Dental Education in the Care of Persons with Disabilities (DECOD) Program
University of Washington School of Dentistry

The Dental Education in the Care of Persons with Disabilities (DECOD) program at the University of Washington School of Dentistry has been in existence since 1974. The DECOD program is a pre- and post-doctoral training program which provides: 1) Direct oral health care for persons with disabilities, 2) Training of oral health care professions students in the care of patients with disabilities and 3) training of oral health care professionals in the care of patients with disabilities.

1. Direct Care

The DECOD Program primarily serves adults with developmental disabilities and select acquired disabilities in a seven-chair dental clinic. The DECOD Program also serves older adults in two nursing home settings. This program is a major resource for patients with qualifying disabilities that are not able to access dental care in the community, whether due to the patient’s level of support needs or the lack of availability of appropriate services in the community.

2. Training of Oral Health Care Professions Students

A major goal of the DECOD Program is to increase access to care for persons with disabilities by assuring a competent and willing oral health care workforce that can meet the needs of this population in private and community practice settings. Historically, patients with special health care needs have had difficulty finding appropriate dental care. According to Oral Health in America: A Report of the Surgeon General, the “availability of dental providers trained to serve special needs populations” complicates “addressing the needs of this population.” This is in part due to limited training of dental and dental hygiene students in the care of patients with disabilities during their pre-doctoral education. The DECOD Program trains dental students at the University of Washington via didactics and a series of clinical rotations with 8-10 sessions in the DECOD Clinic during their 3rd year and 7 sessions during their 4th year. First and second year dental students participate in didactics in the care of patients with special needs as part of the DECOD Program. The DECOD Program also collaborates with 5 dental hygiene schools for dental hygiene student rotations. Collaboration with hygiene schools is an essential part of the DECOD Program as patients with developmental disabilities experience disproportionately high rates periodontal disease and oral hygiene problems are one of the top 10 limiting secondary conditions for this population. DECOD also offers other opportunities for student training, including shadowing experiences for pre-dental students and rotations for Oral Medicine graduate students, dental hygiene masters students, dental assisting students, and pharmacy students.

3. Training of Oral Health Professionals

While many patients with developmental disabilities can be treated in traditional dental settings with appropriately trained dental providers, some patients have advanced needs that require advanced care. The DECOD Program provides a Fellowship Training Program and offers training for General Practice Residents in special care dentistry. The Fellowship training
Program provides practicing dentists, dental hygienists and dental assistants with the opportunity for advanced clinical training in the care of patients with disabilities. This program currently provides 4 weeks of clinical training in addition to directed self-study didactics. The DECOD Program collaborates with the UW General Practice Residency Program to offer a year-long training program with an emphasis in special care dentistry for a second-year GPR resident. This residency program offers extensive clinical experiences in the care of patients with disabilities, as well as rotations in hospital dentistry, geriatric dentistry, and participation in the interdisciplinary UW Leadership and Education in Neurodevelopmental and Related Disabilities (LEND) Program.

Program Outcomes

The program outcomes for FY 2016 are outlined below:

1. Number of patients seen: 3,148 (Medicaid recipients with developmental disabilities)
2. Number of patient visits: 6,296 (for Medicaid recipients with developmental disabilities), 249 (for Medicaid recipients with acquired disabilities), 187 (for non-Medicaid recipients with disabilities)
3. Number of dental students trained: 62 (1st year), 62 (2nd year), 68 (3rd year), 68 (4th year)
4. Number of dental hygiene students trained: 113 (2nd year)
5. Number of fellows trained: 5 (3 dentists, 1 hygienist, 1 dental assistant)
6. Number of residents trained: 1 (2nd Year General Practice Resident)
7. Number of other trainees: 2 (Oral Medicine Graduate Students)

Additional program outcomes:

1. Student willingness to treat: Qualitative research ongoing on student willingness to treat and experiences treating this population beyond graduation.

Program Expenses and Funding

The DECOD Program employs 2 full time dentists, 2 part time dentists, 1 full time dental hygienist, 1 part time dental hygienist, 3 full time dental assistants, and 1 full time patient care coordinator. The funding of the program is provided by Medicaid reimbursement for dental services as well as support from the Department of Social and Health Services (DSHS) in Washington State, which provides an additional reimbursement per patient visit. In FY 2016, the budget was approximately 710,000.

Lessons Learned:

DECOD sees a high proportion of patients whose disabilities affect their ability to receive dental care. The treatment of this population and education of others to treat this population is rewarding and challenging. Matching the level of the learner to the patient, and flexibility in re-assigning patients is essential to maintaining effective and safe care with such a diverse patient population and diverse population of learners and providers. Some patients need more consistency with providers while others enjoy seeing a variety of learners in the clinic setting. This must also be taken into account for patient scheduling.

Maintaining financial stability of special patient care programs can be challenging as well. This population requires more resources (for example, more dental assistants than traditionally used in a dental school setting) and reimbursement is generally low as the majority of patients are Medicaid recipients. Additionally, more high-producing advanced procedures are often not possible in this population due to patient tolerance and other patient care factors. DECOD has relied on the support of the Department of Health for supplemental reimbursement. Support from the Chair of the Department of Oral Medicine and the Dean of the UW School of Dentistry also help make this program successful.

The DECOD Program via collaboration with the UW General Practice Residency Program was able to fill GPR-2 residency positions with emphasis in special care dentistry for the 2015-2016 and 2016-2017
residency years; however, a position for the 2017-2018 residency year remains unfilled. Training those at the residency or specialty level will be essential to develop the next workforce of providers willing and prepared to care for those with more advanced needs.

Additionally, training of dental assistants and dental assisting students in the care of patients with disabilities is an important future goal in order to round out the well-trained special care dentistry team.

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