

Dental Public Health Activity Descriptive Summary

Practice Number: 16014
Submitted By: Division of Oral Health, Illinois Department of Public Health
Submission Date: January 2018
Last Reviewed: January 2018
Last Updated: January 2018

Illinois Oral Health Workforce Project: Establishment of Community Dental Health Coordinator Curriculum in Illinois Dental Hygiene Degree Programs

The Illinois Department of Public Health's (IDPH) Oral Health Workforce Project addresses workforce needs to increase access to oral health services for underserved populations in Dental Health Professional Shortage Areas (HPSA) in Illinois. Focus areas include:

- Supporting oral health providers practicing in specialized roles designed to improve oral health access in underserved communities; and
- Expanding access to community-based prevention services for underserved populations through the dental sealant program.

To achieve these goals, IDPH began implementing a multi-pronged approach to leverage its school-based oral health program with the intent to 1) implement the American Dental Association's (ADA) Community Dental Health Coordinator (CDHC) curriculum in selected college dental hygiene programs; 2) expand community outreach to increase the number of children who are actively participating in the dental sealant program and who are linked with follow-up care, and 3) increase the number of children experiencing tooth decay who receive treatment services in targeted Dental HPSA areas.

IDPH partnered with four dental hygiene colleges and three community-based organizations to implement the CDHC curriculum and provide internship opportunities. A Steering Committee provides oral health expertise and guidance to the program. As of January 2017, four colleges in Illinois have established a CDHC Program, the first class of 29 RDH graduated with a CDHC Certificate, and 125 students are currently enrolled and working toward the Certificate.

Costs include staff time for a program manager and subcontracts to colleges, community-based organizations and an evaluator, ranging from \$10,000 to \$60,000, to establish, plan, and oversee the project, establish and set-up the curriculum, and oversee student activities.

Lessons learned during the project's first two years included understanding the timeframe needed to establish a new curriculum and understanding of how dental sealant programs operate differently throughout the state the understanding the challenges of collecting data to show outcomes.

Lessons Learned:

Establishing a new curriculum in a college is a lengthy process which requires approximately one year or more for preparation and approvals.

Due to the large number of stakeholders involved, collecting data for evaluation also was difficult, and it was difficult to show that a change in participation rate or follow-up care was the direct result of the work of a Community Dental Health Coordinator intern. In the Chicago area, the community-based grantee worked with 56 schools in four zip codes who used 17 different dental providers. To provide a truly accurate assessment, or a more controlled environment and/or buy-in would be needed from all of the players involved would be required.

During the first year of funding, a State budget impasse caused delays in hiring staff and initiating grants with pilot sites. The Dental Sealant Program Manager was able to establish the Steering Committee and identify potential pilot sites, keeping them engaged until an Oral Health Workforce Program manager could be hired near the end of Year 1 and subcontracts established with pilot sites.

Some of the colleges initially expressing interest later declined to participate because of lack of staff time among colleges completing their accreditation process. Staff continued to identify and contact colleges to promote the program until four colleges were recruited.

The process to get new curriculum approved internally by colleges and externally through Community College Board and to execute a license for the curriculum took much more time than expected. The first college to establish the CDHC program became a mentor for other sites and assisted them in navigating these processes.

During the same time period, Illinois passed legislation to establish Public Health Dental Hygienists which caused some colleges to rethink offering CDHC and considering offering the PHDH. The Steering Committee members felt the CDHC curriculum would be a good fit as part of the PHDH program, convincing some of the colleges to move forward. The rules process for the PHDH are still being formulated, and overlap between CDHC and PHDH in the community is uncertain.

Contact Person(s) for Inquiries:

Mona VanKanegan, DDS, MPH, Chief, Division of Oral Health, Illinois Department of Public Health, 535 W. Jefferson Street, Springfield, IL, 62761, Phone: 217-557-5322, Email: mona.vankanegan@illinois.gov

Stacey Ballweg, Grants and Data Manager, Illinois Department of Public Health, 535 W. Jefferson Street, Springfield, IL, 62761, Phone: 217-785-1072, Email: stacey.ballweg@illinois.gov