

## Maryland Public Health Dental Hygiene Act Logic Model (2008-2012)

**Goal:** To provide all Maryland children with a dental home by increasing oral health prevention and education services to low-income populations and to reduce healthcare disparities for the underserved.

<u>Inputs</u>	<u>Strategies</u>	<u>Outputs</u>	<u>Outcomes</u>
<p>Office of Oral Health (OOH)</p> <p>University of Maryland Dental School</p> <p>Maryland Oral Health Association</p> <p>Maryland State Dental Association and component societies</p> <p>Maryland Dental Hygienists' Association</p> <p>Maryland Dental Society</p> <p>Maryland State Department of Education</p> <p>County School Superintendents</p> <p>Maryland Primary Care Associations</p> <p>Public Health Agencies including:</p> <ul style="list-style-type: none"> <li>• Dental facilities owned and operated by</li> </ul>	<p>Agencies hire public health dental hygienists</p> <p>Without a dentist on-site, hygienists who work in public health settings will provide all services within their scope of practice including:</p> <p>a. Oral health education</p> <p>b. Dental screenings</p> <p>c. Prophylaxis</p> <p>d. Prevention services including:</p> <p>i. Dental Sealants</p> <p>ii. Fluoride varnish</p> <p>iii. Toothbrushing w/fluoride toothpaste</p> <p>iv. Other</p> <p>e. Radiographs</p> <p>f. Other</p>	<p># of public health agencies (as defined by law) who hire public health dental hygienists</p> <p># of schools who utilize public health dental hygienists</p> <p># of WIC centers who utilize public health dental hygienists</p> <p># of Early and Head Start centers who utilize public health dental hygienists</p> <p># of Judy Centers who utilize public health dental hygienists</p> <p># of long-term care institutions who utilize public health dental hygienists</p> <p># of Adult Daycare centers who utilize public health dental hygienists</p> <p># of public health dental hygienists hired after the act was passed</p> <p># of hygienists who perform a – f (see strategies)</p> <p># of patients who received a-f</p>	<p><b>Youth/ Adults</b></p> <ul style="list-style-type: none"> <li>• <b>Short-Term:</b> Increased number of oral health education, prevention, and treatment programs for MD youth and adults</li> <li>• <b>Intermediate:</b> Increased # of patients that hygienists recommend/refer to a dental home</li> <li>• <b>Intermediate:</b> Improved and increased oral health awareness for MD youth</li> <li>• <b>Intermediate:</b> Increased # of children and adults in MD with access to oral health services</li> <li>• <b>Intermediate:</b> Increased # of children and adults in MD with access to education and prevention oral health services</li> <li>• <b>Proximal Long-term:</b> Increased # of MD children that have a dental home</li> <li>• <b>Distal Long-term:</b> Reduction in dental caries experience in children</li> <li>• <b>Distal Long-term:</b> Reduction in untreated dental decay in children and adults</li> </ul> <p><b>Dentist</b></p> <ul style="list-style-type: none"> <li>• <b>Short-term/Intermediate:</b> Increased ability of dentists to concentrate on performing treatment (restorative) care</li> <li>• <b>Intermediate:</b> Increased patient load</li> <li>• <b>Long-term:</b> Increase in the # of dentists in the dental health public workforce</li> </ul> <p><b>Dental Hygienist</b></p> <ul style="list-style-type: none"> <li>• <b>Short-term:</b> Increased feeling of value among hygienists in public health settings</li> <li>• <b>Long-term:</b> Increase in the # of hygienists working in public health facilities</li> </ul> <p><b>Agency/Community-Wide</b></p> <ul style="list-style-type: none"> <li>• <b>Short-term:</b> Increased awareness of the presence and utilization of public health dental hygienists</li> <li>• <b>Short-term:</b> Increased number of public health settings (e.g., schools, Early/Head Start programs, WIC centers, Judy Centers, long-term care</li> </ul>

<p>federal, state, or local governments</p> <ul style="list-style-type: none"> <li>Public health departments of schools</li> <li>Health facilities licensed by the public health department</li> </ul> <p>Maryland Women, Infants, and Children (WIC) program</p> <p>Maryland Judy Centers</p> <p>Maryland Head Start State Collaboration Office</p> <p>State-licensed Head Start or Early Head Start programs</p> <p>Maryland Dental Action Coalition</p> <p>Long-term care institutions</p> <p>Adult day care centers</p>		<p>from a public health dental hygienist</p> <p># of a-f services done by dental hygienists under new law</p>	<p>institutions and adult day care centers) who utilize public health dental hygienists</p> <ul style="list-style-type: none"> <li><b>Short-Term:</b> Increased number of public health facilities utilizing public health dental hygienists</li> <li><b>Long-term:</b> Continued increased awareness of HB1280 by the community.</li> <li><b>Long-term:</b> Continued increased number of schools, Early/Head Start programs, WIC centers, Judy Centers, long-term care institutions and adult day care centers who utilize public health dental hygienists</li> </ul>
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**Assumptions Prior to HB1280:**

1. There is a shortage of dentists that are employed in public health settings
2. Dental hygienists have been underutilized in public health settings in the past.
3. Dental health has a significant impact on the general health and well-being of children. Poor oral health impacts social function and can lead to limitations in communication and social interactions as well as many other problems such as eating and learning. If all Maryland children have a dental home, many of the negative impacts that poor dental health causes would be eliminated.

**External Influences:**

Agencies not taking advantage of the act, oral health campaign, other funding and grants such as a two-year, \$250,000 grant from the state of Maryland to provide more than 700 Title I elementary school students in Charles County with dental screenings. Also, other laws passed related to oral health in MD.