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Page 22

Addressing the Dental Assistant Shortage



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Membership Matters accepts original submissions for publication from member dentists. For viewpoint articles, please limit to 800 words. For clinical articles, please limit to 1,600 words. *Membership Matters* is not a peer review publication. Publication of any article is at the discretion of the Editor. Please disclose any financial interests you may have in products or services mentioned in your article. Email editor Barry Taylor at barrytaylor1016@gmail.com with any articles or questions.

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Membership Matters is an official publication of the Oregon Dental Association in support of its core purpose to advance the dental profession and promote the highest standard of oral health and oral health care.



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Barry by the Numbers

GUEST EDITORIAL



By Conor McNulty, CAE
ODA Executive Director

OFTEN, I FIND MY DAYS ARE FOCUSED on numbers: metrics, dashboards, infographics, budgets, etc. All indicators of health, progress and desired outcomes. While they're important, they don't usually provide the full story, but they make it easy to digest complex and voluminous information sources.

In reflecting on Dr. Barry Taylor's tenure as Editor and involvement with this magazine, I found myself once again thinking about numbers. The first monthly editorial meeting I attended after joining ODA was in February of 2014. It included ODA's communications manager, the designer/publisher of *Membership Matters*, myself and Dr. Taylor. An hour later, we wrapped up and I left with my head spinning after a wildly stimulating, entertaining and productive planning session for upcoming themes, issues, and content for *Membership Matters*. From that day forward, I've continued to be impressed by the work and commitment required of the ODA Editor. The below key numbers help showcase Dr. Taylor's countless contributions to this magazine, and communications efforts for the organization.

[9] Years served as the Editor for ODA, following many esteemed and creative predecessors.

[108] monthly editorial meetings completed.

[96] issues of *Membership Matters* published.

[90(ish)] issues of *Membership Matters* editorial deadlines extended to accommodate the editor's witty and sincere requests for time and new ideas.

[1] Presidential citation from Dr. Steve Timm for his work as Editor in 2015.

[7,564] rock and roll band song/ lyrics/historical references during those meetings and editorials written. The man is a walking musical almanac.

[20+] requests for editorials and article reprints from other state and component dental society publications.

[2] editorials written in haiku format. I'm pretty sure that's a record that may never be broken.

[96] editorials inspired from time spent at the dental school, in a private clinic or hiking and exploring the great outdoors across the country.

[63] ODA board meetings attended as Editor, an ex-officio Board position.

[2] sons – Sage & Carl Taylor – who have participated, endured, or served as inspiration for magazine material. Both great young men, by the way.

[200+] member volunteers engaged in writing articles, guest editorials, or interviews for issues of this magazine.

[Hundreds] of dental students inspired and engaged at OHSU School of Dentistry through Dr. Taylor's genuine passion for education and dentistry, many of whom have gone on to contribute to this magazine and serve in leadership roles throughout each level of the organization.

[2,400+] ODA members and their office teams who've read, learned, agreed, disagreed and questioned

The opinions expressed in this editorial are solely the author's own and do not reflect the views of the Oregon Dental Association or its affiliated organizations.

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their own perspectives on dentistry as a result of Dr. Taylor's efforts each month.

Sometimes, statistics can't illustrate everything, but they give you a peek behind the curtain to appreciate the great work happening all around you. There aren't enough thanks to acknowledge Dr. Taylor's hard work and efforts. This publication, the organization, and the dental community of Oregon are better off as a result.

While this piece is meant to sincerely honor Dr. Taylor for his contributions and service to the organization as Editor, it's not a goodbye send off. In fact, he'll continue to serve with the same witty, curious, open-minded and humble approach as President-Elect for ODA following the House of Delegates in September. This editorial, well...it's just Barry by the numbers. 🍷



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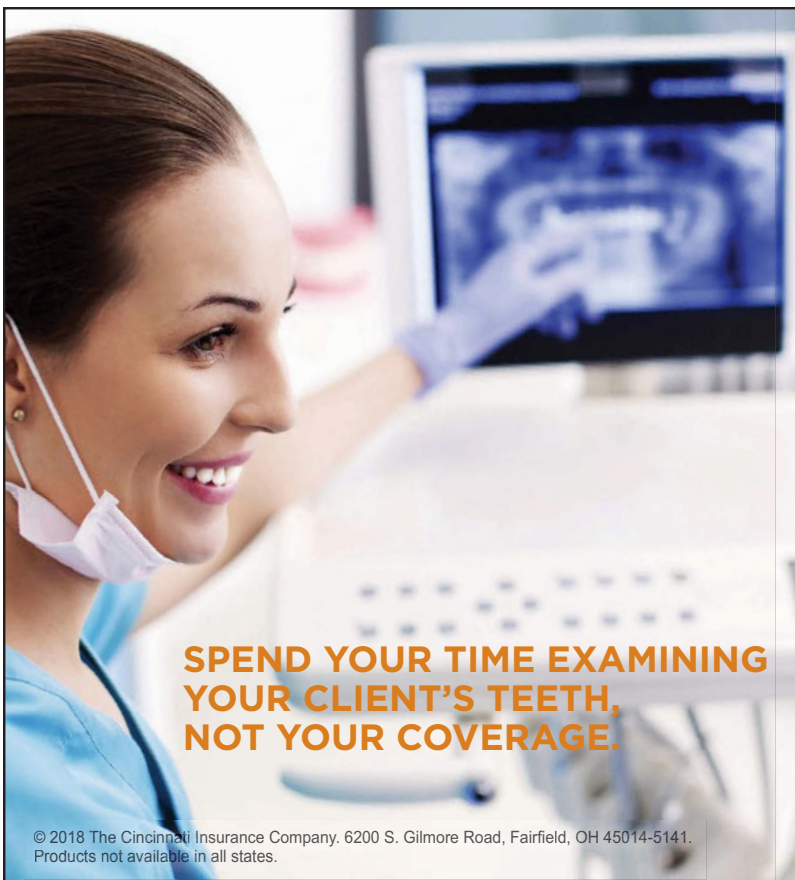
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Multnomah Dental Society

Samyia Chaudhry, DMD
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Patrick Chuang, DDS
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Rachel Forer, DDS
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Leif Gambee, DMD
Yamhill County Dental Society

Noelle George, DMD
Multnomah Dental Society

Gurpreet Gill, DMD
Lane County Dental Society

Dean Gretzinger, DDS
Multnomah Dental Society

Raphael Joseph, DMD
Southern Willamette Dental Society

Jed Keener, DDS
Central Oregon Dental Society

Madeline Kelley, DDS
Multnomah Dental Society

Kelsey Loontjer, DDS
Multnomah Dental Society

Irene Louie, DDS
Multnomah Dental Society

Osama Naga, DDS
Southern Willamette Dental Society

Brian Naylor, DDS
Southwestern Oregon Dental Society

Anna Nonaka, DDS
Multnomah Dental Society


Puja Patel, DDS
Multnomah Dental Society

Steven Perry, DMD
Eastern Oregon Dental Society

Danielle Plesh, DMD
Multnomah Dental Society

Alayna Schoblaske, DMD
Southern Oregon Dental Society

Julie Spaniel, DDS
Washington County Dental Society

Kaitlyn Traynor, DMD
Mid-Columbia Dental Society 



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EDUCATION

Calendar provided by Mehdi Salari, DMD

| Date | Host Dental Society | Course Title | Speaker | Hours CE | Location | More Information |
|----------|-----------------------|--|--|----------|--|--|
| 09/11/18 | Marion & Polk | How to Have Productive Pediatric Appointments | Wes Heringer, III, DMD | 1.5 | Salem (Boys & Girls Club) | Contact Sabrina H. — mpdentalce@qwestoffice.net |
| 09/18/18 | Washington | The Business of Dentistry | Multiple Speakers | 1.5 | Aloho (The Reserve Vineyard & Golf Club) | wacountydental.org or contact@wacountydental.org |
| 09/20/18 | Central Oregon | Dental Trauma & Cracked Tooth Syndrome | Dr. Ryan Duval | 1.5 | Bend (The Riverhouse) | www.centraloregondental society.org |
| 09/21/18 | Lane | Recognition, Diagnosis & Management of Common and Important Oral Soft Tissue Lesions | Drs. Kratochvil, Kleinegger & Petrisor | 6 | Eugene (Center for Meeting & Learning, Lane Community College) | www.lanedentalsociety.org — office@lanedentalsociety.org |
| 10/9/18 | Marion & Polk | Heroes on the Sidelines: Sports Dentistry for Today's Athlete | David Dowsett, DMD | 1.5 | West Salem (Roth's) | Contact Sabrina H. — mpdentalce@qwestoffice.net |
| 10/12/18 | Lane | Achieving Financial Independence | Andrew Tucker | 5 | Eugene (Center for Meeting & Learning, Lane Community College) | www.lanedentalsociety.org — office@lanedentalsociety.org |
| 10/19/18 | Southern Willamette | Risk Management | Chris Verbiest | 3 | TBD | Contact Brian — swdsoregon@gmail.com |
| 10/26/18 | Central Oregon | Global Smile Design | Dr. Bill Robbins | 6 | Bend (Spring Hill Suites) | Contact Jen at jen@kruegerlenox.com or www.centraloregondental society.org |
| 11/2/18 | Lane | Soft Tissue Grafting | James Kohner, DDS | 6 | Eugene (Center for Meeting & Learning, Lane Community College) | www.lanedentalsociety.org — office@lanedentalsociety.org |
| 11/13/18 | Marion & Polk | Sleep Apnea | Patrick Hagerty, DMD | 1.5 | West Salem (Roth's) | Contact Sabrina H. — mpdentalce@qwestoffice.net |
| 11/13/18 | Washington | Risk Management | Chris Verbiest & Others | 3 | Beaverton (Stockpot Restaurant) | wacountydental.org or contact@wacountydental.org |
| 11/15/18 | Multnomah & Clackamas | OSHA Update | Monica Monsantofigli, RDH, MS | 2 | Milwaukee (Moda Plaza) | multdental@aol.com or lora@multnomahdental.org |
| 12/11/18 | Marion & Polk | Risk Management | Chris Verbiest | 3 | West Salem (Roth's) | Contact Sabrina H. — mpdentalce@qwestoffice.net |
| 01/8/19 | Marion & Polk | Prevention & Management of Nerve Injury | Daniel Petrisor, DMD, MD | 1.5 | West Salem (Roth's) | Contact Sabrina H. — mpdentalce@qwestoffice.net |
| 01/8/19 | Washington | The 3Ds of Cone Beam & its Utilization | Multiple Speakers | 1.5 | Beaverton (Stockpot Restaurant) | wacountydental.org or contact@wacountydental.org |
| 01/16/19 | Multnomah | Understanding Current Tax Laws | Elliott Tracy, CPA | 2 | Milwaukee (Moda Plaza) | multdental@aol.com or lora@multnomahdental.org |
| 02/12/19 | Marion & Polk | Hot Employment Law | David Briggs, Saalfeld Griggs, PC | 1.5 | West Salem (Roth's) | Contact Sabrina H. — mpdentalce@qwestoffice.net |
| 03/12/19 | Marion & Polk | You, Me & 3D — Past, Present & Future | Jev Clark, DMD, MD | 1.5 | West Salem (Roth's) | Contact Sabrina H. — mpdentalce@qwestoffice.net |
| 03/12/19 | Washington | Implants & Digital Dentistry | Dr. Tyler Clark | 1.5 | Beaverton (Stockpot Restaurant) | wacountydental.org or contact@wacountydental.org |
| 03/20/19 | Multnomah | Implant / Bone Graft Course | Daniel Petrisor, DMD, MD | 2 | Portland (OHSU School of Dentistry) | multdental@aol.com or lora@multnomahdental.org |
| 05/7/19 | Washington | CRA Update or New Age of Ortho | TBA | 1.5 | Beaverton (Stockpot Restaurant) | wacountydental.org or contact@wacountydental.org |
| 05/14/19 | Marion & Polk | New Hematologic Drugs | William "Bud" Pierce, MD, PhD | 1.5 | West Salem (Roth's) | Contact Sabrina H. — mpdentalce@qwestoffice.net |
| 05/15/19 | Multnomah | Table Clinics | N/A | 2 | Portland (MAC Club) | multdental@aol.com or lora@multnomahdental.org |

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The Oregon Dental Association kicked off the inaugural Leadership Academy in January. The Academy provides participants with a unique backstage pass to ODA offerings and experiences, while developing and enhancing leadership and interpersonal skills.

Congratulations to our Inaugural Leadership Academy Class!



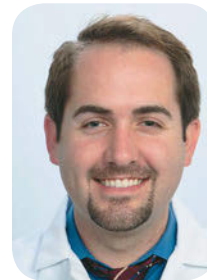
Jordan Anderson,
DDS



Deepak Devarajan,
DMD



Amberena Fairlee,
DMD



Bradley Field,
DDS



Stacy Geisler,
DDS, PhD



Megan Hayes,
DMD



Andrew Peterson,
DMD, MS



Sita Ping, DMD



Shane Samy,
DMD

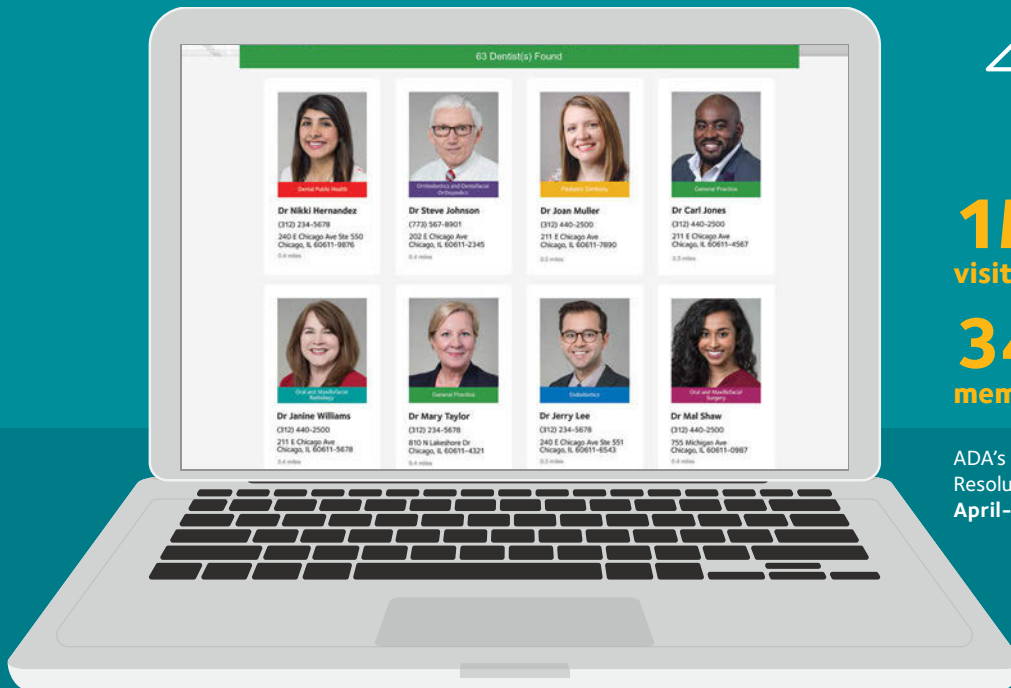


Jeremy Suess,
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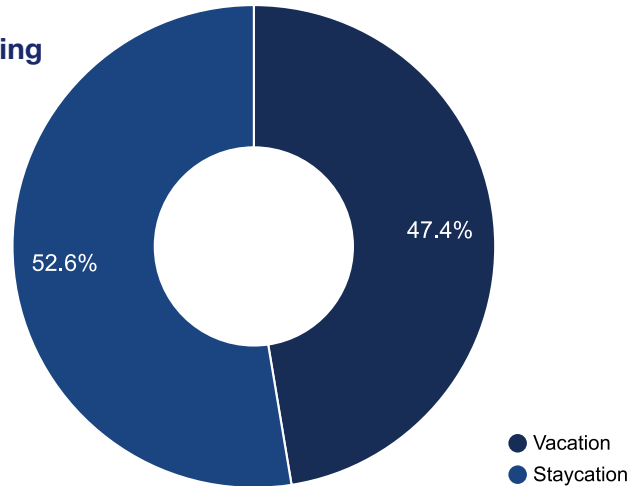
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Membership Poll Results!

IN AN EFFORT TO LEARN MORE ABOUT our members, we include a poll question in each issue of the ODA Insider e-newsletter. Below are the results from July. Please keep an eye out for future questions, and be sure to participate!

Summer is in full swing! Are you going on a vacation or staycation?



Kariana Peters, DMD, Managing Dentist

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How to Help Patients Choose Dentistry and...



By CareCredit

GIVEN THE OPPORTUNITY, MOST PATIENTS WOULD CHOOSE to have a healthy, attractive smile. Unfortunately, many patients feel they have to delay or decline treatment, citing “cost” as the reason because of other financial commitments or priorities. These priorities vary by individual and include needs and wants such as college tuition, car repairs, home improvements, vacations and weddings.

One easy way to help more patients choose to move forward with recommended dentistry without delay is to give them a solution so they can prioritize treatment along with other things. With the CareCredit health care credit card, it’s easier for many patients to fit the cost of dentistry into their monthly budget so they can get care and get their car fixed; get an implant and pay the kids’ tuition; or get adult orthodontics and braces for their kids.

Let Patients Know BEFORE Cost Becomes a Barrier to Care

Just as all patients’ oral health needs differ, so do their financial situations. Letting patients know a special financing option is available early in the patient experience may help them focus on getting the best care, not how to manage the cost.

“Mrs. Jones, it’s great to see you again. Doctor will be with you in just a minute or so. Anything exciting happening in your life?”

“Well...we just booked a two-week cruise to the Bahamas!! I can’t wait.”

“That sounds so exciting. Mrs. Jones, we know everyone has other things going on in their lives — other financial responsibilities — like fabulous cruises. That’s why we do our very best to maximize your insurance contributions. And why we accept cash, general purpose credit cards and the CareCredit healthcare credit card — if you’d rather pay monthly. Would you like more information about that? We want to give you every opportunity to get a healthy smile and

are committed to helping you get care and go on that wonderful cruise!”

Letting patients know payment solutions are available can set the foundation for treatment acceptance. During the financial conversation, it can be helpful to let patients choose for themselves by presenting all payment options and letting them choose what works best for their family and current financial situation.

“Mrs. Jones, we want you to have a healthy smile and enjoy your cruise. You are going to have an out-of-pocket investment for your care, so as we go through what insurance is going to contribute and the remaining balance, remember we accept cash, credit cards and have available a monthly payment option with the CareCredit credit card. I’ll share more information about that with you if you’d like, including what your monthly payment might be.”

When you wait for patients to ask for payment solutions, it may be too late. Some may have already decided to postpone care. Others may walk out of your practice to “think about it,” and never tell you being able to pay over time would have made it easier for them to accept care. Because they just bought a new car or their water heater broke or their dog just had surgery, offering CareCredit to all patients may just turn their mindset from “dentistry or” to “dentistry **and**.” ●

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An Open Letter to ODA Membership



By Dr. Gary Underhill,
President of the
Oregon Board of
Dentistry

WHEN ASKED TO SERVE ON THE OREGON Board of Dentistry (OBD) four years ago, several concerns and questions came to mind.

There had not been a dentist from Eastern Oregon on the OBD for 27 years. Those of us living in our part of the state viewed the OBD with some skepticism. It had always been composed of people from the Portland-Eugene corridor who had little concept of the needs of rural dentistry.

However, after much thought and reflection, I decided to take up the challenge and do my best for a profession for which I have a passion. Coming from a fee-for-service private practice in Wallowa County to dealing with government has been an interesting journey. I have learned about laws, statutes and rules. I have also seen a side of my profession I did not know existed.

My only prior exposure to the investigative process of the OBD was years ago, back when Dr. Kleinstub still had a lot more hair. I had a complaint filed against me, and although it resulted in “No Further Action,” I spent some sleepless nights worrying about it. Because of that experience, I am sensitive to my colleagues’ concerns. Our staff is directed to expedite cases when indicated. On occasion, I have made unofficial calls of encouragement to colleagues going through a rough spot because of a complaint.

The OBD itself is composed of six dentists, two hygienists and two public members.

Usually a board member will serve two terms of four years each. All of us serve at the pleasure of Governor Kate Brown. Governor Brown is committed to diversity, and all sections of our society are well represented. Governor Brown also expects the OBD to enforce the law, and all of our actions follow strict legal guidelines.



Our public members bring an interesting mix to our board deliberations. Alton Harvey comes from the trucking industry. He cannot understand why our licensees cannot get their license renewed on time, even with numerous reminders. In his business, nobody babysits the drivers. If they fail to maintain an active license, they do not drive — period! If they do, they are subject to a massive fine. However at the BOD, approximately 25 percent of our discipline comes from failure to spore test autoclaves, failure to maintain current CE and BLS/CPR and practicing with an expired license.

From time to time, you may hear a colleague howling from afar about a great injustice that has been heaped upon them by the board. One must keep in mind the board did not dictate the path they chose to travel that resulted in discipline. No discipline is taken without thorough investigation by the staff, and each case is reviewed by our evaluators before going to the full board for final action. If a licensee does not agree with board action, they can always ask for a hearing.

We are all members of a great profession. As a group, most of us do our best to serve our patients and to enjoy life as we go along. Approximately 80 percent of all complaints received at the OBD are settled in favor of our licensees with no discipline, which shows that most of us are doing a great job. This also means that the complainants and consumers involved in these cases are not happy with the Board of Dentistry if discipline is not administered as they see fit. Those consumers contact the board, the governor and their state representatives too.

I appreciate the ODA giving me this opportunity to share my thoughts with you and hopefully leave you with a little better understanding of the important work we do. It is my sincere desire that all of my colleagues enjoy this profession as much as I have.

Best Regards,
Gary R. Underhill, DMD, President of the
Oregon Board of Dentistry



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Regulatory Compliance Information

Is Your Office in Compliance with Board of Dentistry Requirements?

The Oregon Dental Association would like to remind our members of certain regulatory requirements.

Spore Testing

Heat sterilizing devices shall be tested for proper function on a weekly basis by means of a biological monitoring system that indicates micro-organisms kill. Testing results shall be retained by the licensee for the current calendar year and the two preceding calendar years.

See OAR 818-012-0040(2).

Continuing Education

All dentists should track their Continuing Education classes and hours earned and ensure they meet their CE requirements before next license renewal.

See OAR 818-021-0060.

BLS Training

All OBD licensees must maintain a current Basic Life Support (BLS) for Health Care Providers certificate.

See OAR 818-012-0030.

License Renewal

While it may seem obvious, please make sure your license is renewed prior to expiration. It is illegal to practice dentistry without an active license. ●



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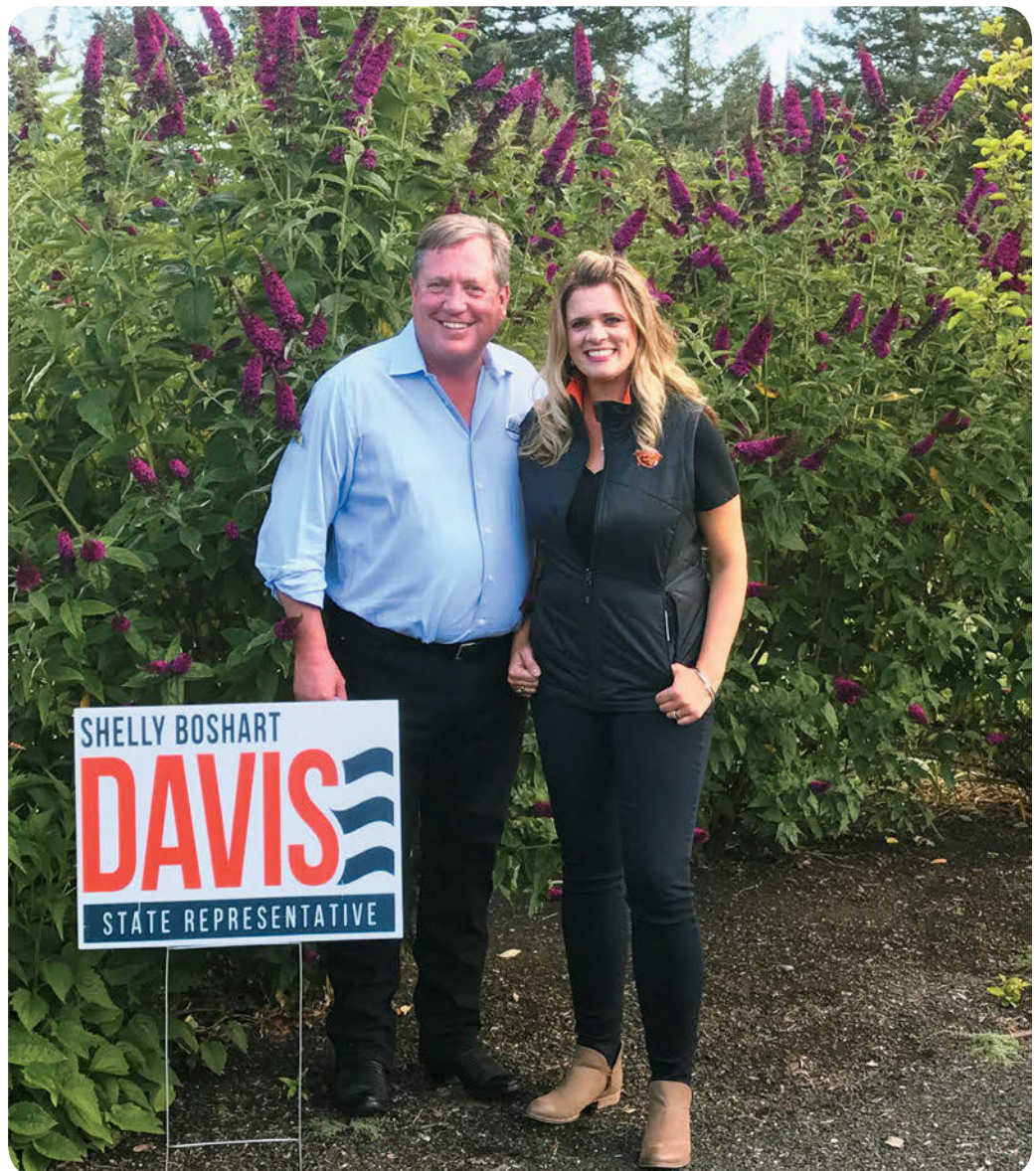
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DOPAC Member Engagement

THE DENTISTS OF OREGON POLITICAL ACTION COMMITTEE (DOPAC) are proud members of the “tooth party,” supporting candidates from both political parties who will advance oral health issues in the state. Connecting ODA members directly with candidates builds relationships and furthers ODA’s advocacy efforts.

DOPAC Board Member Dr. Patrick Hagerty recently hosted a fundraiser for candidate Shelly Boshart Davis. Shelly is running for the Oregon House District 15 seat — the Albany area.

Hosting or attending a fundraiser is a great way to engage in the political process. Contact the ODA for opportunities to attend a fundraiser on behalf of DOPAC. ●



Dental Schools, Organized Dentistry Work to Address Shortage of Dental Assistants

By Melody Finnemore

NEARLY 65,000 MORE DENTAL ASSISTANTS WILL BE needed by 2026, up from the 332,000 who were employed in 2016. The profession's 25 percent growth rate is faster than the average for all occupations, with the aging population and ongoing research linking oral health and general health continuing to increase the demand for preventive dental services, according to the Bureau of Labor Statistics.

With average pay of \$18.09 per hour (\$37,630 a year) and a plethora of full-time work opportunities to choose from, it would seem that more young people would clamor

for the chance to work as a dental assistant. And, yet, they aren't.

The reasons for this dynamic are varied and are largely based on speculation, though dental schools and organized dentistry associations including the ODA are exploring the issue. Longtime dental assistant Mary Harrison, CDA, EFDA, EFODA, FADAA, is involved with several of the organizations and said it is a common theme in professional conversations these days.

"I am sure several topics have come to light," she said. "It might be the fact that the economy is better and there are many other



positions available, and the topic of pay and benefits is another issue.” she added that the Dental Assisting National Board is researching the issue, among others.

Stacy Bone, professional development and dental health education coordinator for Portland Community College’s Institute for Health Professionals, said dental assisting is not marketed at high schools as a career, but more as a pathway to becoming a dental hygienist or dentist.

She noted that people can enter the profession as a dental assistant without any formal education but must take courses and obtain certificates in order to expose X-rays and perform expanded duties in Oregon. However, the career does not require continuing education to maintain certification, as is mandated for hygienists and dentists.

Bone also acknowledged that four-handed dentistry instruction in dental schools has been lacking in the past 10 to 15 years as Dental Auxiliary Utilization Programs have been cut.

She also often hears that the pay is not a living wage so dental assistants must have a second job or rely on a spouse or partner to contribute to afford to live.

Harrison and Bone agreed that the role of dental assistants has changed in myriad ways, from expanded functions and responsibilities to working with technological advances and keeping up to date on materials options.

“The different types of dental practices — single, group, corporate — those changes alone are huge in the responsibilities

that are expected for staff in both areas of the office, front and back,” Harrison said. “Some offices have a person responsible for the cleaning and sterilization of instruments, and assistants in charge of ordering instruments and supplies. These all affect the assistants.”

She noted that, in addition to more responsibilities, challenges for dental assistants include health issues such as back problems and hearing loss and less time to do more work.

“To me, going back several years, the dentist would encourage membership in the dental assistant association and that being a bonus by paying the dues and for all continuing education,” Harrison said. “Times have changed, and most young assistants do not have any desire to join or attend meetings. That is sad to me, the loss of networking with other professionals, learning from each other about new materials, or what to do when a problem comes up, and understanding and sharing experiences and helpful hints on all subjects in the dental office.”

Bone, who oversees PCC’s Integrative Community Dental Assistant program, said the college is seeing positive results from the program. Although it is difficult and time-consuming, it allows students to work and study mostly from home. The externship begins in Term 1 and adds to the students’ confidence right from the start.

“It’s more like a workforce training, which dental assisting is perfect for. They are still qualified to apply for most DA positions in Oregon when they’ve completed the program,” she said.

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Portland, Oregon

Lane Community College
Eugene, Oregon

PCC hosts several career fairs throughout the year that are open to high school and college students to promote the dental assisting career. Its website highlights dental assisting as a career and the programs it offers. And its media department is in the process of creating a video that focuses on the dental assisting profession and its program. The video will have a three-minute version and a one-minute version, with the longer video used on the website and in formal presentations and the shorter version featured on social media, Beach said.

PCC’s health admissions office also holds several “information sessions” each term where the career of dental assisting and the PCC Dental Assisting program, as well as its other dental programs, are presented to students entering the field.

Harrison, Bone and Beach shared several rewards people can enjoy in dental assisting, from working with entire families who are patients to

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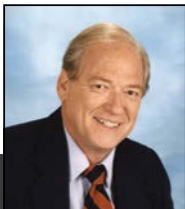
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“With average pay of \$18.09 per hour (\$37,630 a year) and a plethora of full-time work opportunities to choose from, it would seem that more young people would clamor for the chance to work as a dental assistant. And, yet, they aren’t.”

reassuring patients who are anxious or scared.

“I have several come to me and give me a hug and say, ‘Oh Mary, I am so glad you’re here. I could not do this without you!’ That pretty much says it all!” Harrison said. “The office friendships that are made, the fun times spent together and knowing it is just plain fun to get up and go to work in the morning!”

Bone said a career in dental assisting provides an opportunity to work for someone “who respects you, relies on you and rewards you,” as well as the ability to help a dentist get through complex procedures. Other benefits include “knowing you are helping to make sure the patient feels comfortable and that they know you and ask you more questions than they do the dentist,” she added.

Beach said she enjoys seeing students’ progress from their first

day of school to graduation. The rewards of teaching also include helping students overcome challenges and grow in confidence, professionalism and sense of pride. Students don’t always anticipate what comes next in a procedure and so to work with them and see them anticipating what the dentist is going to need next for a smooth, seamless procedure is especially gratifying, she said.

In addition, watching a student become comfortable with dental procedures and terminology in such a way that he or she can encourage and calm the patient is very validating to teachers. When the students can show empathy and help patients become comfortable in the dental office, then the instructors know that they will be welcomed team members when they graduate, Beach said. ●

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Community Dental Health Coordinators Expand Access to Oral Health Care

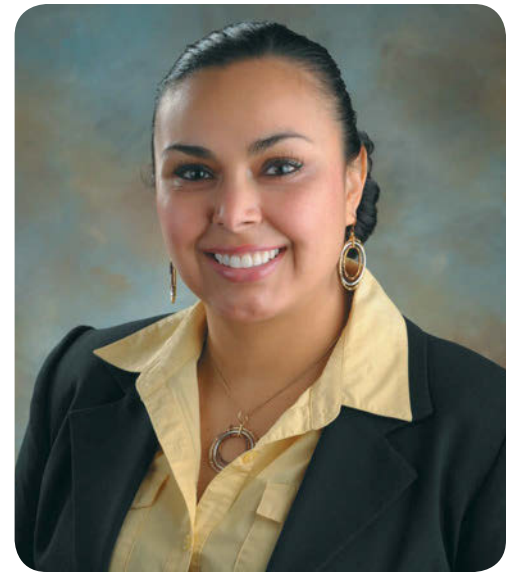
Oregon CDHC Dora Sandoval provides a critical public health connection in her Woodburn community

MANY FAMILIES DO NOT KNOW WHAT DENTAL services are necessary for their health, where services are located or how to access those services. The challenges of navigating the oral health care system can leave patients confused and act as a barrier to even seeking dental services, much less receiving them.

“A lot of patients are uneducated about the importance of dental health, about the connection between bad teeth and overall health,” said Dora Sandoval, a dental hygienist in Woodburn who recently completed training to become a Community Dental Health Coordinator and improve education and preventive care in her community. “By having a CDHC on the medical side of a clinic and talking to patients more about the importance of receiving dental care, we can improve their overall health.”

While Sandoval’s insight into the need for dental health education and preventive care is not new, the training she received to implement these practices stems from one of the newest and fastest-growing types of oral health care providers in the country.

Like community health workers, Community Dental Health Coordinators (CDHCs) are front-line dental health workers who have a deep understanding of the communities they serve. According to the American Dental Association, which helped develop the CDHC training curriculum, CDHCs are liaisons between patients, physicians, dentists, community health centers and other social service agencies to facilitate access to services and improve



the quality and cultural competency of service delivery.

Sandoval spent 15 years working as a dental hygienist, including 12 years working in public health, before the dental director at her clinic suggested she look into the online CDHC training program. She liked the idea of working as a community liaison between medical and dental providers and their patients.

After completing the 12-month online program, Sandoval realized that much of the work she had previously been doing through her role in public health was similar to that of a CDHC, but with the formal training, she had new skills to better serve patients in her hometown.

“The class taught me how to interview patients, allowing them to speak instead of me putting words into their mouths,” said

Barriers to Dental Care for Adults

Reasons for Not Visiting the Dentist More Frequently,
Among Those Without a Visit in the Last 12 Months



Source: American Dental Association Health Policy Institute. For more information, visit ADA.org/HPI.



"[On August 4,] I got to participate again in the Mexican Fiesta Parade along with my two sons. This was the first year that the clinic has a booth and sponsors the Fiesta so I got to work in the booth for a few hours. It was great!"

“By providing culturally competent care, CHDCs can connect with patients on a more personal level while addressing many of the reasons that keep people from visiting a dentist such as fear, cost or lack of oral health education.”

Sandoval. “I really enjoyed learning how to have a better conversation with my patients.”

Today, Sandoval uses these skills in her work as Oregon’s reportedly first formally trained CDHC, educating community members about oral health and serving as a liaison between dentists and patients in her community.

Sandoval likes to spend time in the Creative Learning Center and the toddler and preschool centers at Woodburn High School, teaching the teenage parents and their toddlers about teeth and nutrition. She also volunteers with the Head Start program for the local preschool, and, in the summer, she meets with the students’ parents, showing them how to care for themselves and their children’s teeth. Sandoval also works with the migrant farmworker population in the area.

“We work with a lot of immigrant populations, which I love because I get to practice my language and my culture, which I share with the majority of my

patients,” said Sandoval, who was born in Mexico and learned English when she came to the United States at age 10. “It is easier to get through to my patients because we share that same culture.”

Formally trained CHDCs like Sandoval are already helping to improve oral health and access to dental care in 21 states, a number that is quickly growing. They work in a wide range of settings, including community health centers, tribal clinics, private practices, schools, Head Start programs, farm worker clinics, institutional settings, churches, social service agencies, hospitals and others. By providing culturally competent care, CHDCs can connect with patients on a more personal level while addressing many of the reasons that keep people from visiting a dentist such as fear, cost or lack of oral health education.

While there are currently no CDHC training programs located in Oregon, online programs — like the course Sandoval graduated from — are accessible to any Oregonian who is interested in becoming a Community Dental Health Coordinator, with or without previous dental provider training.

As CDHCs expand across the country and improve oral health education and preventive care in their own communities, they are helping to bridge the gap between dentists and patients. The personal connection of teaching oral health to members of one’s own community helps CDHCs like Sandoval with their work.

“It helps that a lot of people in Woodburn know me — I’ve lived here and gone to church here for a long time,” said Sandoval. “Every summer in Woodburn there is a big Mexican parade. When we participate in the parade, I always hear the little kids saying as we go by, ‘There goes my dentist!’ It’s really fulfilling to have that kind of love from my patients.”

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Central Oregon Community College and Local Dentists Give Back

By Barry Finnemore

THIS PAST YEAR, MEHDI SALARI, DMD, was volunteering at a dental clinic hosted by Central Oregon Community College that serves low-income residents in the Bend area when a retired couple came in for treatment. They had been longtime patients of Dr. Salari's at Skyline Dental, where he's practiced since the 1990s, but he hadn't seen them for a while and didn't know what had become of them.

It was a happy reunion. The couple, it turned out, had fallen on hard financial times and were excited to see Dr. Salari again and to know he would provide their care. For him, it was an opportunity to reconnect with and provide pro bono services to people he had developed a relationship with over some two decades.

"It was very heartwarming to help them, and they were thrilled and felt comfortable



“Budding dental assistants, each of whom participates in eight of the clinics before their practicum, benefit from the clinics in a myriad of ways. They assist as well as retrieve needed materials and supplies. College faculty are on hand during the clinics to give needed direction to the students, who help treat patients who, in many cases, have considerable unmet dental needs.”

[getting treatment] because they knew me,” Dr. Salari said. “We visited after the appointment. It was super nice for me and for them.”

Various versions of that win-win scenario play themselves out regularly at the dental clinics, a partnership between the college and area dentists. In fact, the clinics, which began nearly a decade ago, have multiple benefits. They give dental assistant students in the college’s accredited, one-year program hands-on experience in a setting where they are comfortable and a connection with people in need. For their part, providers have an opportunity to give back, and earn continuing education credits in the process.

Salari calls the clinics a “feather in the cap” of the college and participating dentists.

The clinics, held two Fridays per month during the academic year, provide mostly X-rays, fillings and extractions to adults at or below 200 percent of the federal poverty level. Among the people seen are military veterans who do not have access to dental services. The clinics also provide services such as cleanings and



debridements when hygienists volunteer. And patients who need dentures are referred to a local dentist who provides dentures at reduced rates, said Lynn Murray, dental assisting program director, dental clinic manager and a professor of dental assisting at the college.

Murray said the clinics, where about a dozen dentists volunteer, have been very well accepted. During the 2017-18 academic year, the clinics saw 158 patients and provided nearly \$86,000 in services, she said. The value of services provided the prior year was almost identical to this past year's total. Patients pay just a \$20 supply fee for each appointment, regardless of the extent of services.

"There's so much need out there, and dentistry is so expensive," Murray said.

Budding dental assistants, each of whom participates in eight of the clinics before their practicum, benefit from the clinics in a myriad of ways. They assist as well as retrieve needed materials and supplies. College faculty are on hand during the clinics to give needed direction to the students, who help treat patients who, in many





cases, have considerable unmet dental needs.

“It’s a really comfortable place to get your feet wet and get experience with chairside assisting,” Murray said. “One of the things that’s so nice for students is they are seeing a different group of patients than they would see in a general practice. In this clinic, we are seeing patients who haven’t been to a dentist in 10, sometimes 20 years, who have a lot more issues. It gives students a chance to be empathetic...and give back to those who are less fortunate. Some people really suffer with oral disease. I have seen a change in students’ attitudes, and we talk a lot about how dentistry is not something everyone has the same access to.”

Jeff Timm, DMD, has volunteered with the clinics since they began. He echoed Murray’s sentiment, saying the clinics are an impactful way for

individuals to come together and do their part to care for people less fortunate — and boost not only their health but their confidence. Dr. Timm touched on the story of young man who came to the clinics unable to get a job because of poor oral health. Through the course of several clinics, the young man got an improved smile and, eventually, found work.

Dr. Salari said it’s also invaluable for students to assist various dentists during the clinics. It exposes them to different workstyles and personalities and allows them to see that sometimes there’s more than one approach to a particular procedure.

“Everybody offers something different, and everybody’s communication is different,” he said. “There is so much variety. It’s an assistant’s job to adapt to all of that. It opens their eyes to anticipate the needs of dentists.”

Dr. Timm agreed, saying students are exposed to dentists’ different thought processes based on their training and experience and learn there are “different ways to tackle the same problem.”

Murray said the clinics are always in need of more volunteer dentists. Dr. Timm praised the dental community for its commitment to caring for the most vulnerable, both locally and overseas. He said the great thing about the COCC clinics is that they’re held in a well-equipped facility that makes it seamless for dentists to lend their time and expertise, right in “their backyard.”

“They make it easy to do,” Dr. Timm said. “I’ve sure enjoyed it.” 🎧

To learn about the clinics, and to volunteer, please contact Lynn Murray at 541-383-7574, or lmurray@cocc.edu.

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| Mastering Sedation Nitrous Permitting Course | December 1 & 2, 2018 | OHSU School of Dentistry, Portland |
| Mastering Minimal Sedation Permitting Course | November 30 - December 2, 2018 | OHSU School of Dentistry, Portland |
| Oral Radiology Proficiency Course | January 01, 2019 | OHSU School of Dentistry, Portland |
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