EXTENDED CARE PERMITS TOOLKIT GETTING STARTED

Working in an Extended Care Permit Site can be quite different from working in a private dental practice. Extended Care Permits offer a wide range of opportunities. In some cases, hygienists work with a team of professionals who rely on each other's expertise. In other cases, they work on their own, transporting equipment to community sites, scheduling patients, and keeping records.

Assessing personal work preferences before starting an ECP service provides hygienists with the ability to design an ECP service that fits each individual's needs. It is possible to identify personal preferences by examining a range of choices that comprise many of the elements hygienists have discovered when working as an ECP. This section contains an Extended Care Permit Career Inventory that hygienists are encouraged to complete as one of several approaches to identifying what their ideal ECP job might look like.

It is equally important in the "getting started" phase for hygienists to conduct additional research. This includes interviewing several hygienists practicing as ECP's, shadowing them on assignments, and visiting community agencies that might offer ECP services to their clients. Having a Kansas Extended Care Permit offers hygienists many community choices for practice.

It is essential that hygienists study Kansas laws governing all aspects of dental hygiene, in a traditional hygiene role supervised by a dentist and in community settings as an ECP. To access the Kansas Dental Practices Act: http://www.accesskansas.org/kdb/Documents/Denta%
20practicesactregsandrelatedlaws406 files/DENTA%
20PRACTICESACTAUGUST2009.pdf

To access Extended Care Permit application form, visit the Kansas Dental Board website at http://www.accesskansas.org/kdb/Documents/Forms/ ECP IandIIrevised71408.pdf

This section contains:

GETTING STARTED: EXTENDED CARE PERMIT CAREER INVENTORY:

A tool for hygienists who are exploring new career avenues that offer them the opportunity to use their professional education and training

OVERVIEW OF EXTENDED CARE PERMITS BASED ON THE DENTAL PRACTICE ACT

ECP I

ECP II

ECP laws applying to dental hygienists returning to work after an absence





EXTENDED CARE PERMITS TOOLKIT GETTING STARTED

Introduction:

Kansas Registered Dental Hygienists have new opportunities to provide services in community settings. This Extended Care Permit Career Inventory was developed to stimulate a hygienist's thinking about how to incorporate public health hygiene services into a career and life plan.

There are no right or wrong answers, just options that can be added up to a description of an individual's ideal ECP hygiene service. Please circle the answers that best meet your vision of an ECP service.

Basic Questions

I have an interest in public health

- A. Very strong interest
- B. Strong interest
- C. Limited interest
- D. Very little interest

I feel a personal desire to give back by serving people in need of dental care

- A. Very strong desire
- B. Strong desire
- C. Limited desire
- D. Very little desire

I feel a personal desire to do something different yet still use my dental hygiene skills

- A. Very strong desire
- B. Strong desire
- C. Limited desire
- D. Very little desire

I feel a personal desire to expand my management and leadership skills

- A. Very strong desire
- B. Strong desire
- C. Limited desire
- D. Very little desire

I know dental hygienists who are working as ECP hygienists

- A. Shadowed them on their jobs
- B. Talked with them about their jobs
- C. Know the benefits and challenges working as an ECP

I have volunteered in dental health settings

- A. Kansas Mission of Mercy
- B. School Dental Screening Program
- C. School presentations during Children's Dental Health Month
- D. Toothbrushing programs in preschool
- E. Fluoride varnish programs
- F. Dental exhibit at health fairs





EXTENDED CARE PERMITS TOOL KIT GETTING STARTED

Types of Public Dental Settings

I prefer to provide services (please circle all that apply)...

- A. At an established clinic with fixed dental equipment
- B. At an established clinic with portable dental equipment
- C. Rotating to one type of site (i.e. school) with portable dental equipment
- D. Rotating to a variety of sites (school, hospital, prison) with portable dental equipment
- E. Sharing portable equipment with other ECP hygienists

I prefer to provide dental hygiene services in the following settings (please circle all that apply)

- A. Early Childhood Programs (pregnant women, infants and toddlers)
- B. Preschool Programs (3-5 year olds)
- C. Schools (K-12)
- D. State correctional institution
- E. Local health department
- F. Indigent health care clinic
- G. Adult care home
- H. Hospital long-term care unit
- I. State institution
- J. In-home care for person qualifying for federal home and community bases services (HCBS) waiver

I prefer to provide hygiene services at a site (please circle all that apply)...

- A. With a team of other dental health professionals and students
- B. With a team of health professionals
- C. With a team of other professionals such as educators
- D. With a team of office staff
- E. By myself

I am willing to travel to a site (circle all that apply)...

- A. Greater than 25 miles but less than 50 miles from home daily
- B. Greater than 25 miles but less than 50 miles from home weekly
- C. Greater than 25 miles but less than 50 miles from home monthly
- D. Greater than 25 miles but less than 50 miles from home quarterly
- E. Unwilling to travel to a site more than 25 miles from my house

I need to provide services in an environment (please circle all that apply)...

- A. Free from air with dust and other allergy producing particles
- B. Free form overly heated or extremely cold rooms
- C. Free from harsh/loud noises
- D. Free from compromising postures which create muscular/skeletal discomfort





EXTENDED CARE PERMITS TOOL KIT GETTING STATED

Types of Service

I prefer providing the following clinical procedures (please circle all that apply)....

- A. Fluoride applications
- B. Caries assessment using laser fluorescence (ie. DIAGNOdent)
- C. Sealants
- D. Routine prophylaxis
- E. Scaling and root planning

I prefer the following types of services (please circle all that apply)...

- A. Clinical care
- B. Screening
- C. Data collection and reporting
- D. Patient education

Administration

I prefer to do record keeping (please circle all that apply)

- A. Myself using paper documents
- B. Myself using computer software and filing electronically
- C. With the assistance of and office person filing paper documents
- D. With the assistance of an office person using computer software and filing electronically

I have to following level of computer confidence and competence

- A. Teaching myself new software programs
- B. Quick to learn new software programs from someone else
- C. Slow to learn and incorporate new software programs
- D. No interest in using the computer in my ECP hygiene services

I prefer to....

- A. Submit patient services for billing by myself and problem solve glitches in payments
- B. Turn all billing processes over to someone else

I prefer to....

- A. Be an employee with a salary I can count on
- B. Have benefits-health and disability insurance, retirement plan
- C. Be a contractor, paid based on the ECP services I perform

I prefer to....

- A. Join an ECP hygiene service that is new but administered by others
- B. Join an existing ECP hygiene service and administered by others
- C. Take over an existing ECP hygiene service and administer it myself
- D. Design an ECP hygiene service and administer it my self







Types of Patients

I am confident working with the following patient population (circle all that apply)

- A. Pregnant women
- B. Infants and toddlers
- C. Preschool children
- D. Elementary school children
- E. Adolescents
- F. Adults
- G. Developmentally/Intellectually disabled
- H. Physically disabled
- I. Older Kansans



I am planning to work in dental public health...

- A. Within the next six months
- B. Within the next year
- C. Within the next 2 years
- D. Sometime in the future
- E. Maybe sometime if someone presents me with an opportunity that fits into my career and life plan
- F. After I retire from private practice

I see my involvement in dental public health as

- A. A volunteer
- B. A substitute for an ECP hygienist
- C. Part-time
- D. Full-time

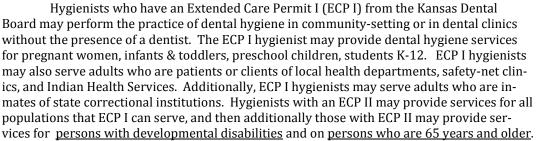
Based on your answers to these questions and other idea that came to mind, please write a description of your ideal ECP hygiene service.	
·	
·	





EXTENDED CARE PERMITS TOOL KIT GETTING STARTED- ECP I

EXTENDED CARE PERMIT I BASIC INFORMATION AND SUMMARY OF THE DENTAL PRACTICE ACT K.S.A. 65-1456(f)



With the consent of the parent or legal guardian, ECP hygienists may serve children who are part of residential or community center for therapeutic services, those receiving family preservation and foster care services from SRS, those in homeless shelters and runaway youth programs, and children in the custody of the Juvenile Justice System. For all other children, ECP hygienists are limited to serving young children birth to five in infant/toddler and preschool programs as well as students in schools who qualify for Medicaid, HealthWave or free or reduced lunch programs.

In summary, this permit opens up the opportunity for the hygienist to provide the full range of prevention services to children of all ages who are limited in their ability to have a dental home. The hygienist serves as the front-line professional to prevent oral disease and to identify concerns so that dentists can conduct an comprehensive examination and intervene early enough to ward off more serious conditions.

Hygienists who wish to receive an ECP I must have a sponsoring dentist, their own professional liability insurance, and 1,200 hours of practice in the past three years under the supervision of a dentist. A hygienist who has been an instructor at an accredited dental hygiene program for two academic years within the past three years may also qualify to receive an ECP I.

Hygienists applying for an ECP I have no requirements for additional continuing education hours beyond the 30 required hours to renew the dental hygiene license.

The sponsoring dentist may be any dentist who has a license to practice in the State of Kansas. The dentist signs the ECP I application. Each dentist may monitor five dental hygienists with an Extended Care Permit, either 1 or II.

Hygienists send their reports of findings and treatment to the dentist within 30 days of providing services to the patient; the dentist has 30 days to review the report. The hygienist and dentist must have a signed agreement stating that the dentist shall monitor the dental hygienists activities. Neither reports nor agreements are housed at the Kansas Dental Board.

Extended Care Permit Application Form: Kansas Dental Board

http://www.accesskansas.org/kdb/Documents/Forms/ECP_IandIIrevised71408.pdf
Please read K.S.A. 65-1456(f) for precise legal statements in the Dental Practice Act. In addition,
you can find an expanded explanation on Oral Health Kansas website, including questions and
answers about sponsoring dentists and financing ECP II services.





EXTENDED CARE PERMITS TOOL KIT GETTING STARTED- ECP II

EXTENDED CARE PERMIT II BASIC INFORMATION AND SUMMARY OF THE DENTAL PRACTICE ACT K.S.A. 65-1456(g)

Hygienists who have an Extended Care Permit II (ECP II) from Kansas Dental Board may perform the practice of dental hygiene in community-setting or in dental clinics without the presence of a dentist. The ECP II hygienist may provide dental hygiene services to persons with developmental disabilities and on persons who are 65 years and older who are residents in a adult care home, subsidized housing, hospital long-term care unit, state institution. They also may serve Kansans who live in the community and receive services from developmental disability centers and senior services such as case management, home health, and elderly nutrition program. The services may be offered in a community disability or elder center or at the home of a homebound person who qualifies for the federal home and community based service (HCBS) waiver.

In summary, this permit opens up the opportunity for the hygienist to provide the full range of prevention services to individuals who have difficulty traveling to dental offices because of medical conditions and disabilities. The hygienist serves as the front-line professional to prevent oral disease and to identify concerns so that dentists can conduct an comprehensive examination and intervene early enough to ward off more serious conditions.

Hygienists who wish to receive an ECP II must have a sponsoring dentist, their own professional liability insurance, and 1800 hours of practice in the past three years under the supervision of a dentist. A hygienist who has been an instructor at an accredited dental hygiene program for two academic years within the past three years may also qualify to receive an ECP II.

The hygienist must have 6 continuing education hours on the care of special needs patients or other training as may be accepted by the board as part of the 30 required hours to renew the dental hygiene license.

The sponsoring dentist may be any dentist who has a license to practice in the State of Kansas. The dentist signs the ECP II application. Each dentist may monitor five dental hygienists with an Extended Care Permit, either I or II.

The hygienist sends her report of findings and treatment to the dentist within 30 days of providing services to the patient; the dentist has 30 days to review the report. The hygienist and dentist must have a signed agreement stating that the dentist shall monitor the dental hygienists activities. Neither reports or agreements are housed at the Kansas Dental Board.

Extended Care Permit Application Form: Kansas Dental Board http://www.accesskansas.org/kdb/Documents/Forms/ECP_IandIIrevised71408.pdf

Please read K.S.A. 65-1456(g) for precise legal statements in the Dental Practice Act. In addition, you can find an expanded explanation on Oral Health Kansas website, including questions and answers about sponsoring dentists and financing ECP II services.





EXTENDED CARE PERMITS TOOL KIT GETTING STARTED Hygienists Returning to Work

Dental Hygienists Seeking an ECP When Returning to Work

Dental hygienists seeking an Extended Care Permit who have not practiced in the past three years but have retained a Kansas dental hygiene license have a way to qualify for an ECP. The law specifies that hygienists returning to work have two options. They can complete a refresher course approved by Kansas Dental Board or perform at least 200 hours of dental hygiene care under the supervision of a dentist with a Kansas license. These need to have been completed within the previous 12 months prior to applying for an Extended Care Permit. The supervising dentist will be asked to provide the dental board with a letter of recommendation. The hygienist will be required to document six hours of relevant continuing education if applying for an ECP II.

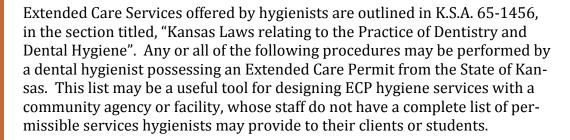
K.S.A. 65-1456 New Section 5

A dental hygienist who meets the requirements of subsections (f)(1) or (g) (1)(A) of K.S.A. 65-1456, and amendments thereto, prior to a period of retirement or disability, but not within the past three years, and is returning to active practice after such period of retirement or disability under K.S.A. 65-1431(i), and amendments thereto, or who has retained a license to practice but has not practiced in the past three or more years may qualify for an extended care permit by completing a refresher course approved by the board under K.A.R. 71-3-8 or performing 200 hours of dental hygiene care within the last 12 months under the supervision of dentists licensed in the state of Kansas and provides the board with a letter of endorsement from one of the supervising dentists.





EXTENDED CARE PERMIT PATIENT SERVICES



It is important to note that K.S.A. 65-1456(k)does make the exception that dental hygienists who do not have an ECP may provide dental hygiene instruction, visual oral health care screening and fluoride varnish applications in community based setting.

Here is a list of dental hygiene patient services that are allowed in an Extended Care Permit setting, some of which are written into the law and others that may be delegated by sponsoring dentist

Procedure: Oral Prophylaxis

Removal of extraneous deposits, stains and debris from the teeth and the rendering of smooth surfaces of the teeth to the depths of the gingival sulci

<u>Procedure: Topical application of fluoride for the prevention of caries and treatment of dentinal sensitivity</u>

Procedure: Dental Hygiene Instruction

- A. Provide complete oral hygiene instruction, and necessary hygiene items for at-home care
- B. Explain prevention and treatment of dental decay
- C. Explain prevention and treatment of gingivitis and periodontal disease and its relation to other systematic problems
- D. Provide information on tobacco use and cessation
- E. Provide nutritional counseling for oral health
- F. Recommend re-care hygiene visits at intervals appropriate to the individual
- G. Inform patient that services available through Extended Care Permits are preventative in nature and do not constitute comprehensive dental exams, diagnosis and care plans







EXTENDED CARE PERMIT PATIENT SERVICES

Procedure: Assessment of Patient's Apparent Need for Further Evaluation by a Dentist to diagnose the presence of caries and other abnormalities

- A. Provide complete oral screening for dental decay
- B. Provide oral cancer screening
- C. Perform a complete periodontal evaluation and explanation of prevention and treatment of periodontal disease and its relation to other systemic problems
- D. Perform screening for ill fitting dentures or partial dentures
- E. Recommend a dental visit for further evaluation
- F. Or other duties, which are delegated, verbally or in writing, by the sponsoring dentist that are consistent with this act

Procedure: Sealants

Sealants may be placed on any deciduous or permanent occlusal surface that appears to be free of caries and restoration and/or having a specific reading set by the sponsoring dentist using the approved protocol of laser fluorescence.

Procedure: Radiographs

With permission from the sponsoring dentist, a hygienist with an Extended Care Permit may take radiographs in community-based settings for the dentist's follow-up assessment and diagnosis

Procedure: Oral Health History

The hygienist conducts a comprehensive documentation of the patient's medical oral health history and maintain appropriate records

