

Written/Oral Testimony Washington State Board of Health

November 13, 2013

Chairman and members of the Washington State Board of Health,

My name is Nancy Alleman and I am a Washington State Licensed Dental Hygienist, representing myself.

Thank you, members of the Washington State Board of Health, for addressing Oral Health and making it a priority.

I have reviewed all of the proposed strategies in agenda item #13 (Recommended Strategies to Improve Oral Health of Washington Residents) and support the adoption of those strategies with exception the **Work Force Strategy**.

I would like the board of health to consider including, in the **Workforce Strategy**, some appropriate strategic language addressing, "new and emerging evidence based dental workforce models." An example of that language could include the following:

- Support policies for the exploration and feasibility of new and emerging evidence based dental workforce models to increase access to and efficiency of dental treatment.

I am not suggesting that the Board of Health endorse any particular model but that the Board support the conclusion (below) from the University of Washington's 2009 Washington State Oral Health Workforce Report and use this report as a resource for the Board to implement policy addressing oral health workforce capacity. This report is the most current comprehensive oral health workforce report for Washington State and includes all members of the oral health workforce, not just dentists as referenced in materials presented today.

Washington State Oral Health Workforce Report 2009, University of Washington:

http://www.ws-ohc.org/plan/CHWS_FR130_Skillman.pdf

Page 36:

“Explore New Ways to Use Allied Health Dental Providers and Alternative Dental Providers to Increase Dental Treatment Capacity and Efficiency:

The traditional dental team (dentists, dental hygienists and dental assistants) lacks a provider similar to the medical profession's nurse practitioner or physician assistant (Pew Center on the States and National Academy of State Health Policy, 2009). Exploring the benefits and drawback of increasing dental hygienists' ability to provide certain services for underserved populations, and/or the feasibility of introducing new types of providers such as dental therapists, community dental health coordinators and/or other new practitioners, would be useful for workforce planning.”

This above conclusion is mirrored by reports from the Institute of Medicine, major national policy makers, including the Kellogg and the Pew Foundations, several recognized public health institutions and is in direct alignment with provisions written in the Affordable Care Act. As of this year, new and emerging evidence based dental workforce models are being explored and or legislatively proposed in over 20 states, including Washington State.

Thank you again for your time and for supporting oral health.

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Past President Washington- State Dental Hygienists' Association, Washington Rural Health Association Board, Washington State Health Care Personnel Shortage Task Force, Washington State Head Start Dental Hygienist Liaison for the National Oral Health Project and National Center for Health, member Washington State and Pierce County Oral Health Coalitions, University of Washington Oral Health Collaborative, Pierce College Dental Hygiene Technical Advisory Committee