



## President's Corner

Learn how can you help WDHS grow as an organization.

page **3**



## Topics

- |                          |   |
|--------------------------|---|
| <b>ACE</b>               | Access to care, taking it to the streets!   |
| <b>Health</b>            | Brittle Nails, We treat our nails like built-in Swiss army knives...                    |
| <b>Presidents Corner</b> | Welcome to our first edition, We hope you find it informative and motivating.           |
| <b>RDH News</b>          | Dental Hygiene and Self Regulation.   |
| <b>Fitness</b>           | Biggest Loser Fitness Trainer inspire Dental Hygienists to become "champions of change" |



## ACE taking it to the streets!

Raising awareness in our community. In 2013 we plan to raise money and awareness in the community we serve. Please plan to join us.

Donna Poole, RDH  
ACE, Chairperson

## Access to Care Education Committee

Yvonne Gilead initiated The Wolverine Dental Hygienists' Society, Access to Care Education Committee (ACE) in 2008 with a goal to provide the community with oral health care education, by means of workshops, classes and presentations. ACE is committed to positively impacting and assisting the community with their oral health needs.

This year alone we were able to provide oral health demonstrations, distribute oral health literature, toothbrushes and toothpaste to well over 200 individuals. Our collaborations with organizations and individuals within the community helped to assist in our efforts. We are excited about the committees' plans for upcoming fundraising events for 2013. Your support and ideas are needed. So don't hesitate to join us!

more on **2**



Onychoschizia, those with  
a fissure down the  
middle....

Article submitted by:  
Gail Woodson-Stamps, RDH

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## Brittle Nails!

We treat our nails like built-in Swiss Army knives, using them to pry open seltzer cans and scratch away dirt. Like all tools, they need to be maintained.

**WHAT IT IS** The condition involving splitting and tearing nails (and those with a fissure down the middle) actually has a name: onychoschizia.

### **WHAT CAUSES IT**

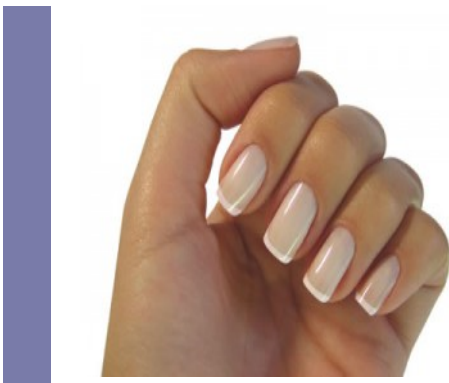
Excessive hand-and dishwashing, nail polish removers, and cold weather. Great nails start with new habits

**AVOID WATER** Wear gloves when doing dishes and skip the antibacterial soaps, which can be drying, says NiaTerezakis, a dermatologist in New Orleans.

### **KEEP THINGS LUBRICATED**

Apply lotion before and after washing hands. Massage it into cuticles and nails.

**GO GENTLE** Wear gloves in cold weather. Resist using nails to pick up things or clean dirt from other nails. (And step away from those glue-on talons and gel nail polish.)



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**FINALLY,** The surface of the nail has small keratin fibers that are oriented in the same direction, like the scales of a fish. To keep them flat, avoid pushing back cuticles with harsh metal tools and using fingernails to dig under things. (Yes, that includes the pull tabs on cans.) Whole Living November 2012 p. 50

Yes ladies, most of us already have to expose our hands to enough water on our jobs. Remember the older we get our bodies tend to become more dry and brittle in certain areas. Avoid excessive water, keep those hands lubricated, and keep those hands protected from the elements. (That is both sun and cold.)



## +Presidents' Corner

### Happy Holidays!

This is the FIRST of many Newsletters to come. I want to thank everyone who has supported WDHS in the various events we have had over the years. Theater night at the Reparatory Theater in Detroit, Scholarship banquets honoring our scholarship recipients, the 2008 NDA and NDHA Convention in Detroit, and Dinner and Movie at the Palladium just to name a few...

Ms. Albreta Merritt and Ms. Deborah Carter founded WDHS in 1972; the foundation these ladies laid has sustained this organization for 40 years. As president, it is my job to continue to build upon that solid foundation. With that said, here are some of the many wonderful ways WDHS is growing and evolving:

- Applying for 501(C) 3 Status
- Initiating Access to Care (ACE)
- Supporting Community Outreach Programs

- Scholarships
- National Boards (workshop)

With your active support we can continue to grow and do great things in our community.

Please visit our Website for details on upcoming events, workshops and ways you can get involved.

As you see, we are truly movers and shakers! Our Next Newsletter will be posted in March 2013. Thank you again for all your support and I look forward to seeing you in the coming year!

Your President,  
Melanie Conner, RDH, MS  
mrc1rdh@aol.com

*"If we could read the secret history of our enemies, we should find in each man's life sorrow and suffering enough to disarm any hostility" – H.W. Longfellow*

## **DENTAL HYGIENE AND SELF REGULATION:**

Every state has a dental Board of Dentistry that was created to establish licensing requirements for dental team members and to protect the public regarding oral health care issues. It has only been since the late 1070's that dental hygienists were considered to become members of the Boards of Dentistry. Prior to the late 1970's members of State dental boards were primarily comprised of Caucasian men. The rules and regulations that affected the dental hygiene profession were determined by dentists. Dental hygienists have shown their skills and abilities as leaders, and more and more, dental boards are recognizing and including dental hygienists on boards and committees.

Most state dental boards have a subcommittee comprised mostly of dental hygienists whose responsibilities are to address issues impacting the dental hygiene profession, determine licensure requirements, handle disciplinary issues and assure that CE is completed by licensed dental hygienists. On some of the advisory committees dentists and public members are appointed to provide balance. The advisory subcommittees were formed to give dental hygienists more autonomy and control over their profession in lieu of the formulation of a separate board of Dental Hygiene.

The 19-member board assists the Michigan Department of Licensing and Regulatory Affairs in overseeing and regulating the practice of more than 7,800 dentists, 10,100 dental hygienists and 1,400 dental assistants.

Michigan has a five member advisory committee, comprised of four dental hygienists and one dentist, who considers matters related to the dental hygiene profession and makes recommendations to the full board of dentistry. All members of the advisory committee are voting members on the board. The existence of the advisory committee is not mandated by state rules or statutes, but instead is a committee appointed by the chairperson of the board.

## **LEGISLATIVE ACCOMPLISHMENTS IN MICHIGAN:**

What is PA 161? Public Acts of 2006 (Act No. 161) was approved by the 93rd Legislature to determine rules in which a dental hygienist may provide preventive dental hygiene services to underserved patients. The law, in particular, regulates the supervision requirements for a hygienist practicing under PA 161. Under PA 161 a "dental hygienist may perform dental hygiene services under the *supervision* of a dentist as part of a program for dentally underserved populations in this state conducted by a local, state, or federal grantee health agency for patients who are not "*assigned by a dentist.*" In other words,

the patient receiving services by a PA 161 hygienist need not be a "*patient of record*" of a dentist.



## **New Model Of Care....**

Barbara Seldon,  
RDH. Ed Med.

The Michigan Department of Community Health Oral Health Program (MDCH-OHP) administers the PA 161: Public Dental Prevention Program (PA 161 Program). This program allows a collaborative practice between dental hygienists and dentists to allow preventive oral health services on unassigned and underserved populations in the state of Michigan. Through approved applications, nonprofit agencies can use dental hygienist service providers to administer preventive services to those in the state most in need of oral health care.

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## Finger Printing and Licensure:

### **NEW MODEL OF CARE AND WORK FORCE SCOPE OF PRACTICE:**

HB 4718 would allow dental hygienists to supervise dental assistants to act as his or her “second pair of hands” when delivering care for these patients. It authorizes dental assistants to assist dental hygienists in the application of dental sealants in PA 161 programs and in health departments, schools, and community health centers.

### **MEDICAID REIMBURSEMENT:**

At this time PA 161 dental hygienists may enroll for a Medicaid provider ID through the Community Health Automated Medicaid Processing System (CHAMPS) Provider Enrollment subsystem.

The billing provider can submit claims for services with the RDH as the rendering/servicing provider. An RDH is required to have a Type 1 (Individual) NPI number to enroll. The RDH is considered a rendering/servicing-only provider.

Rendering/Servicing-Only Provider is a Type 1 (Individual) NPI who renders services strictly on behalf of an organization, clinic or group practice. They are required to affiliate themselves with a Type 2 (Group) NPI such as a

**Federally Qualified Health Center (FQHC)**, Local Health Department, clinic, sole dentist or dental group in CHAMPS.

Direct payment for services is issued to the Type 2 entity only and not to the individual.

### **DENTAL HYGIENE SALARY:**

The average salary of dental hygienists in Detroit/Southfield, Michigan is \$43,000.00 per year. This is 7% lower than the national average.

### **FINGERPRINTING AND LICENSURE:**

Effective October 1, 2008, all applicants for a health profession license or registration in Michigan are required to submit fingerprints and undergo a criminal background check. Your license or registration will not be issued until this process is complete.

Article submitted by  
Barbara Seldon, RDH, Med



## Winning by Losing....

### **The Biggest Loser Fitness Trainer Inspires Dental Hygienists to Become “Champions for Change”**

During the ADHA’s 85<sup>th</sup> Annual session, Procter & Gamble Oral Health Professional partnered with Jillian Michaels, the personal trainer and life coach of the NBC hit series, “The Biggest Loser,” as part of its Inspire Change program. Through her focus and dedication, she has helped many Americans across the country be conscious of what to eat and how to work out. Michaels and special guest Amy Hazelwood, RDH, BS, spoke about how dental hygienists can become “Champions for Change” during their presentation; they discussed how healthcare professionals should look inside themselves, be empathetic to others and reach out to people to help them improve their quality of life. Michaels discussed how oral care is related to whole body health, saying, “We need to communicate that to our patients.” She also talked about the “small investments we need to make in our lifestyles – like buying organic fruits and vegetables, exercising, watching our diet and switching from a manual to power toothbrush to improve our oral health.” She encouraged dental hygienists, “Use positive techniques in practice and not scare tactics, and use before-and-after pictures to show patients their own accomplishments that will make a difference in motivating them to be more and do more.”

*Christine A. Hovliaras Delozier, RDH, BS, MBA, Jillian Michaels and Amy Hazelwood, RDH, BS*

For other inspirational articles, visit: [moeningpresentations.com/jillian-page.aspx](http://moeningpresentations.com/jillian-page.aspx)

Thanks to all of our contributing writers  
for making this publication insightful and  
possible.

Barbara Thompson, RDH, BS, Editor

Wolverine Dental Hygienists’  
Society  
P O Box 32286  
Detroit, MI 48232  
[wdhsonline.com](http://wdhsonline.com)