

Smiles for Life National Oral Health Curriculum Report on Trends, User Profile, and Satisfaction

July 1, 2015 – September 30, 2015

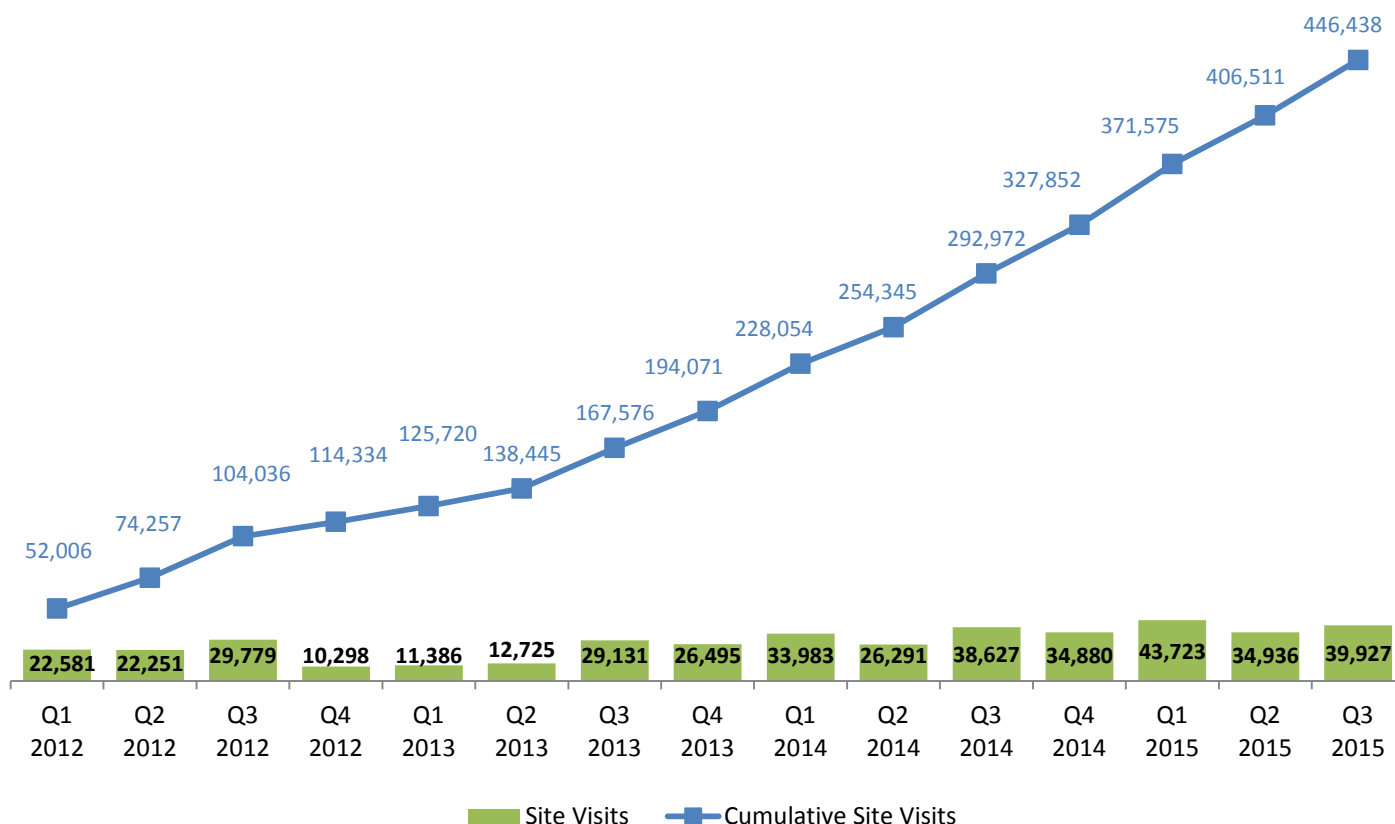
INTRODUCTION

This report provides the utilization statistics for the Smiles for Life Oral Health Curriculum for Quarter 3 (Q3) of 2015 (July 1, 2015 to Sep 30, 2015). This data is collected from the Smiles for Life website (www.SmilesForLifeOralHealth.org).

DISCRETE SITE VISITS

Since the launch of the site in June 2010, there have been 446,438 discrete site visits.¹ Exhibit 1 shows the number of site visits since 2012 (the green bars illustrate the number of site visits in each quarter, and the blue line illustrates the cumulative number of site visits by quarter). Q3 2015 remained fairly consistent with the previous three quarters, with 39,927 site visits.

**Exhibit 1. Discrete Site Visits²
Q1 2012 – Q3 2015**



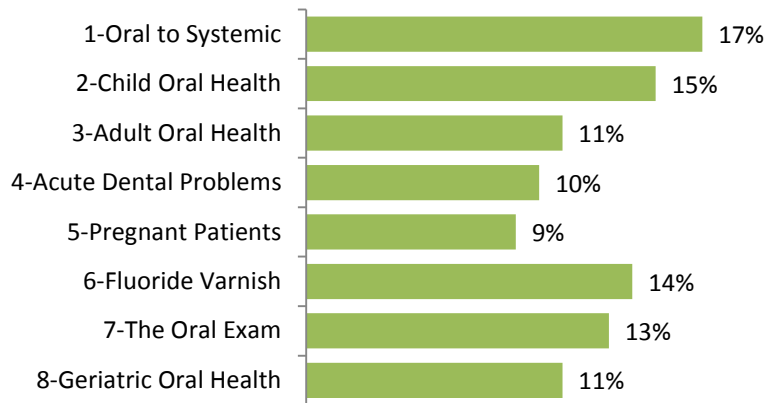
¹ A discrete site visit is defined as a visit to the website, regardless of the number of pages viewed.

² Site visit data may include a small number of search engine inquiries/bots. From July 2012 to May 2013, search engine inquiries/bots were removed from the data, which may account for any decreases in visits during that time.

COURSE COMPLETION FOR CE CREDIT

The total number of courses completed for Continuing Education (CE) credit in Q3 2015 was 11,284 (see Exhibit 2). Course 1 (Oral to Systemic) was the most frequently completed course for CE credit (17%). Course 2 (Child Oral Health) was the next most commonly completed course (15%), followed by Course 6 (Fluoride Varnish) with 14% and Course 7 (The Oral Exam) with 13%.

Exhibit 2. Course Completion for CE Credit
Q3 2015 (percentages are out of the 11,284 courses completed for CE credit by 3,975 users)



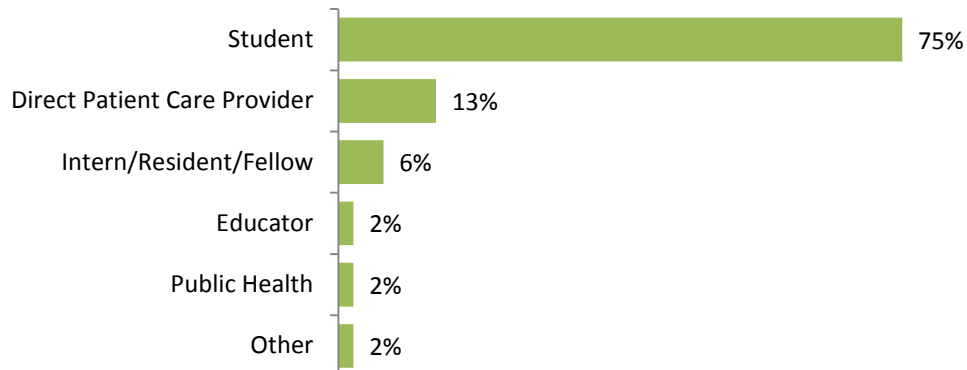
MODULE POWERPOINT DOWNLOAD

Course modules are made available to educators registered on the site. There were 1,876 downloads in Q3 2015, with Module 1 (Oral to Systemic) representing 32% of the total downloads. In addition, Module 2 (Child Oral Health) represented 21% of all downloads, and Module 6 (Fluoride Varnish) represented 15%.

CE REGISTERED USERS BY TRAINING LEVEL

The majority of CE registered users were students (75%). In addition, 13% of CE registered users were direct patient care providers, 6% were an intern/resident/fellow, 2% were educators, and 2% worked in public health.

Exhibit 3. CE Registered Users by Training Level
Q3 2015 (n=3,974)

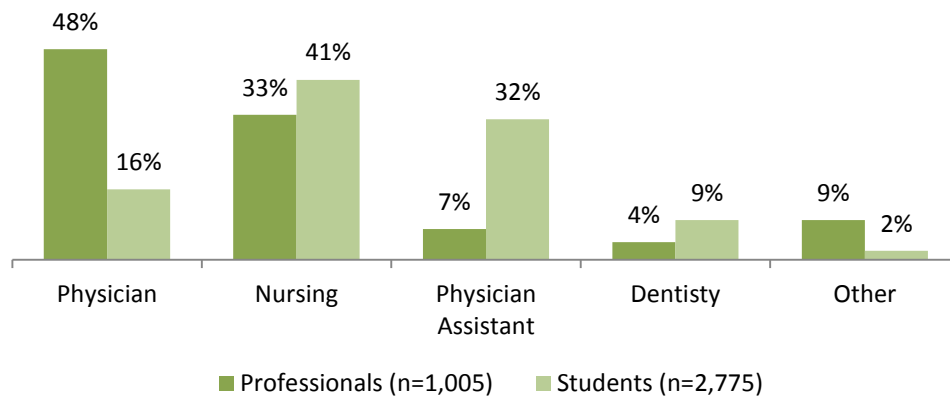


CE REGISTERED USERS, BY PROFESSION/AREA OF STUDY

Exhibit 4 shows the profession/area of study of CE registered users in Q3 2015. (The dark green bars illustrate the profession of CE registered users who were working in a professional setting, and the light green bars illustrate the area of study of CE registered users who were students).

The majority of *professionals* were Physicians (48%) or Nurses (33%). The majority of *students* were studying to become Nurses (41%) or Physician Assistants (32%). Of the student CE registered users, 74% were in a graduate program, 23% were in an undergraduate program, and 2% were in a non-degree seeking program (data not shown).

**Exhibit 4. CE Registered Users, by Profession/Area of Study
Q3 2015**



CE REGISTERED USERS BY ORGANIZATION

A total of 3,946 CE registered users reported their organization in Q3 2015. Exhibit 5 provides a list of organizations with 40 or more CE registered users (in order from largest number of users to smallest). With 402 CE registered users, West Virginia University was the organization reported most frequently.

**Exhibit 5. Organizations with 40 or More CE Registered Users
Q3 2015**

Organization	Number of Registered Users
West Virginia University	402
New York University	390
Florida International University	177
University of West Florida	115
State University of New York	107
University of Nebraska	88
Western University	87
University of Texas	86
University of Louisville	80
Emory University	79
Kaiser Permanente	78
University of Rochester	72
Idaho State University	70
Harding University	63
Wichita State University	60
University of Manitoba	52
University of Colorado	51
Wayne State University	49
The Children's Hospital of Philadelphia	46
Toronto College of Dental Hygiene and Auxiliaries	45
Northeastern University	44
University of Pittsburgh	44
Marywood University	43
Bethel University	41
University of Toledo	40

CE REGISTERED USERS BY STATE

A total of 3,964 registered users reported their state in Q3 2015. Exhibit 6 provides a list of states with more than 100 CE registered users in Q3 2015 (in order from largest number of total users to smallest), and provides data from the three previous quarters to compare the number of registered users over time. New York was the state reported most frequently in Q3 2015 (n=610), followed by West Virginia (n=442) and Florida (n=325). The states with the largest relative change in the number of registered users from Q2 2015 to Q3 2015 were Georgia, Kansas, and Florida. While not shown in Exhibit 6, there was also a large increase in the number of registered users from other countries in Q3 2015 (n=126).³

**Exhibit 6. States with More than 100 CE Registered Users
Q3 2015**

State	Q4 2014	Q1 2015	Q2 2015	Q3 2015
New York	489	360	465	610⁴
West Virginia	120	374	224	442
Florida	261	271	96	325
Pennsylvania	82	68	111	229
California	128	141	83	216
Colorado	49	87	525	150
Michigan	126	140	204	138
Texas	86	260	85	132
Kansas	4	151	22	129
Ohio	220	133	83	127
Georgia	47	6	6	125
Massachusetts	55	289	131	122

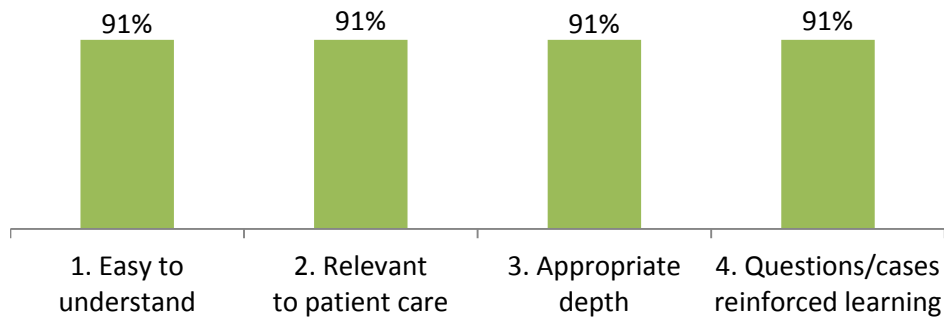
³ Other locations reported by registered users included Australia, British Columbia, Manitoba, New Zealand, Nova Scotia, and Ontario.

⁴ Of the CE registered users from New York in Q3 2015, 64% reported that their organization was New York University while another 18% reported their organization was State University of New York.

USER SURVEY RESULTS

The Smiles for Life Oral Health Curriculum includes a satisfaction survey of seven questions available to each user after completion of a module. Questions 1-4 ask about the ease of use, relevance to patient care, opinion of appropriate depth of material, and whether the content (cases and questions) helps reinforce learning. In Q3 2015, 10,196 SFL course surveys were completed by 3,722 registered users. As shown in Exhibit 7, there were very high levels of satisfaction (91% agreed or strongly agreed) across all four survey questions. These results are consistent with past quarters.

**Exhibit 7. Survey Results: Questions 1-4 (Strongly Agree and Agree)
Q3 2015 (10,196 surveys were completed by 3,722 registered users)**



Questions 5-7 (open-ended) of the satisfaction survey ask what users liked about the module, how the module could be improved, and what changes they will make in their clinical practice. A sample of representative responses (excluding non-substantive responses) to these open-ended questions in Q3 2015 are provided in Exhibit 8.

**Exhibit 8. Sample of Survey Results: Questions 5-7
Q3 2015**

Question	Sample Responses
5. What did you like about the module?	<p>“I enjoyed the variety of ways the information was presented throughout the course.”</p> <p>“This module was full of information that could easily be applied to my future career as a physician assistant.”</p> <p>“It was presented in appropriate depth and was easy to read and understand. “</p> <p>“Concise modules with clinically relevant information as well as the case studies.”</p> <p>“Wonderful illustration and explanation of Early Childhood Caries and how to prevent and treat with my patients.”</p>
6. How could we improve this module?	<p>“I would like to see a slide or take home page of medications and impact on dental health. “</p> <p>“It was very hard to find information that actually related to the exam at the end, making the end of course exam difficult.”</p> <p>“Include more pictures labeled with the disease or abnormality.”</p> <p>“Include more interactive activities to learn about the different stages of Early Childhood Caries.”</p> <p>“More interactive case studies.”</p>
7. What changes will you make to your clinical practices?	<p>“I will take five minutes to talk to patients about the importance of oral health.”</p> <p>“I will routinely check my younger patients for signs of ECC and implement fluoride varnish in-house.”</p> <p>“I will be sure to provide an oral examination when conducting a full physical.”</p> <p>“I will promote regular dental visits.”</p> <p>“I will be more aware of medications that affect oral health.”</p>

Please feel free to contact Lindsey Padjen, Harder+Company Community Research, at lpadjen@harderco.com with any questions regarding this report.