Public Health Dental Hygienist (PHDH) Toolkit

Introduction
The Illinois Dental Practice Act allows public health dental hygienists (PHDH) to see patients without first having the dentist perform an exam. This opens up many opportunities for dental hygienists to provide oral health education, screening and assessment, and preventive care outside of the traditional setting. This toolkit is designed to provide Federally Qualified Health Center (FQHC) dental directors and public health dental hygienists resources that may help implement the work of a PHDH in the various settings that Illinois law allows. Whether your interest is in developing a sealant program, providing services at a Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) or Head Start program, developing a community outreach program or expanding services in the FQHC clinic, you’ll find information below to get you started or expand an existing program.

Planning Community-Based Programs.
If you are looking for information on community needs and resources, addressing social determinants of health, engaging stakeholders, action planning, building leadership, improving cultural competency, planning an evaluation, or sustaining your efforts over time, view the University of Kansas Community Tool Box at the Center for Community Health and Development.

Oral Health Education – Planning a Dental Health Event at Your Local School or Health Fair? Check Out These Resources.
Numerous opportunities exist for public health dental hygienists to educate the public about improving and maintaining oral health. Events such as school and community health fairs or community dental health education programs provide excellent opportunities for PHDHs to provide students, teachers, and the community information about oral health. Below you’ll find patient education materials and curricula for oral health educational programs.

Resources
- American Academy of Pediatrics Tiny Teeth Oral Health Tool Kit
- American Dental Association Smile Smarts! Dental Health Curriculum

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- American Dental Hygienists' Association Protect Tiny Teeth
- Colgate Bright Smiles - Bright Futures Program Materials for Dental Professionals
- Give Kids a Smile - Tiny Smiles Program
Head Start and WIC - Discover more about Head Start Centers and Women, Infant, and Children (WIC) Programs.
Head Start centers are dedicated to promoting school readiness for families with low incomes and their children from birth through age 5. In addition to education and cognitive-development services, Head Start programs provide comprehensive services, including primary health, oral health, nutrition, and social services. WIC saves lives and improves the health of nutritionally at-risk women, infants, and children by being one of the nation’s most successful and cost-effective nutrition intervention programs. The websites below provide additional information about Head Start and WIC programs.

Resources
- ASTDD Federal Agencies Head Start
- Open Wide: Oral Health Training for Health and Early Childhood Professionals
- Improving Access to Oral Health Services for Head Start and Early Head Start Children
- Dental Hygienists and Head Start
- Dentists and Head Start
- Dental Services at WIC: A Primer for Community Health Centers

School Screening Programs – Learn about common practices used to identify the oral health needs of school children. Dental screenings that include education, topical fluoride application, and necessary referrals can have a positive effect on the oral health status of children.

Resources
- ASTDD Basic Screening Survey Tools

Prevention Services – Read About the Numerous Types of Prevention Services Provided in School-Based Oral Health Programs.
Providing prevention services including sealants, fluoride mouth rinse, and fluoride varnish can aid in optimal dental health for children.

Resources
- School-Based Oral Health Programs
  - Association of State & Territorial Dental Directors (ASTDD) Statements on School-Based Oral Health Programs
  - ASTDD Best Practice Approaches for State and Community Oral Health Programs
• National Maternal and Child Oral Health Resource Center - School Oral Health Services is a collection of selected resources offering high-quality information about oral health services for school-age children and adolescents.

• School-Based Health Alliance School Oral Health Resource Library (scroll down the page to the hyperlink for the Oral Health Resource Library) offers information about school-based health including oral health education; screening and risk assessment; preventive care; care coordination, integrated services, evaluation, sustainability, and more.

• School-Based Health Alliance School Oral Health Playbook: The playbook provides links to school oral health strategies, examples of best practices models, and “how to” information about starting an oral health program or improving an existing one.

• American Journal of Public Health “Using Registered Dental Hygienists to Promote a School-Based Approach to Dental Public Health”

• American Academy of Pediatric Dentistry Recommendations for Pediatric Oral Health Assessment, Preventive Services, and Anticipatory Guidance/Counseling

• Sealant Programs – Available below are links to evidence-based information about the efficacy of dental sealants for prevention, guides for setting up a sealant program, and information on evaluation of a sealant program.
  • American Dental Association and American Academy of Pediatric Dentistry Evidence-based clinical practice guideline for the use of pit-and-fissure sealants (2016)
  • Preventing dental caries through school-based sealant programs: updated recommendations and reviews of evidence
  • Seal America the Prevention Invention
  • ASTDD Best Practices for Sealant Programs
  • The Community Guide - Community Preventive Services Task Force Preventing Dental Caries: Community-Based Initiatives to Promote the Use of Dental Sealants
  • The Community Guide - Dental Caries (Cavities): School-Based Dental Sealant Delivery Programs
  • School-Based Dental Sealant Programs Prevent Cavities and Are Cost-Effective (abstract)
  • Evaluation of School-Based Dental Sealant Programs: An Updated Community Guide Systematic Economic Review
  • Sealants for preventing tooth decay in permanent teeth

• Fluoride Resources – Check out these websites to get up-to-date information about topical fluorides.
  • American Dental Association Fluoride Clinical Guidelines – This webpage offers guidelines for topical fluoride, nonrestorative caries treatment, and fluoride treatment for young children.

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Best Practices for Portable and Mobile Dental Programs.
Portable and mobile dental services provide onsite dental preventive and restorative care for students at their school. Portable/mobile dental care improves students’ oral health by removing barriers to access care.

Resources
- ASTDD Mobile-Portable Dental Manual
- Mobile and Portable Dental Services in Pre-school and School Settings: Complex Issues
- California School-Based Health Alliance Resources
- National Network for Oral Health Access - Access to Care - Creating Access Points

Interprofessional Collaborative Practice.
Integrating oral health into medical care can increase access and reduce costs for dental care. Below are resources that provide information to help organizations make the shift to this patient centered model of care.

Resources
- National Network for Oral Health Access (NNOHA) Integrated Care Resource Center
- NNOHA How Can a Dental Hygienist Improve Access and Productivity in Your Community Health Center (CHC)?
- Improving Oral Health Outcomes by Integrating Medical and Dental Care

Articles about Direct Access Dental Hygiene Practice (including PHDH model).
- “Preparing the Future Dental Hygiene Workforce: Knowledge, Skills, and Reform” (Abstract) This article examines some of the factors that are likely to shape the future of dental hygiene practice, considers the strengths and weaknesses of current curricula, and proposes educational changes to prepare dental hygienists for practice in 2040. The article offers multiple scenarios in which dental hygienists can be key players.
• "Medical Dental Integration Model" – This article discusses “The First Teeth First Program” that is designed to help decrease the incidence of tooth decay in children through direct services and education for families using collaborative partnerships and a Medical Dental Integration Model.

• Public Health Dental Hygienist: An Option for Improved Quality of Care and Quality of Life (Abstract)
The purpose of this research was to document quality of life (QoL) and quality of care (QoC) measures for families receiving care from dental hygienists within public health departments, and to consider if oral health for families with economic disparities and cultural differences was improved.

• Perceptions of Kansas Extended Care Permit (ECP) Dental Hygienists’ Impact on Dental Care (Abstract)
The purpose of this study was to examine the perceptions of Kansas ECP dental hygienists on change to the oral health disparities present in oral care in Kansas.

• Expanded Scopes Of Practice For Dental Hygienists Associated With Improved Oral Health Outcomes For Adults
This article evaluates the impact of advanced dental hygiene scopes of practice on population oral health outcomes.
Roles of a Public Health Dental Hygienist

**Clinician**
- Screening and assessment
- Radiographs
- Prophy
- Fluoride application
- Sealant placement
- Silver diamine fluoride
- Intraoral photos

**Oral Health Educator**
- Oral hygiene instructions
- Group classes on oral health
- Nutrition counseling related to oral health

**Patient Management**
- Make referrals
- Follow-up on referrals
- Follow-up on emergency and urgent treatment

**Program Manager**
- Manage prevention programs
- School-based
- WIC
- Head Start
- Community outreach

**Interprofessional Collaborative Practice**
- Screening and assessment for medical patients
- Manage referrals for preventive and restorative care
- Fluoride varnish or silver diamine fluoride applications for pediatric patients
PREPARING FOR
PUBLIC HEALTH DENTAL HYGIENIST
CERTIFICATION

1. DETERMINE QUALIFICATIONS TO BECOME A PUBLIC HEALTH DENTAL HYGIENIST (PHDH)
   - A desire to provide dental hygiene services in a public health setting.
   - Two years of dental hygiene work experience or equivalent of 4,000 hours as a dental hygienist.

2. COMPLETE TRAINING REQUIREMENTS (42 hours of continuing education credit)
   - A total of 29 continuing education (CE) hours in medical emergencies in the dental office, pediatric dentistry, pharmacology, medical record keeping, oral pathology, and geriatric dentistry.
   - A total of five CE hours of your choice of geriatric dentistry, cultural competency, nutrition for geriatric and special needs patients, communication techniques with non-English speaking patients, and teledentistry.
   - Eight hour in-person review course and PHDH certification exam.
     Additional information at Illinois Dental Hygienists Association (IDHA)

3. PREPARING FOR PRACTICE AS A PHDH
   - PHDH certificate on file at supervising dentist’s office and with the PHDH certificate available to the Illinois Department of Public Health (IDPH) upon request.
   - Execute a PHDH supervision agreement between supervising dentist(s) and PHDH.
     ✓ Request template agreement from Illinois Primary Health Care Association (IPHCA).
   - Both parties sign agreement.
AFTER CERTIFICATION
WHAT NEXT?

Develop the Public Health Supervision Agreement

1. DEVELOP POLICY GUIDELINES AND/OR STANDING ORDERS
   - What will be considered standard provision of care?
   - What populations will be served?
   - If multiple locations, are standing orders the same?
   - How will referrals for dental emergencies be handled?
   - How are referrals and follow-up care managed?

2. DEVELOP COMMUNICATION AND CONSULTATION PROTOCOLS
   - How will the PHDH and DDS/DMD communicate?
   - How will immediate concerns be managed?
   - How often will DDS/DMD and PHDH meet to discuss cases?
     - Illinois Practice Act mandates there be at minimum quarterly meetings scheduled to discuss cases.
     - When might more frequent meetings be expected?

3. DEVELOP PROTOCOL FOR PATIENT DOCUMENTATION AND DENTAL RECORD MAINTENANCE
   - How will patient dental records be accessed?
   - What is the process for dental record storage?
   - Is there protocol for documentation?
     - Consent form signed – documentation that patient was informed of care provided by PHDH.
     - Documentation that the patient was informed that the dentist will not see the patient and that PHDH care would not be provided if other options were available.
     - Treatment provided is appropriately documented.
     - Documentation for dentist referral and/or need for follow-up care
     - Patient provided information sheet at end of appointment and said action documented in dental record.
4. DEVELOP SITE SPECIFIC MEDICAL EMERGENCY PROTOCOLS
   - Who are the responsible staff for each site and what are their roles?
   - Who gets informed of medical emergencies?
   - How is the incident documented?

5. EXECUTE PHDH SUPERVISION AGREEMENT BETWEEN PHDH SUPERVISING DENTIST(S) AND PHDH
   - Signed PHDH Supervision Agreement kept on file with availability to supervising dentist and PHDH.
   - Copy of PHDH agreement is submitted to IPHCA.

Follow PHDH Certification Requirements

1. PHDH REPORT TO ILLINOIS DEPARTMENT OF PUBLIC HEALTH
   - At the completion of a project or minimally once a year, complete and submit the Annual Report of PHDH Services and Location of Work to IDPH.

2. COMPLETE REQUIRED ANNUAL CE CREDIT CLASSES
   - PHDHs are required to complete four hours of CE credit courses related to public health per year in addition to completion of the required CE credit hours for relicensure.

Roles of the Public Health Dental Hygienist

1. ORAL HEALTH EDUCATOR
   - Patient oral health care instructions
   - Group oral health instructions
     ✓ Diabetic patients
     ✓ Older adults
     ✓ Pregnant women
     ✓ New parents
   - Nutrition counseling related to oral health
   - School-based oral health instructions
2. **PATIENT MANAGEMENT**
   - Referrals
   - Consultations
   - Management of follow-up care

3. **CLINICIAN**
   - Patient screenings and assessments
   - Oral prophylactic procedures
   - Radiographs
   - Sealant placement
   - Fluoride application

4. **INTERPROFESSIONAL COLLABORATIVE PRACTICE**
   - Screening and assessment for medical patients.
   - Manage referrals for preventive and restorative care.
   - Fluoride varnish or silver diamine fluoride applications for pediatric patients.
Determine Qualifications
• Committed to the PHDH model
• Two years or equivalent of 4,000 hours of dental hygienist (RDH) experience

Complete Training
[Total of 42 continuing education (CE) credits]
• Complete CE course requirements (34 CE)
• Complete review course and certification exam (8 CE)

Preparing for Practice
• Execute a PHDH agreement between dentist and PHDH including, PHDH policy guidelines and protocol.

Maintaining PHDH Certificate
• Annually complete four hours of public health-related CE requirements.
• Complete and submit the Annual Report of PHDH Services and Location of Work to IDPH.

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**What is Public Health Supervision?**

Supervision of a PHDH by a licensed dentist who has a written public health supervision agreement:

- PHDH must work in an approved facility or program.
- Dental exam before treatment (TX) not required.
- Dentist not required to be present in the facility during treatment.
- May treat patients who are either:
  - eligible for Medicaid
  - uninsured and whose household income is not greater than 200% of the federal poverty level

**What Services can PHDHs Provide?**

- Screenings and assessments
- Patient education
- Prophylaxis
- Radiographs
- Fluoride application
- Sealant placement
- Silver diamine fluoride (SDF)
- Intraoral photos – when intraoral camera is available

**RDH vs. PHDH?**

- **Registered Dental Hygienist**
  - RDH licensure
  - General supervision
- **Public Health Dental Hygienist**
  - RDH licensure and PHDH certificate
  - PHDH supervision
  - Dental exam prior to TX not required
  - TX allowed without dentist in facility
  - May not administer local anesthesia or nitrous oxide
  - May not place, carve, or finish amalgam restorations or provide periodontal therapy

**Where Can PHDHs Practice?**

- Federally qualified health center
- School-based clinic
- Federal, state, or local health department
- Head Start
- WIC

**How Does the PHDH Benefit Your Practice?**

The PHDH workforce model can have a positive impact on access to care. Allowing PHDHs to treat patients without a dentist first examining the patient can conceivably boost productivity. Permitting PHDHs to provide treatment without the dentist in the facility allows PHDHs the opportunity to provide dental hygiene services outside of the traditional clinic setting.