## **Innovations in Rural Oral Health: Indigenous Veterans' Oral Health**

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**Case Overview:** The 2020 Oral Health Access For Maine's Veterans needs assessment identified several barriers to accessing oral healthcare. Since the report's publication, each of those barriers has been resolved except for one - finding oral health professionals to adequately staff the dental clinics in the Houlton Band of Maliseet Indians, Mi'kmaq Nation, Passamaquoddy Tribe (Indian Township and Pleasant Point) communities.

The Maliseet and Mi'kmaq communities and two Passamaquoddy communities are very rural and have roughly a one-hour travel time between them, so they could potentially share staff.

## Ask of the Group:

- 1. What strategies could be used to recruit the necessary oral health professionals to the clinics in the short term?
- 2. What strategies or programs could be implemented to develop the oral health workforce for these rural, indigenous communities in Maine in the long term?

## Recommendations

- ▶ Utilize Dental and Hygiene Students: Engage dental hygiene and dental students as trainees to provide oral health care services in the short term. This approach would have a dual benefit of bringing oral health services to the area and exposing the students to community-based programs, which could encourage their future involvement and work in these programs.
- Loan Repayment Programs: Promote existing loan repayment programs, especially those targeting rural areas. At the same time, be mindful and explore how to address the fact that loan repayment eligibility changes if more than one dentist moves to a given rural area. This may need to be addressed at the policy level.
- Tribal Community Representation: Encourage enrollment of tribal community members in dental and hygiene schools. Highlight existing programs, such as the Native American educational waiver, which covers tuition for tribal members.



## Recommendations, continued

- Legislation Related to Mid-Level Providers: Advocate for legislation that supports the practice of mid-level providers, including dental therapists, in Maine. Acknowledge existing resistance among various stakeholder groups and work towards overcoming it.
- **Mentoring and Early Exposure:** Establish mentoring programs that pair students with oral health care providers. Begin this process early, from middle school onwards, to nurture interest and understanding of the profession.
- Medical-Dental Integration: Explore the possibility of medical providers delivering oral health screenings, fluoride varnish, and basic oral hygiene education. Collaborate with local medical facilities to explore opportunities for partnerships that would lead to enhanced oral health care access. Partnership opportunity ideas include collaborative messaging and community outreach, cross-training providers, and collaborative referral pathways.
- Address Transportation Challenges: Recognize the lack of public transportation in rural areas and explore solutions as a crucial aspect of improving access to healthcare.
- Community Engagement and Education: Develop outreach programs that encourage education within tribal communities. Promote the importance of education, health, and oral care among younger generations.
- **Explore Public-Private Partnerships:** Investigate the potential for partnerships between private practices and new oral health care providers to encourage community involvement and increase the likelihood of long-term commitment.
- Address Provider Retention Issues: Address issues related to provider retention in rural areas, acknowledging the challenges of isolation and limited recreational opportunities. Consider incentives beyond loan repayment to retain oral health clinicians.

These recommendations aim to address both short-term needs for oral health professionals and long-term strategies to build a sustainable oral health workforce in the indigenous communities of rural Maine.

