Arizona School of Dentistry & Oral Health

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A.T. STILL UNIVERSITY

ATSU

ASDOH MISSION

The mission of the Arizona School of Dentistry & Oral Health is to educate caring technologically adept dentists who become community and educational leaders, serving those in need.

ASDOH graduates will be culturally-competent, community-responsive general dentists who are able and willing to serve as a resource in their community for dental public health issues.

Selection

"Our profession IS who we accept."

"We can teach almost anyone to be a good dentist, what we cannot teach is HEART."

Dr. Jack Dillenberg

Emphasis

Out of sight, out of mind.

Exposure

Experience is the best teacher.

How?

SELECTION

Utilize a unique application process that places a premium on volunteerism and underserved experience as well as the community from which the applicant comes.

CURRICULUM DESIGN AROUND PUBLIC HEALTH

Emphasize public health education and activities throughout dental school. Community Service Learning Requirements during last 3 years of Dental School. Require students to complete a Certificate in Public Health.

EXPOSURE TO COMMUNITY AND PUBLIC HEALTH EXPERIENCES AND OPPORTUNITIES

Group Practice model training during second and third year in on-site clinic.

4th year clinical experience at least 50% in external community rotations.

ICSP

ICSP = Integrated Community Service Partnership

Students will complete a Summer Rotation at the end of their 3rd year

At least 50% of the 4th year clinical education is done at external sites

Starting in the 4th year student completes 4 rotations of 4 – 6 weeks in duration

Each external rotation is followed by an equal amount of time in the ASDOH clinic

Participation in all assigned rotations <u>is required</u> but the student must complete a minimum of two (2) rotations for their graduation requirement

ICSP

4 program staff

- Associate Dean
- •2 Associate Directors
- •Administrative Assistant

Program is tuition driven.

Living and travel expenses paid by the student.

Housing generally paid by site.

Site retains all revenue from student production.

Types of Sites – 2013-2014

| FQHC: | 37 |
|-----------------------------|----|
| Other Community Non-profit: | 3 |
| Tribal Clinics: | 5 |
| IHS: | 3 |
| VA: | 1 |
| Homeless: | 2 |
| Portable/ Mobile | 2 |
| Student Arranged Clinics | 18 |

ICSP sites to which students are assigned for

| A 1 1 | 2013-2014 | | |
|------------|-----------|---------------|---|
| Alaska | 2 | New Hampshire | 1 |
| Arizona | 18 | New York | 1 |
| California | 6 | New Jersey | 1 |
| Colorado | 1 | New Mexico | 3 |
| Florida | 1 | | |
| Kansas | 1 | Ohio | 2 |
| | 1 | Oregon | 1 |
| Maryland | 1 | Rhode Island | 1 |
| Maine | 1 | | 1 |
| Michigan | 2 | Texas | 3 |
| e | 2 | Utah | 1 |
| Missouri | 2 | | _ |
| Montana | 5 | Washington | 8 |
| | _ | Wisconsin | 1 |
| Nebraska | 1 | 13 • 3 113 11 | _ |

| 2013-2014 ICSP Site/ Rotation Statistics | |
|----------------------------------------------------------------|-----|
| Arizona sites participating | 20 |
| Out of State sites participating | 39 |
| Total number of sites participating | 59 |
| Number of sites matching with students | 50 |
| Number of sites/ rotations that students arranged and | 17 |
| developed for themselves from their home area, hometown or | |
| area of interest. | |
| | |
| Total number of rotation slots available to students for 13-14 | 506 |
| Number of rotation slots filled for 13-14 | 290 |
| % of total rotation slots filled for 13-14 | 57% |
| % of Arizona rotation slots filled for 13-14 | 67% |
| % of Out of State rotation slots filled for 13-14 | 57% |

Interior Community Health Center – Fairbanks, AK



ICSP Rotation Benefits For Student

- •Exposure to a variety of community and public health based clinical environments and situations.
- •An opportunity to be taught and mentored by excellent clinicians.
- •Student competence and confidence dramatically increased.
- •A deeper understanding of the unique oral health challenges faced by many communities, and the opportunity to learn first hand how to address those challenges.

ICSP Rotation Benefits For Student

- •Students and sites report ability for students to see 8 12 patients per day at their 2ndrotation. Some students report these patient numbers during their 1st rotation.
- •Sites report that students can produce as much as \$10,000 \$16,000 in a 4 6 week rotation.

Hopi Health Care – Polaca, AZ



Procedure numbers

| Class of 2010 | | |
|-------------------------------------------|-------|--------|
| Total number of Restorative Procedures – | | 11,135 |
| Total completed Internally (D3, D4) – | 2,727 | |
| Total completed Externally (D4 only) - | 8,408 | |
| Average completed Internally - | 47 | |
| Average completed Externally - | 144 | |
| | | |
| Total number of Oral Surgery Procedures - | 5024 | |
| Total completed Internally (D3, D4) - | 1640 | |
| Total completed Externally (D4 only) - | 3384 | |
| Average completed Internally - | 28 | |
| Average completed Externally - | 58 | |

Mariposa CHC – Nogales, Arizona



ICSP Rotation Benefits For Site

- ✓ The dental staff has the opportunity to share their expertise and experience.
- ✓ The experience that the student receives at the site can be a very effective recruiting tool.
- ✓ All revenue produced by the student is retained by the site.
- ✓ The organization has the opportunity to be a partner with us in educating future dental professionals about cultural, societal and health issues unique to the community they serve.

Valley-Wide Health Systems – Alamosa, Colorado



ICSP Rotation Site Feedback Survey – 2007, 2009, 2012

ASDOH students contribute to our overall clinical operation.
Strongly Agree or Agree 89%

ASDOH student are valued by our providers.

Strongly Agree or Agree 95%

ASDOH student are valued by our staff and our administration.

Strongly Agree or Ágree 94%

ASDOH students are valued by the patients and the community we serve.

Strongly Agree or Agree 90%

ASDOH students contribute to meeting our organizations mission and goals.

Strongly Agree or Agree 85%

ASDOH and its students are seen as a potential source of providers.

Strongly Agree or Agree 90%

Participation with ASDOH and its students is seen as a positive retention tool.

Strongly Agree or Agree 75%

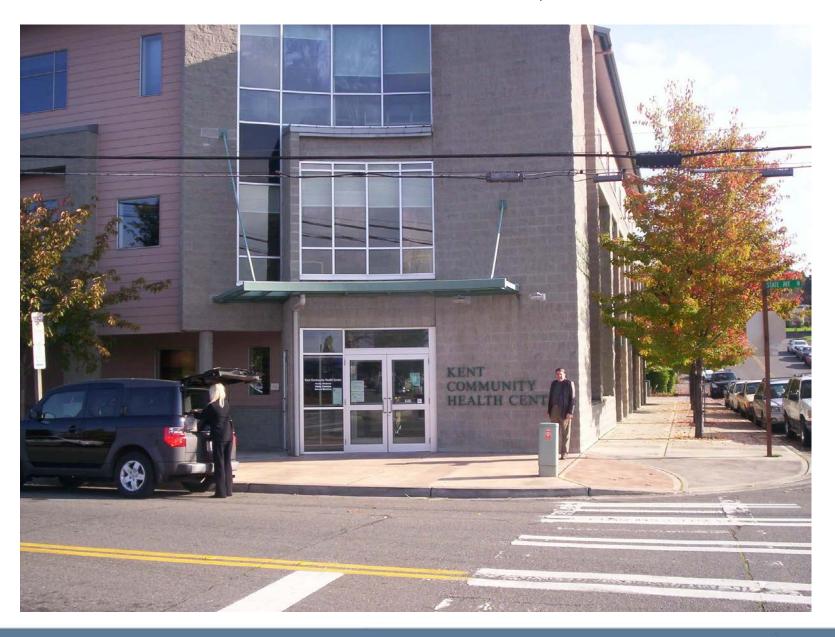
Describe the fiscal impact of student participation with your organization

Positive 44%

Neutral 50%

Negative 6%

HealthPoint - Kent, WA



Feedback Comments from CHC Sites

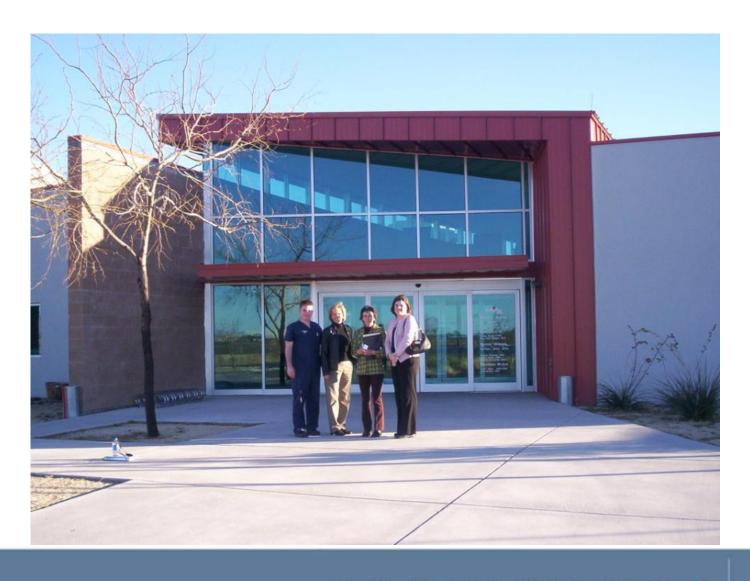
"We love having ASDOH students and the students increase our capacity to fulfill our mission."

"The students come to our site with tremendous competencies and proficiencies - ready and enthusiastic to jump into patient care."

"These students are dedicated, mature, responsible, compassionate, and conscientious. They will be our future colleagues, and will enhance our profession."

"Our mission is to treat underserved patients with quality treatment in a compassionate manner. ASDOH students have the same mission and goals."

Hidalgo Medical Clinic – Lordsburg, NM



Feedback Comments from Students

Inscription House – Shonto, AZ



"Being at the Inscription House, which is located about an hour from Kayenta, I am surprised at how this health center has built its own community.

Being someone that has always lived near a city I always wondered if I would feel right at home in a place that is more than 40-50 miles from the nearest town. Could I as a dentist choose to live and work in a place like this? I found that working in a community like this is an actual possibility for me.

I discovered this when I went for a walk with the IHHC dental clinic director, Dr. Samaddar. Talking with her I learned that there is so much beauty in places like Inscription House. What makes the clinic work and makes your home comfortable are the people in these small communities, people that are there because they want to be there to serve and to enjoy learning about others and the environment. "

Washington

I finally figured out what I want to do with my life:

I suspected that I would like working in public health, but I had no idea that I would love it.

I am convinced that community health center is a great place for me to begin my dental career, and the perfect opportunity to give back to the community.

I had already decided earlier in the year that I would like to finish my MPH after graduation, so I think that I have that part of my life figured out.

CHC of Southcentral Texas – Gonzales, TX



Colorado

This was a great group to work with. I was able to bounce questions, ideas, and, probe their minds with questions.

One of the reasons I decided to work in public health was because of my first experience at a public health center in Florida. This group embodied the culture, mindset, and compassion of the group that I use to work with in Florida which further strengthens my aspirations to work in public health and advance the health of the those that are unaware or less fortunate.

This is why I took the Hippocratic oath and these doctors further solidify my innate desire to work for the under served.

ATSU/ ASDOH Graduate Loanship Program Applications (funded by United Health Foundation)

James Doll Canyonlands Community Health Center, Fredonia, AZ

During my rotation in Salt Lake City, I found a woman seated quietly in the dental chair with tears streaming down her cheeks awaiting treatment her husband had passed away a few weeks earlier from cancer and that they were in heavy debt due to his hospital bills —she wondered how much more she could take.

After telling me of her many current struggles she expressed gratitude that a dental clinic existed where her and her children's needs could be met at little cost to her. She also expressed her tanks for my willingness to listen. I very quickly became the one with tears in my eyes as I proceeded to provide her with two occlusal restorations; quite possibly the two most memorable amalgams have placed in my short career.

ATSU/ ASDOH Graduate Loanship Program Applications (funded by United Health Foundation)

James Doll Canyonlands Community Health Center, Fredonia, AZ

It was that day that I decided working in a community health setting was what I wanted most.

As far as I understand these are the only dental clinics locally available to meet the needs of the people of these two very rural towns—Littlefield and Fredonia. This is certainly not something I foresaw when I endeavored into the dental profession a decade ago. I will probably not be able to do many veneers and I will probably get pretty tired of driving, but the thought of fulfilling these people's dental needs brings a lot of joy—which is what matters most.

ATSU/ ASDOH Graduate Loanship Program Applications (funded by United Health Foundation)

Robert Anderson Henderson County Rural Health Centers, Inc., Stronghurst, III.

It is profound how life's experiences influence the course that future decisions take. Up until my senior year of dental school at ASDOH, I would have told you that after graduation I was either continuing my formal education in a residency program, or going into private practice as an associate. During my fourth year of dental school I was exposed to dentistry in community clinic settings while participating in the external clinical rotations prescribed by our curriculum.

By selecting a rural setting in which to live and work, the opportunities to involve my wife and children with me in community projects are very much increased. By doing this, I hope to set an example for my children and those with whom I have the pleasure of associating with, of working not for the sole purpose of a paycheck, but to indeed make a difference.

St. Vincent de Paul – Phoenix, AZ



Class of 2011 Graduation Survey "Where are they going?"

Plans after graduation: - n=59

Specialty or Residency Training 38
Directly into practice/ employment 17
Did not know 4

Of the 17 graduates who went directly into practice/employment -

11 (65%) chose Community/ Public Health/ Military

| FQHC | 9 (53%) |
|------------------------|-----------------------------------------------------------------------|
| IHS | O |
| Military | 1* (6%) (*8 military graduates went into military residency programs) |
| Other Non-Profit | 1 (6%) |
| Solo Private practice | 0 |
| Partner/ Associateship | 4 (24%) |
| Group/ Corporate | 2 (12%) |

Class of 2012 Graduation Survey "Where are they going?"

Plans after graduation: - n=68

Specialty or Residency Training

Directly into practice/ employment

26

Did not know

Of the 26 graduates who went directly into practice/employment -

11 (42%) chose Community/ Public Health/ Military

| FQHC | 9 (3 | 5%) |
|------------------------|------|-------|
| IHS | 1 | |
| Military | 1 | |
| Solo Private practice | O | |
| Partner/ Associateship | 9 | (35%) |
| Group/ Corporate | 5 | (19%) |
| Contract Dentist | 1 | |

Class of 2013 Graduation Survey "Where are they going?"

Plans after graduation: - n=71

Specialty or Residency Training 35
Directly into practice/ employment 36
Other 6

Of the 36 graduates who went directly into practice/employment –

11 (30%) chose Community/ Public Health

| FQHC | 8 (22%) |
|------------------------|----------|
| Local Health Dept. | 2 |
| US Public Health Corps | 1 |
| Solo Private practice | 1 (2%) |
| Partner/ Associateship | 12 (33%) |
| Group/ Corporate | 2 (5%) |
| Contract Dentist | 1 |
| Unsure | 9 |

There is nothing more difficult to take in hand, more perilous to conduct, or more uncertain in it success, than to take the lead in the introduction of a new order of things – because the innovator has for enemies all those who have done well under the old conditions but only lukewarm defenders in those who may do well under the new.

Niccolo Machiavelli

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