

CE Course Handout

Working in Collaboration to Improve the Oral Health of Pregnant Women, Infants and Children in Head Start

Friday, June 19, 2015 2:30pm-5:30pm







Working in Collaboration to Improve the Oral Health of Pregnant Women, Infants, and Children in Head Start

National Center on Health Susan Deming, Diane Flanagan, Kathy Hunt, and Michelle Landrum American Dental Hygienists' Association Session Nashville, TN June 19, 2015

Presentation Learning Objectives

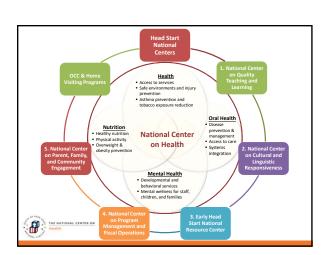
- Discuss successful strategies for collaboration to improve the oral health of pregnant women, infants, and children enrolled in Early Head Start/Head Start (EHS/HS)
- Discuss successful efforts to overcome challenges related to education, disease prevention, and access-to-care issues impacting EHS/HS participants.
- Describe materials produced by the National Center on Health (NCH) focused on oral health and the integration of oral health into overall health.
- Develop ways to interface with dental hygienist liaisons (DHLs) and HS programs in their own states.





National Center on Health Dental Hygienist Liaisons

Michelle Landrum, R.D.H., M.Ed. National Center on Health Consultant American Dental Hygienists' Association Session Nashville, TN June 19, 2015



National Center on Health Priority Health Issues

- · Healthy weight, nutrition, and physical activity
- Developmental and behavioral health
- Safety and Injury prevention
- Health literacy
- · Oral health and dental homes
- Asthma prevention with special emphasis on tobacco exposure prevention



National Center on Health Partners

• Project led by the American Academy of Pediatrics

Mission

Improve the health outcomes of pregnant women, infants, and children enrolled in EHS/HS





National Center on Health Goals

- Provide evidence- and practice-based information and materials to the EHS/HS community
- Work collaboratively with leaders in the health, early childhood, and child care fields to improve the health of EHS/HS children and their families
- Work with national, state, and local organizations and agencies to enhance the health care infrastructure that impacts and serves children enrolled in EHS/HS and their families



National Center on Health Oral Health Project

- Project lead:
 - National Oral Health Resource Center working in collaboration with the Association of State and Territorial Dental Directors (ASTDD)
- Framework:
 - Disease Prevention and Management
 - Access to Care
 - Systems Integration





National Center on Health Oral Health Project

The American Dental Hygienists' Association (ADHA) is recognized as an important NCH Oral Health Project partner





What Is the Role of State Dental Hygienist Liaisons?

- Provide a communication link between NCH and statewide oral health activities and programs
- Collaborate with state partners including state dental directors, HS state collaboration directors, and former Dental Home Initiative state leads to address accessto-care issues
- Assist in increasing preventive and educational services to HS statewide
- Share resources with HS and other partners to deliver consistent messages on oral health



Common Dental Hygienist Liaison Activities

- Share NCH oral health resources, including the monthly Brush Up on Oral Health newsletter, with HS programs in their state
- Attend local health advisory meetings
- Present oral health information at local, state, and regional HS meetings and conferences
- · Link children to oral health professionals and services







Head Start Overview

Diane Flanagan, R.D.H.
National Center on Health
Wisconsin Dental Hygienist Liaison
American Dental Hygienists' Association Session
Nashville, TN
June 19, 2015

What Is Early Head Start/Head Start?

- Federal programs
- Serves pregnant women and children from birth to age 5 from families with low incomes
- Promotes comprehensive child development, family support, and school readiness
- Supports children's growth in the following domains:
 - language and literacy
 - cognition and general knowledge
 - physical development and health
 - social and emotional development
 - approaches to learning





Source: http://eclkc.ohs.acf.hhs.gov/hslc/hs/

How to Find an Early Head Start/Head Start Program

EHS/HS Locator:

http://eclkc.ohs.acf.hhs.gov/hslc/HeadStartOffices



History of Head Start

- HS began in 1965 as part of Lyndon Johnson's War on Poverty
- Administered by the Administration for Children and Families
- HS has served nearly 30 million children and serves over 1 million children annually
- In 2007 HS training and technical assistance system was redesigned to support programs through six national centers and a state-based system
- EHS began in 1994



Source: http://eclkc.ohs.acf.hhs.gov/hslc/hs/about/histor

Early Head Start/Head Start Services

- EHS/HS programs provide comprehensive services to enrolled children and their families, which include:
 - education and cognitive development services
 - health, nutrition, social, and other services
- EHS/HS emphasizes the role of parents as teachers, and programs build relationships with families that support:
 - family well-being and positive parent-child relationships
 - families as learners and lifelong educators
 - family engagement in transitions
 - family connections to peers and community
- families as advocates and leaders



Source: http://eclkc.ohs.acf.hhs.gov/hslc/hs/abo

Early Head Start/Head Start



Service delivery models

- Center-based or school-based
- Family child care homes
- Home-based
- Combination of center-based and home-based



Source: http://eclkc.ohs.acf.hhs.gov/hslc/hs/abou

Early Head Start/Head Start Program Performance Standards

- Provide a standard definition of quality services that all local EHS and HS grantees are required to follow
- Oral-health-related performance standards completed within first 90 days of enrollment and documented in Performance Information Report (PIR)
 - HS must determine whether each child has an ongoing source of continuous, accessible care ("dental home")
 - A health professional must determine if a child is up to date on preventive and primary oral health care according to state EPSDT (Medicaid) periodicity schedule



Head Start Performance Standards

- HS must help parents bring the child up to date within the first 90 days of enrollment, if a child is not up to date on age-appropriate preventive and primary care (EPSDT)
- e.g., assists with Medicaid and Children's Health Insurance Program (CHIP) application, transportation, finding a dental professional
- HS must obtain or arrange further diagnostic testing, examination, and treatment for each child with a health/dental problem



Head Start Performance Standards

- Dental follow-up and treatment must include topical fluoride treatments as recommended by a dental professional
- HS must establish ongoing communication with parents of children with identified dental needs to facilitate the implementation of the plan
- Education of HS staff, case-management systems, and documentation are vital to this process

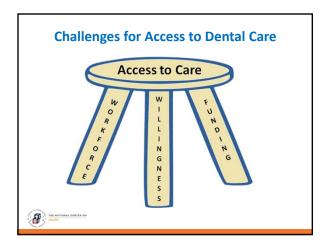




Head Start Program Information Reports

- Provides data on services provided to children and their families. All grantees must submit self-reported data annually to the Office of Head Start.
- · Data collected for children ages 3 and older:
 - # who received preventive oral health care
 - # who needed dental treatment
 - # who received treatment
 - Most common reason children did not receive dental treatment
 - # who are up to date on preventive and primary oral health care (requirement varies by state)
 - # of pregnant women who received an oral exam or treatment





Challenges for Access to Dental Care

- Finding dental providers who:
 - See young children
 - Treat pregnant women
 - Provide follow-up needed treatment
 - Accept Medicaid
 - Have extended hours





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Dental Access Challenges for Parents

- Dental office staff are not friendly or welcoming
- · Explanations and instructions are hard to understand
 - Too technical
 - Not in the language they speak
- · Transportation is difficult or impossible
- Difficult to miss work for dental appointments
- · Oral health care is too expensive



Challenges for Dental Providers

- Not feeling comfortable treating young children
 - May not have received adequate education
- Concerns about safety of treating pregnant women
 - May not have received adequate education
- Parents canceling or not keeping appointments
- Inadequate Medicaid reimbursement to cover services



Early Head Start/Head Start Staff

- Directors/supervisors
- Health coordinators/nurses
- Home visitors
- Child educators
- Family advocates
- Support staff





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Dental Hygienist Liaison National Activities



- Present at national meetings
 - ADHA
 - National Oral Health Conference
 - National Primary Oral Health Conference
- · Participate in webinars
- Resource to NCH



Dental Hygienist Liaison Statewide Activities

- Annual conference
 - Exhibit
 - Present
- Health coordinators meetings
- Board of directors meetings



Resource to HS state

collaboration office

Resource to dental

hygienists

Local Activities

- Provide oral health information for newsletters
- Train HS staff
- Participate in family health events
- Perform oral screenings and apply fluoride varnish
- Serve on health advisory committees
- Connect HS centers to oral health services



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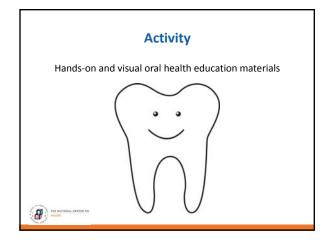
Oral Health Education Tips to Share with HS Staff

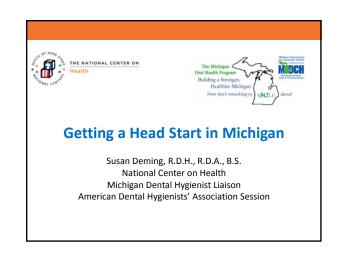
- Be prepared to discuss family's oral health needs
- Ask for permission to discuss oral health
- Start the conversation with open-ended questions
- Assess parents' readiness for change
- Recognize parents' strengths and challenges
- Build parents' confidence
- Summarize the discussion and action plan

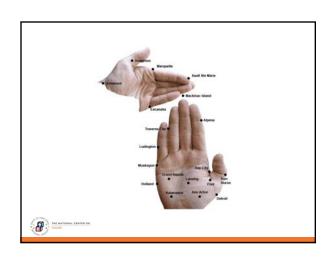






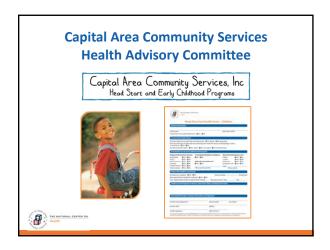




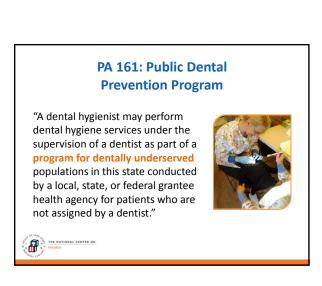






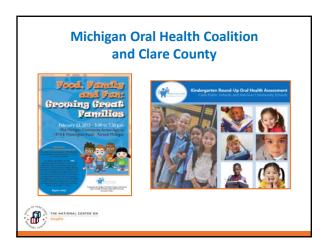


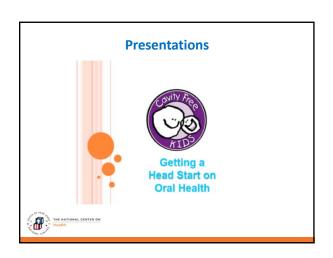












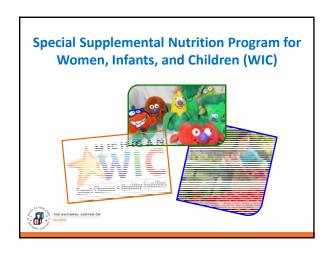






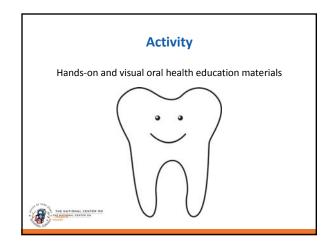


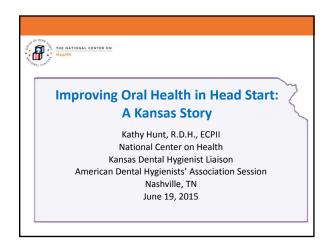




Joined Michigan HS Association Trained parents and staff Attended HS conferences Established collaborations Provided role modeling Utilized assessment codes Member of Michigan health advisory board THE MATCHIGAN HEADS MICHIGAN HEADS MICHI











Collaborations

 Oral Health Kansas (State Oral Health Coalition)



 Bureau of Oral Health
 (Kansas Department of Health and Environment)





Other Contacts: Kansas



Kansas Association for the Medically Underserved (State Primary Care Association)



Kansas Dental Hygiene Association (Chair for Community Dental Health Committee)



Kansas Dental Association (Board Member, Kansas Dental Charitable Foundation)





Other Contacts: National

 National Center on Health (Office of Head Start)



 National Maternal and Child Oral Health Resource Center (Georgetown University)



 Association of State and Territorial Dental Directors





Dental Hygienist Liaison Activities

- Contact for early childhood oral health
- 0
- Disseminate information about
 - Changes in policy
 - Approved materials
 - Funding, training, and meeting opportunities
- Provide technical assistance



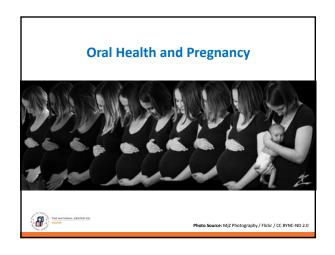




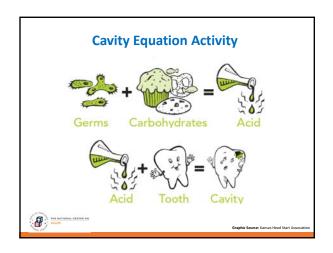




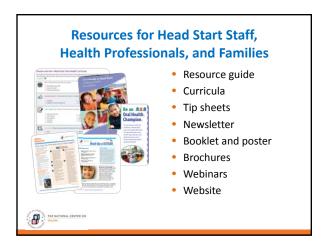


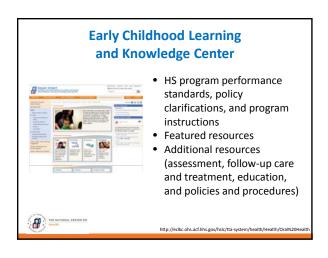






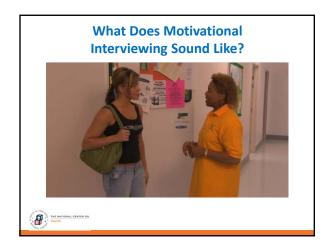












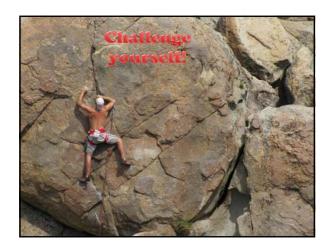


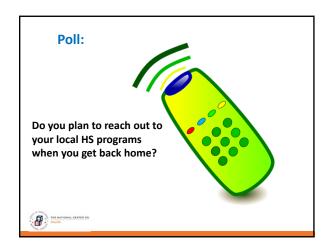












National Center on Health Contact Information

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E-mail: nchinfo@aap.org

Website: http://eclkc.ohs.acf.hhs.gov/hslc/tta-

system/health/center



