Health Center and Dental School Service Education Program
A Concept to “Grow Your Own”

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National Oral Health Conference
May 2, 2005
Organization

- Background
- Problems Addressed
- Goals and Objectives
- Model Program
Background

- Pipeline, Profession, and Practice: Community-Based Dental Education
  - Funded Robert Wood Johnson Foundation, California Endowment
  - 15 schools; seniors and residents
  - 60 days in patient centered clinics
  - Students/residents average 7-10 visits/day
  - Health Center (HC) faculty treat full schedule patients

- Connecticut Model
Problem: Dentists

- Supply of Services Decline
  - Decline dentists
  - Gender change
- DDS Income Increases: 6%/Yr.
- Seniors Less Interest Treat Underserved
Concept Goals and Objectives

- **Goals**
  - Provide more care to underserved
  - Recruit and retain HC dentists
  - Pilot test model program

- **Objectives**
  - Select 7 HC Networks
  - Implement 3 year program
  - Assess program effectiveness
HRSA’s Grow Your Own Model

- The major purpose of the “Grow Your Own HC Nurse” program is to help address the nursing shortage and recruitment problems experienced by Health Centers (HCs), funded under sec. 330 of the Public Health Service Act, by training employees (or volunteers) and/or potential employees from the community as basic level registered nurses.

- A second purpose is to establish long term linkages between schools of nursing and HC to provide clinical training sites at the HC for the nursing school students. An expected outcome of this program is to assist HC in recruiting nurses by increasing the number of nursing students exposed to HC programs and populations.
The purpose of the “Grow Your Own HC Dentist” program is to help address the recruitment problems experienced by Health Centers (HCs), funded under sec. 330 of the Public Health Service Act, by training Dental Students from the local and regional Dental Schools and Residencies is service education health center linked programs.

A second purpose is to establish long term linkages between schools of dental schools/residencies and HCs.

An expected outcome of this program is to assist HCs in recruiting dental professionals by increasing the number of dental professional students exposed to HC programs and populations.
HRSA’s Grow Your Own Model

- The expected outcomes include:
  - training of Dental Health Professionals in a Health Center Primary Care Environment;
  - employment of these new Dental Professionals sec. 330-funded HCs;
  - a continuing linkage between the collaborating HCs and the Dental Professional Schools and Residencies.
Program: Applicants

- HC Network and School(s) Partner
  - Networks apply for and receive funds
  - Fund 7 at $140K/yr. for 3 years

- Selection Criteria
  - Underserved treated
  - Capacity
  - Sustainability
  - Other funds
How HRSA Funding “Could” Work

- Health Center led Networks would partner with local and regional Dental Professions Schools/Residencies to apply for a Network Oral Health Expansion Grant.

- A revenue sharing agreement between Network Health Centers and the Dental training Programs would occur based on mutually agreed upon Productivity goals.
Program: Finances

- Funds Cover HC Marginal Expenses
- Per Student/Resident Generate Gross Billings about $200K+/Year
- HC Receives First $40-50K Per Student to Cover Marginal Costs
- Networks Negotiate Revenue Sharing with Schools for Remainder
Program: Operations

- HC Dentists
  - Faculty appointments, training for role
  - Continue treat patients

- Schools
  - Malpractice coverage
  - Travel and living expenses
  - Rotations: minimum 3-4 weeks/provider
Service Education Model

Lead Health Center
Receives Grant, Coordinates Program
Manages Financial Transactions

HRSA-BPHC
Oral Health Service Expansion

Dental Schools, Residency Programs
Students/Residents
HC Faculty Training
Specialty Care

Outcomes
New Patients
Improved
Quality
Recruitment
Increased
Revenue

U.S. Department of Health and Human Services
Health Resources and Services Administration
Contact Information

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