

Topic Areas of Action Plan Focus

Promising Practices

The Promising Practices topic area includes “Outcomes” directed at successful, evidence-based and research-based strategies, decision-making practices, and activities that can be replicated and applied to oral health problems in Colorado. This topic area directly relates to the National Call to Action #2 “Overcome barriers by replicating effective programs and proven efforts” and Action #3 “Build the science base and accelerate science transfer” as well as Healthy People 2010 objectives 21-8, 21-9, and 21-13 and related objective areas in Chapters 7, 11, 16, 23, and 27.

Priority Outcome #1

All medical screenings and medical check-ups throughout the lifespan should include oral health.

Why

“Anticipatory guidance, risk assessment, and care management facilitate improved health outcomes for all ages.” -- U.S. Surgeon General’s Report on Oral Health.

Strategy 1: Incorporate lifelong dental care into current medical schedules (check-ups, immunizations, etc) that is promoted to health care providers and the general public.

Suggested Partners

Medical and oral health provider and professional organizations, educational institutions, Colorado Clinical Guidelines Collaborative, advocacy groups, organizations and facilities that represent points of entry for medical care, local public health nurses, Colorado Family Physicians, Delta Dental of Colorado and other third party carriers, Centers for Medicare and Medicaid Services, Colorado Department of Public Health and Environment/Children with Special Health Care Needs, Covering Kids and Families, Colorado Consumer Health Initiative, Invest in Kids, Colorado Children’s Campaign.



Suggested Action Steps

- Action: Develop a frequency schedule of dental exams/screenings based on needs of targeted greatest risk populations.
- Action: Form partnerships (corporate businesses and possibly 9Health Fair) and develop a schedule or calendar of recommended health needs that incorporate dental check-ups/exams.
- Action: Incorporate oral health into existing ‘Health Passports’ and make it available in numerous places that are accessible to or accessed by families (medical and dental offices, community health clinics, pharmacies, etc).

Evaluation

The schedule is developed, promoted and used by health care providers and the public. Oral health incorporated into passports and made available.

Strategy 2: Work with health care providers to increase access to oral screenings.

Suggested Partners

Medical and oral health providers and professional organizations, educational institutions, Colorado Clinical

continued

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Guidelines Collaborative, advocacy groups, organizations and facilities that represent points of entry for medical care, local public health nurses, Colorado Family Physicians, Delta Dental of Colorado and other third party carriers, Centers for Medicare and Medicaid Services, Colorado Department of Public Health and Environment/Children with Special Health Care Needs, Covering Kids and Families, Colorado Consumer Health Initiative, Invest in Kids, Colorado Children's Campaign

Suggested Action Steps

- Action: Investigate and report on the systems that incorporate medical and dental care (community health centers).
- Action: Increase referral networks between medical and dental providers.
- Action: Promote the concept and the definition of the dental home.
- Action: Determine target populations to be screened.
- Action: Increase referral networks between medical and dental providers.
- Action: Develop statewide, standardized screening procedures.
- Action: Identify areas of target populations and conduct screenings.
- Action: Allow reimbursement for basic preventive dental procedures, such as screening and fluoride treatments, by medical providers.

Evaluation

An increase in referral networks between medical and dental providers is realized. The report on systems of incorporated care already in existence is made available. Screening protocol is developed and is implemented. Screenings are conducted. Reimbursements are secured. Information is used to refer for follow-up care and program planning.

Strategy 3: Increase the number of pregnant women and children up to age one who receive an oral exam.

Suggested Partners

Colorado Medical Association, Colorado Academy of Family Practice, Colorado American Academy of Pediatrics, Colorado Association of Pediatric Nurse Practitioners, Child Health Associates Group, WIC, prenatal programs, Children's Hospital, pediatric health and oral health providers, Colorado Chapter of the American College of Obstetricians and Gynecologists, oral health professional organizations

Suggested Action Steps

- Action: Promote and educate providers on the American Academy of Pediatrics and American Academy of Pediatric Dentistry policy on timing of the first dental exam.
- Action: Investigate various state and local programs that target exams in the birth to one-year age group.
- Action: Develop a training program to teach general dentists how to examine and treat very young children.
- Action: Use anticipatory guidance with parents about the importance of early oral care.

Evaluation

Children birth to age one are receiving an oral health screening. Increased numbers of pregnant women are receiving an oral health screening. Increased number of state and local programs are recommending screening for pregnant women and children birth to age one.

Priority Outcome #2

Expand oral disease prevention and referral services into school health programs throughout the state.

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Why

According to the Colorado's School-Based Health Centers 2004 report "Schools that have health centers on site report increased attendance, lower dropout rates, fewer suspension rates, and higher graduation rates." An estimated 7.8 million hours of school are lost annually due to acute oral pain and infection. -- Snapshot of Oral Health in Colorado

Strategy 1: Partner with state and local educational, dental, health, professional and community organizations to determine the feasibility of introducing oral disease prevention and referral services into school health programs.

Suggested Partners

Colorado Department of Public Health and Environment, Prevention Services Division, Colorado Association for School-Based Health Care, Colorado Connections for Healthy Schools, Colorado Association of School Executives, Colorado Department of Education, Colorado Association of School Nurses, local school advisory councils, Colorado Community Health Network, Colorado Dental Hygienists' Association, Colorado Dental Association, parent teacher associations, public health nurses, school districts, county commissioners

Suggested Action Steps

- Action: Assess the school and community dental resources available for oral disease prevention education, screening, preventive services and treatment .
- Action: Develop a plan for educating schools and communities regarding oral health issues for children and students.
- Action: Develop a plan for implementing and evaluating an oral health component within school health programs.
- Action: Engage local schools in pilot implementation projects.

Evaluation

Increased number of children/students who access oral health screening, preventive services and routine care in

communities that include oral health as a component of their school health program. Increase in the number of children/students who receive dental sealants. Reduced number of hours lost from school due to dental disease. Reduced amount of dental disease.

Priority Outcome #3

Achieve greater than 90% of population on public water systems receiving optimal fluoridation.

Why

"The most cost-effective preventive measure for reducing dental decay is community water fluoridation. Since its inception in the second half of the 20th century, fluoridation of community water supplies is responsible for major reductions in tooth decay (40-70 percent in children) and tooth loss in adults (40-60 percent). Fluoridation safely and inexpensively benefits both children and adults, regardless of socioeconomic status or access to dental care." -- Impact of Oral Disease on the Health of Coloradans. This is one of two proven evidence-based strategies for the prevention of dental disease.

Strategy 1: Duplicate strategies of successful fluoridation initiatives.

Suggested Partners

Oral Health Awareness Colorado!, Colorado Department of Public Health and Environment, Colorado Dental Association, Colorado Oral Health Network, Colorado Dental Hygienists' Association

Suggested Action Steps

- Action: Review "Healthy Smiles Ft. Collins" documentation on referendum issue.
- Action: Secure the final list of strategies from the CDC.
- Action: Educate and promote on the safety and the cost-effectiveness of water fluoridation.

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- Action: Provide resources/tool kits/talking points to help medical and oral health providers feel confident in discussing the science and the effectiveness of fluoridation.
- Action: Expand school fluoride mouth rinse programs to schools throughout the state that qualify according to Colorado Department of Public Health and Environment criteria.

Evaluation

Fluoridation tool kits are developed and available. Successful strategies are duplicated. Increase the number of public water systems that optimally fluoridate water.

Priority Outcome #4

Colorado children at greatest risk of dental disease receive dental sealants.

Why

Dental sealants, a thin coating bonded into the pit and the fissures of the chewing surface of permanent molars, are nearly 100 percent effective in preventing tooth decay. When properly placed and retained, dental sealants are a highly effective primary preventive measure. This is one of two proven evidence-based strategies for the prevention of dental disease.

Strategy 1: Expand sealant programs statewide.

Suggested Partners

Colorado Department of Public Health and Environment, Oral Health Awareness Colorado! partners conducting sealant programs, safety net dental providers, local public health, Delta Dental Foundation, Delta Dental Plan

Suggested Action Steps

- Action: Determine true extent of sealant program penetration in the state.
- Action: Use standardized nationally recognized criteria for risk determination/school selection.
- Action: Secure funding to expand existing “Promising Practices” in sealant delivery.
- Action: Promote the school-based sealant guidelines and cost benefits of school-based sealant programs.
- Action: Expand programming into identified schools.

Evaluation

Risk populations are identified. Additional funding is secured. Programs are expanded statewide.

Strategy 2: Work with private dental community to increase sealant application.

Suggested Partners

Colorado Department of Public Health and Environment, private oral health providers, oral health professional organizations, Delta Dental of Colorado, University of Colorado School of Dentistry

Suggested Action Steps

- Action: Offer continuing education units for dental providers on the efficacy and the application of sealants.
- Action: Provide dental providers with information about sealant improvements.

Evaluation

Sealant application is increased in the private dental community. Additional continuing education units are provided. Information is available to and utilized by dental providers.