Selecting a School-Based Oral Health Care Program

Resource Guide for Schools





Purpose

Oral health care programs within a school setting are a great way to ensure that all students have access to care. School administrators and school nurses have many options when seeking an oral health program to provide services to their students. Programs may differ in the types of oral health providers, the specific services being delivered, and space requirements. Use this document to choose the type of oral health program that will best meet the students' needs.

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What is the Oral Health Program?

The Wisconsin Department of Health Services' <u>Oral Health Program</u> aims to protect and promote the oral health of the people of Wisconsin. Activities include:

- Planning, implementing, and evaluating preventive oral health programs.
- Collecting, analyzing, and reporting statewide data on the public's oral health.
- Training and education for health professionals and the public.
- Providing technical assistance to program partners.
- Developing recommendations to improve the state's oral health outcomes.

What is Wisconsin Seal-A-Smile?

<u>Wisconsin Seal-A-Smile</u> (SAS) is a school-based oral health program that provides care to students at school. The program's mission is to improve the oral health of all Wisconsin students by providing school-based dental sealants. SAS utilizes evidence-based clinical guidelines and has strong partnerships with local health departments, dental clinics, and social service organizations. With Wisconsin Seal-A-Smile, the health and needs of students are the number one priority.

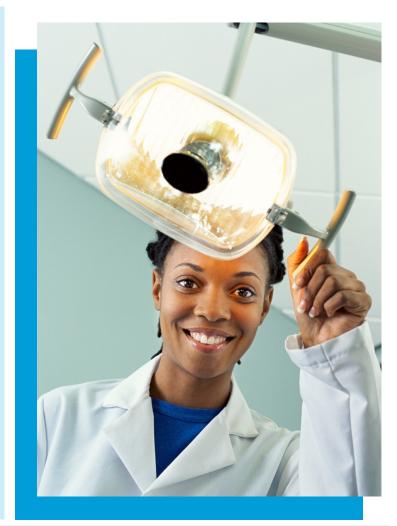
SAS is administered at the state level through a collaborative effort between the Wisconsin Department of Health Services' Oral Health Program, Delta Dental Foundation of Wisconsin, and the Children's Health Alliance of Wisconsin. This partnership allows for a statewide program that provides a level of oversight that exceeds standard practice. Grants are awarded to local programs to provide the school-based care according to established policies and procedures. Grantees have access to a statewide database for collecting and reporting data.

What are the benefits of Wisconsin Seal-A-Smile?

- No eligibility requirements for students to receive services.
- Services are free of charge for all students.
- State administered program provides oversight and requires funded programs to follow evidenced-based clinical guidelines to ensure high quality care.
- Infection control guidelines and state regulations are followed.
- School administration has assurance that programs are following federal, state, and local regulations.
- Data is used to secure additional oral health funding that schools and communities benefit from.
- Programs provide case management and help families find necessary restorative dental care.

What is a community-based dental program and why is it important?

A community-based program delivers prevention and dental care directly to a local community. With a community-based approach, students facing barriers to care have a better chance of finding a dental home to receive comprehensive dental care. Community-based programs establish working relationships with local dental clinics and use a team approach when caring for students within that community. This community approach is important for families who are uninsured or underinsured. Ideally, all students would have an established dental home available year-round for dental visits, comprehensive care, and in the case of emergencies. Unfortunately, not all students have access to this ideal state of care, due to lack of insurance, lack of transportation, or other reasons. In such cases, community-based programs may be the only dental care students are receiving.



What are the different types of school-based programs and what services do they offer?

Services	Dental Screening Programs	Dental Sealant Programs	Dental Preventive Services Programs	Basic Preventive and Restorative Dental Services Programs
Education		x	x	X
Screened for dental needs	X	X	X	X
Dental sealants		x	X	
Fluoride varnish applications		x	x	x
Dental cleaning			X	
Restorative services (basic fillings and simple extractions)				x
Referred for treatment if needed		x	x	x

Some programs may offer additional services other than indicated above. Please check what services the program offers.



Why should a school partner with a school-based dental program to serve students?

Wisconsin's 2018 Healthy Smiles/Healthy Growth survey found that approximately 18% of third grade students have untreated tooth decay.¹ When left untreated, tooth decay can lead to needless pain and suffering, lost school days, and the risk of other systemic health problems. Students in pain have difficulties concentrating, leading to a negative impact on their learning. When services are provided directly at school, the students spend less time out of the classroom. In addition, many students do not have access to regular dental care. School is the ideal place to reach these students.

What grades do these programs serve?

Serving all grades may not be necessary. Sometimes specific grades are targeted based on the services the program provides. For example, dental sealants may be offered to specific grades based on tooth eruption. Ask the program what grades they plan to serve.

Is a program that provides dental cleanings better?

Treatment options should be based on the latest research. Research suggests that routine dental cleanings do not reduce dental disease rates in students.² Providing a routine dental cleaning to every student may not be necessary. A dental cleaning is not required prior to the placement of dental sealants. The application of dental sealants is an evidence-based approach that prevents 80% of cavities in back teeth.³

How and where are services provided?

Some programs will set up inside the school building and need a private location, such as an empty classroom, stage, lunchroom, or other available area. They will need access to electrical outlets and internet. Others provide services in a mobile van and keep all equipment within the van. The van may need to connect to the school's electrical outlets. Lastly, some will require transportation for students to an offsite location. Discuss who will be responsible for the transportation costs and liability coverage. Schools may want to ask how long the students will be out of the classroom.

What infection control policies and procedures are in place?

Any program using mobile equipment is expected to follow the same federal and state regulations for infection control that are required of traditional dental clinics. Written infection control policies specific to each mobile program are required and serve as the backbone for providing dental care that will ensure a safe environment for students and program staff. Ask to see these infection control plans. The Oral Health Program ensures all Wisconsin Seal-A-Smile grantees follow <u>CDC Infection Prevention & Control Guidelines & Recommendations</u>.

Can the program provide local letters of reference?

Some programs approaching schools can be located outside of the community, operated by large organizations, or even be based out of the state. Programs may also be based locally within the county. Regardless, a letter of reference from a local health department, dental office or community clinic will show that the program has established a good working relationship with the local dental community.



Will there be a charge to any of the students?

<u>Wisconsin Seal-A-Smile</u> offers services free of charge to all students, while other programs may charge a fee. **Be sure to ask about all fees, who would collect the fees, and what happens if fees are not paid.** Charging a fee can be a way of discouraging uninsured families from participating, and leave students at increased risk of dental disease without access to care.

How is eligibility for the program's services determined?

It's important to understand how programs determine eligibility for services, if they provide their full scope of treatment to all students who return a consent form, and if any students will be charged for services. To meet the dental needs of the student population, all students should be offered the same opportunity to receive dental care. Serving all students ensures the students most in need of the services are able to access them. Policies that require specific eligibility criteria, such as only serving students that qualify for free and reduced meal programs or those on Medicaid, are stigmatizing. With Wisconsin Seal-A-Smile, a signed consent form is the only paperwork needed to receive free services. Be sure to ask whether the dental program is willing to see every student. Schools can ask for a written contract, such as a memorandum of understanding (MOU), that expresses this commitment.

How is consent obtained?

The program and school should develop a protocol that clearly establishes how and when parent/ guardian permission will be obtained. It is important that private health information is transmitted and stored securely following HIPAA guidelines. Therefore, many programs utilize electronic consent forms. There should be no minimum number of students to have services provided at the school. All students returning consent forms should receive services.

Does the program use treatment providers licensed in Wisconsin?

Programs should have established policies and procedures to perform basic background checks on volunteers and licensure status to ensure protection of the students at the school. Schools may verify licensure with the <u>Wisconsin Credential/License Search</u>.

How are the school's responsibilities defined?

The school district administration may want to consider a written MOU that states the individual responsibilities of the school, program coordinator, and provider. The MOU should also address the cost and time commitment for all to operate a successful school-based oral health program. Ask if the program has identified a coordinator or liaison to work with the school and what specific items they will be responsible for. A MOU can help reduce misunderstandings between the program and the school. The agreement can address the following:

- Student eligibility for services.
- The school's specific responsibilities.
- The program's specific responsibilities.
- Any costs or fees involved.
- Any liability coverage by the program.
- Any liability remaining with the school.

Ensure only one agreement is signed.



How is case management and follow-up handled, and who is providing it? Who will address parent/guardian questions or concerns after the program provides treatment?

All programs will encounter students who need restorative care. Case managers help students and families do the following:

- Find a dental home.
- Find local dental clinics to care for uninsured students or those on Medicaid/BadgerCare Plus.
- Ensure that appointments are made and kept.
- Make sure treatment plans are completed.

All programs need to reach out to local partners and have working relationships with local dental offices so students can quickly receive needed care. Case management is important to ensure the student receives necessary restorative care. The program should have a plan for following up on students with dental decay. The plan should include who the local providers are and how follow-up care is delivered. **Be sure to ask what the plan is.** Remember to confirm if the program is providing follow-up or if the school is expected to follow-up. It is important to have a clear understanding regarding who ultimately has the responsibility of communicating with students and parents/guardians about needed dental care. In addition, once the program has finished providing services at the school, make sure there is an established protocol for how parent/ guardian questions or concerns will be addressed.

What referral mechanisms have been established with local dental care providers or clinics?

The incoming dental program should be able to provide information on its referral mechanisms with local dental providers. This might include a MOU with a local dental provider or clinic. Schools can request to see the MOU or contact the providers on the program's referral list to confirm they are a current referral partner. It is important to understand how far families will be expected to travel to get any necessary follow-up care.

If the program offers restorative services, such as fillings and extractions, are treatment plans established? Will all of the necessary treatment be completed, and in what timeframe?

Programs offering restorative care often take radiographs (X-rays) to assist in the diagnosis of dental disease. Once the disease is diagnosed, a treatment plan is made. In many cases, the treatment will require multiple visits. Consider asking if the program will return until all work is complete and if so, ask when they will return. Treatment needs should be completed in a timely manner. It's important to know if the program takes care of the most urgent needs and then requires the student to finish treatment with a different provider. In addition, understand what the policy is for sharing the X-rays and treatment plan with the local dental clinic. This communication with local dental clinics is critical to ensure students receive all needed dental treatment, they do not receive duplicative services, and their families are helped to find a permanent dental home.

How often and for how long will the program be at the school-for instance, once a year, once a week, or some other arrangement?

The program's duration at the school can vary based upon the number of students being seen and services being provided. Programs dedicated to following best practices and providing the highest quality of care will return for multiple visits each school year. To ensure that all students who sign up for the program receive treatment, schools may want to review the provided paperwork looking for words such as "if time allows" or "as time permits." These words often indicate that the program is scheduled to be at the school for a set number of days even if not all the students who are signed up for care can be seen.

How is the quality of care determined?

The program should return to the school to check on sealant retention. Retention checks follow best practice and are a way to evaluate staff technique and materials used. This allows the program to reapply any broken sealants and identify changes in policies and procedures to ensure the highest quality of care is offered to students. The Oral Health Program oversees Wisconsin Seal -A-Smile to ensure state regulations are followed, evidence-based methods are used, and quality of care is at its highest.

How can individual student dental records be obtained by parents/guardians and the dental office once the program has completed their services at the school?

All oral health information should be kept private and always be maintained in a HIPAA-compliant manner. Each student should be given a follow-up letter at the conclusion of their appointment, notifying parents/guardians of the outcome of the school-based appointment and any necessary steps they should take to follow-up. This letter should contain information on how families can get individual student dental records directly from the program.

What oral health data will be collected? Will information be shared with the school, local health department, and the Oral Health Program?

Data should be collected on the oral health status of the students and the services provided. Ideally, at the conclusion of the dental program's visit, each school should receive a quantitative list of services that were delivered to the student body. For example, 100 students received 300 dental sealants. This deidentified data is also valuable to local health departments and the Oral Health Program. The data provides information on the oral health of students and informs program efforts. Unfortunately, not all school-based programs choose to partner in these oral health surveillance or data sharing efforts.



References:

- 1. Elderbrook, M. E., Hang M., Olson M. A. (2018). Healthy Smiles Healthy Growth: Wisconsin's Third-Grade Children. Wisconsin Oral Health Program, Wisconsin Department of Health Services. Publication number P-00589.
- 2. Sampson, C. (2010). Is routine dental prophylaxis effective?. *Evidence-based dentistry*, *11*(1), 16–17. https://doi.org/10.1038/sj.ebd.6400704
- 3. Centers for Disease Control and Prevention. (2016). *Dental Sealants Prevent Cavities*. <u>https://www.cdc.gov/vitalsigns/dental-sealants/index.html</u>





For information on Wisconsin Seal-A-Smile, please visit <u>www.dhs.wisconsin.gov/oral-health/programs/seal-</u><u>smile.htm</u>.





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