

DENTAL HEALTH AIDE THERAPISTS

Increasing access and improving oral health outcomes for Oregon Tribes



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OPHA CONFERENCE



Oral health is important to
overall health



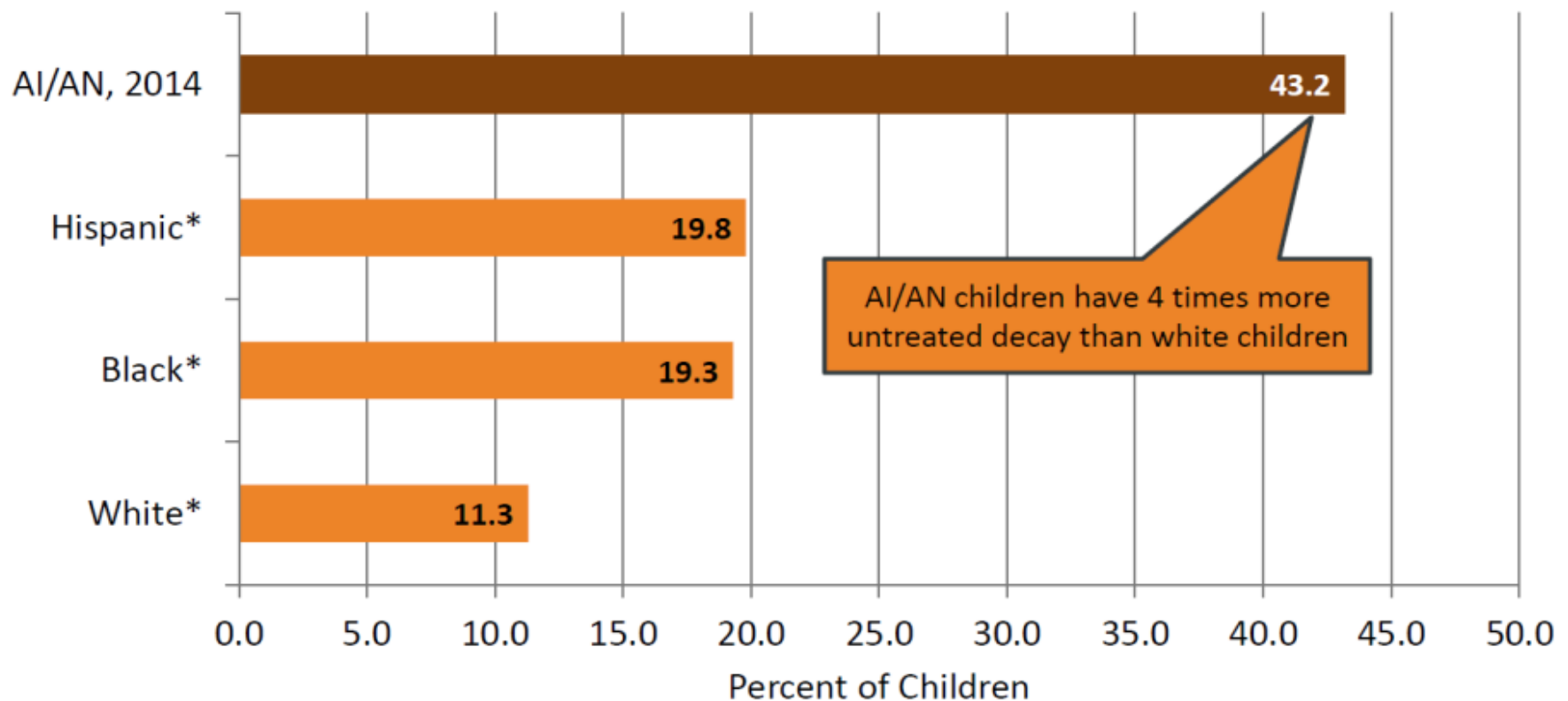
**YET MILLIONS OF
PEOPLE LIVING IN
TRIBAL COMMUNITIES
CANNOT GET THE
DENTAL CARE THEY
NEED**



Oral Health Disparities

FINDING # 2 (CONT.): AI/AN CHILDREN HAVE MORE TOOTH DECAY THAN OTHER POPULATIONS

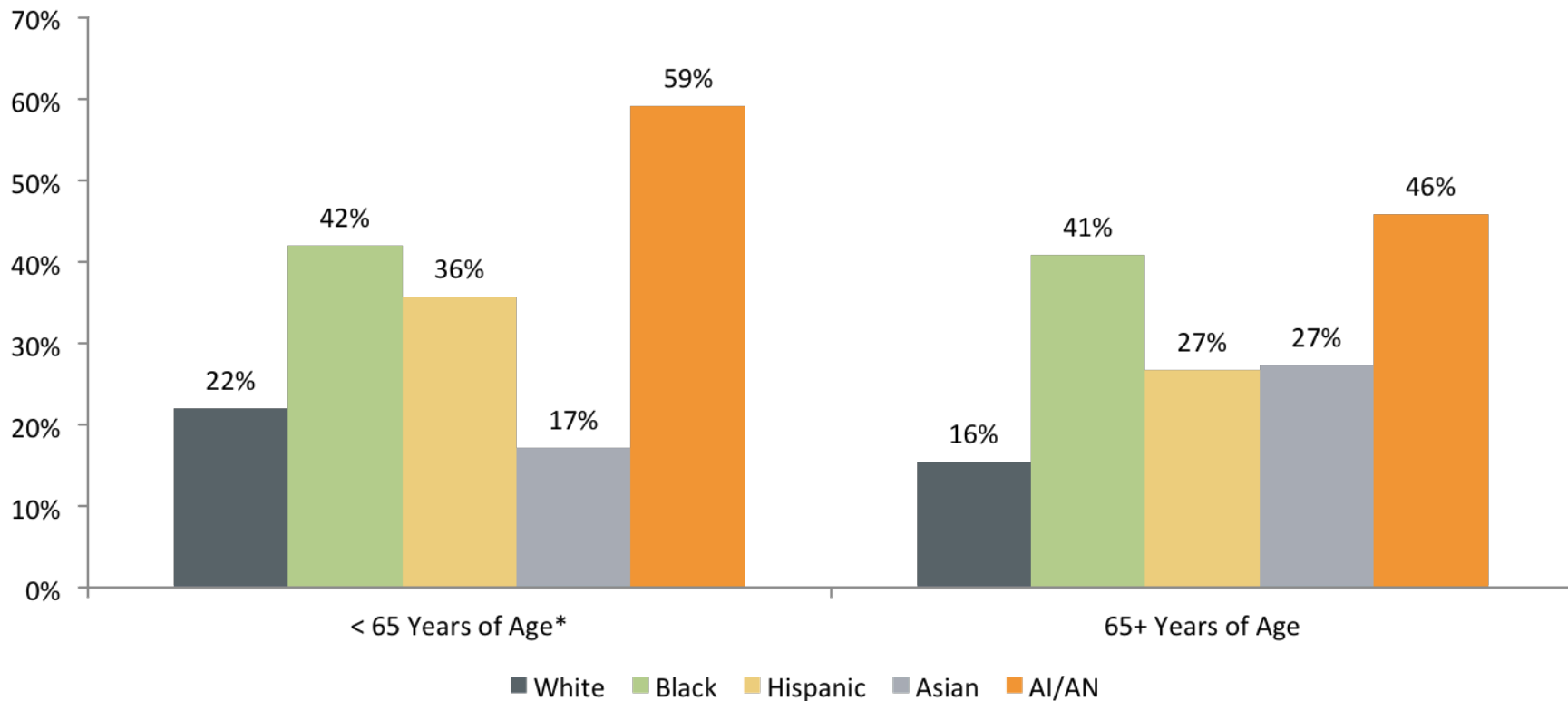
Percent with Untreated Decay Among Children 3-5 Years of Age



Key Finding #1

AI/AN adult dental patients suffer disproportionately from untreated Dental Caries

Percent of Adults with Untreated Tooth Decay by Race and Ethnicity



What are the barriers to care?

- Shortage of dentists in tribal communities
- Lack of IHS resources
- Cost of care
- Historical trauma
- Lack of culturally competent providers
- Geographic isolation



Little Access to Culturally Competent Providers

Male	84%
Female	16%
Native American	0.1%
Asian/Pacific Islander	7%
Black/African American	3.5%
Hispanic/Latino	3.5%
White/Caucasian	86%

Source: American Dental Association, Bureau of Health Professions, HRSA



A Proven Solution: Dental Health Aide Therapists



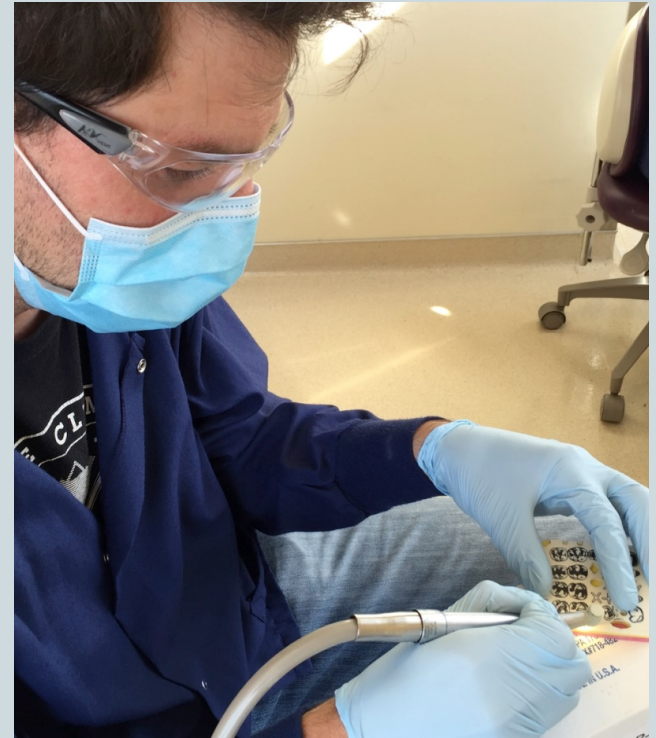
What are DHATs?

- Primary oral health care professionals
- Focus on routine preventive and restorative services—limited scope of practice (46 vs. 500+ procedures dentist)
- Part of the dental team led by the dentist under general supervision
- Recruited from their community, go back to serve their community



DHAT Education Program

- Alaska Native Tribal Health Consortium two-year intensive training program
- First year focus on coursework
- 2nd year: 3000 hours of clinical training and community projects



Jason Mecum, Coquille DHAT student



DHAT Education Program

- 400-hour dentist-supervised preceptorship resulting in practice agreement
- In Alaska, must be recertified by Federal Community Health Aide Program Certification Board every 2 years



Dental Health Aide Therapy Programs

- Expand access to consistent, routine, high quality oral health care in tribal communities;
- Grow the number of AI/AN oral health care providers available to tribal communities;
- Bring culturally competent care into tribal communities;
- Establish cost effective solutions to oral health challenges into tribal communities;
- Bring care where it is needed most.

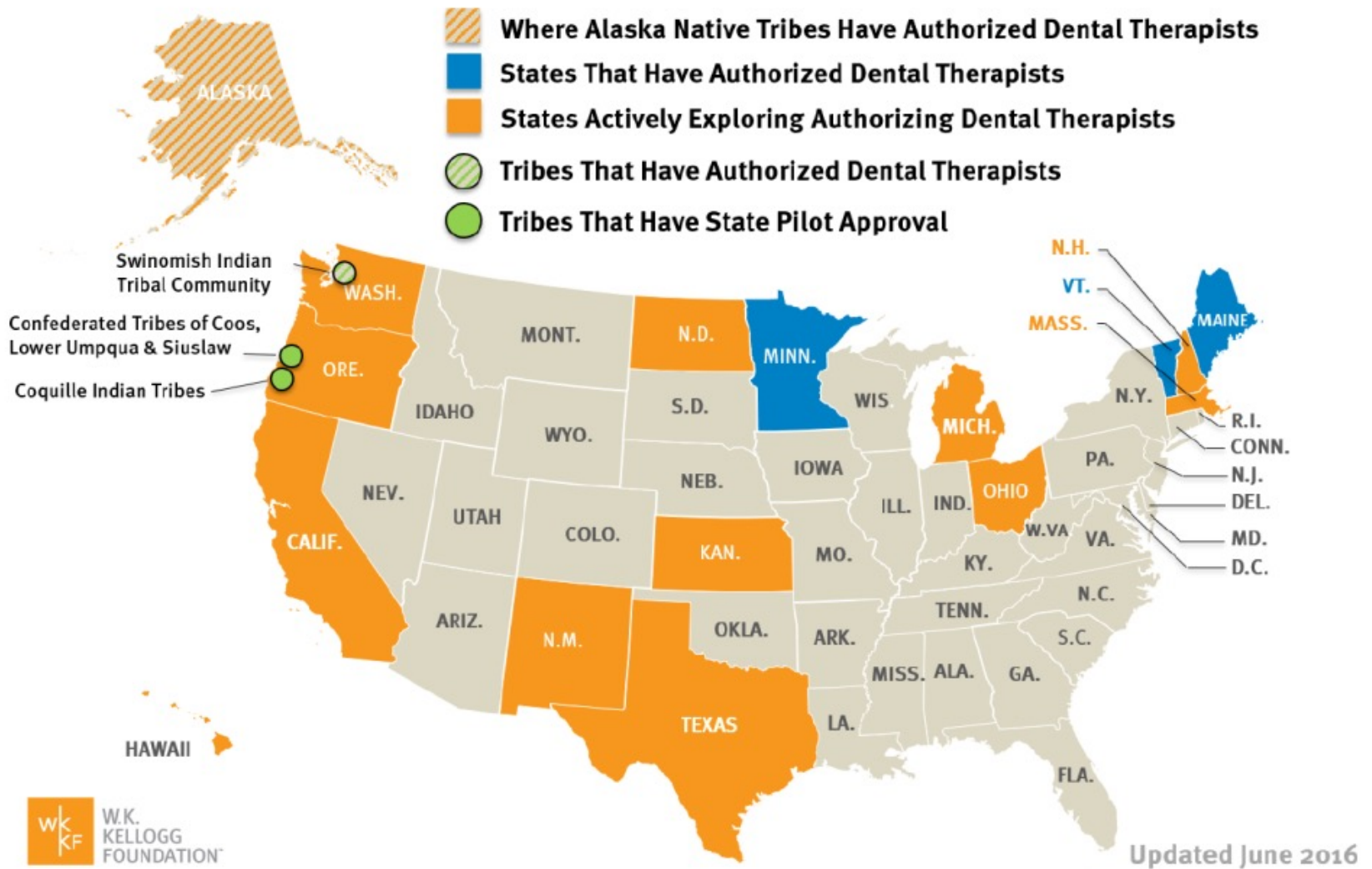


Where do you find dental therapists?

- Dental therapists practice in 54 countries, including the US, Canada, England, Australia, New Zealand and The Netherlands
- Alaska Natives brought model to their tribal health system 11 years ago
- Minnesota, Maine, Vermont, and Swinomish Indian Tribal Community have all authorized dental therapists



Building Momentum for Dental Therapists



Oregon Tribes DHAT Pilot Project



OHA Pilot Project Background

Oregon Dental Pilot Projects were authorized by state legislation in 2011 to increase access and improve quality to oral health care by:

- Teaching new skills to existing providers,
- Developing new categories of dental providers, and
- Accelerating and expanding the training to current providers.



Additionally, in 2015, legislation was passed to:

- Extend the sunset date from 2018 to 2025--acknowledging the slow start and lack of funding to the program since 2011
- Ensure new providers and services would be covered by Medicaid
- Oregon Health Authority funded for upcoming years to administer the program

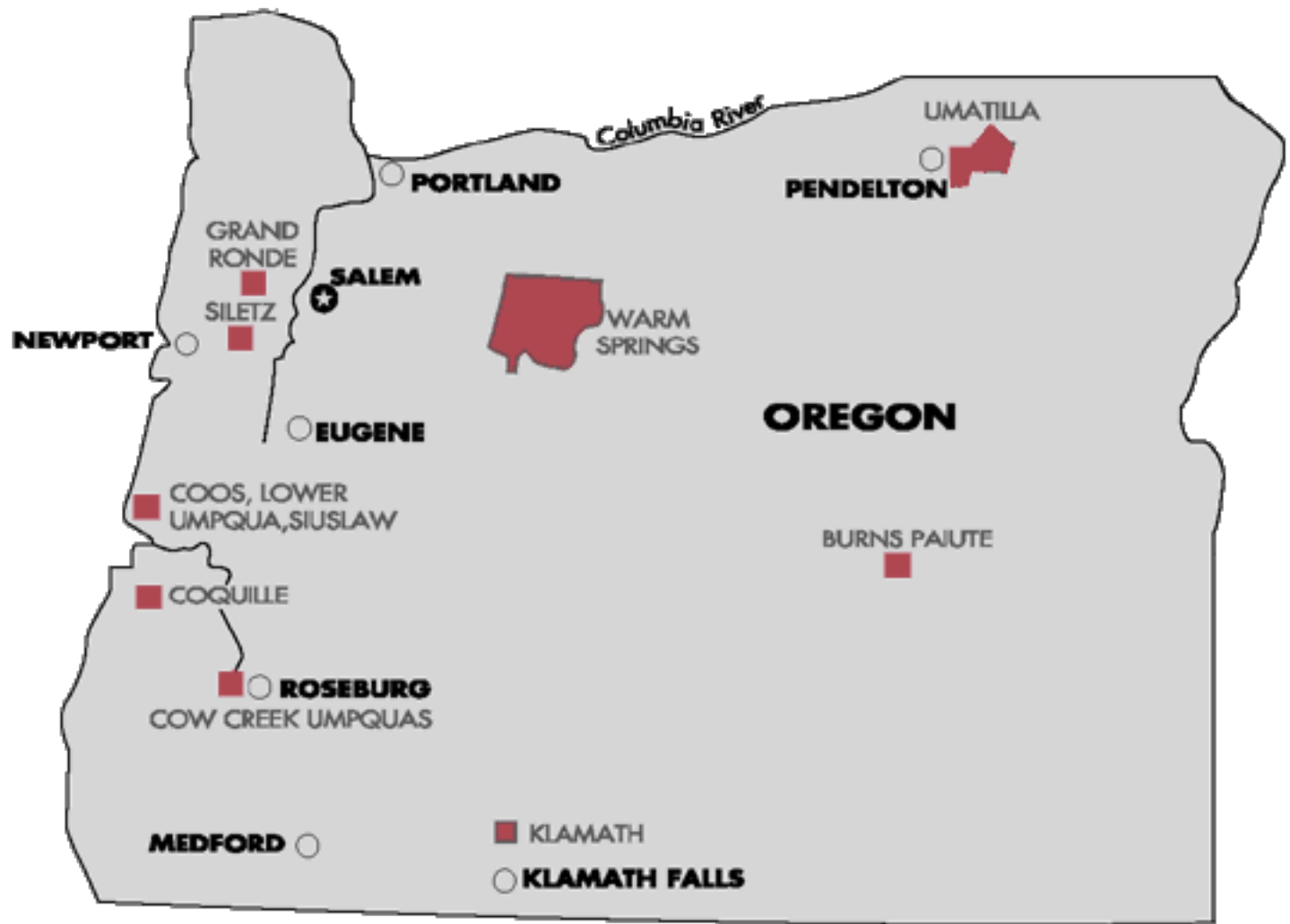


In February 2016, The Northwest Portland Area Indian Health Board--working with Oregon tribes--was approved by the Oregon Health Authority to train and employ DHATs at Tribal Health and Dental Clinics.



Initial Pilot Sites





About CTCLUSI

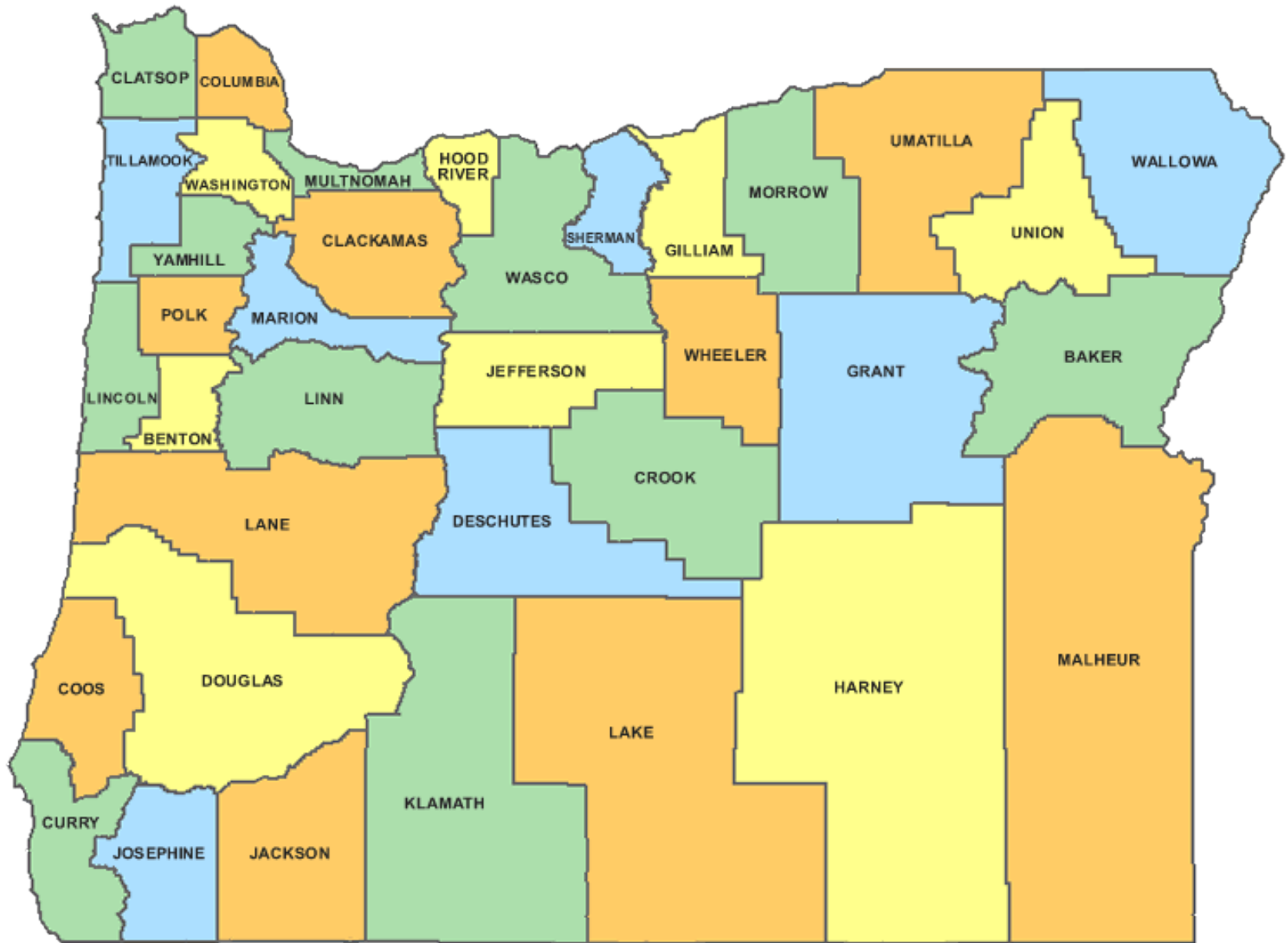
- The Confederated Tribes of Coos, Lower Umpqua and Siuslaw Indians original homelands extended from the Coastal Range in the East to the Pacific Ocean in the West, a vast region of some 1.6 million acres.
- Even though the U.S. government officially terminated them in 1954, the Confederated Tribes continued to fight for restoration, and recognition as a sovereign nation. They were restored as a federally recognized tribe on October 17, 1984.



CTCLUSI Dental Clinic

- Fully staffed 3-chair clinic serves primarily tribal members/families
- We also provide services to Coquille Indian Tribe. Coquille serves our members at their Community Health Center
- We have a 5-county service area including Coos, Curry, Lane, Lincoln and Douglas





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Dental Clinic Challenges

- Provider continuity and retention
- Large service area
- Backlog of patients
- Severity of oral health disease



Our Students!



Naomi Petrie
DHAT Class of 2017



Marissa Gardner
DHAT Class of 2018



Next Steps

- Collecting baseline data as part of a comprehensive program evaluation
- Hiring an experienced DHAT to start at the clinic before first student arrives next summer
- Supervising dentist training
- Expanding facility to accommodate new providers



About Coquille Indian Tribe

- Coquille ancestors lived in the lands of the Coquille River watershed and lower Coos Bay.
- The Tribe today has over 1000 members and a land base of 7,043 acres, and is the second largest employer in Coos County, Oregon.



About Coquille Indian Tribe

- After the United States reinstated federal recognition to the Tribe and restored its full sovereignty rights in 1989, the Coquille Tribal government created an administrative program that now provides housing, health care, education, elder care, law enforcement and judicial services to its members.



Coquille Indian Tribe Health Services

- Coquille operates Community Health Clinic for their members/family, community members, and CTCLUSI members in the 5-county service area: Coos, Curry, Douglas, Jackson and Lane
- We currently do not have a dental clinic or dental team but are exploring facility expansion and other options for housing a dental program



Our Students!



Alexandria Jones
Class of 2018

Jason Mecum
Class of 2018



Why DHATs make sense for Coquille

- Growing our own workforce
- Expanding member health care to include oral health
- Increased economic sustainability with providers who can do half of usual procedures at a lower cost



Next Steps

- Participating in baseline data collection as part of the comprehensive program evaluation
- Investigating how best to deliver oral health care to our members by building a dental team and the resources and facilities they need to be effective



Thank you!



QUESTIONS?

