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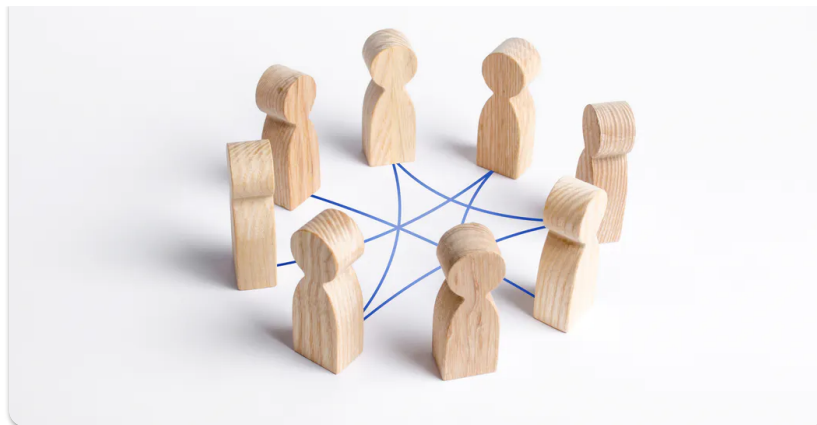
Growing your dental hygiene career path through medical-dental integration

Does a hospital setting seem an unusual workplace for a hygienist? One hygienist describes her diverse mission and work and how her role "requires me to see myself as an innovator in the overall need for improved health care."

Sheba Jones, MSDH, RDH, AP

March 3, 2022





Editor's note: *Frontline Clinician* is a feature where hygienists share their various histories, experiences, interests, and more as health-care workers making their mark. In this installment, Sheba Jones, MSDH, RDH, AP, discusses how her diverse mission and work as a hospital-affiliated practice dental hygienist give her the opportunity "to see myself as an innovator in the overall need for improved health care." (Want to tell your frontline story? Drop a line to RDH editor-in-chief Jackie Sanders: jsanders@endeavorb2b.com)

Does a hospital setting seem like an unlikely place for dental hygienists to be working to improve patient care? Not unlikely at all, says America's largest dental insurance provider, Delta Dental.

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Disease Education (HOPE) program at Banner – University Medical Center Phoenix, and other hospital and community-based clinics are following their lead.

My hospital-based dental hygiene program

I’m a dental hygienist who practices in a hospital setting, and my career goals have expanded well beyond a private practice. My work at Dignity Health in Mesa, Arizona, requires me to see myself as an innovator in the overall need for improved health care. These health-care needs are especially acute for the poor and vulnerable whose unique social issues and causes for poor health require diverse solutions to give access to affordable, quality, whole-body care.

Hospitals are achieving success through medical-dental integration programs. Dignity Health, now united with Catholic Health Initiatives as Common Spirit Health, is a nonprofit provider offering services in 21 states. Their Oral Health department has been in existence for 12 years and is fully grant-funded. It has afforded me an opportunity for greater autonomy as a public health/dental hygienist practitioner and in a joint collaborative role as

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Mountain campus. These opportunities and

experiences are then extended to our students whom I supervise in both hospital and community health settings.

My diverse mission and work through Common Spirit Health's Oral Health program include:

- Working in outreach community dental health clinics for low-income residents.
- Providing community education and screenings in pediatric offices, ob/gyn clinics, WIC centers, hospital-sponsored childbirth classes, and diabetes education classes.
- Screening and supporting children under five and expectant mothers through case management to secure a dental home.
- Providing oral health services on advanced airway patients (endotracheal tube or tracheostomy/ventilators). Our role is to reduce oral biofilm that contributes to ventilator-associated pneumonia, as well as serve as an informative resource on the link between oral and systemic health.

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These expanding opportunities require a mind shift for both the dental hygienist, who perhaps envisioned a more limited role as an assistant in a private practice, and for the health-care team that evaluates patients' needs that include oral health education, prevention, and treatment. The 21st century dental hygienist is challenged to provide expertise that can be integrated into the patient's total health plan.

For example, the grant-funded program at Banner Health in Mesa, Arizona, utilizes dental hygienists as oral health educators in both hospital and community health centers. They work with other health professionals to improve patient care by:

- Providing oral health protocols for senior patients.
- Collaborating with case managers and social workers to assure a holistic health-care plan.
- Establishing an oral health standard of care

- Providing care for patients visiting an emergency room with a dental emergency.
- Connecting hospital and ER patients with community health centers for follow-up.

At Phoenix Children’s Hospital, Katharine Martinez, MPH, RDH, brings her expertise and experience to the medical team. In a recent interview, she talked about the benefits of having a dental hygienist as part of the pediatric staff. It saves money, focuses on prevention, and improves overall patient care, which is cost-effective in the long term.

“I would define my specific role at Phoenix Children’s Hospital as an educator to the medical staff—physicians, nurses, and others—quality assurance monitoring and enforcement (especially if programs are grant funded), and case management,” she says. “I find resources and dental providers that would be willing to see high-risk medical patients. I am also a provider of primary oral care within the limits of our scope of practice in the hospital setting.”

Is medical-dental integration cost effective?

Is this an effective management of health-care dollars? According to the CDC, the US health-care system could save up to \$100 billion

diabetes, high blood pressure, and high

cholesterol and referred them for treatment.

Prevention is cost-effective and improves the overall health of underserved populations.¹ The 21st century paradigm of medical/dental integration is the future for dental hygiene as our profession continues to embrace opportunities for integrating oral care into standards for excellence in health for all populations.

Reference

1. Nasseh K, Greenberg B, Vujicic M, Glick M. The effect of chairside chronic disease screenings by oral health professionals on health care dollars. *Am J Public Health*. 2014;104(4):744–750. Cited in National Center for Chronic Disease Prevention and Health Promotion. Cost Effectiveness of Oral Diseases Interventions. <https://www.cdc.gov/chronicdisease/programs/implementation-disease.htm>. Accessed January 19, 2022.

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