

February 14, 2017

Abby Tate, RDH, ECP III  
Testimony in Support of House Bill 2139  
House Health and Human Services Committee

Chairman Hawkins and Members of the Committee:

My name is Abby Tate, and I have been a dental hygienist for four years (and held an extended care permit III for a year and a half). I currently work in private practice, but previously worked in public health in the Shawnee Mission and Olathe schools helping to care for the underserved populations in the school systems. That is where I see the largest need in the Johnson County area for a mid-level dental provider.

While I worked in those school districts, two dentists made it to around 40 schools two to three times a year, with five hygienists going to each school four to five times per school year. As hygienists we were only able to provide prophylaxis with sealants and fluoride to the children who had already had an exam and X-rays. Some children needed so much treatment there was no way they were going to get it all taken care of within the year if they waited for the dentists to come back to their school.

Those kids who needed follow-up with a dentist were either referred back to our safety net clinic – if their parents (who mostly held jobs that did not provide paid time off) were able to find time to bring them. Most of these children's parents work long hours at low-income jobs that have long and late hours and do not always provide benefits like insurance and paid time off. An hour away from a job means an hour less of pay for their family. That makes going into the schools to make it easier on the parents crucial to this demographic!

If there was a mid-level dental provider, we could increase access to care at a more affordable rate to our public health dental departments instead of hiring more outreach dentists. Dental therapists in the public health sector could only do more good to our community! And let me say from dental outreach experience, it is not a cushy job. The patient load, extra work, lower-than-private-practice pay, constant stocking of supplies, and wear and tear on your body of loading/unloading equipment multiple times a day – those who will choose to be a public health dental therapist will be doing it for the love of making a difference to those who will not be getting fast, accessible care otherwise. Only good can come from a mid-level provider! Please help us increase access to care to our underserved children of Kansas!

Abby Tate, RDH ECP III