

A Student Operated, Faculty Mentored Dental Clinic Service Experience at the University of Texas Health Science Center at San Antonio for the Underserved Refugee Community: An Interprofessional Approach

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Background

In the last several years, a large number of refugees have settled in San Antonio and many are without adequate access to health care (1). Due to limited resources and stress, most of the refugee population suffers from acute and chronic diseases, which often reduce their potential for success in their new host country. Their lack of health knowledge and health care needs is a major detriment for successful integration as productive members of their new society. Therefore, the need for proper health education as well as comprehensive health care and creation of a stable comprehensive medical home is essential for their future success and independence.



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ABSTRACT

Background: As the number of refugees settling in San Antonio increases, so will their health care needs. Due to limited resources and stress, they suffer from acute and chronic diseases, reducing their potential for success in their new host country. The need for proper health education coupled with a stable holistic health care facility is essential for their future success.

Objectives: In 2009, nursing students began serving the San Antonio refugee population. By 2011, dental and medical students joined to create the student-run San Antonio Refugee Health Clinic (SARHC). SARHC serves the refugees by providing free health care/education while connecting them to San Antonio's primary health care system.

Methods: Select dental, medical, and nursing students under the mentorship of their faculty operate the SARHC clinic. The students work in collaborative teams where select members of the refugee community and bilingual students provide translational assistance. The nursing students take vital signs and medical students perform physical exams after gathering a history of present illness. Dental students provide oral health/nutritional education and screenings inclusive of head and neck examination and oral cancer risk assessment.

Results: Thirty-two dental, 83 medical, and 118 nursing students rotated through the clinic last year, serving patients with the most common chief complaints of dental, musculoskeletal, dermatological, and gastrointestinal nature. The most common dental findings for this population have been dental caries, periodontal disease, and other dental diseases requiring urgent care. Sub-programs such as the student interpreter program, ladies' health education, and the Refugee Accompaniment Health Partnership have resulted from the SARHC initiative to meet the refugees' needs. Currently under development is a future collaboration with local San Antonio clinics such as the San Antonio Christian Dental Clinic to serve as their dental home.

Conclusion: The use of this interprofessional model has resulted in holistic and accessible health care for the refugees in San Antonio. Patients receive complimentary comprehensive care while students benefit from development of cultural competence reinforcement of humanitarian values. It is difficult to conclude which group is the biggest beneficiary of attending SARHC. As the dental students reflected, "We started attending the clinic as a service learning project. We then became their advocates, treated them at our dental school, and became knowledgeable about our community's dental clinics while offering tailored referrals."

KEY WORDS: interprofessional education, community service learning, Texas refugee population

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CASE REPORT

Texas Dental Establishments in 2011

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Background

Between 2000 and 2011, the population of the State of Texas increased from 20.8 million to 25.6 million residents (23% increase). During the same period, the number of professionally active dentists increased from 9,873 to 11,751 individuals (19% increase) and the number dental establishments increased from 6,965 to 9,041 locations (30% increase) (1-5).

In 2000, there were 2,993 residents for the “average” dental establishment ¹ in the State of Texas. The “average”² establishment had gross receipts (in 1997) of \$420,100, and had 5.8 employees, ³ (6.1 employees, nationally) each of whom was paid an annual average salary of \$33,900 (compared to \$32,600, nationally) (1).

¹ “An establishment is a single physical location where services are performed. It is not necessarily identical to a company or enterprise, which may consist of one or more establishments. In addition, one or more practitioners may be present in an establishment. (Throughout this manuscript, except where specified)...the term “dental establishment” refers to those facilities (with employees) subject to federal income taxes. Government agency programs (hospitals and health departments) are not included” (5).

² No dental establishment is “average,” and wide variations exist between dental facilities in different areas of the State of Texas (and the nation). Nevertheless, keeping track of the evolving and contrasting configurations of “average” dental practices (where possible, at local levels) does provide necessary information to monitor developments for the general profession and individual practitioners.

³ Employees may include dentists, dental hygienists, dental assistants, office staff, etc.



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ABSTRACT

Objective

To document the evolving Texas dental establishment pattern between 2000 and 2011 as the profession seeks to provide care to the burgeoning population of the state.

Methods

Published results from the Department of Commerce, Census Bureau’s annual study of business patterns for each county and state (with specific information on numbers of establishments, employees, salaries and resident population) were used to permit a review of these developments.

Results

Between 2000 and 2011 there was an almost 30% increase in dental establishments, predominantly in establishments with greater number of employees. Statewide the average number of employees per establishment increased to 6.6, ranging by county from 3.6 to 9.9 employees; with an average state salary of \$47,000, ranging by county from an average of \$35,000 to \$59,000.

Conclusion

The burgeoning state population growth is being matched by a greater proportional increase in dental establishments, but a smaller percentage increase in the number of dentists. The need to monitor dental establishment activities beyond the confines of one’s own facility is emphasized.

KEY WORDS: Dental practices, employees, auxiliaries, salaries, population

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