Over the years, the senior dental students have had the opportunity to see and work in a variety of dental clinics/practices throughout the state and region. The graduating class of 2014 was the first class to complete the enhanced rotation period of two, three-week rotations. Previously, students were required to complete two, two-week rotations. It has been encouraging and exciting to see a trend in increased productivity over the years. Even more exciting is knowing that increased productivity equals increased care.

The following data regarding the extramural rotations is noteworthy:

- The class of 2014 provided care for 4,900 patients and provided 6,039 procedures. The approximate value of this care was $454,227.
- The class of 2015 provided care for 4,026 patients and provided 8,270 procedures.

The approximate value of this care was $1.1M during their fall rotations. Many students still have rotations to complete in March and April.

- Students have approximately 55 rotation sites throughout Nebraska, Wyoming and South Dakota where they can do their rotations.
- An overwhelming majority of the procedures done while on rotations are restorative cases, followed by oral surgery cases.

We are excited to see the growth in the students’ clinical productivity during their extramural training. None of this could be possible without the dedication of preceptors who supervise the students. A BIG “thank you” goes to all who are a part of the extramural rotation program. Without your leadership and expertise, the extramural program would not be possible. Thank you for your commitment to training the next generation of dentists for Nebraska and the region.
Access to dental care, especially for rural and underserved populations, is a growing concern both nationally and within the state of Nebraska. To address the dental workforce needs of the state, the College of Dentistry has recruited students from rural areas, trained students in rural settings, and encouraged students to locate in rural communities.

According to the UNMC Health Professions Tracking Center (HPTC) the total number of dentists practicing in Nebraska in 2012 was 1,028 compared to 1,017 in 2008. This is good news! Because of population growth, however, the number of dentists per 100,000 population decreased by approximately 3% from 2008 to 2012. Not such good news!

Of the 1,028 professionally active dentists in Nebraska, approximately 37% (378) practice in rural communities. Between 2008 and 2012 the number of dentists older than 60 years increased by 39%. Approximately 54% of Nebraska dentists practice part-time.

The UNMC College of Dentistry is the main source of general dentists for rural Nebraska. Eight-seven percent of the rural dentists in the state are College of Dentistry graduates. Currently, 16 of the 93 counties in the state have no dentist. This is a vast improvement compared to 2012 when 20 counties had no dentist. During the past five years the college has had a Health Resources and Services Administration (HRSA) grant to support the students’ extramural rotations in rural Nebraska. As a part of the work of the grant, the senior dental students are required to spend six weeks in rural and underserved areas providing dental care. Since 2010, UNMC dental students have located in the following rural communities:

1. Alliance 8. Doniphan 15. Laurel
22. Scottsbluff
23. Seward
24. Sidney
25. York
26. Valentine

Kim McFarland, D.D.S., M.H.S.A.
Associate Professor & Principal Investigator
HRSA Service Learning Grant
Department of Oral Biology
College of Dentistry
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Addressing future dental workforce needs is a continuing challenge of recruiting, training, and encouraging students to practice in rural and underserved communities. The current HRSA grant that supports the College of Dentistry’s efforts to increase the number of dentists in rural Nebraska, will end June 30, 2015. The college has applied for another HRSA workforce grant to support these activities in the future. We will be notified by July 2015 if our grant application is successful.
There is increasing impetus on the U.S. health care system for members of all health disciplines to work together to improve the quality of care while reducing delivery costs. The Institute of Medicine advocated in its 2009 publication "Health Professions Education: a Bridge to Quality" that “all health care professionals should be educated to deliver patient-centered care as members of an interdisciplinary team, emphasizing evidence-based practice, quality improvement approaches and informatics.” As a result of this and other factors, most of the health care professional schools across the nation are increasing their efforts to train the next generation of students in interprofessional care, and this effort is being included in their accreditation requirements and standards.

UNMC Strategic Plan 2014-17

IPE Outcomes:
- All health professional students will have at least one IPE experience in the Clinical Enterprise each year in an actual clinical setting.
- Increase the number of non-faculty health care professionals who receive faculty appointments and participate in the teaching.
- Establish the Office of Health Professions Education in the Clinical Enterprise.
- Catalog and establish multiple new core population health care curricular elements to be available for IPE programs across the educational continuum.

IPE engages students from two or more different healthcare professions in activities designed for them to work collaboratively. The goal of IPE is for the students to learn more about each other and their professions in order to improve the efficiency and the quality of patient care through Interprofessional Practice (IPP).

The College of Dentistry (COD) continues to be involved with IPE by formally incorporating activities into the curriculum and providing other opportunities for COD students to interact with other health care professionals.
Formally, the COD has incorporated required activities into the Patient Management and Professionalism course. This is an interdepartmental course in which all dental students are enrolled each year of their program. This umbrella course monitors many of the affective behavioral aspects of dentistry to complement the discipline-based competency examinations administered by departments.

This course now requires D-1 student participation in an IPE team building exercise. This fall we engaged the 68 new students from the COD along with the 72 new entering students from the College of Nursing in Lincoln in a team building exercise intended to demonstrate that teams can often make better decision than individuals. D-2 students were involved in an asepsis/hand washing session with nursing students where the nursing students supervised hand washing techniques and then helped disclose its effectiveness with UV light technology. Most of these exercises will include dental hygiene students and all of them will involve students from the College of Nursing. One of the exercises planned for next year will be conducted using distance learning technology between campuses to give students added experience with aspects of tele-health.

The COD continues to have its regularly scheduled IPE/outreach programs: Children's Dental Day in Lincoln and in the Panhandle, SHARING Clinics, the Grand Island Extraction Clinic and Nebraska Mission of Mercy. All of these programs involve chair-side patient care including dental and dental hygiene students, dental residents and students from the UNMC College of Nursing (CON). Just this past February at Children’s Dental Day, we had students from Central Community College in Hastings, Southeast Community College in Lincoln, the Lincoln division of the College of Nursing and the Physician Assistant students from Union college all participate in the day’s events. Also this year we have had a second Family Practice resident do a rotation at the college visiting undergraduate clinics such as admission, pedi-dent, operative, endodontics and oral surgery. At our next SHARING Clinic in April we will have students from the accelerated nursing UNMC Lincoln Division program at the College to take vitals and assist with triage and patient care.

There are some new items for this report.

- The COD has cooperated with the Lincoln Division of the CON to submit a small grant to develop an IPE experience where dental and nursing students work together to perform in-school elementary student physical exams.
- Dr. McFarland gave an oral presentation at the March, 2015, ADEA meeting in Boston entitled “Igniting Community-based IPE through Telehealth.”
- COD pediatric dentistry residents have started working closely with Omaha Public School nurses to do oral health screenings and teledentistry consults on elementary school children.
- UNMC has been working with the publisher Elsevier and has launched a new journal entitled Journal of Interprofessional Education & Practice (JIEP). The journal is divided into two sections, clinical and non-clinical. Faculty at UNMC will serve as editors for the clinical portion of the JIEP.

The purpose in all this is to provide experiences and opportunities for faculty and students alike to be more comfortable working with other health professions.

Because of distance and scheduling issues, the Lincoln students have not been involved with the IPE programs in Omaha. Each year the Omaha campus holds IPE exercises for the entire entering student body at the Medical Center. This is an enormous undertaking involving nearly 500 students at once in an on campus IPE activity. The benefit of course is that these exercises involve all the health professions at the UNMC campus bringing together students from medicine, nursing, pharmacy, public health and all of the allied health professions. However, starting next year the COD students will likely take part in the main UNMC event in order to leave a bigger dental IPE footprint on the Omaha campus and to encourage most Omaha students to take part in COD based IPE events.

"The purpose in all this is to provide experiences and opportunities for faculty and students alike to be more comfortable working with other health professions.”
Technology Update

Introduction to Securely Sharing Protected Health Information

Today’s technology continues to improve and make everyday communication easier. With e-mail, texting and social media, sending out pictures from your last vacation has become second nature to us. Most of us use this technology in our everyday lives without understanding how everything works and just how insecure our normal communications are. This can lead to health professionals unknowingly sending protected health information insecurely.

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 and Health Information Technology for Economic and Clinical Health Act (HITECH) of 2009 provide rules for the handling of protected health information (PHI). With fines up to $1.5 million for multiple violations, it’s become critical that health providers understand exactly how their PHI is being stored and transferred.

While there may be some encryption in place between you and your e-mail provider, the e-mail and texting that we use day to day is not. There is no way to guarantee that the servers between you and the recipient are secure. There are, however, e-mail providers on the market that do offer completely secure e-mail services. Some of these providers are NeHII, Email Pros, MD OfficeMail and NeoCertified.

Secure messaging providers are relatively inexpensive to use. For example the Nebraska Health Information Initiative (NeHII) is a statewide health information exchange that allows providers to view and share information using virtual health records and electronic medical records with other health professionals throughout the state. NeHII has a direct service that allows one doctor to send messages to other doctors directly and attach files such as radiographs, PDFs or other documents that are under 10 megabytes in size. After an initial $100 setup fee, a doctor can get an account to send messages for $15 a month.

Some things to consider when selecting a secure e-mail provider are the cost of the service, maximum size of attachments, and their ability to sign a business associate agreement (BAA). A BAA is a contract signed by both the e-mail provider as well as the doctor. This agreement covers topics such as who has access to the PHI, whether a business associate may use PHI and how breaches of information are handled. A BAA helps to protect the doctor and is required under HIPAA.

This article is just a short introduction of ways to share PHI. For more information about HIPAA and its guidelines please refer to the Health and Human Services website at http://www.hhs.gov/ocr/privacy/hipaa/understanding/coveredentities/index.html.

Calvin Hughes
Instructional Technologist

Disclaimer:
The College of Dentistry has no financial or other special interest in any of the companies mentioned in this article. The information provided is informational in nature and not an endorsement of the good or services these companies provide.
The research and evaluation team, led by Dr. Preethy Nayar, assisted by Aastha N. Chandak and Niodita R. Gupta, is responsible for the ongoing evaluation of the HRSA grant. The extramural training sites provide valuable learning experiences for the students. These experiences provide both a high-tech and hands-on training experience. During their extramural training, students have the opportunity to utilize intra-oral cameras and telehealth services. They also have the very personal experience of working directly with the most vulnerable, at-risk, and underserved populations in the region. The evaluation of these training experiences has resulted in the following presentations and publications. The findings of the evaluation have been disseminated in national meetings and peer-reviewed journals of dental education. The evaluation activities have resulted in the following presentations and publication listed below.

2013

2014


2015

“School-based Dental Sealant Programs in Rural Nebraska: Dental Students’ Reflections.” Preethy Nayar, Kimberly McFarland, Aastha N. Chandak, Van Thi Hong Do, Niodita Gupta, Ashley Merritt, Brian Lange, & David Brown. Accepted for poster presentation at the National Oral Health Conference, Kansas City, Missouri, April 2015.
This publication is available online.

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