

# ORAL HEALTH UPDATE FOR SCHOOL NURSES DECEMBER 1, 2016

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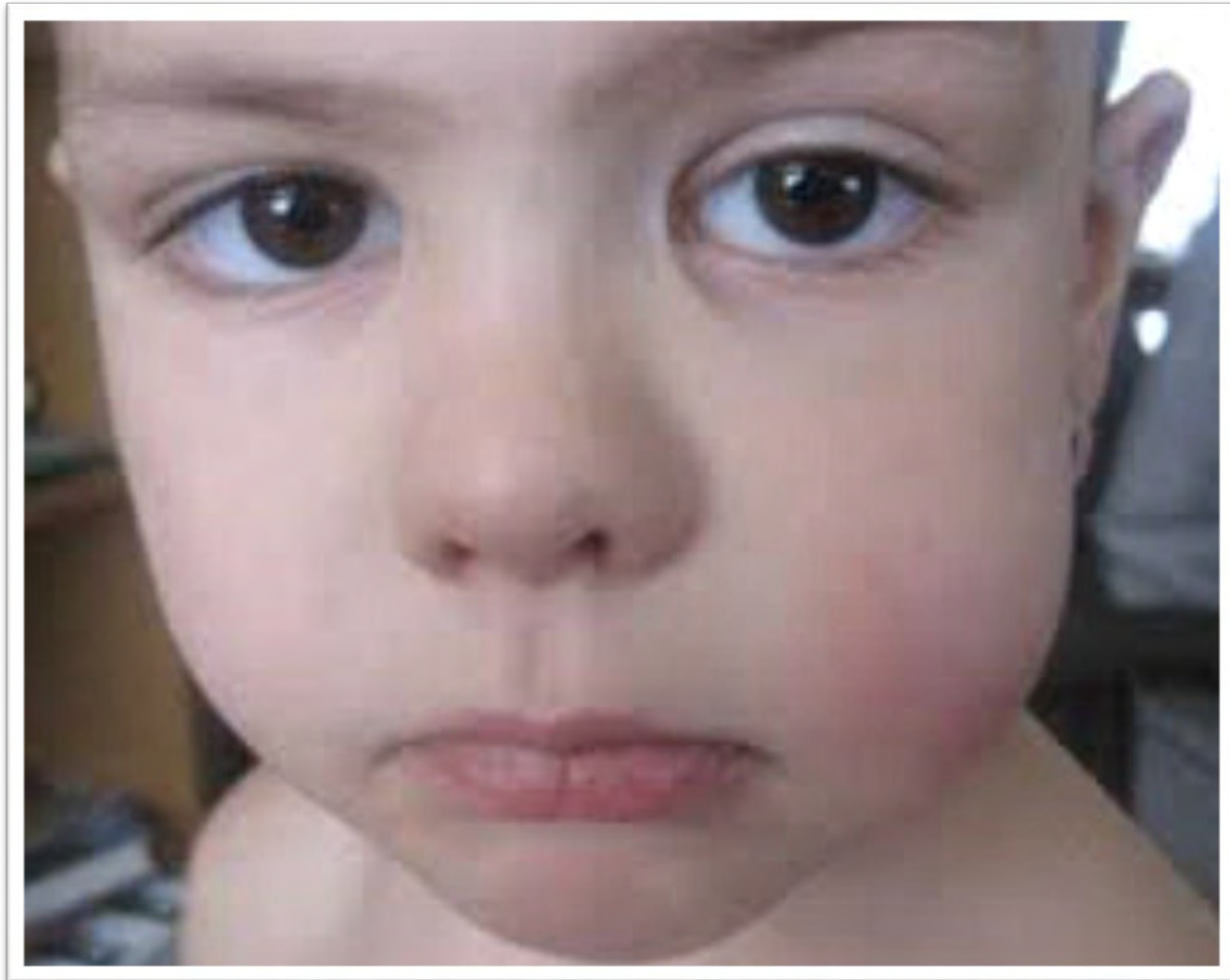
Dental Director

Missouri Department of Health and Senior  
Services

# Objectives

- Information about children's dental health Needs in Missouri
- Role of diet in tooth decay (dental caries)
- Discuss oral health programs available in Missouri
- Present issues of School Based Dental Programs
- Present resources for School Nurses
- Information for Community water fluoridation

# The Need



# Children's dental health in Missouri

## Third Graders\*

- 67% of students have dental decay experience (55% US)
  - 27% of students have untreated decay (26.1% US)
  - 6.4% had urgent treatment needs.
  - 11% of students had dental sealants
- \*2014 Mo Burden Report – PSP data

Dental caries -  
most common  
chronic disease  
among children

### Consequences of poor oral health

1. Overall health,  
ability to learn,  
eat, and speak.
2. Children miss  
**51 million  
school-hours**  
annually due to  
dental-related  
issues.
3. self-esteem.



# Higher Risk Children

- Definition - children from low-income families (up to 200% FPL) are at greater risk for dental caries experience and for untreated caries than the rest of the population.
  - less likely to have a dental visit in a year
  - less likely to have dental sealants
  - more likely to have untreated caries, greater risk in MO rural areas.
- Community Water Fluoridation helps this group the most
- Sealants are most cost-effective when targeted to higher risk Children's teeth and an important piece of prevention

# Managing Dental Caries

- Caries is an infectious oral disease that can be arrested in its early stages.
- Caries can be prevented-
  - **primary prevention**, provided to avert the onset of caries – fluoride and CWF
  - **secondary prevention**, to avert the progression of early caries to cavitation – sealants, preventive restorations





# MO Department of Health and Senior Services Sponsored Programs

- State Dental Plan published 2015
- State Dental Director position filled January 4, 2016
- Adult Dental Services – January 2016
  - 70,300 claims \$16.6 million thru October 2016
- Fluoridation Notification Law, August 2016
- Dental Sealant Grant from Delta Dental Foundation. August 2016
- Tele-Health Law passed in 2016

# Current Programs cont'd

- **Dental Sealant Program** – RFP released November 1
  - Contractors will be selected by competitive bids process, work to start early 2017.
  - Must target schools defined as “high risk” for tooth decay:
    - 50+% of children in school participate in FRL program.
  - Provide dental sealants for all children regardless of insurance/Medicaid status.
  - Provide follow-up care and have relationship with community/school selected.

# Current Programs Cont'd.

- **Tele-health (dentistry)**

- Should allow a dental hygienist to provide services under general supervision by tele-dentistry - School based programs?
- Medicaid Regulations – currently under review
- MO Dental Board – decisions to describe dental practice in this situation.

- **Fluoridation Education** – working with University of Missouri Department of Engineering to develop training modules for Water Department Engineers and Staff on Fluoridation.

# Preventive Services Program

- Community-based, volunteer fluoride varnish and oral health education program with four components:
  - Screening
  - Education
  - Prevention (fluoride varnish)
  - Referral
- 2015-2016 School Year:
  - 83,139 students in 750 schools and organizations.
  - Infants through age 18.



# Oral Health Information for School Nurses

## -DHSS Oral Health Webpage

- Resources for School Nurses and Teachers
- <http://health.mo.gov/living/families/oralhealth/index.php>



# Missouri Department of Health & Senior Services

Healthy Living

Senior & Disability Services

Licensing & Regulations

Disaster & Emergency Planning

Data & Statistics

## Oral Health

Home » Healthy Living » Healthy Families » Oral Health

Oral health is essential for general health and well-being. Oral health problems affect not only the ability to eat and speak but are inter-connected with serious health issues like diabetes, heart disease, stroke, osteoporosis, and preterm or low birth weight. But the good news is that oral health problems are preventable. A healthy smile for life starts with healthy habits like brushing and flossing, using fluoride, making smart food choices and eating habits, and visiting the dentist at least yearly.

While the Missouri Office of Dental Health does not offer direct care such as extractions, prosthetics/dentures, composite and silver fillings, and professional cleanings, we are committed to improving the oral health of all Missourians through education, prevention and leadership.

**NEW** Adult dental benefits are now available for MO HealthNet recipients. Expanded coverage of dental services for adults in Missouri includes preventive services, restorative services, periodontal treatment, oral surgery, extractions, radiographs, pain evaluation and relief, infection control, and sedation. For more information please see the following resources:

- [MO HealthNet Provider Bulletin](#)
- [List of MO HealthNet Providers](#)
- [Missouri Primary Care Association's Tool to Find a Community Health Center](#)

## Oral Health

- < Information
- < Locate Location
- Missouri Oral Health Plan 2020
- < Missouri Oral Health System
- < Oral Health Services
- Dental Services
- Preventive Services (PSP)
- < Related Links
- < Water Fluoridation

Oral Health Plan  
Missouri Department of Health & Senior Services  
PO Box 570



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- Delta Dental's Land Of Smiles
- Dental Curriculum For Teachers
- Dental Guide For School Nurses
- Missouri Child Abuse and Neglect Mandated Reporter Training
- Missouri Child Abuse and Neglect Mandated Reporter Training Introductory Video
- National Health Service Corps Loan Repayment
- Rural Spotlight
- Student Loan Repayment For Dentists, Nurses, And Physicians
- Information For Physicians
- Topical Fluoride Varnish Program For Schools

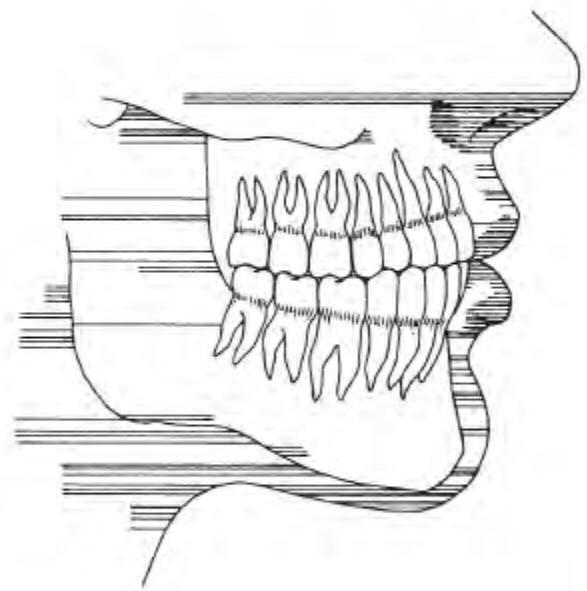
## Oral Health Information

- < [Locate Local Dentist](#)
- < [Missouri Child Abuse and Neglect Mandated Reporter Training](#)
- < [Missouri Child Abuse and Neglect Mandated Reporter Training System](#)
- < [Oral Health Resources](#)
- < [Dental Sealant Program](#)
- < [Preventive Services \(PSP\)](#)
- < [Related Links](#)
- < [Water Fluoridation](#)

Oral Health Program  
Missouri Department of Health & Senior Services  
PO Box 570



# Dental Health Guide *for* School Nurses



Missouri Department of Health and Senior Services

# Dental First Aid Kit

- **Hanks balanced salt solution (such as a Save-A-Tooth Kit)**
- **Salt**
- **3% Hydrogen peroxide solution**
- **Orabase with Benzocaine\***
- **Orajel™ for cold sores\***
- **Abreva® for cold sores\***
- **Basic Supplies**
  - Cotton swabs, Dental floss, Tongue depressor, Ice pack, Soft wax, 2 inch x 2 inch gauze squares, Stimulents or tooth picks, Tea bags, Toothbrushes, Tweezers

# Problems you can effect

- Red sore swollen gums
- Cold sores
- Toothache
- Post Extraction Bleeding
- Broken or Displaced tooth
- Tooth Avulsion
- Possible jaw fracture or dislocation
- Orthodontic appliance problems
- Objects lodged between teeth
- Lacerated lip or tongue
- Tooth eruption pain

# Abscessed tooth

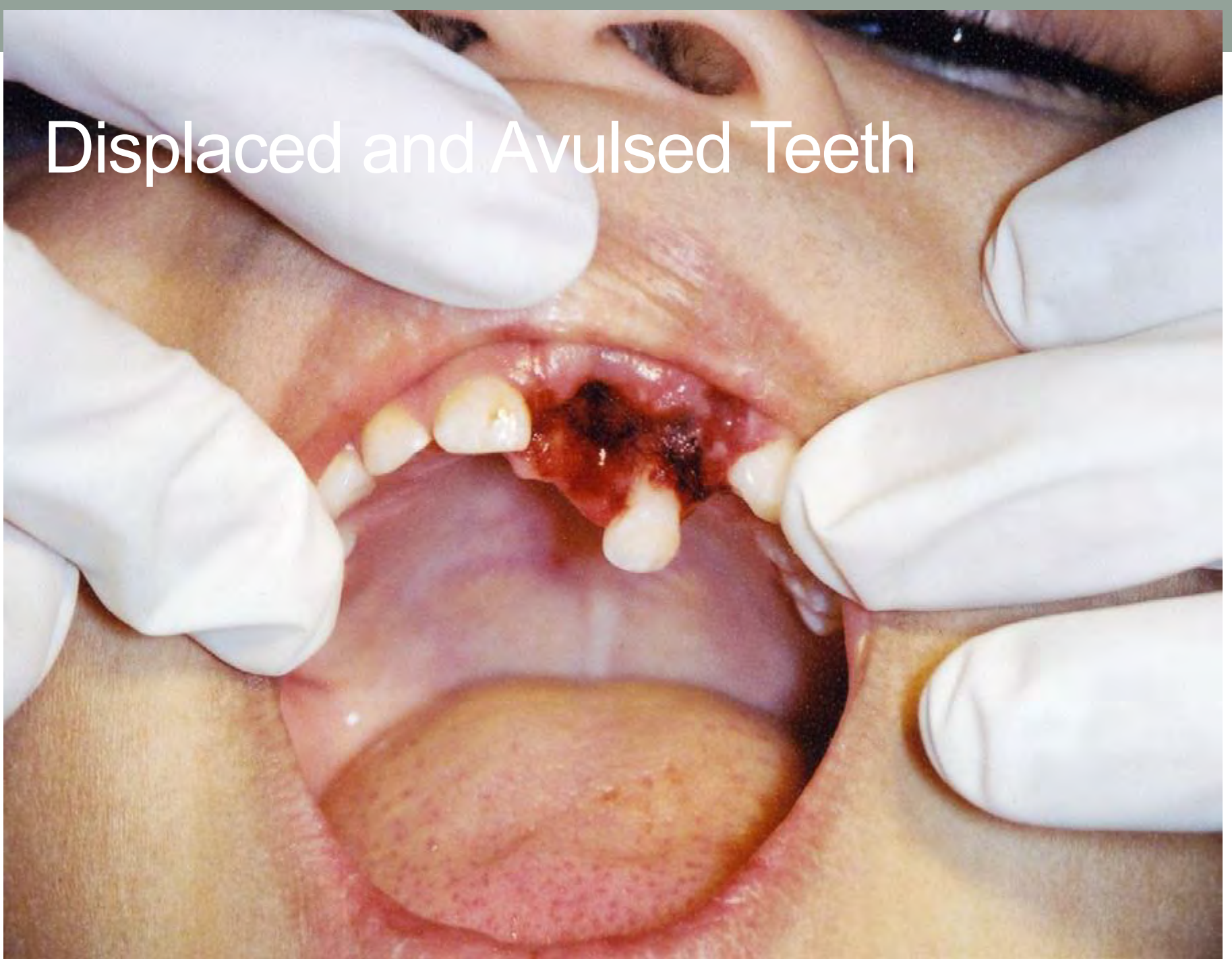


# Inflamed Red Gums





# Displaced and Avulsed Teeth



# Orthodontic appliances









# School-based Dental Programs

## School nurse email survey

- Purpose
- To see if your school had a dental program for your students
- Who ran the program
- What you thought about the program
  
- 84 responses

# Survey sent out by Marjorie

- Sent out in June 2016
- 84 responses
- 9 had no oral health program
- 40 worked with the PSP program
- 19 worked with local agencies
- 16 Worked with Big Smiles

# Survey Responses – 84

- 73 schools had a dental program
- 65 were happy with their programs
- 40 worked with the PSP program
- 5 Delta Dental tooth fairy
- 15 Big Smiles program
- 16 Local dental program
- 62 other program not identified

# Problems with Programs

- Would only see children with Medicaid or Insurance – 8
- Poor Organization – 5
- Problems with Follow up – 3
- Concern about parents consent and/or communication - 2
- Other issues, kids didn't like fluoride varnish, couldn't get volunteer dentists.

# 2016 Email Survey – opportunities for improvement.

- Only seeing Medicaid Children – 7
- Problems with being organized – 9
- Quality of Dental Care – 1
- Problems with follow- up Care – 3
- Finding Volunteers

# 2016 Email Survey Kudos

- Liked PSP individual staff – 7
- PSP & unspecified staff very good – 11
- Liked their local program, Jordan Valley, Comtrea, ACHE, CCHE, Affinia,- 13
- Happy with services (all providers) – 65

# Working with a School Based Dental Program

- Memorandum of Understanding (MOU)
  - Should describe what the school (district) will provide
    - Space
    - Utilities
    - Cooperation of staff
    - Help contacting parents
  - Answer other questions
    - Where will they set up?
    - Will they interfere with other events – i.e. MAP testing

# Working with a School Based Dental Program - continued

- What the dentist (clinic) will provide – professional dental care and
  - Liability insurance
  - Confidentiality
  - Staff
- Who the dentist will and won't see – free?
  - What about children with pain and infection
  - Who does the follow-up



# Working with a School Based Dental Program - continued

- Parental Consents
  - School should be able to review
  - Are you comfortable with one consent for the whole school year or forever?
  - What about invasive treatments – pulling teeth?
- Referral List – do they make sense
  - Are they taking care of their own referrals?
  - Do the dentists agree to take Medicaid or free care patients?

# Resources

- “School based or school linked mobile or portable dental Services”, Association of State and Territorial Dental Directors ([ASTDD.org](http://ASTDD.org))
- “Fluoride varnish issue brief”, Association of State and Territorial Dental Directors ([ASTDD.org](http://ASTDD.org))

# Community Water Fluoridation

CDC named water fluoridation as one of 10 great public health achievements of the 20<sup>th</sup> Century



# Why should school nurses care about community water fluoridation (CWF)

- Prevents tooth decay – 25% reduction in decay rates with CWF
- All ages benefit – even adults
- Safe and effective – 70 yrs. of use
- Saves Money – ROI up to \$47/dollar spent
- It's natural
- It promotes health equity – 80% of decay in 25% of population (indigent and rural)
- Reduces decay by 2 teeth per child per year

# Preventing Tooth Decay

- 2.25 teeth per child (McDonagh).
- Reduction of tooth decay in fluoridated areas is approximately 30-50%.
- Increases percentage of children totally free from tooth decay 14.5% (McDonagh).
- Adults who have lived in fluoridated communities their entire lives have 34.7% fewer teeth decayed



▲ Fig.7.2. Decay of upper anterior teeth due to improper feeding habits



# What Is Community Water Fluoridation?

- Fluoridation of community water supplies is simply the adjustment of the existing, naturally occurring fluoride in drinking water to an optimal level for the prevention of tooth decay. Think of it this way: Water that has been fortified with fluoride is similar to fortifying milk with Vitamin D, table salt with iodine, and bread and cereals with folic acid






# Optimum Levels of Fluoride

**Fluoride: Small Solution. Big Benefits.**

The **U.S. Department of Health and Human Services** announced a recommendation that community water systems adjust the amount of fluoride to **0.7 mg/L** to achieve an optimal fluoride level to help prevent tooth decay.

Just how much is 0.7 milligrams per liter of water? It's like ...

 <p>1 inch in 23 miles</p>	 <p>1 minute in 2.74 years</p>	 <p>1 cent in \$14,000</p>
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**What difference does a little fluoride make?** The public health benefits are big. Before water fluoridation children had about **3 times** as many cavities.

For more information, visit [ADA.org/fluoride](http://ADA.org/fluoride).

**ADA** American Dental Association®  
America's leading advocate for oral health

# State of the State-MO

- 117 water systems adjust Fluoride levels (2014)
- 76% of the population uses fluoridated water (2014)
- Cities like St. Louis has been fluoridated since 1952



# Anti-Fluoridation Reasons

- Fluoride is Toxic - yes but only at levels above 4ppm optimum level is 0.7ppm
- It is dangerous to handle – proper methods for handling fluoride insures safely
- It doesn't work – It has been proven as recently as 2014 Edmonton study, 70 years of data
- We get enough Fluoride thru dental visit fluoride applications and Fluoridated toothpaste. – The biggest benefit for CWF is the indigent who don't have regular access to dental care.
- Many more.

# More Information

- <http://www.cdc.gov/fluoridation/basics/>
- <http://health.mo.gov/living/families/oralhealth/waterfluoridation.php>
- <http://www.slpl.lib.mo.us/cco/code/data/t1126.htm>
- <http://www.stlwater.com/ccr.pdf>

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