I. Description of Sabbatical Leave GOALS & OBJECTIVES

Oral health continues to be an underrated part of total well-being of our nation. Oral disease has been called the “silent epidemic” because it continues to affect some of our most needy individuals such as children and people with special needs.

According to the 2013 Michigan Check-up On Oral Health, Mecosta County is ranked 21st out of the 83 counties. 20% of residents are enrolled in Medicaid and 19% are living in poverty. Approximately, 59% of students receive free/reduced school lunch. Ferris State University Dental Hygiene clinic is listed as a Safety Net Provider Program for Mecosta County.

The Michigan Department of Health and Human Services (Community Health), Division of Chronic Disease-Oral Health has started many new initiatives in the past few years aimed at creating preventive oral health programs for many groups of citizens such as pregnant women, infants, preschoolers, school-age children and people with special needs such as HIV/AIDS and Developmentally Disabled. I have spent the last two semesters working with the State of Michigan Oral Health Division and the Michigan Oral Health Coalition on local and state level oral health programs. I have gained a world of information to share with faculty and local community groups. In the future, I will continue to work with local programs that will utilize Dental Hygiene Students in an Academic Service-Learning component of my Community Dentistry Courses to update and integrates some of the information I have gained from my sabbatical leave during the 2015-2016 academic year.

II. Description of Sabbatical Leave:

Professional Development

1. I worked three days a week with the Michigan Department of Health and Human Services Department, Division of Chronic Disease -Oral Health, to become familiar with current initiatives and programs within the state. (Lansing).

2. I was assigned an internship role at the MDHHS and allowed to attend all meetings and trainings along with employees. I had access to all programs and worked on a Sealant Program Promotion. I visited 10 School Based Sealant programs around the State while on Sabbatical Leave. All but one of those programs was staffed by a graduate of the Ferris State University-Dental Hygiene Program. It was wonderful to see our graduates working in these programs!

3. I attended a variety of meetings where the MDHHS OH staff members were presenting oral health seminars and informational tables. (Ex. Michigan Head Start Annual Meeting in Lansing Oct. 2015)
4. I was able to work with a variety of initiatives during my leave which included the following:

   a. Perinatal Oral Health for Health Professionals- Perinatal oral health initiative for medical and dental professionals. Contact: Erin Suddeth, RDH, BS, MPA
   b. Michigan Caries Prevention Program – a collaborative effort between MDHHS, Delta Dental, University of Michigan School of Dentistry and Altarum Institute to reduce the burden of childhood dental disease in the State of Michigan.
   c. Developmentally Disabled Dental Programs for people born with disability that requires the person to be managed within the community Mental Health system assigned to a service coordinator or case manager. oralhealth@michigan.gov (DDTF)
   d. Oral Health and Medical Professionals - Inter-Professional Program – Physicians and nurse practitioners (NP) who complete specified certification requirements are allowed to bill Medicaid for fluoride varnish applications provided to children 0-35 months up to four times in a 12-month time periods.
   e. Michigan Dental Program for Those Living with HIV -covers dental care for person living with HIV/AIDS who qualify for the program.
   f. Dental Hygienist’ Role in Public Dental Prevention Programs
   g. PA 161 Program- Collaborative practice between dental hygienists and dentists to allow preventive oral health services on unassigned and underserved populations in the State of Michigan. Nonprofit agencies can use dental hygienist service providers to administer preventive services to those in the state most in need of oral health care. Contact: Erin Suddeth RDH, BS MPA
   h. Mobile Dentistry – Information on Mobile Dental Law, Application Process and Permit. Contact: MDHHS-MobileDentistry@michigan.gov - Erin Suddeth RDH BS MPA
   i. Community Water Fluoridation-Which makes available current and accurate information for professionals and the public on community water fluoridation. Contact: Susan Deming  I have served as a committee member for 6 years.
   j. State of Michigan Department of Health and Human Services Contact: Christine Farrell MDCH Oral Health Director farrellc@michigan.gov

5. I spent two days a week working with the Michigan Oral Health Coalition to become familiar with current initiatives and programs within state. (Lansing) The MOHC is comprised of primary care clinicians, oral health clinicians, dental benefits providers, advocacy and providers organizations, state and local government officials and consumers working together to improve oral health in Michigan. The Michigan Oral Health Coalition’s mission is to improve oral health in Michigan by focusing on prevention, health promotion, oral health data, access and the link between oral health and overall health.

While at the Michigan Oral Health Coalition I was able to:

   b. Participated as a member of Prevention and Improvement Workgroup MOHC 2015/16
c. Attend MOHC Fall Members Meeting on 2015 Oral Health Plan for Michigan – This is a comprehensive plan developed by MOHC to meet oral health goals by addressing recommendations in the plan.

d. Attended Community Water Fluoridation/Current Oral Health Programs Meetings

e. Attended the Kent County Oral Health Coalition Meeting in Grand Rapids. (9/15)

f. Attended the Brush Program at KCOHC in September and did a “Train the Trainer” Program in Ft. Wayne in January 2016. Contact: McMillen Center-Michelle Nagel

g. Contact: Karlene Ketola MHSA Executive director- kketola@mohc.org

Community Service

6. Design Oral Health resources and displays at the Ingham Community Health Center (Women’s Healthcare. Located at Human Services Building 5303 S. Cedar St. Lansing MI 48911

a. Inter-professional Coordination between Adult Dental Center and Women’s Health Center Contact: Ruth Scott/Ann Scott –Ingham Community Health Center- Supervisor (517-887-4320)

b. Ruth Scott and I wrote a Delta Dental Grant (Brighter Futures Grant) for $1500. TV and DVD players will be purchased for 3-5 rooms. I have created a DVD on Oral Health which will be played for reception room and Educational use for clients at the Ingham Women’s Clinic which focuses on Adolescents and Women of childbearing age.

c. I was able to gain donations from Delta Dental and created handouts for clients which supplied the center with oral health aids to share with clients.

d. I created an in-service on Oral Health and the Pregnant Women for staff at the Center.

Program Development – Academic Service Learning

7. Contacted Spectrum Health Big Rapids about Dental Hygiene students doing educational program at prenatal classes offered at the hospital during Spring semester.

a. Perinatal education and referral programs.
   i. Birthing Center Spectrum Health

b. Offered to do in-service with the BRUSH Program to the following:
   i. Mid Michigan Community Action Agency-Early Head Start program
   ii. NEMSCA – Head Start Programs

c. Educational Programs and resources for Special Needs Individuals

   i. Mecosta Osceola Intermediate School District- Special Education Center
   ii. Hope Network – Paris, MI

d. (Fall 2016 DHYG 217) I have designed a new unit for Dental Hygiene Students within the Community Dentistry Course on Pregnancy and Oral Health with lecture and interactive assignments presented September 2016.
III. List of Publications(submissions) and/or papers presented (scheduled) as a result of leave activities.

Fall /Spring 2015-2016

a. Presented information Table on Michigan Oral Health Coalition at variety of state and local meetings including FSU Student Dental Hygiene and MI Dental Hygiene Educators meeting. Fall 2015


c. Created an Educational Flip Chart and DVD on Oral Health for the Ingham Community Health Centers – Women’s Healthcare Center.

IV. A list of graduate courses and/or seminars attended during 2015-2016 Sabbatical Leave.

a. Attended University of Michigan- Concise Health Information for You and Your Patient- Cardiovascular disease to Supplements. September 2015


c. Attended Caring for Women with HIV Infection, UN Medical Center –October 2015
   i. Presented awareness information at HIV seminar to Nurse Practitioners – Lansing

d. Attended Michigan Dental Hygiene Educators/SADHA Meeting FSU October 2015

e. Complete Brush Training in Grand Rapids Michigan – Kent County Oral Health Coalition

f. Competed Brush Training for the Trainer – Ft. Wayne, IN – Day training to prepare to give the Brush Training to Local professional. January 2016

g. Webinar: Effective Advocacy for Oral Health – DentaQuest Foundation’s Oral Health 2020 Initiative August 2015

h. Completed State of Michigan Diversity Training – Fall 2015
   i. Attended Michigan Oral Health Coalition Fall Members Meeting October 2015


k. Attended Michigan Oral Health coalition annual Meeting May 2016

l. Attended HIV Therapy as HIV Prevention: reducing the Risk of HIV Infection Among Uninfected Adults – UN Medical Center May 2016

Fall Semester 2016 – Big Rapids

I am working in the Mecosta / Osceola County area to update and coordinate oral health programs that the Ferris State University Dental Hygiene Student are participating in starting Fall and Spring Semester 2016-2017 during their DHYG 217/227 Community Dentistry Courses.

Dental Hygiene Students currently visit many of these local sites such as Head Start and MOISD Education Center, I am updating activities to align with the programs being offered by the Michigan Department of Health and Human Services and MOHC.
V. Impact of the leave on the Applicants’ (Sandra G. Burns) professional responsibilities.

a. Continue to teach within the Community Dentistry course with programs at Metron Nursing Home, MOISD Educational Center, Hope Network Program, Spectrum Health – Diabetic Support Group and Prenatal seminars, Head Start Programs (Varnish),

b. I was able to utilize many new sources of information from the State of Michigan and Michigan Oral Health Coalition which I will incorporate into my teaching at Ferris State University.

I believe there were multiple levels of value to this sabbatical leave for myself and to the Ferris State University Dental Hygiene Program. I teach community dentistry and health promotions and disease prevention courses within the dental hygiene curriculum. By working closely with the Michigan Department of Health and Human Services and the Michigan Oral Health Coalition, I have gained valuable experience and current data to share within my courses. This experience within the governmental and non-profit agencies will help to strengthen my background in oral health initiatives in the State of Michigan. I have been able to participate and gain valuable experience by working with staff members and participating in the programs being currently offered. MDHHS Oral Health staff currently have collaborations with several other organizations within MDHHS. This allowed me a look at inter-professional communication and sharing of ideas and resources to improve the health of all residents at the state level.

Both the Michigan Department of Health and Human Services and Michigan Oral Health Coalition are currently working on oral health programs which could benefit the local Mecosta/Osceola Area. Such programs as Perinatal, Varnish and Babies Too Programs target specific populations of individuals which are greatly needed in the local area. In Mecosta County, only 7.5% of Medicaid-enrolled children less than Age Two received an Oral Evaluation during 2011-12. In Osceola County, only 1.4% of Children less than Age Two received an Oral Evaluation. Children who have their first preventive visits early in life are more likely to have subsequent preventive visits and less restorative or emergency visits. (Association of State and Territorial Dental Directors (2012) First Dental Visit by Age One Policy Brief). As you may conclude, Mecosta and Osceola Counties could benefit from a more programs to get young children in for oral evaluations.

Also, I will be sharing the MDHHS Oral Health Programs and the MOHC initiatives with the local community with Mecosta County and surrounding area. The goal of this plan is to create a comprehensive perinatal oral health initiative for the State of Michigan. This would be a wonderful opportunity to work on a State Health Plan from the beginning. I feel that there are many great opportunities to working with the MDHHS and MOHC on their current programs and projects. I feel that I have gain current knowledge and increase my skills and effectiveness as a teacher.
By working closely with the Ingham Women’s Center in Lansing, I have gained experience by implementing current initiatives right next door while having the support of the MDCH and MOHC. In the future, I hope to work with local health agencies and present in-services on oral health, implement client educational and counseling programs, and coordinate with the programs presently available.

In conclusion, I will bring this new knowledge and expertise back to Ferris State University and use it to develop academic service-learning programs for the dental hygiene students within Mecosta/Osceola Counties. This was a valuable leave which has benefited me by expanding my professional knowledge and experience base, and will allow me to return to Ferris State University and apply the knowledge gained to benefit my students and the community.

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