

# Current Status of Children's Oral Health in Oregon

- Based on the 2007 Oregon Smile Survey, children in grades 1-3:
  - 64% of children have already had at least one cavity.
  - 1 in 5 children have rampant decay decay in seven or more of their teeth.
  - 35% have untreated decay and are in need of dental treatment.
- When compared to the 2002 Oregon Smile Survey, in 2007 there was a 38% increase in the number of children with decay in their permanent teeth.
- Only 22.6% of Oregon communities have fluoridated water.





### "First Tooth" Project Overview

- Ongoing collaboration with the Oregon Oral Health Coalition's (OrOHC) Early Childhood Cavities Prevention Committee.
- 3-year workforce development project funded by the Health Resources and Services Administration (HRSA) until August 31, 2012.
- Purpose was to reduce childhood tooth decay in Oregon by increasing the number of medical and dental providers delivering evidence-based preventive oral health services to infants and toddlers under age 3.

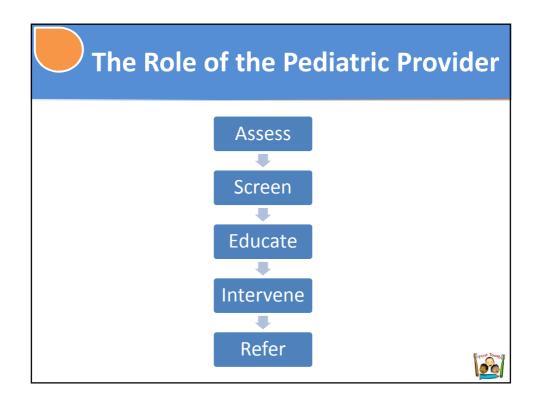




### "First Tooth" Project Goals

- Expand the oral health workforce in Oregon by utilizing medical care providers to deliver early childhood caries prevention services to at-risk children ages birth to three years.
- Develop and launch an online training and resource center.
- Facilitate collaborative referral relationships between dentists and primary medical care providers so that Oregon children have a dental home.



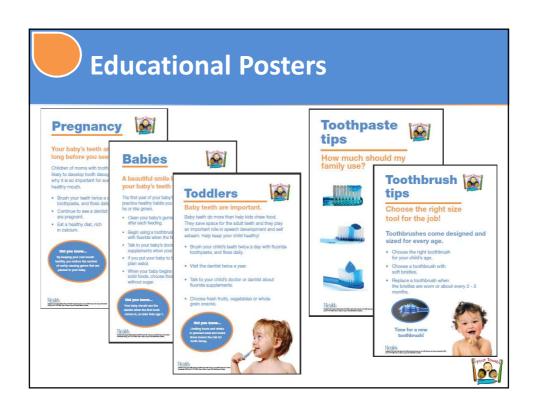


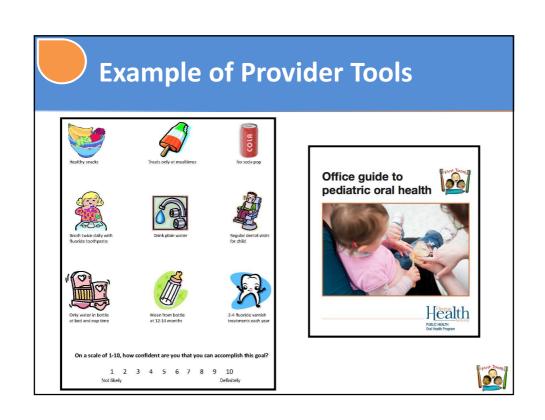
## **Project Components**

- In-office 1 1.5 hours CME/CE training for medical and dental providers
- Oral health education tools
- Anticipatory guidance resources
- Comprehensive resource and training website
- Online training for medical and dental providers
- Continued technical assistance











#### www.healthoregon.org/firsttooth

- Online Trainings:
  - Launched on September 28, 2012.
  - Interactive:
    - Downloadable resources
    - -Links to websites
    - Expanded definitions
  - Evaluation questions are asked throughout the training.



## **Anticipated Outcomes**

- **Expand the oral health workforce** serving young children by utilizing pediatric medical providers to provide early childhood caries prevention services.
- Assist dental and medical providers to implement culturally appropriate early childhood caries prevention services.
- Facilitate **collaboration** between medical and dental providers.
- Increase utilization of dental services by young children in Oregon and establish a "**Dental Home**" by age one.
- Reduce early childhood caries in Oregon.



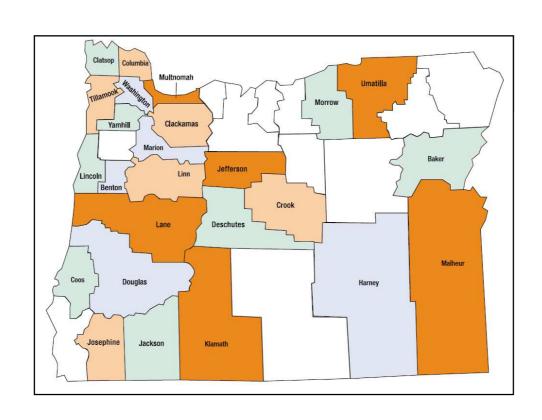


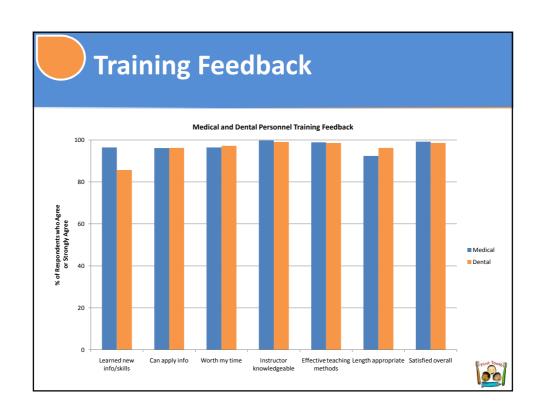
## **In-Person Training Statistics**

- 102 in-person trainings:
  - 64 medical
  - 24 dental
  - 14 combined medical/dental
- 149 different sites have been trained.
- 1,424 participants have been trained:
  - 991 medical personnel
  - 433 dental personnel









Evaluation Outcome Measures			
Outcome Measure	Data Point	2010 Data	2011 Data*
Fluoride varnish applications by a medical provider	<ul> <li>% of children ages 0-3 on Medicaid who receive fluoride varnish application(s) from a medical provider</li> </ul>	1.5%	2.4%
Preventive oral health services by a dental provider	<ul> <li>% of children ages 0-3 on Medicaid who receive preventive dental services from a dental provider</li> </ul>	17.2%	19.2%
Children with a dental home	<ul> <li># of children ages 0-3 on Medicaid with a dental home.</li> </ul>	16.1%	18.0%
* Preliminary	Data		evet To

## **Future of "First Tooth"**

- "First Tooth" was transferred to the Oregon Oral Health Coalition (OrOHC) on September 1, 2012.
- Grants submitted to the DentaQuest Foundation, Ford Family Foundation, and Oregon Community Foundation (OCF) to support "First Tooth" activities.
- Continue to conduct outcome evaluation data collection and analysis.
- Disseminate and present evaluation report and results.



### **Future of "First Tooth" & CCOs**

- Local community implementation and ownership.
- "First Tooth" as a train-the-trainer program.
- Package "First Tooth" to appeal to Coordinated Care Organizations (CCOs), Dental Care Organizations (DCOs), and local champions:
  - Ready-to-go
  - Resources available to support implementation
  - Defined health indicators and measures to track health outcomes

