A Strategic Framework to Improve Children’s Oral Health

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Arizona Department of Health Services
HRSA Grant # T12HP14995
The Costs of Early Childhood Tooth Decay (Caries)
Call to Action
Surgeon General’s Reports

- Oral Health in America (2000)

- National Call to Action to Promote Oral Health (2003)
Call to Action
Institute of Medicine Reports

- Advancing Oral Health in America (2011)
Responding to the Call to Action

A Strategic Framework
A Conceptual Model
Influences on Children’s Oral Health
Improving Children’s Oral Health

- Oral disease is complex.

A multi-level approach is needed to improve children’s oral health.
A Strategic Framework
Prevent & Control Early Childhood Tooth Decay

Systems of Integration and Coordination
- Partnership with health and childcare providers
- State and local dental public health programs
- Policy development

Access to Dental Care Services
- Age one dental visit
- Dental home
- Dental workforce and professional development

Disease Management
- Risk assessment for tooth decay
- Spectrum of dental treatment

Prevention
- Fluoride
- Reduction of bacteria that cause tooth decay
- Education and anticipatory guidance for parents and caregivers
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Best Practice Approaches for State and Community Oral Health Programs

A Best Practice Approach Report describes a public health strategy, assesses the strength of evidence on the effectiveness of the strategy, and uses practice examples to illustrate successful/innovative implementation.

Report last updated: May 25, 2011

Best Practice Approach
Prevention and Control of Early Childhood Tooth Decay

I. Description (page 1)
II. Guidelines and Recommendations (page 20)
III. Research Evidence (page 23)
IV. Best Practice Criteria (page 25)
V. State Practice Examples (page 26)
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Summary of Evidence Supporting the Prevention and Control of Early Childhood Tooth Decay

- Research ++
- Expert Opinion +++
- Field Lessons ++
- Theoretical Rationale +++

See Attachment A for details.
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Responding to the Call to Action

Developing Strategies
A Strategic Framework
Prevent & Control Early Childhood Tooth Decay

- Prevention
- Disease Management
- Access to Dental Care Services
- Systems of Integration and Coordination
Align and Link Local, Regional, State and National Oral Health Efforts

HealthyPeople.gov

Oral Health

Goal
Prevent and control oral and craniofacial diseases, conditions, and injuries, and improve access to preventive services and dental care.

Overview
The health of the mouth and surrounding craniofacial (skull and face) structures is central to a person’s overall health and well-being. Oral and craniofacial diseases and conditions include:

- Dental caries (tooth decay)
- Periodontal (gum) diseases
- Cleft lip and palate
Healthy People 2020
Oral Health Objectives

- Improve oral health
- Increase access to preventive services
- Develop monitoring and surveillance
- Build infrastructure
American Academy of Pediatric Dentistry
2010-11 Definitions, Oral Health Policies, and Clinical Guidelines

Introduction
- Overview
- Vision Statement/Mission Statement
- Core Values

Revised Strategic Plan
Revised AAPD Research Agenda

Definitions
- Dental Home
- Dental Neglect
- Dental Disability

Revised Medically Necessary Care
- Special Health Care Needs

Oral Health Policies
Revised Medically Necessary Care
Revised Oral Health Care Programs for Infants, Children, and Adolescents
- Dental Home
Promoting Oral Health

**INTRODUCTION**
Oral health is critically important to the overall health and well-being of children and adolescents. It covers a range of health promotion and disease prevention concerns, including dental caries (tooth decay); periodontal health; proper development and alignment of facial bones, jaws, and teeth; oral diseases and conditions; and trauma or injury to the mouth and teeth. Oral health is an important and continuing health supervision issue for the health care professional.

Children caries (tooth decay) is a preventable and transmissible infectious disease, caused by bacteria (e.g., Streptococcus mutans or Streptococcus sobrinus) that form plaque on the surface of the mouth. And youth with special health care needs are at increased risk. National surveys also have demonstrated that children in low-income and moderate-income households are more likely to have caries and more decayed or missing teeth.
Evidence-based clinical recommendations on the prescription of dietary fluoride supplements for caries prevention

A report of the American Dental Association Council on Scientific Affairs

Dental caries remains the most prevalent chronic disease in children. The Centers for Disease Control and Prevention (CDC) reported that from 1999 through 2004, 42 percent of children aged 2 to 11 years experienced dental caries in their primary teeth, the trend in younger children aged 2 to 4 years has increased over time, and 59 percent of adolescents aged 12 to 19 years experienced dental caries in their permanent teeth.

A series of epidemiologic studies conducted during the 1930s and 1940s led to experimental studies in Grand Rapids, Mich., and other locations in which investigators doc-

ABSTRACT

Background. This article presents evidence-based clinical recommendations for the prescription of dietary fluoride supplements. The recommendations were developed by an expert panel convened by the American Dental Association (ADA) Council on Scientific Affairs (CSA). The panel addressed the following questions: when and for whom should fluoride supplements be prescribed, and what should be the recommended dosage schedule for dietary fluoride supplements?

Types of Studies Reviewed. A panel of experts convened by the ADA CSA, in collaboration with staff of the ADA Center for Evidence-based Dentistry, conducted a MEDLINE search to identify publications that addressed the research questions: systematic reviews as well as clinical studies published since the systematic reviews were conducted (June 1, 2006).

Results. The panel concluded that dietary fluoride supplements should be prescribed only for children who are at high risk of developing caries and whose primary source of drinking water is deficient in fluoride.
Research Evidence

Recommended Community Interventions

Oral Health: Dental Caries (Cavities)

Tooth decay (dental caries, or cavities) remains a common chronic condition that becomes more prevalent with age. These interventions aim to prevent dental caries through the use of dental sealants and community-wide fluoridation.

Task Force Recommendations & Findings

This table lists interventions reviewed by the Community Guide, with Task Force findings for each (definitions of findings). Click on an underlined intervention title for a summary of the review.

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<thead>
<tr>
<th>Community water fluoridation</th>
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<tr>
<td>Statewide or community-wide sealant promotion</td>
<td>Insufficient Evidence</td>
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<td>School-based or -linked sealant delivery programs</td>
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Vermont’s Tooth Tutor program helps to ensure that every child has access to preventive, restorative and continuous care in a dental office. Schools choose to participate in the Tooth Tutor Program.

A dental professional will help the school nurse update dental information in each child’s school health file, assisting families who currently do not have a dentist to find a dental home for their child/children and providing a free dental screening to these children upon request.

- Approximately half of all elementary schools, and all the Head Start programs in Vermont participate in the Tooth Tutor Program.
- Most of the Tooth Tutors are funded through Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) funds but some are funded through grants and foundations.
Responding to the Call to Action

Strategies to Build Enhanced Dental Teams
A Response to the Call to Action

Arizona Department of Health Services
Office of Oral Health

The Enhanced Dental Teams Grant
(2009-2012)
The goal of the EDT Grant:
To promote and develop Enhanced Dental Teams to improve access to oral health services for underserved populations and underserved areas.
The Enhanced Dental Teams Grant

Enhanced Dental Teams have increased workforce capacity, diversity & flexible:

- Bring preventive service to children in their community settings
- Establish dental homes
- Expand service areas
- Improve coordination of dental care
The Enhanced Dental Teams Grant

The EDT Grant works to:
• Build local, regional & state infrastructure
• Train providers for Enhanced Dental Teams
• Build linkages & partnerships to increase Enhanced Dental Teams
• Provide technical support and resource information
### A Strategic Framework
**Prevent & Control Early Childhood Tooth Decay**

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Strategies to Build Enhanced Dental Teams

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