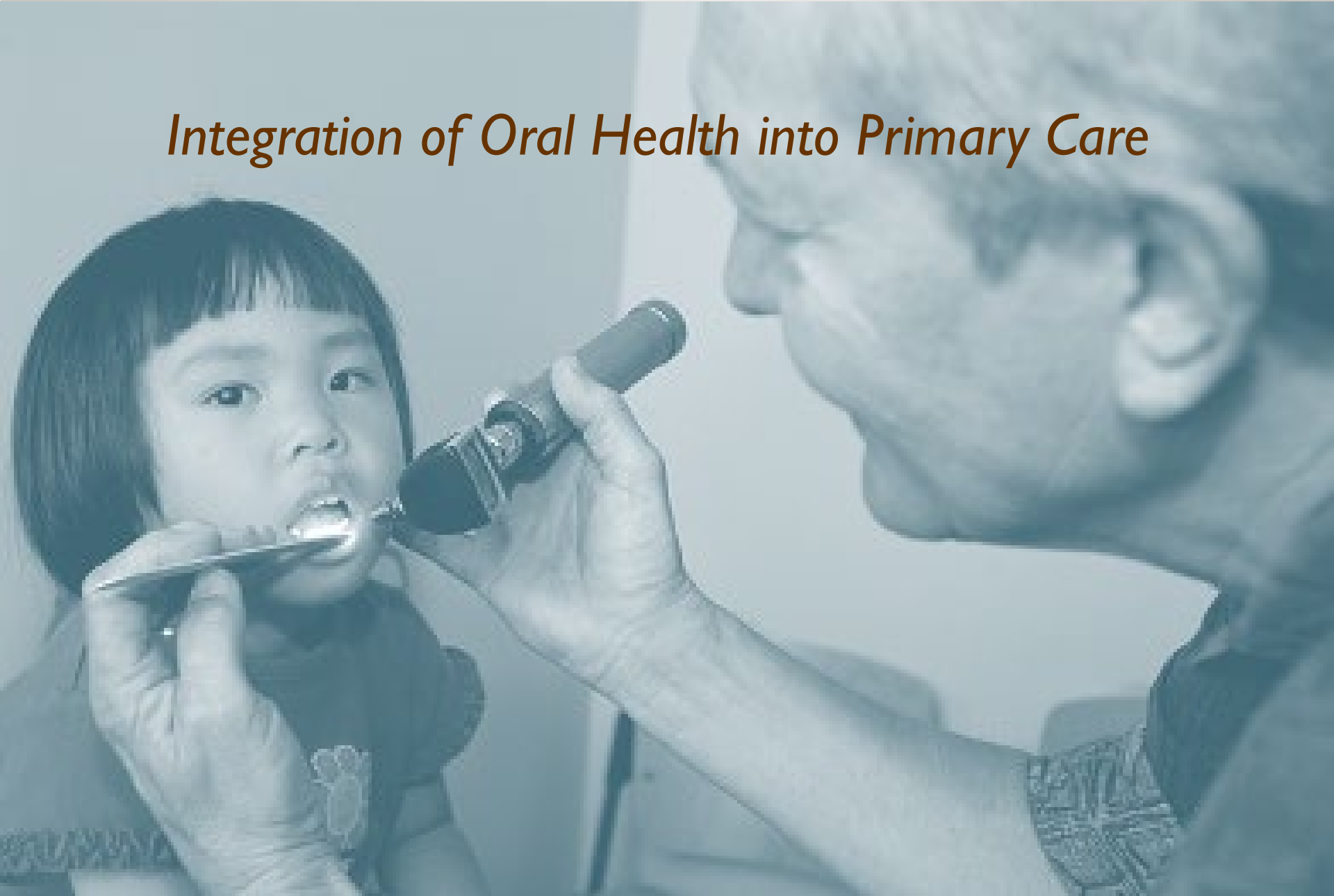


Why consider integrated care?

Visits by Americans, in Millions



Integration of Oral Health into Primary Care

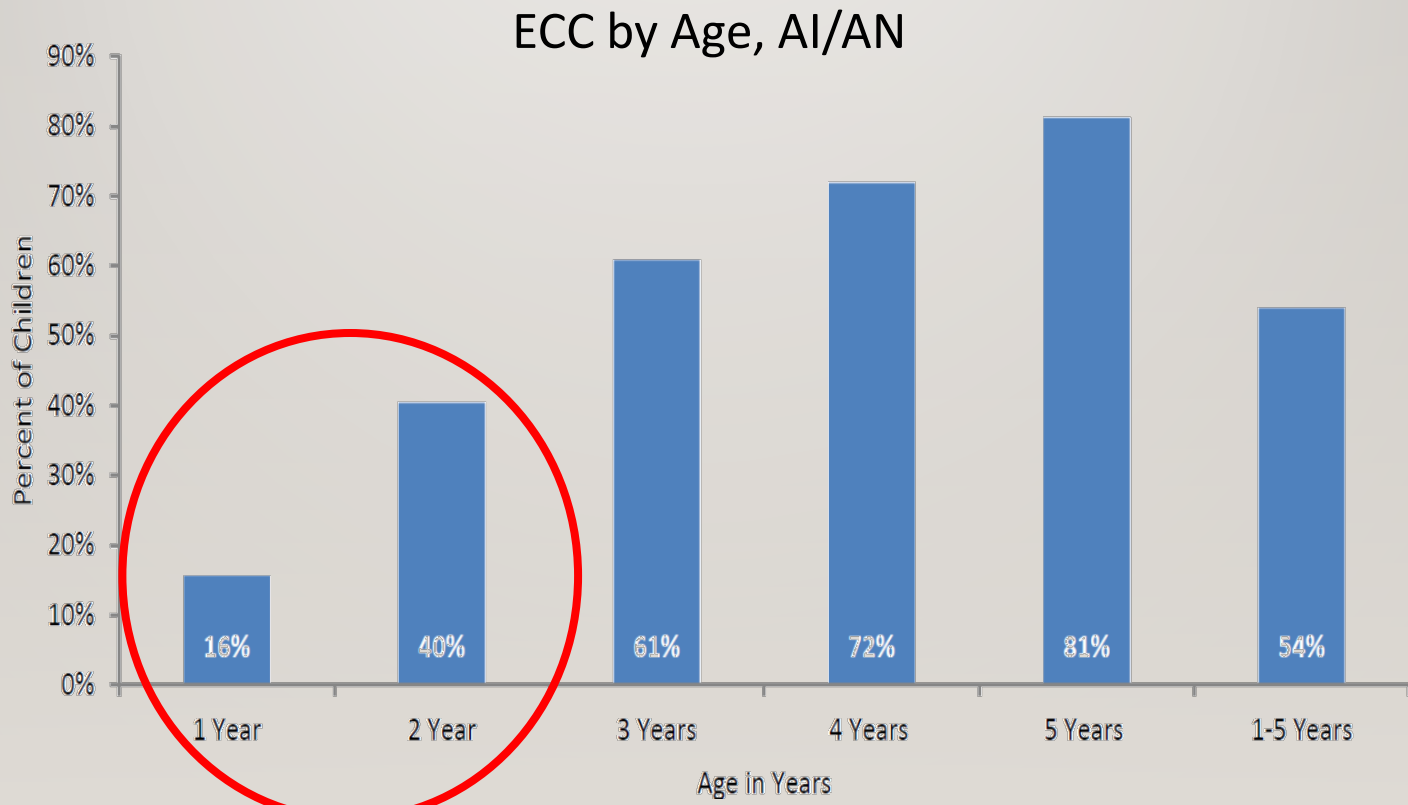


Early Childhood Caries Collaborative

- Goals were to increase access to dental care by 25%, increase dental sealants by 25%, increase the number of patients receiving fluoride varnish by 25%, and increase therapeutic fillings by 50%
- Used a multi-disciplinary model of community and medical collaborators



Why did we do it?



Redefining ECC as a HEALTH problem

- Delayed speech development
- Poorer nutrition
- Missed Head Start/school days
- Low self-esteem
- Pain & Infection



What was the impact of non-dental workforce involvement in the ECC Collaborative?

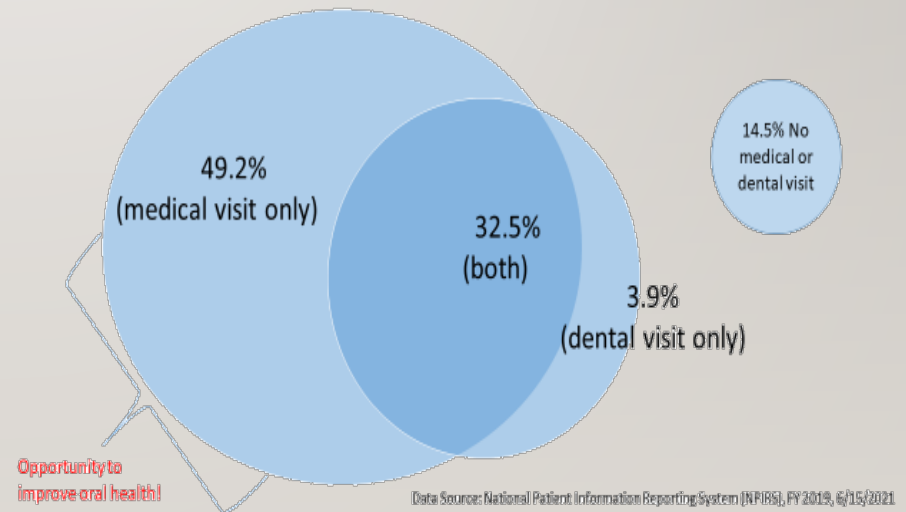
- Access to care, 1-5 year-olds
 - 22% increase annually
 - **14% were referrals from outside the health system**
- Dental sealants, 1-5 year-olds
 - 48% increase annually
- Fluoride varnish applications
 - 115% increase annually, including
 - **335% increase among non-dental**
 - **(227% increase among 1-2 year-olds)**
- Interim therapeutic restorations, 1-5 year-olds
 - 232% increase annually



Medical Silver Diamine Fluoride Project

Partner: IHS Chief Pediatric Consultant

- Teach medical providers how to apply silver diamine fluoride in AI/AN children 1 to 5 years of age to arrest development of existing caries
- Promote early referral of AI/AN children from medical to dental



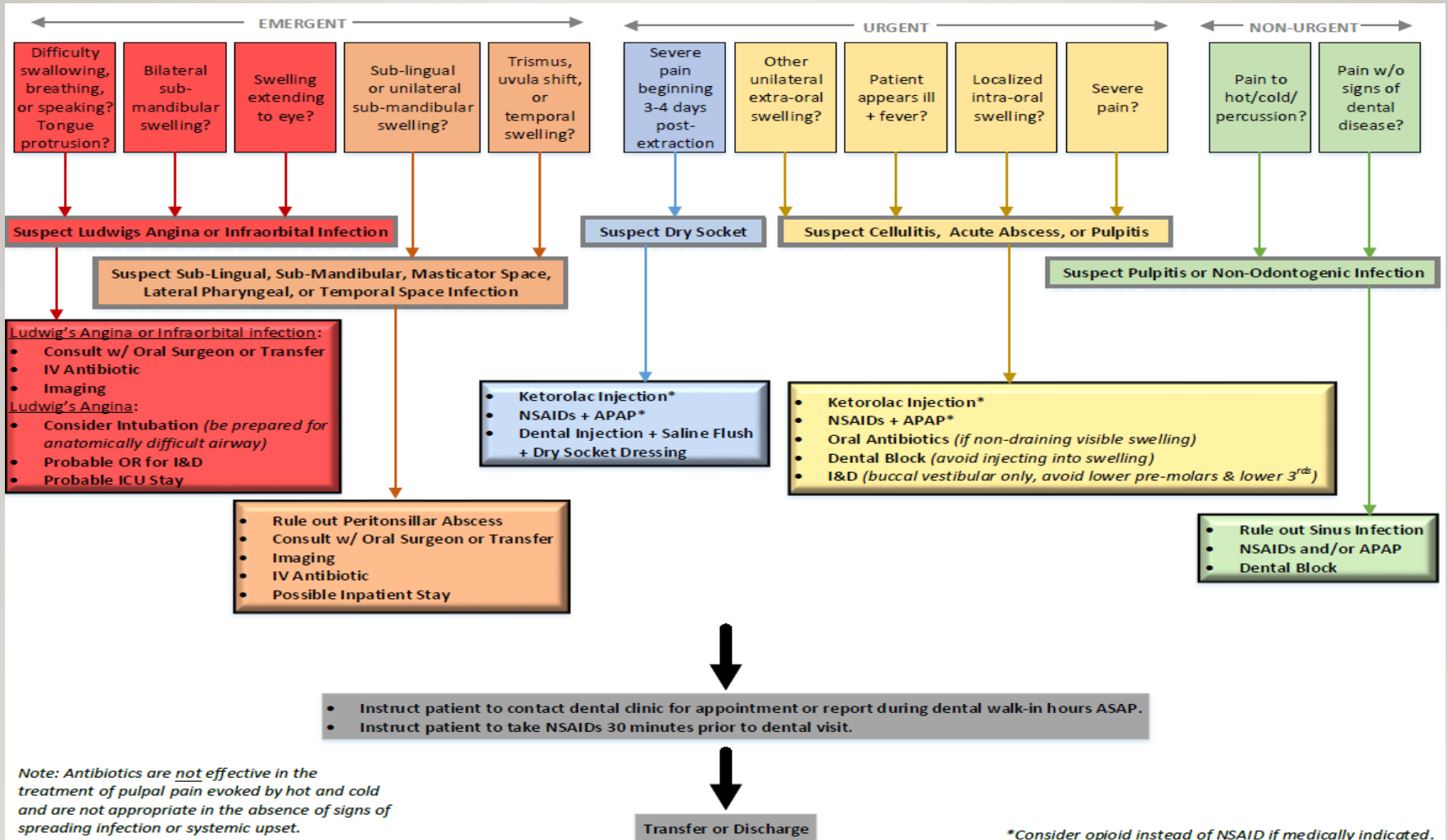
Triaging and Treating Dental Conditions in the Emergency Department

Partner: IHS Chief Clinical Consultant for Emergency Medicine

1. Improve the recognition of specific dental conditions of patients presenting to IHS and tribal emergency departments (EDs).
2. Increase timely referrals from EDs to IHS and tribal dental programs.
3. Through recognition and triage of patients with dental conditions, promote antibiotic stewardship and reduce opioid prescriptions in the ED for dental conditions.
4. Enhance skills of ED medical providers in administering local anesthesia for patients presenting with dental pain.

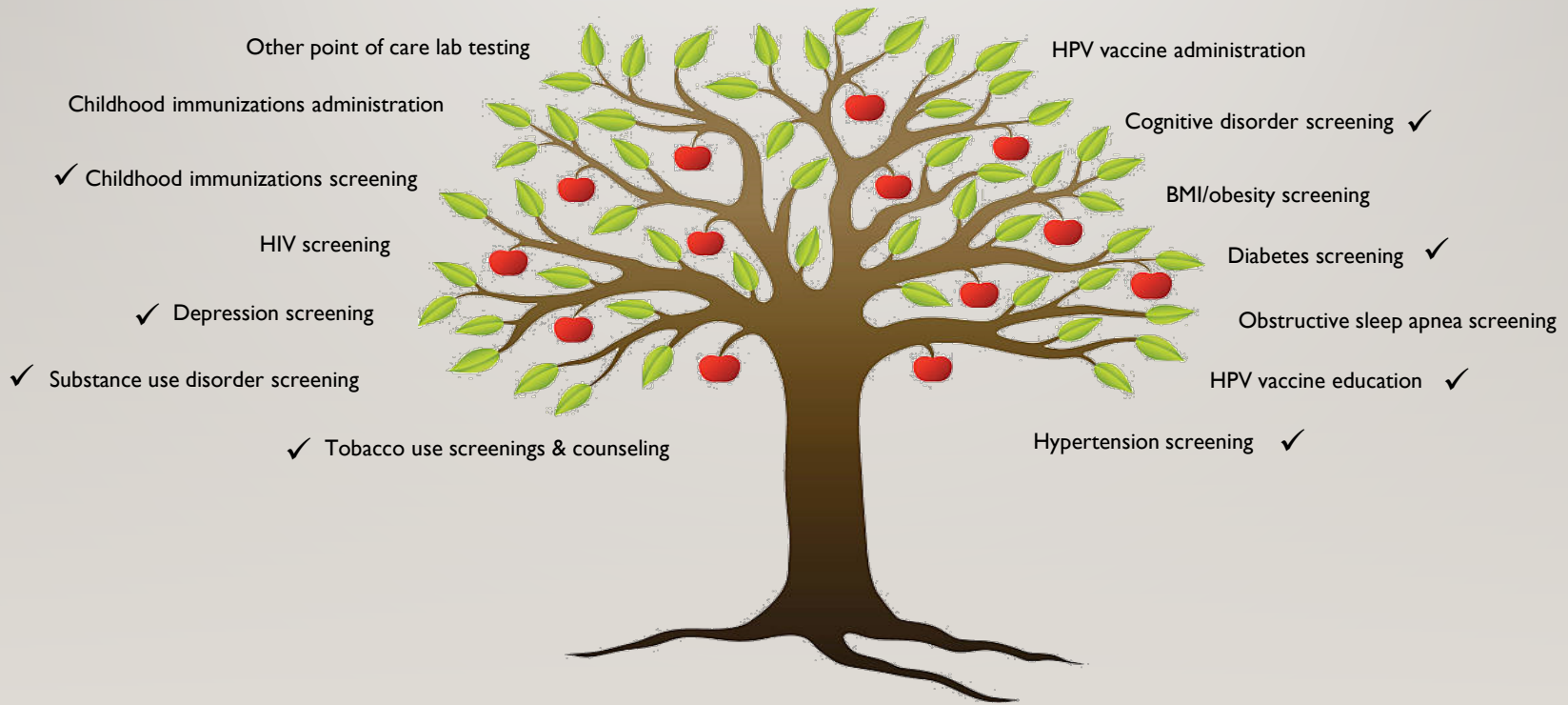


Triaging and Treating Dental Conditions in the Emergency Department



Integration of Primary Care into Dentistry

IHS is an innovator!



Depression Screenings in Dental Settings

Why?



- Adults with depression report both brushing and flossing their teeth less often than those without depression.
- Adults with poor mental health (including depression) are more likely to have one or more unmet oral health need and are less likely to seek care for these needs than those with better mental health.
- Depression is linked to higher levels of dental caries (decay).
- Scores on measures of depression are higher in individuals with a temporomandibular disorder (TMD)—that is, chronic pain in the face and jaw—compared to those without a TMD.



The Patient Health Questionnaire-2 (PHQ-2)

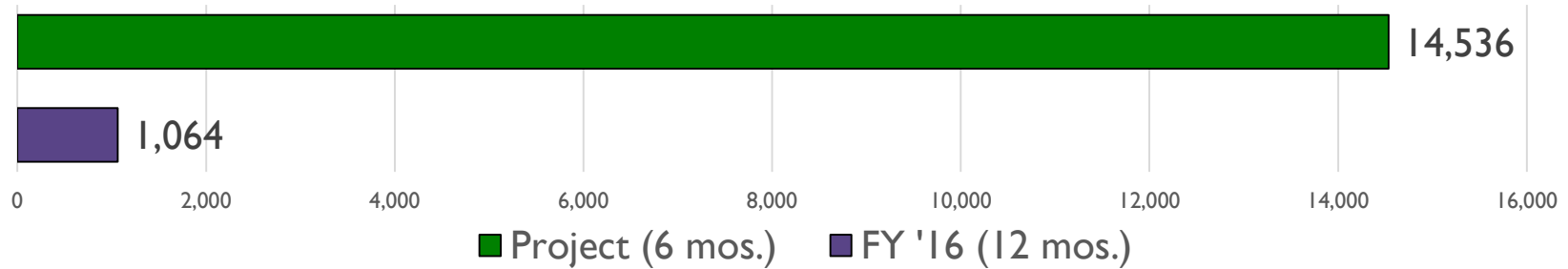
In the past 2 weeks, have you?	Not at all	Several days	More than half the days	Nearly every day
Little interest or pleasure in doing things	0	1	2	3
Feeling down, depressed, or hopeless	0	1	2	3

- Frequency: Annually
- Ages: 12 years and over
- Form: PHQ-2 Scored, Adult & Adolescent versions
- Referral: When the patient has an overall score of 3 or higher

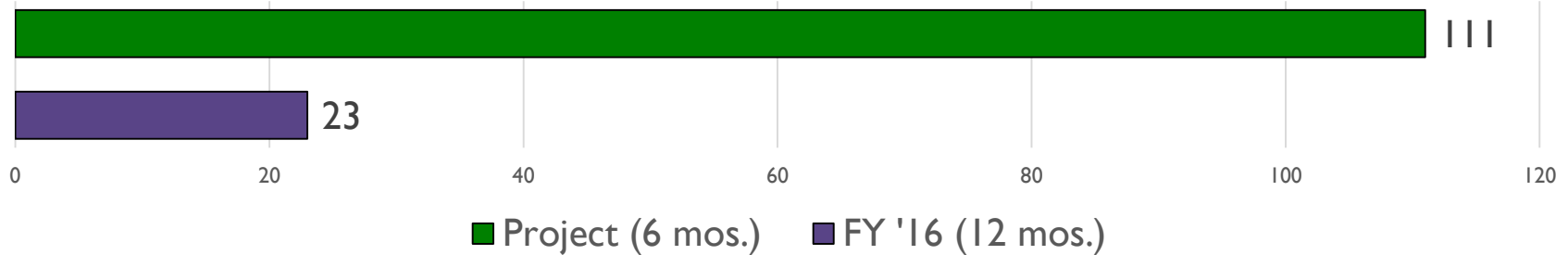


Results of 2016-17 Depression Initiative (Partner: Division of Behavioral Health)

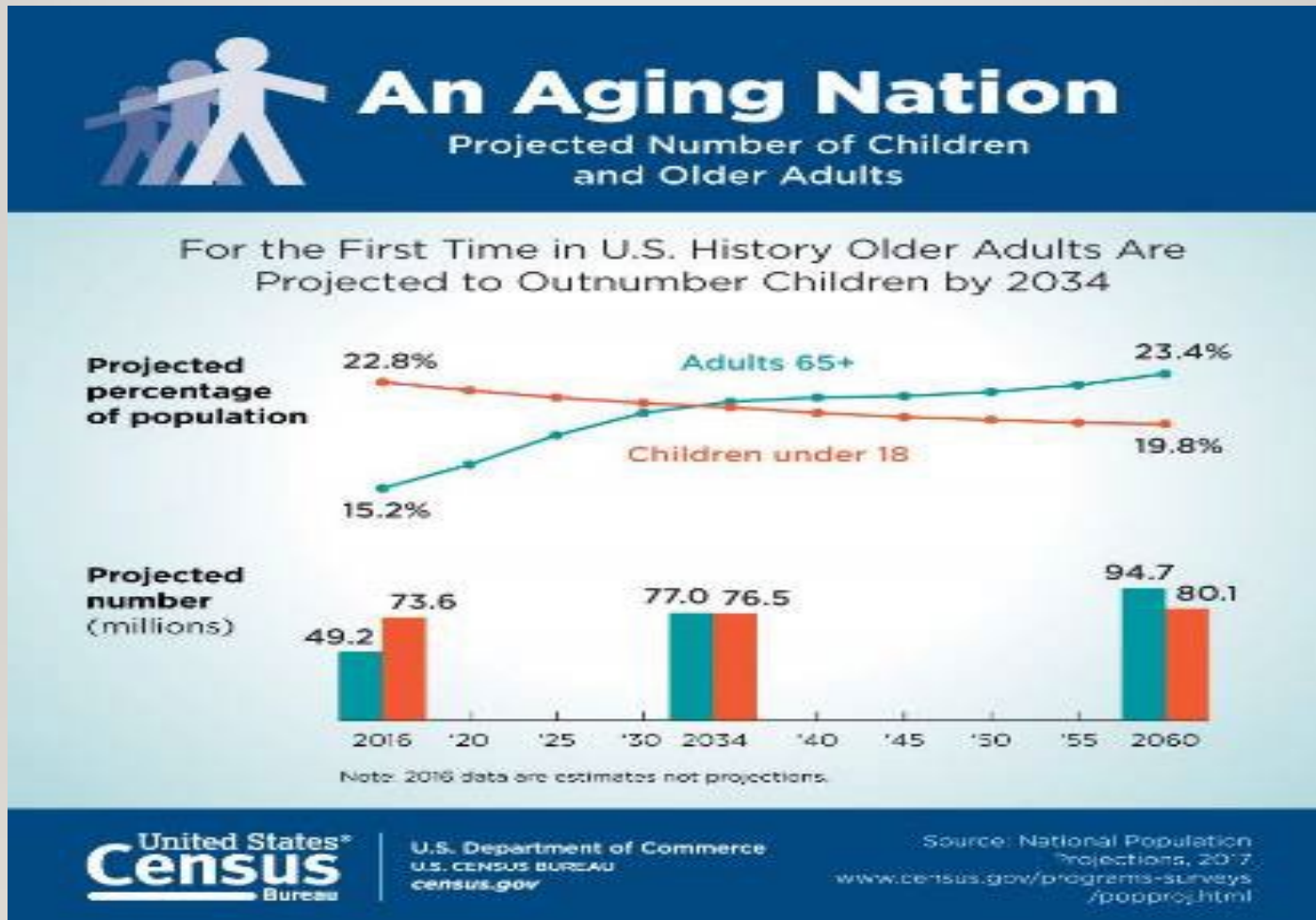
Dental Depression Screenings, 12 sites



Dental Referrals to Behavioral Health, 12 sites

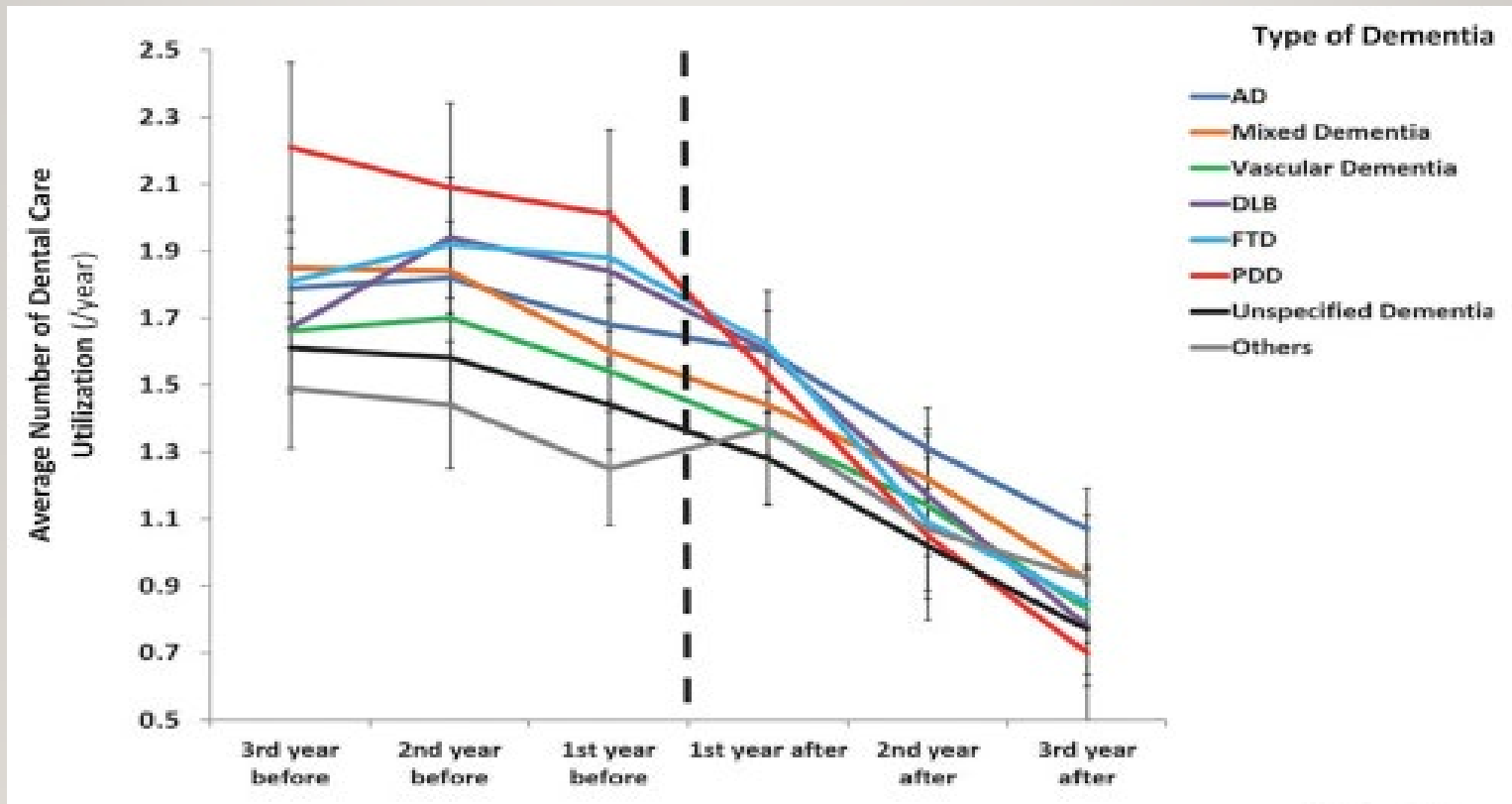


Cognitive Assessments in Dental Settings



Cognitive Assessments in Dental Settings

Why in Dental?



Fereshtehnejad, S. M., Garcia-Ptacek, S., Religa, D., Holmer, J., Buhlin, K., Eriksdotter, M., & Sandborgh-Englund, G. (2018). Dental care utilization in patients with different types of dementia: A longitudinal nationwide study of 58,037 individuals. *Alzheimer's & Dementia*, 14(1), 10-19.



Cognitive Screenings – Mini-Cog

Mini-Cog™

Instructions for Administration & Scoring

ID: _____ Date: _____

Step 1: Three Word Registration

Look directly at person and say, "Please listen carefully. I am going to say three words that I want you to repeat back to me now and try to remember. The words are [select a list of words from the versions below]. Please say them for me now." If the person is unable to repeat the words after three attempts, move on to Step 2 (clock drawing).

The following and other word lists have been used in one or more clinical studies.¹⁹ For repeated administrations, use of an alternative word list is recommended.

Version 1

Banana
Sunrise
Chair

Version 2

Leader
Season
Table

Version 3

Village
Kitchen
Baby

Version 4

River
Nation
Finger

Version 5

Captain
Garden
Picture

Version 6

Daughter
Heaven
Mountain

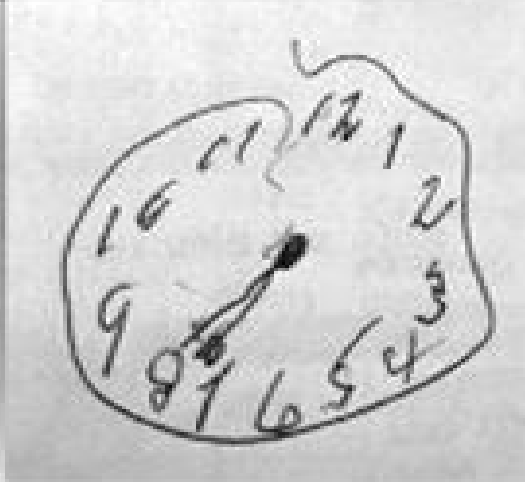
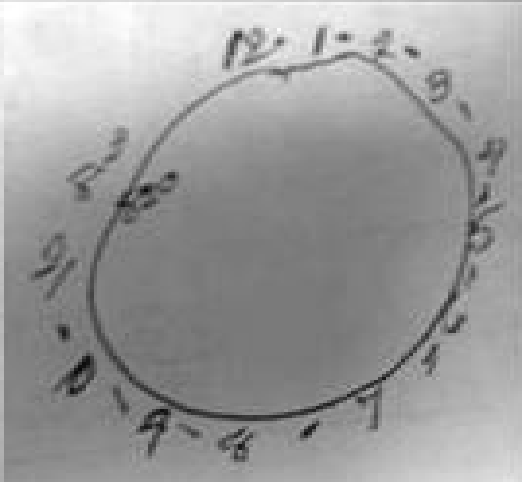
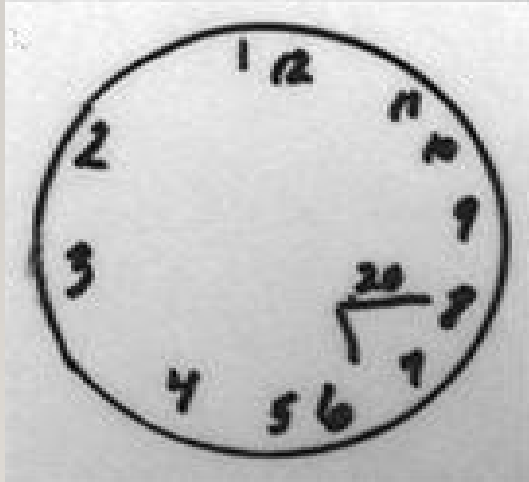
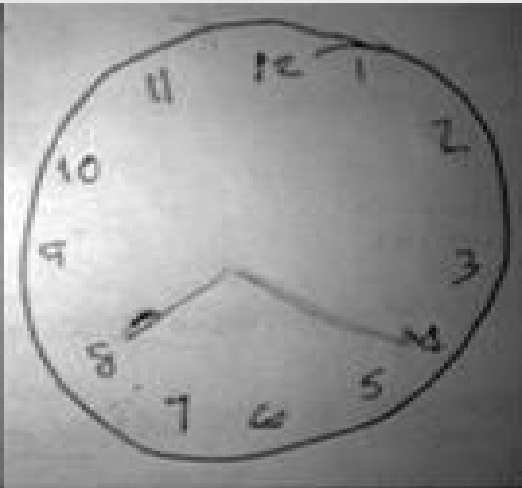
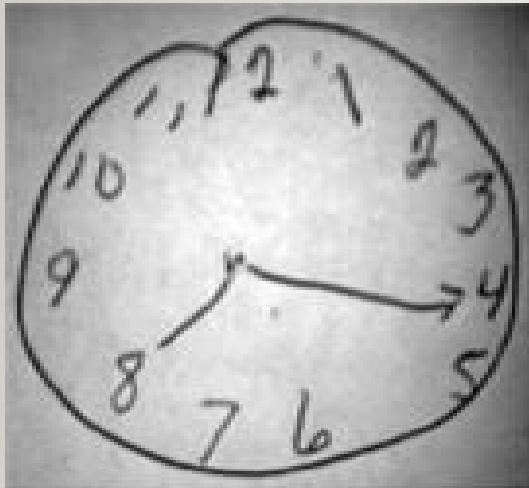
Step 2: Clock Drawing

Say: "Next, I want you to draw a clock for me. First, put in all of the numbers where they go." When that is completed, say: "Now, set the hands to 10 past 11."

Use preprinted circle (see next page) for this exercise. Repeat instructions as needed as this is not a memory test. Move to Step 3 if the clock is not complete within three minutes.



Cognitive Screenings – Clock Drawing Examples



Learn more about the Mini-Cog at <https://mini-cog.com>



Cognitive Screenings – Mini-Cog Scoring

Step 3: Three Word Recall

Ask the person to recall the three words you stated in Step 1. Say: "What were the three words I asked you to remember?" Record the word list version number and the person's answers below.

Word List Version: _____ Person's Answers: _____

Scoring

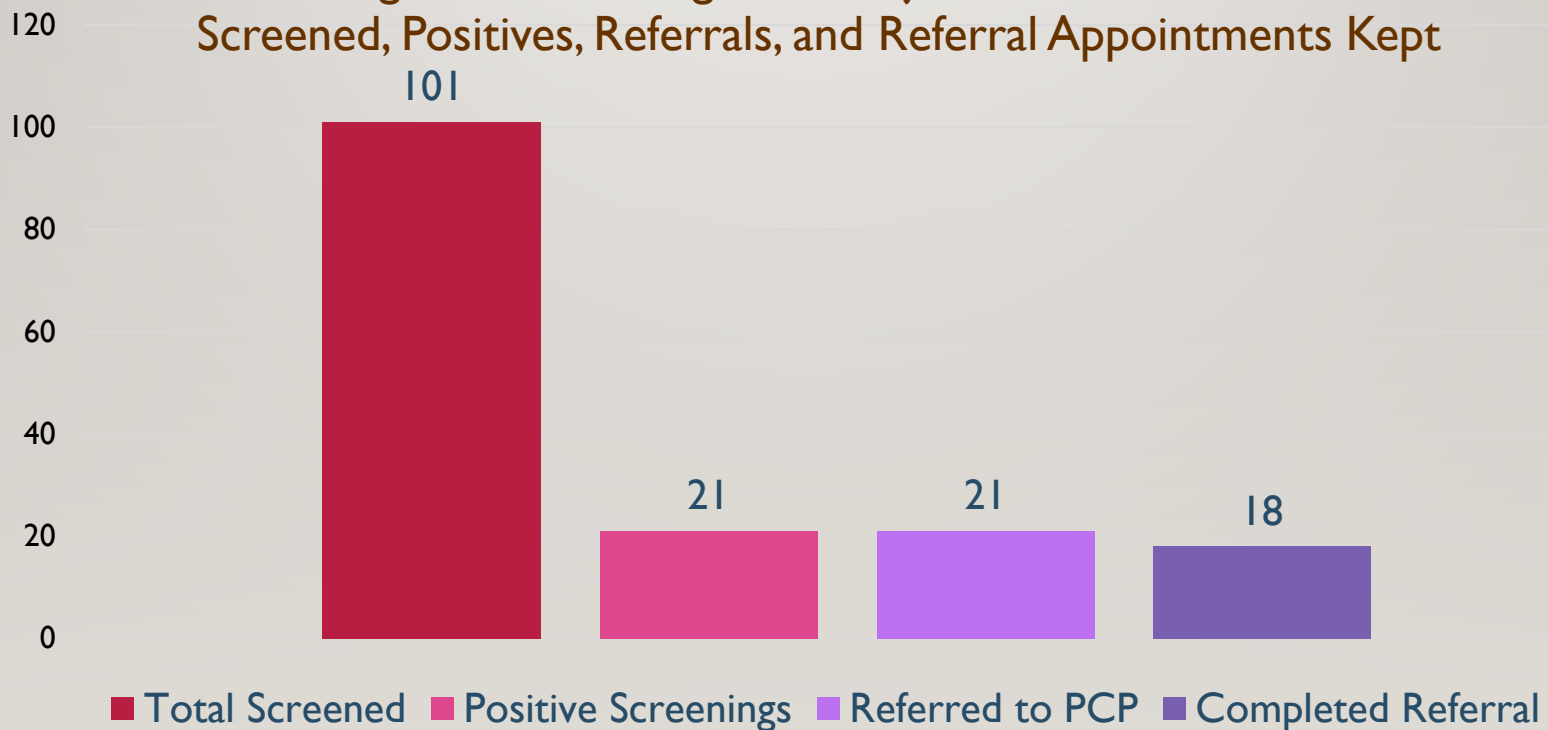
Word Recall: _____ (0-3 points)	1 point for each word spontaneously recalled without cueing.
Clock Draw: _____ (0 or 2 points)	Normal clock = 2 points. A normal clock has all numbers placed in the correct sequence and approximately correct position (e.g., 12, 3, 6 and 9 are in anchor positions) with no missing or duplicate numbers. Hands are pointing to the 11 and 2 (11:10). Hand length is not scored. Inability or refusal to draw a clock (abnormal) = 0 points.
Total Score: _____ (0-5 points)	Total score = Word Recall score + Clock Draw score. A cut point of <3 on the Mini-Cog™ has been validated for dementia screening, but many individuals with clinically meaningful cognitive impairment will score higher. When greater sensitivity is desired, a cut point of <4 is recommended as it may indicate a need for further evaluation of cognitive status.



Cognitive Screening Results (1st phase)

Partner: Elder Care Program/DCCCS

IHS Cognitive Screening Pilot Project: Number of Patients Screened, Positives, Referrals, and Referral Appointments Kept



New Initiative (2024): Hypertension Screenings in Dental Programs

Partner: Division of Nursing Services

- Hypertension has a direct impact on oral health and it is bi-directional; periodontitis is associated with hypertension and dental patients are often apprehensive and present to the dental office with anxiety and hypertension
- While in dental training, most U.S. dental schools require that blood pressure be taken at every examination and surgical appointment
- Recent data show that less than half of oral health professionals routinely take blood pressure



New Initiative (2024): Diabetes Screenings in Dental Programs

Partner: Division of Diabetes Treatment & Prevention



- Diabetes mellitus has a direct effect on oral health as uncontrolled diabetes often leads to the “6th complication” of diabetes, periodontal disease
- This relationship is also bi-directional in that successful periodontal therapy has been shown to improve glycemic control
- We are using the DDTP algorithm to screen using fasting blood glucose, in collaboration with medical



New Initiative (2024): Immunization Screenings in Dental Programs

Partner: Division of Nursing Services

- On November 17, 2022, the IHS Chief Medical Officer announced the IHS E3 Vaccine Strategy
- 55% of adults do not get the annual influenza vaccination
- 31% of adults over 65 years of age have never received the pneumococcal vaccination
- 19% of children under 24 months of age have not received 4 doses of DTP/DT/DTaP
- Human Papilloma Virus (HPV) causes more oropharyngeal cancers than any other type of cancer, including cervical cancer, with 14,400 cases/year



**“You’re not healthy without good
oral health”**

C. Everett Koop

13th U.S. Surgeon General (1982-1989)



To learn more....

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 - (301) 549-2629
- IHS Dental Portal (data briefs, initiatives)
 - <https://www.ihs.gov/doh>

