Dental Hygiene in New Mexico

Executive Summary

Dental hygienists met as a group during a Summer Symposium in 2018 to provide input that would help develop a plan to advance dental hygiene in New Mexico. This input provided valuable insight into how dental hygienists could realistically make improvements to New Mexicans' health. Although most of the symposium consisted of round table networks for dental hygienists to discuss issues and ideas, the beginning included presentations addressing historical perspectives, national trends, New Mexico dentists' perspectives, and the focus on the future initiative. Following the symposium a work group was selected who were tasked with developing recommendations to advance dental hygiene in New Mexico, based upon the input from the symposium. An update on this work group was provided during the 2019 New Mexico Dental Hygienists' Association (NMDHA) Scientific Session to all dental hygienists and dental hygiene students in attendance. These recommendations included continuing to advance the educational degree attainment by dental hygienists, cultivating strategic partnerships, enhancing dental hygiene curriculum that focuses on the preparation of dental hygienists for the future, involvement in funding mechanisms for dentistry and infrastructure support for dental hygiene entrepreneurs. These recommendations will be discussed at the NMDHA Scientific Session in the Fall of 2019 and the paper will be available to all dental hygienists in New Mexico by links on multiple websites.

Introduction

Historically, dental hygienists in New Mexico have made numerous advances in the practice of preventive dental health care for populations within the state. These include continued advancements in treatment modalities, the creation of dental hygiene Bachelor's and Master's Degree programs, the increase in the number of schools offering dental hygiene degrees, improvements in the scope of practice, an increase in dental offices hiring dental hygienists, and the integration of dental hygiene positions outside of dental clinics to bring preventive care and comprehensive care management to more individuals. All of these advancements improve access to dental hygiene care for New Mexico citizens.

However, there is still much more to do to improve the oral health of New Mexicans. A group of dental hygienists came together for a symposium in the summer of 2018 as the beginning of a strategic initiative to boldly promote and advance the practice

of dental hygiene with the primary goal of improving the overall health of New Mexicans (See Figure 1). Although not specifically sponsored by one entity, the NMDHA and all New Mexico dental hygiene schools participated in the development and implementation.

Another goal was to promote the professional socialization of dental hygienists across the state. This initiative brought dental hygienists together to share their thoughts and visions so that a unified voice for dental hygiene could be developed and promoted. This unified group collectively developed strategic initiatives to advance dental hygiene and promote the use of dental hygienists within all health systems in New Mexico. For this reason, the symposium provided keynote presentations to present the historical perspective and describe the current system and projected trends in dentistry. The Executive Director of the New Mexico Dental Association also provided input from dentistry.



Figure 1: Strategic Initiatives

Subsequently, the participating dental hygienists provided input to moderators on specific topic areas (See Figure 2).

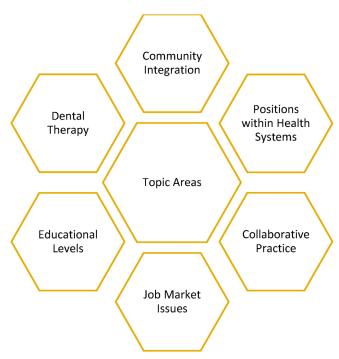


Figure 2: Topic Areas for Discussion

These input sessions comprised the majority of the symposium, which provided valued input to describe the perspective of many dental hygienists in New Mexico. The initiatives (Figure 3) discussed in the white paper are the areas in which dental hygienists in New Mexico propose to pursue the advancement of dental hygiene.

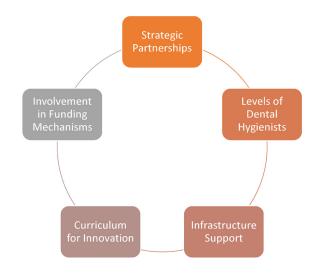


Figure 3: White Paper Initiatives

Strategic Partnerships

Background: Historically, the NMDHA and the dental hygiene educational programs have explored and engaged in strategic alliances with other organizations and schools. Continuing to cultivate these valuable partnerships among private and public health dental hygienists in New Mexico will help foster more strategic partnerships.

A strategic partnership is formed by two or more entities working to obtain a common goal. These partnerships, in the business environment, are targeted at leveraging and improving the competitive advantage for the parties involved. (1) In some instances, these strategic collaborations can be formal or informal. In the non-profit arena, agreements are not always formal and are based on the sharing of resources to accomplish a goal. (2) An example of an informal strategic allegiance is the collaboration between the NMDHA and community partners. In this scenario, the collaboration is mainly related to the delivery of a message for the benefit of the public. For example, Company X provides financial resources to NMDHA to support its mission of "representing dental hygienists in continuing to improve the oral health of our community by being innovative in increasing access to quality oral healthcare". Company X has a vested interest in improving oral health and reducing oral health disparities in the State of New Mexico;

however, NMDHA has access to the resources and workforce to accomplish Company X's mission but not the financial capacity to disseminate those resources to the public. In this case, a strategic alliance between Company X and NMDHA shows to be beneficial for both entities and instead of a formal agreement, both work collaboratively in a guid pro guo environment that ultimately benefits the public and provides a good image to both, Company X and NMDHA. Equally important is strategic planning and analyzing the business environment. A successful alliance comes from meticulous planning and knowing the strengths and weaknesses as well as the opportunities and threats of both, the organization and the potential strategic partnership organization. (1) If the main goal of the partnership is to promote social responsibility, then careful consideration must be placed on the Strengths, Weaknesses, Opportunities and Threats (S.W.O.T) analysis of the partnership in order to forecast outcomes and mutually take advantage of the shared strengths and opportunities presented. (1)

Dentists have been engaging in strategic partnerships for a long time. The exchange of resources and patient referrals with dental associates and other dental practices is a clear example of interbusiness relationships and intra-business partnerships.

These collaborations turn out beneficial not only to the partners but also to the patients they serve. Networking between providers and getting to know what resources each practice has to offer is essential for the exchange of expertise and resources. (3)

Solutions: In order to determine areas beneficial for dental hygienists' strategic partnerships it is pertinent to analyze the business environment in New Mexico following our S.W.O.T analysis (Figure 4).

This S.W.O.T analysis provides only a brief overview of the dental hygiene environment in New Mexico, as discussed during the symposium. Dental hygienists can benefit from professional collaborations and strategic partnerships to enhance their practice and professional development. The opportunities presented are just some of the areas where dental hygienists could potentially find new ventures and areas of interest. Any of the items presented in the opportunities section will require dental hygienists to get involved in some type of strategic alliance to be successful.

S.W.O.T. ANALYSIS

Strengths and Weaknesses are Internal Environment (Within DENTAL HYGIENE)
Opportunities and Threats are External Environment (Outside of DENTAL HYGIENE)

| HELPFUL | HARMFUL | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| To achieving the objective | To achieving the objective | |
| STRENGTHS | WEAKNESSES | |
| Professional Association- NMDHA Networking/Socialization Opportunities Professional Presence and Recognition Active on Legislation that Affects Dental Hygiene | Lack of Employment Protections for Dental Hygienists Lack of Unified Voice Dental Hygienists unwillingness to get involved in Professional Association and Ignite Action Lack of Emerging Leaders | |
| OPPORTUNITIES | THREATS | |
| Collaborative Practice and Advanced Practice (Dental Therapy) Advanced Educational Opportunities within the State Community Outreach Expertise Inter and Intra- Professional Collaboration | Lack of Employment in the State Legislation that would negatively affect Dental Hygiene Difficulty in starting a Dental Hygiene practice Low Dental Reimbursement Rates from Medicaid | |

Figure 4: S.W.O.T. Analysis of Business Environment in New Mexico

Levels of Dental Hygienists

Background: Today in New Mexico there are four dental hygiene programs accredited by the Commission on Dental Accreditation. Three programs are housed in institutions that additionally have regional accreditation. Dental hygiene education was first established in New Mexico in 1961 at the University of New Mexico (UNM) as an Associate of Science degree program. In addition to the University of New Mexico, San Juan College in Farmington accepted its first dental hygiene cohort in Fall 2001. The program at Doña Ana Community College in Las Cruces opened in 2007, with its first class graduating 2009. Pima Medical Institute in Albuquerque started in 2011. UNM is a Bachelor of Science (B.S.) degree entry level program with a graduate program and

a Bachelor's degree completion program.

The annual graduation statistics for dental hygienists in New Mexico are, approximately 48 students with an associate degree, approximately 30 dental hygiene students graduate annually with a Bachelor's degree and 4 graduate with a Master's degree in dental hygiene. New Mexico is not alone in addressing the importance of educational standards meeting healthcare needs. As stated in policy, the American Dental Hygienists' Association (ADHA) supports all aspects of formal dental hygiene education which includes certificate, associate, baccalaureate, and graduate degree programs; however, the ADHA

declares its intent to establish the baccalaureate degree as the minimum entry level for dental hygiene practice in the future. (4) It is apparent the ADHA sees the progression of the profession and recognizes the growing complexity of healthcare in general. Healthcare workforce across many disciplines are becoming more educated in general with positions requiring higher degrees.

Dental hygienists in New Mexico and across the country are further integrating in healthcare settings outside of the dental office including schools, hospitals and traveling programs. As dental hygienists practice in interdisciplinary work environments and are presented with increasingly complicated cases, additional skill sets are needed. Examples include understanding increasingly complex medical illness and socioeconomic forces affecting patient health and behaviors. Furthermore, these patient interactions require advanced leadership and communication skills, ethical decision making, and often policy and business skills. A deeper understanding of standards and regulations to keep patients safe is becoming increasingly important.

Also recognized at the symposium was the value of different educational levels for a dental hygienist working in various roles; therefore, standardizing the educational entry-level degree is not the definite solution.

Solutions: Due to the growing complexity of the healthcare environment, the primary goal expressed was to further strengthen the dental hygiene workforce with additional training opportunities. Three suggested solutions are: 1) increasing inter-professional integration training opportunities for dental hygiene students at all educational levels, 2) investigating and promoting BS degree entry level transition, degree-completion and dual enrollment opportunities, and 3) expanding higher education, graduate level experiences in the advancement of a higher-prepared workforce of dental hygienists. In a follow-up meeting to the symposium, educators from all the dental hygiene programs in New Mexico discussed establishing a dental hygiene educator alliance group. This group plans to meet routinely to collaborate on ways dental hygiene programs in New Mexico may further strengthen and prepare dental hygiene graduates.

Curriculum for Innovation

Background: Since the inception of dental hygiene by Dr. Alfred Fones in 1913, the profession has continued to evolve and advance. Dental hygienists have become the leaders in preventive oral health and are a valuable asset to the dental team. These educated, licensed providers provide both preventive and therapeutic treatments to improve the oral and overall health of the public they serve.

At the symposium, dental hygienists voiced that they are in support of a New Mexico dental hygiene-based dental therapy model and/ or an increase in practice options and settings. This consensus mirrors the ADHA's view of using advanced dental hygiene based workforce model. (5) They expressed the need for an advanced level provider in a variety of different settings such as nursing homes and school-based health centers throughout the state.

Throughout the symposium, several dental hygienists who have been successful in their sole business ventures discussed their practices. The majority reported they needed to pursue additional classes before their business start-ups that included small business information. Participants reported that although the classes that they pursued were crucial to their business ventures, they still reported they would

have liked to have business courses specific to dental hygiene and entrepreneurship.

Solutions: Dental hygiene educational institutions are essential to the infrastructure of support to dental hygienists. New Mexico currently has four entry-level dental hygiene programs, one of which offers a bachelor and master's degree in dental hygiene. These programs offer continuing education and certificates to advance dental hygiene education throughout the state. Courses that have been traditionally offered are courses directly related to the provision of dental hygiene services such as fluorides, lasers, and novel products. A shift, or supplementation to the courses currently offered should be inter-professional in nature and include topics such as business administration, business law, professional writing, and business analytics tailored toward the dental hygienist. Business classes for example are strategic ways to help dental hygienists who are looking to start their own dental hygiene practice. This additional educational demand on current educational infrastructure creates an additional burden on already crowded curriculums. The new educational programs needs will need to be shared among local, state and national associations.

Infrastructure for Support

Background: In 1999, legislation was established in New Mexico, which allowed collaborative practice agreements between dental hygienists and dentists that enabled dental hygienists to deliver preventive oral health care services without the general supervision of a dentist. At the time, New Mexico was one of only 10 states that permitted direct access to dental hygiene services. New Mexico is now one of the 40 states that allow direct access to dental hygiene services. Since this time, the practice act in the state of New Mexico has expanded for dental hygienists to include local anesthesia under general supervision and prescriptive authority. Dental hygienists in New Mexico are strategically positioned to capitalize on the advantages of their substantial legislative advancements.

The ADHA published a report titled Dental Hygiene at the Crossroads for Change which discussed new workplace models and opportunities. (6) These work place ideas include dental hygienists working in hospital settings, in primary care facilities, nursing homes, and private ventures. New work force opportunities coupled with the advanced dental hygiene scope of practice in the state make it a prime opportunity for innovation. To ensure that dental hygienists in New Mexico are able take advantage of these unique opportunities an infrastructure for support must be established.

Solutions: An ample infrastructure for support would provide education and services to dental hygienists to enhance and sustain new workplace models. This is crucial to workplace innovation in New Mexico because dental hygienists in the state have expressed interest in work place opportunities outside of the traditional private practice model. A well-structured infrastructure of support should give the dental hygienist the tools necessary to create strategic partnerships, affect funding mechanisms, build collaborative relationships, and develop skills that could drive dental hygiene workplace advancements.

State and local dental hygiene components should seek to expand their scope of continuing educational offerings and tailor them to meet the need for additional workplace models. They should solicit experienced hygienists or experts who can provide frameworks for dental hygiene workplace models and practical advice. The NMDHA should create a dental hygiene resource center that includes contact resources and toolkits for: 1) Insurance provider issues 2) Government agencies training 3) Educating dental hygienists about their scope of practice and 4) Providing example business models and start-up business training.

Involvement in Funding Mechanism

Background: One area in which dental hygienists have had minor involvement historically, is the funding mechanisms for dental hygiene care. Currently, funding for dental care comes directly from patients (self-pay); private dental insurance which generally comes from employee/employer contributions although some individuals purchase dental insurance outside of employment benefits; publicly-funded insurance, called Medicaid, for those with low-incomes and/or disabilities; or grants funded by government tax dollars or private sector companies or foundations. Additionally, the government funds dental care for military members and veterans with service connected disability. Lastly, tax revenue also pays for dental care for those in federal or state prisons.

The dental insurance industry affirms the value of dental hygiene treatment by the comprehensive coverage of dental hygiene services by insurance plans. The American Dental Association (ADA) has the authority to assess, develop and describe dental codes for reimbursement and state dental organizations were instrumental in the development

of dental insurance (7), which significantly improved the utilization of dental care, including dental hygiene care in the US. This also has placed significant power regarding dental care funding within this organization. Current trends, project that the movement of dental services from private dental offices to government-subsidized clinics and Dental Service Organizations (DSOs). DSOs bring the corporate structure to private dental offices and are continuing to increase in volume. Although Medicare has not generally covered routine dental services, unless an individual pays for supplemental insurance, this may be changing, and there is discussion on including dental care services within the Medicare reimbursement infrastructure.

Solutions: Dental hygienists must actively collaborative with dental organizations, governmental agencies, health systems and insurance companies on funding mechanisms involved in funding dental services. The NMDHA should take a lead in these endeavors. Faculty should also strive to include this in all curricula throughout the state, so that dental hygienists understand funding mechanisms.

Summary

Many individuals discussed ideas and possible solutions to address issues facing the profession during the symposium (Figure 5). The dental hygienists of New Mexico clearly are interested in advancing dental hygiene by promoting the use of dental hygienists throughout health systems in New Mexico.

| Solutions | Organizations | Partnerships |
|--------------------------------------------------|----------------|-----------------------------|
| | Involved | |
| Increasing inter-professional integration | Dental Hygiene | NMDA, Nursing and |
| Advanced practice and career opportunities | Programs and | Medical Associations and |
| | NMDHA | School Leader Associations |
| Advancing the education level of dental | Dental Hygiene | NMDHA |
| hygienists by promoting the BSDH Degree Entry | Programs | |
| Level, and increase enrollment in Degree | | |
| Completion and Graduate Level Programs | | |
| Enhance curriculum within dental hygiene | Dental Hygiene | NMDHA |
| Programs that focus on advanced skills, business | Programs | |
| administration, law and analytics | | |
| Toolkit Resource for dental hygienists that help | NMDHA | Partnerships with business |
| dental hygienists create practices | | creating agencies |
| Funding mechanisms involvement in all areas of | NMDHA | NMDA, insurance |
| funding including insurance companies, | | companies, governmental |
| governmental agencies and health systems | | agencies and health systems |
| Improving professional socialization of dental | Dental Hygiene | NMDHA |
| hygienists in New Mexico by enhancing student | Programs | Local Components |
| professional associations | | Dental Hygienists |

Figure 5: Solutions to Advance Dental Hygiene in New Mexico

The evolution of curriculum in dental hygiene programs and supportive services offered by the New Mexico Dental Hygienists' Association are always avenues to promote dental hygiene in New Mexico, with the ultimate goal of improving New Mexicans' overall health.

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Contributing Authors and/or Moderators:

Diana Aboytes, RDH, MS
Christina Calleros, RDH, MS
Lisa Esparza, RDH, MS
Elmer Gonzalez, RDH, MS, MA, PhD
Lindsey Lee, RDH, MS
Christine Nathe, RDH, MS
Sherry Paxson, RDH, MS
Vicki Pizanis, RDH, EdD
Barbara Posler, RDH

Participating Dental Hygienists:

Veronica Macias
Mike Boatman
Gloria Abeyta
Karen Foisie
Sandy Bartee
Jennifer Carranza
Amos King

Catherine Sovereign
Alicia D. Garcia
Christan Granger
Aliandra Maes
Joshua Thais
Lucille Saiz
Colleen White

Dawn Chadwell
Monica Trujillo-Willis
Simone Benito-Diaz
Steve Collotzi
Angela Cook
Jolene Vandolah
Tamara L. Urvanejo

Rocio Huizar

Marla McBeth Scott

Cindy Vigil
Nicole Love
Cheryl Offutt
Halie East
Paige Jensen
Michelle Grega
Vivian Doan
Cathy Elliot
Mariela Leyba
Erica Clampitt
Mary Kaye Vigil
Dina Martinez-Valdez
Erica Husak-Godec

Marion McCreary
Julie Arneson
April Polichette
Leslie Miramontes
Robin Gatlin
Amber Haddock
Frances Eckert
Candace Maestas
Heeta Shukla
Thuy Leuthner
Rachel Moore
Nutan Patel

Mannaie Prudencio

Michelle Le
Janet Schramm
Cheryl Stiles
Nancy Sabourin
Judy Lopez
Teresa Neri
Katelynn Steward
Gabrielle Paul
Alexandra Moore
Britney Ford
Celina Garcia
Elaine Sanchez
Ali Peralta

Raquel B. Montoya Melisa Coose Rochelle Begay Jacob Kualapai Melissa Barbara Gilbert Vazquez