





## Oral Health Workforce Development Summit Summary

Fall 2022

# **Growing** and **developing** the oral health workforce in Michigan.

#### The Problem

Expanding and diversifying the oral health safety net is not a simple problem to solve.

For many people, the resources and education that can keep their mouths healthy are often out of reach. When it comes to dental insurance in Michigan, half the population is either uninsured or on Medicaid. These individuals often seek care from a provider in the oral health safety net, such as a Federally Qualified Health Center, if they can even receive care at all. According to the Health Resources and Services Administration, approximately 1.4 million Michiganders live in regions with inadequate access to dental services, and more than 286 dentists are needed to serve them.

Finding those 286 new dentists and recruiting them to practice in underserved areas is difficult for a variety of reasons, including geography, a lack of training or interest in public health dentistry and compensation. The average dental student graduates more than \$300,000 in the hole, and that number can be higher for students from historically and systemically disadvantaged backgrounds.

Partially as a result, Michigan dentists aren't representative of the populations they serve. As an example, less than 4 percent of dentists are Black, yet more than 14 percent of Michigan's population is Black. These issues exist for many dental hygiene and assisting students as well—dental hygienists are overwhelmingly white women, and licensing and supply fees are not covered by student loans, which can make them unaffordable for many.



#### What We Did

In July 2022, the Delta Dental Foundation (DDF) and the Michigan Primary Care Association (MPCA) gathered 63 oral health care providers, educators, advocates, foundation representatives and other stakeholders from across Michigan. Working with facilitators, the group discussed the current oral health landscape, including the barriers that prevent access to care, employment, opportunity and education. From there, participants brainstormed as many ideas as possible to address these barriers and grow and diversify the oral health workforce in Michigan.

#### What We Found

The Oral Health Workforce Development Group brainstormed desired outcomes with associated strategies that largely fell into one or more of these three categories: education, diversity and marketing. As an example, the desired outcome of "Dental assistant and dental hygiene students and professionals are exposed to careers in the safety net" could fall under marketing, and tactics to achieve that objective could include social media

campaigns, job shadow and mentorship programs, partnerships between safety-net providers and educational institutions and more. The top 10 desired outcomes are detailed below:

- Michiganders from diverse backgrounds have greater exposure to dental assisting and dental hygiene as career paths.
- Dental training and education are more affordable.
- Education and training programs, especially for dental assistants, are filling all available slots for prospective students.
- Create accessible opportunities for people to receive school-based and non-school-based dental training in their local community.
- Recruit individuals into the oral health workforce who look like the people they serve.
- Ensure safety-net clinics can offer creative and competitive benefits packages to attract and retain dental assistants and hygienists.
- Ensure leadership at safety-net clinics have the skills and support necessary to create an inclusive, supportive work environments.
- Michiganders view oral health professions in a more positive light and as an important part of the larger health care system.
- Dental assistant and dental hygiene students and professionals are exposed to careers in the safety net.

The Oral Health Workforce Development Group also hosted several focused discussions on how to build strong and accessible programs that create a robust dental therapy workforce. Participants explored:

- What it would take for one to three colleges or universities to open a CODA-accredited dental therapy program by Fall 2024.
- How to help interested dental therapy applicants pay for education.
- Whether it's possible to kickstart dental therapy in Michigan by luring in dental therapists from other states.

 The creation of a scholarship to send applicants to other states for education and bring them back to Michigan to practice.

The outcomes of this discussion include an announcement from Ferris State University committing to dental therapy program development, a commitment from the Delta Dental Foundation to fund a dental therapy scholarship and a commitment from the state of Michigan to fund efforts to develop dental therapy education programs. Additionally, the Michigan Health Endowment Fund Board will consider a dental therapy scholarship program in early November, and the W.K. Kellogg Foundation continues to explore ways to support dental therapy as a strategy for improving oral health equity. If all grants under consideration are approved, these organizations would provide collective support of more than \$1.5 million for dental therapy implementation in Michigan.

#### **Looking Ahead**

The next step is to determine how—and when—the interventions identified by the group can be implemented to meet the desired outcomes. To that end, the DDF and MPCA are convening a steering committee to review the summit's findings and develop an appropriate action plan. This committee will meet twice a year to assign tasks and track the results generated from these efforts, such as funding or policy changes. Steering committee efforts will be reviewed annually when the full Oral Health Workforce Development Group reconvenes. For more information about the steering committee and the Oral Health Workforce Development Group, email workforcedevelopment@deltadentalmi.com.

### Make a Difference

To learn more about the Delta Dental Foundation, visit www.deltadental.foundation.





