Public Health Administration Quality Improvement Project
Background

Public Act 161 of 2005 (PA 161) amended the Public Act 58 of 1991 and was approved by the State of Michigan 93rd Legislature to allow dental hygienists to provide preventive dental hygiene services to underserved patients in non-traditional practice settings through approved public or non-profit programs. 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 provide preventive oral health services for underserved populations in the State of Michigan. Through approved applications, public and non-profit agencies can utilize dental hygienist service providers to administer preventive services to those in the state most in need of oral health care. Within the PA 161 programs, 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.”

The MDCH-OHP has the responsibility of administering the PA 161 program. These responsibilities include the application process (available online), renewal process (by law must be completed every 2 years), collecting quarterly reports, maintenance of the PA 161 program web site and providing assistance for non-profit agencies interested in developing a PA 161 program. In addition, the MDCH-OHP may convene an Advisory committee to discuss and review recommendations.

Methods

As part of a Public Health Administration Quality Improvement (QI) project, the MDCH-OHP conducted a PA 161 Program Customer Satisfaction survey via email through Survey
Monkey between November and December, 2012. The purpose was to receive feedback on the program and its processes from agencies enrolled in the PA 161: Public Dental Prevention Program. Qualitative and quantitative data were collected in a 19 question survey that was administered to all contact persons operating PA 161 programs in Michigan. Currently, there are 55 PA 161 programs operating in the State of Michigan with 208 dental hygienists with 98 supervising dentists.³

The first three questions collected quantitative data on date of survey completion, type(s) of agency the PA 161 program provides services to (i.e. community dental clinic, Federally Qualified Health Center (FQHC), long term care facility or nursing home, school based or school linked health center) and county or counties they provide services in.

The MDCH-OHP strives to provide high quality services and programs that are responsive to customer needs. The results of the survey will be used by the MDCH-OHP to maintain or improve customer satisfaction, efficiency, and service quality for existing and future PA 161 programs. The survey was developed and administered via email to all PA 161 programs in the state focusing on the following:

- **Application process/Renewal process**
  The application questions involved six Likert scale questions regarding the step-by-step ease of access to the online application, and instructions (ease of obtaining and ease of following); completing the application, user-friendliness of submitting the application, overall satisfaction with the application process and helpfulness of renewal applications reminders. Two opened questions allowed the respondents to share any suggestions regarding the application and/or renewal process.
• **Quarterly report process**

A set of six Likert scale questions were used to evaluate the quarterly report submission, including questions regarding the ease of following the instructions, user-friendliness, distribution of the quarterly report template, and if the reminders were helpful. Open-ended questions were used to identify barriers for the PA 161 programs in completing the quarterly reports and asking for recommendations or suggestions regarding the quarterly reports process.

• **Maintenance and user accessibility of the PA 161 program web site**

Questions on the PA 161 program web site included frequency of use, user-friendliness; additional information that would helpful on the web site; and the technical assistance needs of the programs. These questions were asked in a variety of question formats including frequency selection, choice selection, and open-ended.

• **Ease of access and satisfaction of the MDCH-OHP personnel**

Several questions according to a Likert scale regarding the PA 161 program staff included: staff is courteous/respectful, knowledgeable, helpful, and responsive, provide adequate technical assistance, satisfied with the PA 161 program, service meets my needs, and overall satisfaction. Open-ended questions asked for specific areas that programs were not satisfied with the staff and program administration, what improvements to the program could be made to better serve the programs, and a dialogue box for any comments not covered in the above survey questions.

**Results**

The questionnaire was sent to the contact person (who is mainly responsible for setting up and renewing the PA 161 program); it is assumed they were the primary respondent for
completing the questionnaire. However, it is possible that multiple people from the same agency also completed this survey. Forty-four respondents completed the survey. Figure 1 shows the variety of agencies that operate PA 161 programs. With the use of mobile dentistry, PA 161 programs service all counties in the State of Michigan.

![Agencies Operating PA 161 Programs (n=41)](image)

**Application Process**

Overall, a combined 88.7% of the participants agreed or strongly agreed with the PA 161 program application process (see figure 2). The open-ended questions yielded several requests for providing the application in an on-line format (since the survey completion, the application can be attained online). In addition, requesting dentists to send letters versus signing a standard form was noted as a concern for the application process. One person noted the application/renewal process was excessive and extremely time consuming. Additional suggestions included a request to lighten up on the application/renewal processes that may inhibit new programs from beginning or current ones from remaining and increase the renewal process time frame for established programs. Also noted was a comment seeking an easier way to update provider information by using technology. All respondents agreed or strongly agreed that application renewal reminders were helpful.
Figure 2

Application Process

**Step-by-Step Instructions Easy to Obtain (n=44)**
- Strongly Disagree: 2.3%
- Somewhat Disagree: 11.4%
- Somewhat Agree: 45.5%
- Agree: 38.6%

**Step-by-Step Instructions are Comprehensive (n=44)**
- Somewhat Agree: 9.1%
- Agree: 50.0%
- Strongly Agree: 40.9%

**Step-by-Step Instructions are Easy to Follow (n=44)**
- Somewhat Disagree: 2.3%
- Somewhat Agree: 15.9%
- Agree: 52.3%

**Application Easy to Complete (n=44)**
- Strongly Disagree: 2.3%
- Somewhat Disagree: 2.3%
- Agree: 25.0%
- Strongly Agree: 34.1%

**Submitting is User-Friendly (n=44)**
- Strongly Disagree: 2.3%
- Somewhat Disagree: 31.8%
- Somewhat Agree: 45.5%
- Agree: 18.2%

**Overall Satisfied with the Application Process (n=44)**
- Somewhat Disagree: 2.3%
- Somewhat Agree: 43.2%
- Agree: 45.5%
- Strongly Agree: 9.1%
Quarterly Reports Process

A combined 90% of the respondents agree or strongly agree that they are satisfied with the quarterly report process (Figure 3). Open-ended questions yielded the following responses:

- Difficulty in collecting data on “number of patients receiving treatment after referral”
- Information on the quarterly report seems repetitive
- Time consuming—MDCH-OHP should consider requiring fewer reports possibly 2 times per year

Nearly 75% of the respondents strongly agreed the reminders for quarterly reports were helpful. Just over 2% of the respondents expressed difficulty in completing the quarterly reports, following the instructions and using the template. As noted in the open-ended questions, some respondents noted a lack of time and computer skills as a barrier to completing the quarterly reports.

Web Site Usage

Over 88% of the respondents reported viewing the PA 161 program web site less than one time per month. Greater than 84% expressed the information was helpful. Suggestions from the open-ended questions regarding the PA 161 program web site include:

- Insurance information regarding Healthy Kids Dental, MIChild, and Medicaid
- Details of each program and the population they serve
- Listing of current programs
- Details of programs that will see patients with special needs

Additional general remarks for the PA 161 program include:

- Provide a map for current programs and dentists accepting patients
- Help with Medicaid reimbursement
<table>
<thead>
<tr>
<th></th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Somewhat Disagree</th>
<th>Somewhat Agree</th>
<th>Agree</th>
<th>Strongly Agree</th>
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<td><strong>QR Reminders are Helpful (n=43)</strong></td>
<td>2.3%</td>
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<td><strong>Distribution of QR Template is Adequate (n=43)</strong></td>
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<td><strong>QR is Easy to Complete (n=43)</strong></td>
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<td><strong>QR Instructions are Easy to Follow (n=43)</strong></td>
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<td>4.7%</td>
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<td>55.8%</td>
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<td><strong>Overall, Satisfied with the QR Report Process (n=43)</strong></td>
<td>2.3%</td>
<td>2.3%</td>
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<td>46.5%</td>
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<td><strong>Process for Submitting QR User-Friendly (n=43)</strong></td>
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<td>4.8%</td>
<td>9.5%</td>
<td>28.6%</td>
<td>54.8%</td>
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MDCH-OHP Staff Assistance

Questions regarding the MDCH-OHP staff assistance in the application/renewal process and the quarterly reports assistance were overwhelmingly satisfied with the services provided. Over 95% of respondents stated the MDCH-OHP staff was available for assistance regarding the application process. Ninety-three percent of the participants also agreed that the staff was helpful in the quarterly reports process.

Discussion

Overall, the persons who responded to the survey seem satisfied with the application/renewal, quarterly reports, web site usage, and staff assistance provided to the PA 161 programs by the MDCH-OHP. Some of the general remarks regarding increasing the renewal time cannot be addressed due to the language in the law that states each program must be renewed every 2 years. The improvement of having the application being available online has already occurred. It is clear that the PA 161 programs are seeking ways to utilize technology with the application/renewal process and the quarterly reports to minimize their time working on paperwork. Comments in both the application and quarterly reports sections support the increase use of technology to reduce the current process.

A limitation of this study was that it allowed more than one respondent per agency to complete the survey. In addition, due to the anonymity of the respondents, it was impossible to know how many people from each agency were actually responding. Future surveys may consider specifying one respondent per program or sending the survey to all PA 161 Program service providers instead of the Program contact person. The additional suggestions to improve technology concerning the quarterly reports and web site design will be taken into consideration by the MDCH-OHP to help support the
current providers and to increase the number of PA 161 programs providing care to the underserved populations in Michigan.

References

