

**Stephen Hoffman**

From: Burgette, Jacqueline <jacqueline@pitt.edu>
Sent: Tuesday, November 24, 2020 2:37 PM
To: IRRC
Subject: State Board of Dentistry proposed regulation: Public Health Dental Hygiene Practitioner Practice Sites
Attachments: Burgette (2020) Success rates of pediatric dental referrals made by PHDHPs.pdf; PHDHP Poster_4112020.pdf

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Dear Independent Regulatory Review Commission,

I am writing to comment on the final regulations for practice site expansion of Public Health Dental Hygiene Practitioners to medical settings in underserved areas and childcare settings. There have been two rigorous scientific evaluations of Public Health Dental Hygiene Practitioners: one evaluating the success of Public Health Dental Hygiene Practitioner referrals to pediatric dentists and the other describing that Public Health Dental Hygiene Practitioners provide preventive dental services to predominantly underserved children.

The publication, "Success Rates of Pediatric Dental Referrals Made by Public Health Dental Hygiene Practitioners" was recently made available online by the Journal of Public Health Dentistry and is attached to the email. This study examined the success rate of referrals to pediatric dentists by a Public Health Dental Hygiene Practitioners co-located in a medical setting. The study found that children with dental caries (tooth decay) had 5.7 times greater odds of successful referral from the Public Health Dental Hygiene Practitioner to the pediatric dentist compared to children without dental caries. The results of this study are testament to the effectiveness of a coordinated effort across medicine and dentistry using PHDHPs to decrease family's barriers to accessing dental care by pediatric dentists, particularly for children with dental caries.

In the poster presented to the American Academy of Pediatric Dentistry in May 2020, titled, "Race and Payor Type for Child Visits with Public Health Dental Hygiene Practitioners," the proportion of Public Health Dental Hygiene Practitioner visits with non-white children increased from 77% to 87% from 2013 to 2017. Similarly, the proportion of Public Health Dental Hygiene Practitioner visits with publically insured children increased from 72% to 82% during the same 5-year time period. These results describe how Public Health Dental Hygiene Practitioners co-located at a pediatric hospital clinic have the potential to improve access to dental care for disadvantaged children. These findings are under review for publication in a scientific peer-reviewed journal.

Taken together, there is five years of data that support that Public Health Dental Hygiene Practitioners increase access to dental care for children who are underserved or suffering from untreated dental disease. Please consider these rigorous scientific findings in support of the regulations to expand practice sites for Public Health Dental Hygiene Practitioners.

Warm regards,
Dr. Burgette

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