

Share & Learn: Bringing Head Start and Local Oral Health Programs Together – Partnering To Meet Head Start and State Requirements

February 19, 2025

Speakers

COHTAC: Kristin Hoefft, Early Head Start/Head Start: Cristine Cochran & Ristyn Woolley, Office of Oral Health: Vyshiali Sundararajan, Madera County: Evelyn Ramirez & Mayra Gonzalez, Santa Clara County: Brandy Mattson, Chriselda Gonzalez, & Somayeh Bolourchi, Solano County: Rosario Manjarrez and Carol Ash, Tehama County: Jena Roof & Hannah Bergen Ziyadinova

Facilitator

Janelle Urata (COHTAC)

Funding & Disclaimer

- **Acknowledgement:** This webinar is funded by the Office of Oral Health (OOH) within the California Department of Public Health. Funding is provided through Proposition 56 – the California Healthcare, Research and Prevention Tobacco Tax Act of 2016 – under Contract 22-10488. The California Oral Health Technical Assistance Center (COHTAC) assists OOH in advancing the California Oral Health Plan through technical assistance and training.
- **Disclaimer:** The presentations today are the content of the speakers and do not necessarily represent the views or opinions of the California Department of Public Health, California Health and Human Services Agency, OOH, or COHTAC.

Housekeeping

- Meeting is being recorded and will be posted on the COHTAC website and YouTube channel – follow-up materials and recording link will be emailed
- Questions, comments, and resource sharing are welcomed in the chat box and will be answered at the end of the presentations – please stay muted until called on
- As always, we appreciate your feedback – please take a minute at the end to complete our evaluation survey

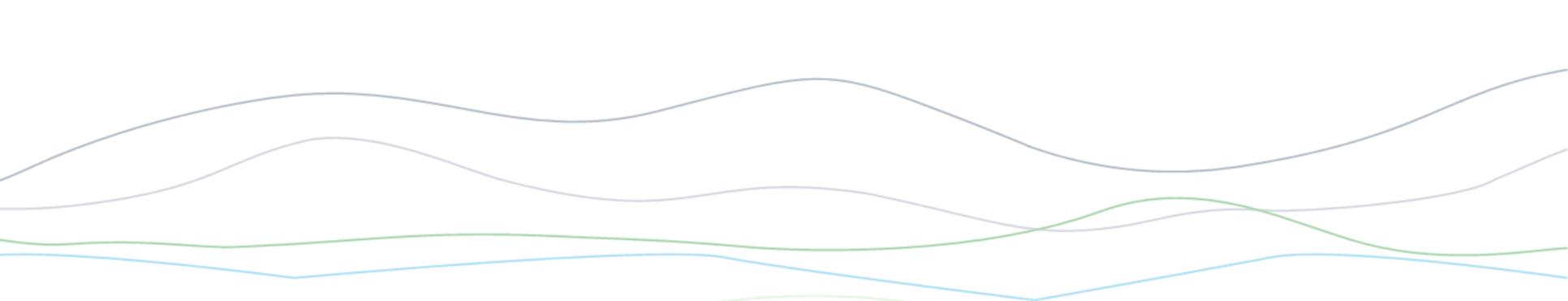
Learning Objectives & Agenda

Objectives

- Understand the goals and objectives of Head Start Programs and Local Oral Health Programs
- Describe the importance of oral health and the Kindergarten Oral Health Assessment
- Identify opportunities to collaborate and strengthen partnerships
- Identify opportunities to collaborate and strengthen partnerships
- Explain successful cross-program collaborations
- Connect with their local counterpart

Agenda

- Welcome and overview – [Janelle Urata](#)
- CA Oral Health & LOHP Overview – [Kristin Hoeft](#)
- Head Start Program Overview – [Cris Cochran](#) & [Ristyn Woolley](#)
- KOHA Overview - [Kristin Hoeft](#) & [Vyshiali Sundararajan](#)
- LOHP Examples
 - Madera County – [Evelyn Ramirez](#) & [Mayra Gonzalez](#)
 - Santa Clara County – [Brandy Mattson](#), [Chriselda Gonzalez](#), & [Somayeh Bolourchi](#)
 - Solano County – [Carol Ash](#) & [Rosario Manjarrez](#)
 - Tehama County – [Hannah Bergen Ziyadinova](#) & [Jena Roof](#)
- Resources & Next Steps - [Janelle Urata](#)
- Announcements and wrap up – [Janelle Urata](#)



CA Oral Health & LOHP Overview

Kristin Hoeft (COHTAC)

CA Oral Health and LOHP overview

Kristin Hoeft, COHTAC, University of California, San Francisco



Did You Know . . .



- Oral health is critical to overall health
- Tooth Decay (dental caries) is the **most** common chronic childhood disease in the US
- **4x** more common than asthma
- **20x** more common than diabetes
- **3x** more common than obesity



Children's Oral Health in California

- Over half of CA children have tooth decay *by kindergarten*
 - 19% have extensive decay*
- Over 350,000 California school children were absent for at least 1 school day for a dental problem**

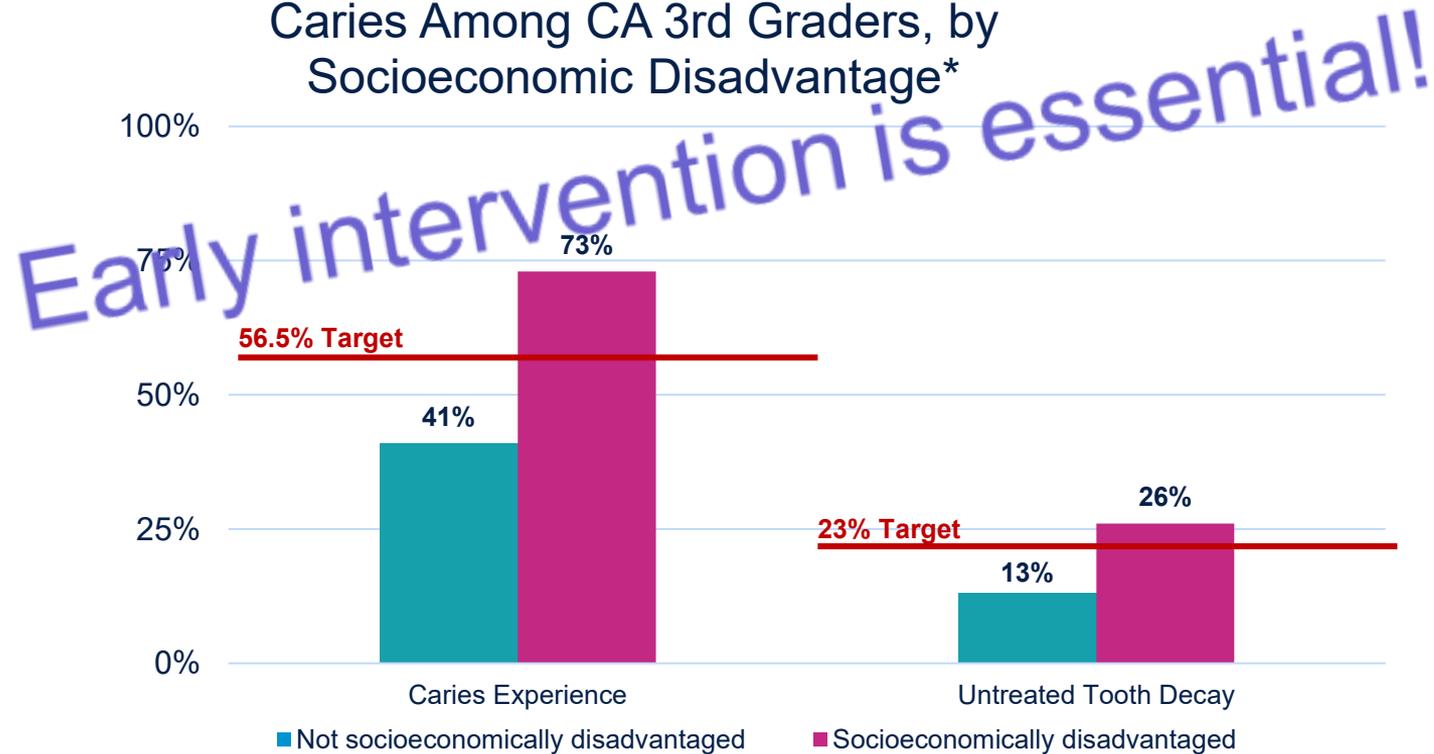


*2018-2020 3rd Grade Basic Screening Survey, California Office of Oral Health

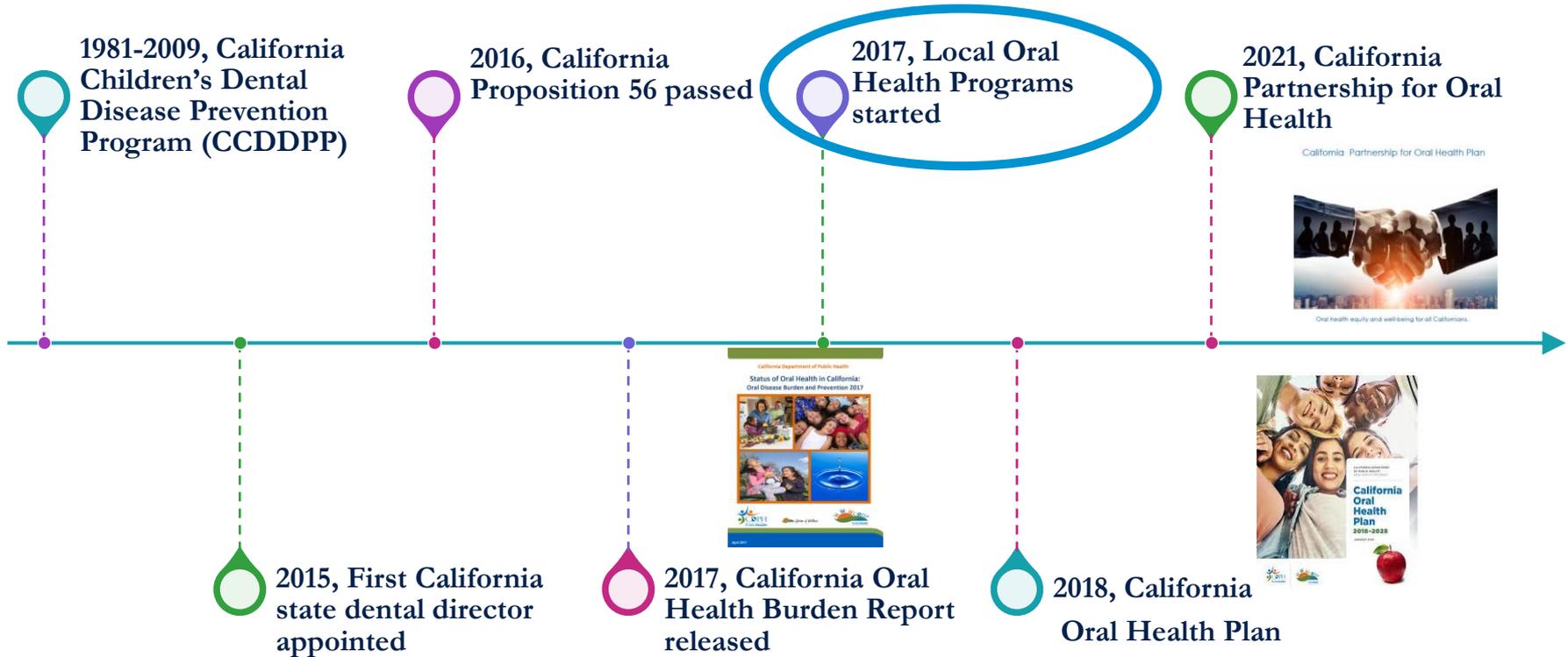
**in 2022; https://oralhealthsupport.ucsf.edu/sites/g/files/tkssra861/f/wysiwyg/OOH_Infographic_Oral_Health_07.16.24.pdf

3rd Grade Children's Oral Health in CA

Caries Among CA 3rd Graders, by Socioeconomic Disadvantage*



Oral Health Attention in California



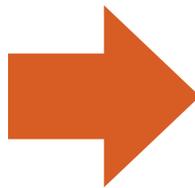
What is a Local Oral Health Program (LOHP)?

Proposition 56 (tobacco tax) created funds for 61 LOHPs throughout California, usually known and labeled by county.

Goal

Continue to create and expand capacity through:

- **Workforce development**
- **Disease prevention**
- **Community-clinical linkages**
- **Surveillance**



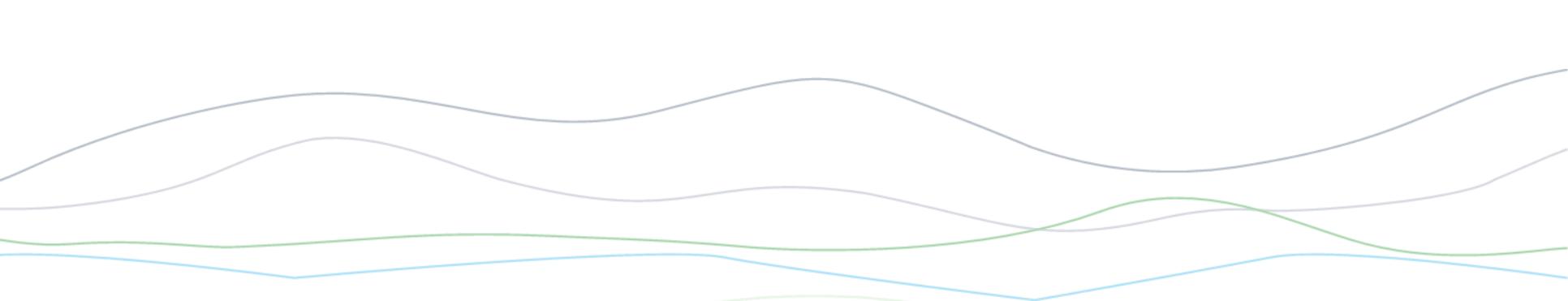
Impacts

- **Lower health disparities**
- **Improve utilization of dental care and healthcare**
- **Lessen oral disease burden**
- **Lessen emergency room visits for non-traumatic oral health issues**

LOHP workplan includes preschool-aged children



- **2.3.b** Develop a protocol to implement assessment, counseling, and linkage to providers, as well as **care coordination using the 5A's strategies for addressing oral health problems in pre-school and school-aged children.**
- **2.1.b** Based on SWOT analysis findings, begin planning for school-based/linked programs...
- **5. Design of an early education and care prevention program (e.g. Tooth Brushing Programs in Pre-K, Oral Health Education)**
- **3.2** Develop and implement a plan to identify and recruit **Key Partners** that work with underserved populations... Head Start and Early Head Start



Head Start Program Overview

Ristyn Woolley (Head Start Collaboration Office),
Cris Cochran (CA Department of Education: Early Head Start)

California Head Start Collaboration Office

California Oral Health Technical Assistance Center and Head Start
February 19, 2026

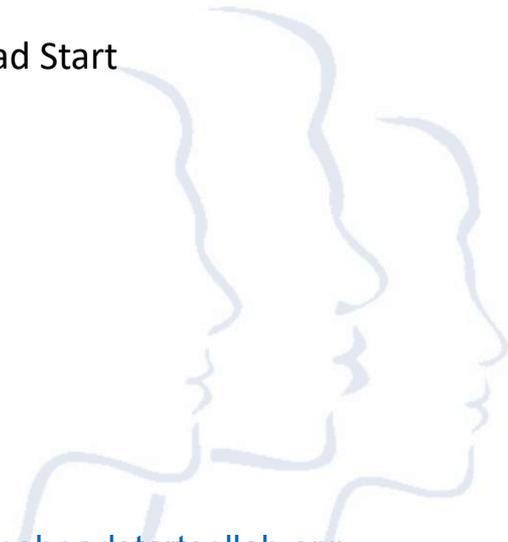


HSCO



**Head Start
Collaboration Office**

[Home | CA Head Start Collab: www.caheadstartcollab.org](http://www.caheadstartcollab.org)



California Head Start Collaboration Office (CHSCO)

Collaboration offices, funded by a grant from the Administration for Child and Families, create a visible presence for Head Start at the state level and assist in the development of multi-agency and public-private partnerships among Head Start and other interested stakeholders.



Director
Ristyn Woolley

Ristyn has over 24 years working in Early Learning and Care in many capacities including teaching, research and publications, policy, mental health, inclusion, and Head Start. She holds a bachelor's degree in Business Administration from the University of Pacific and Masters in Early Childhood Educational Leadership from Mills College. When not working she enjoys spending time with her nieces and nephews, doing puzzles, skiing, and attending concerts.



Associate Governmental Program Analyst
Brianne Rood

Brianne has over seven years of experience working as a program analyst and five years working in the Early Learning and Care space, focusing on policy, education, nutrition, and tribes.

She holds a bachelor's degree in Nutritional Science and Education from San Jose State University. When not working she enjoys spending time with her husband, baby girl, and dog.

What is the Intent of the HSCO?

- **Strengthen** early childhood **systems**;
- **Improve access** to comprehensive services and support for children ages birth to school entry, whose families live in poverty;
- Encourage and facilitate **widespread collaboration** between Head Start and other programs, services, and initiatives;
- **Communicate** with stakeholder groups for information sharing, planning, and partnering and serve as a conduit of information between regional offices, the State and local early childhood systems;
- Augment Head Start's capacity to **partner on state initiatives** for children and families; and
- Facilitate the involvement and **recognition of Head Start in state policies**, plans, processes, and decisions on the target populations.

Head Start Services



What is Head Start?

- The Office of Head Start funds programs with direct federal grants to local organizations that provide **early education and comprehensive services** to low-income children and families.
- Designed to help break the cycle of poverty, providing preschool children of low-income families with a comprehensive program to meet their emotional, social, health, nutritional and psychological needs.
- Head Start programs are helping children get ready to succeed in school and in life through learning experiences tailored to their changing needs and abilities.
 - Early Learning and Development
 - Health and Wellness
 - Family Engagement
 - Family Well-being



Program Types

- To reach the children and families who need Head Start services the most, programs are designed according to community need. Head Start programs tailor their programs as appropriate for families in the designated service area. These programs may be provided in different settings and hours according to the needs indicated by their community assessment.
 - Early Head Start- Birth - Two years old
 - Head Start Preschool- Three - Five years old
 - Center-based services are located in child development centers.
 - Home-based services are mostly delivered in a family's own home, along with planned group socialization activities.
 - Family child care services are located in a family-based child care setting.
 - Locally-designed services are often delivered through some combination of the above settings, depending on the needs of the community.
 - Early Head Start-Child Care Partnerships (EHS-CCP)



Head Start Program Performance Standards

The standards serve as the foundation for the Head Start program's mission to deliver comprehensive, high-quality individualized services supporting the school readiness of children from families with low income.

Mandatory federal regulations (45 CFR Chapter XIII) that define the minimum requirements for all Head Start and Early Head Start programs, focusing on high-quality education, health, mental health, nutrition, and family engagement.

THE REGULATIONS

Head Start Program Performance Standards

45 CFR Chapter XIII
August 2024



1302.42 CHILD HEALTH STATUS AND CARE

HEAD START 90-DAY HEALTH DETERMINATIONS

(b)(1) Within 90 calendar days after the child first attends the program or, for the home-based program option, receives a home visit, a program must:

(b)(1)(i) **Obtain determinations from health care and oral health care professionals as to whether or not the child is up-to-date on a schedule of age appropriate preventive and primary medical, mental health, and oral health care, based on:** the well-child visits and ***dental periodicity schedule** as prescribed by the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) program of the Medicaid agency of the State in which they operate.

DENTAL PERIODICITY SCHEDULE – CALIFORNIA

*First examination is required at the eruption of the first tooth and no later than 12 months. Repeat every 6 months or as indicated by child's risk status/susceptibility to disease.

https://www.aapd.org/globalassets/media/policies_guidelines/bp_recdentperiodschedule25.pdf

California CHDP/EPSDT Periodicity Schedule for Dental Referral by Age

Age (years)	Routine Dental Referral	Suspected Dental Problem
1* - 20	<input checked="" type="checkbox"/> Refer every 6 months** (Children with special needs may need more frequent referrals)	Refer at any age if a problem is suspected or detected

- A dental screening or oral assessment is required at every CHDP/EPSDT™ health assessment regardless of age. [EPSDT- A Guide for States](https://www.medicaid.gov/medicaid/benefits/downloads/epsdt_coverage_guide.pdf) pp.13-15 https://www.medicaid.gov/medicaid/benefits/downloads/epsdt_coverage_guide.pdf
- Refer children directly to a dentist:
 - **Beginning at age one** as required [California Health and Safety Code Section 124040 \(6\)\(D\)](http://leginfo.ca.gov/faqs/codes_displaySection.xhtml?lawCode=HSC§ionNum=124040) http://leginfo.ca.gov/faqs/codes_displaySection.xhtml?lawCode=HSC§ionNum=124040
 - **At any age** if a problem is suspected or detected – refer to the [CHDP Dental Referral Classification Guide](https://www.dhcs.ca.gov/formsandpubs/publications/Documents/Dental-Classification-Guide.pdf) <https://www.dhcs.ca.gov/formsandpubs/publications/Documents/Dental-Classification-Guide.pdf>
 - **Every six (6) months for maintenance of oral health** - visit [Periodicity of Examination, Preventive Dental Services, Anticipatory Guidance, and Oral Treatment for Infants, Children, and Adolescents](http://www.aapd.org/media/Policies_Guidelines/BP_Periodicity.pdf) pp.198-199. http://www.aapd.org/media/Policies_Guidelines/BP_Periodicity.pdf
 - **Every three (3) months** for children with documented special health care needs when medical or oral condition can be affected; and for other children at high risk for dental caries. [AAP Oral Health Risk Assessment Tool](https://www.aap.org/en-us/Documents/oralhealth_RiskAssessmentTool.pdf) https://www.aap.org/en-us/Documents/oralhealth_RiskAssessmentTool.pdf

1304.42 ENSURING UP-TO-DATE CHILD HEALTH STATUS

(b)(1)(ii) Assist parents with making arrangements to **bring the child up-to-date as quickly as possible**; and, if necessary, directly facilitate provision of health services to bring the child up-to-date with parent consent as described in §1302.41(b)(1).

1302.42 ONGOING CARE

(c)(1) A program must help parents continue to follow recommended schedules of well-child and **oral health care**.

(3) A program **must facilitate and monitor necessary oral health preventive care, treatment and follow-up**, including topical fluoride treatments. In communities where there is a lack of adequate fluoride available through the water supply and for every child with moderate to severe tooth decay, a program must also facilitate fluoride supplements, and other necessary preventive measures, and further oral health treatment as recommended by the oral health professional.

1302.42 EXTENDED FOLLOW-UP CARE

(d)(1) A program **must facilitate further diagnostic testing, evaluation, treatment, and follow-up plan**, as appropriate, by a licensed or certified professional.

(2) A program must develop a system to **track referrals and services provided** and **monitor the implementation of a follow-up plan** to meet any treatment needs associated with a health, **oral health**, social and emotional, or developmental problem.

ADDITIONAL CONSIDERATIONS

1) Head Start Federal Monitoring Reviews

Funding Year 2026 federal monitoring review indicators:

- Focus Area 1 (FA1): The managers will demonstrate the data they use to monitor health services.
- The review team will ask how the manager of each service area monitors the consistency and quality of the services provided to children and families.
- Focus Area 2 (FA2): How does the grant recipient track that a health care professional has determined if a child is up-to-date on their preventative and primary medical and **oral health care within 90 days of enrollment?**

ADDITIONAL CONSIDERATIONS

2) Program Information Report (PIR)

The PIR does not assess compliance with the Head Start Program Performance Standards or other regulations. Although the PIR collects information on topics from the Head Start Program Performance Standards and other regulations, PIR data is not used for compliance purposes.

PROGRAM INFORMATION REPORT

Oral health

According to [45 CFR 1302.42\(b\)\(i\)](#), programs must obtain determinations from oral health care professionals as to whether or not the child is up-to-date on a schedule of age appropriate preventive and primary oral health care based on the dental periodicity schedules as prescribed by the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) program of the Medicaid agency of the state in which they operate.

Questions C.18 and C.19 collect information about oral health preventive care and oral examinations that would occur as part of staying up to date on the state's dental periodicity schedule

Oral Health Preventive Care - Includes cleaning, fluoride varnish application, silver diamine fluoride application (prevents decay), and dental sealant application.

Oral Treatment - Includes restoration, pulp therapy, silver diamine fluoride (manages decay), and extraction.

Accessible dental care – children

	(1) # of children at enrollment	(2) # of children at end of enrollment
C.18 Number of children with continuous, accessible oral care provided by an oral health care professional which includes access to oral health preventive care and oral treatment		

	# of children
C.19 Number of children who received oral health preventive care during the program year	
C.20 Number of all children who have completed a professional oral examination during the program year	
a. Of these, the number of children diagnosed as needing oral treatment during the program year	
1. Of these, the number of children who received oral treatment during the program year	

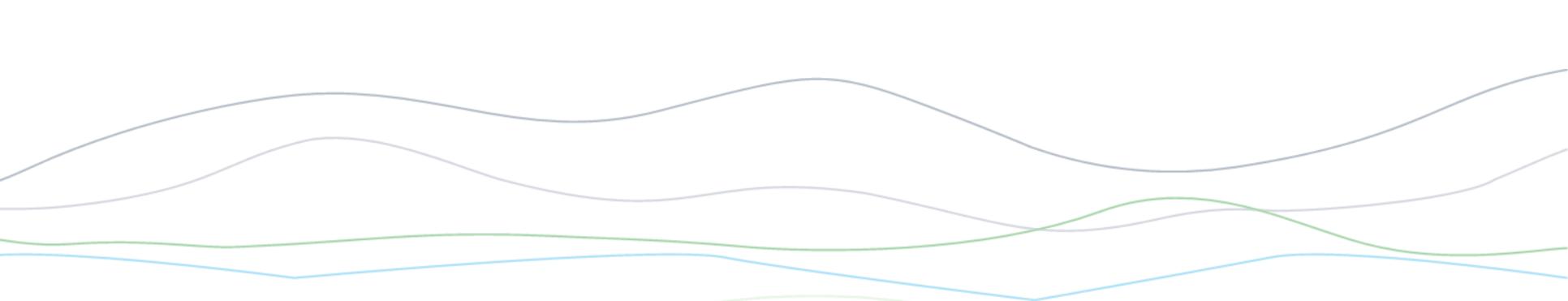
1302.46 FAMILY SUPPORT SERVICES FOR HEALTH

- (b)(1)(i) Programs must collaborate with parents to promote children's health and well-being by providing **opportunities to learn about medical and oral health care....practices.**
- (ii) Discuss the importance of physical activity, **healthy eating**, and the negative health consequences of sugar-sweetened beverages.

1302.43 Oral Health Practices. A program must promote effective oral health hygiene by ensuring all children with teeth are assisted by appropriate staff, in brushing their teeth with toothpaste containing fluoride once daily.

SUMMARY OF HEAD START REQUIREMENTS

- 1. Within 90 days, a *determination* of whether the child enrolled is up to date on their periodicity schedule. An RDH, RDHAP or DDS can complete this *determination*.
- 2. A *dental exam (by DDS)* is required to be had on file, usually also with a treatment plan, as needed.
- 3. The oral health *treatment plan* submitted usually alongside the dental exam/eval must be *followed up on*.



KOHA Overview

Krsitin Hoeft (COHTAC),
Vyshiali Sundararajan (Office of Oral Health)

Introduction to KOHA

Vyshiali Sundararajan, Office of Oral Health, CDPH

Kristin Hoeft, University of California, San Francisco, COHTAC

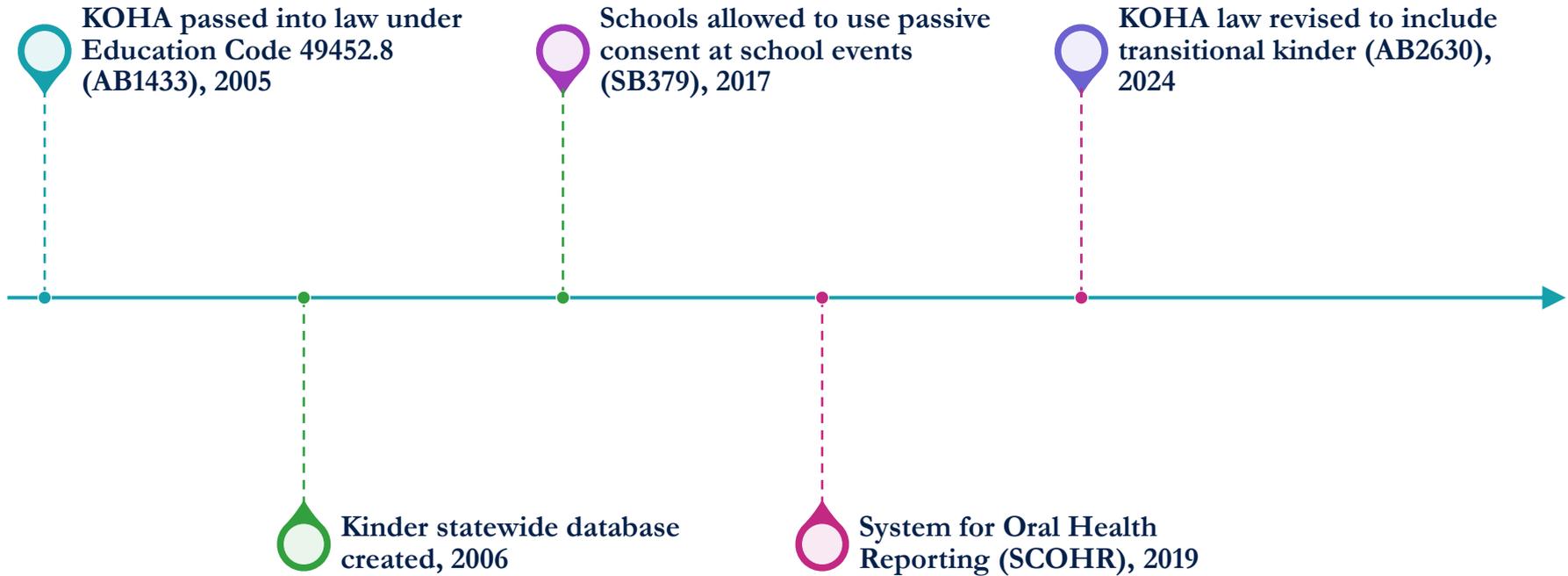


Kindergarten Oral Health Assessment (KOHA)

- California state policy
 - AB 1433, amended by SB 379 and AB 2630
 - CA Ed. Code 49452.8
- Students need to be screened once between TK and K grades (or first grade if that is their first year of public school)
- Data is centrally reported



KOHA Timeline



Kindergarten Oral Health Assessment (KOHA)

ARTICLE 4. Physical Examinations [49450 - 49458]

(Article 4 enacted by Stats. 1976, Ch. 1010.)

49452.8.

- (a) (1) A pupil, while enrolled in kindergarten in a public school, or while enrolled in first grade in a public school if the pupil was not previously enrolled in kindergarten in a public school, no later than May 31 of the school year, shall present proof of having received an oral health assessment by a licensed dentist, or other licensed or registered dental health professional operating within the professional's scope of practice, that was performed no earlier than 12 months before the date of the initial enrollment of the pupil.
- (2) For purposes of this section, "kindergarten" includes both transitional kindergarten and kindergarten. The proof described in subdivision (a) shall be required only once during a two-year kindergarten program.

Kindergarten Oral Health Assessment (KOHA)

ARTICLE 4. Physical Examinations [49450 - 49458]

(Article 4 enacted by Stats. 1976, Ch. 1010.)

49452.8.

- (a) (1) A pupil, while enrolled in kindergarten in a public school, or while enrolled in first grade in a public school if the pupil was not previously enrolled in kindergarten in a public school, no later than May 31 of the school year, shall present proof of having received an oral health assessment by a licensed dentist, or other licensed or registered dental health professional operating within the professional's scope of practice, that was performed no earlier than 12 months before the date of the initial enrollment of the pupil.
- (2) For purposes of this section, "kindergarten" includes both transitional kindergarten and kindergarten. The proof described in subdivision (a) shall be required only once during a two-year kindergarten program.

Kindergarten Oral Health Assessment (KOHA)

ARTICLE 4. Physical Examinations [49450 - 49458]

(Article 4 enacted by Stats. 1976, Ch. 1010.)

49452.8.

- (a) (1) A pupil, while enrolled in kindergarten in a public school, or while enrolled in first grade in a public school if the pupil was not previously enrolled in kindergarten in a public school, no later than May 31 of the school year, shall present proof of having received an oral health assessment by a licensed dentist, or other licensed or registered dental health professional operating within the professional's scope of practice, that was performed no earlier than 12 months before the date of the initial enrollment of the pupil.
- (2) For purposes of this section, "kindergarten" includes both transitional kindergarten and kindergarten. The proof described in subdivision (a) shall be required only once during a two-year kindergarten program.

Kindergarten Oral Health Assessment (KOHA)

ARTICLE 4. Physical Examinations [49450 - 49458]

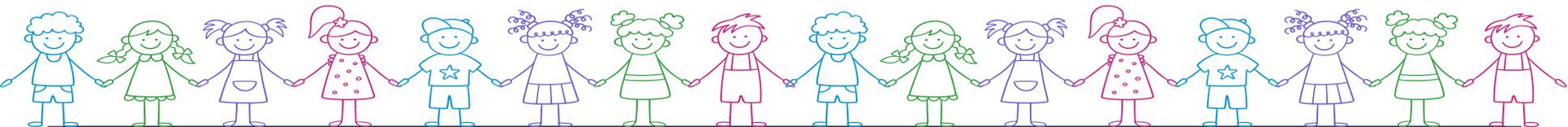
(Article 4 enacted by Stats. 1976, Ch. 1010.)

49452.8.

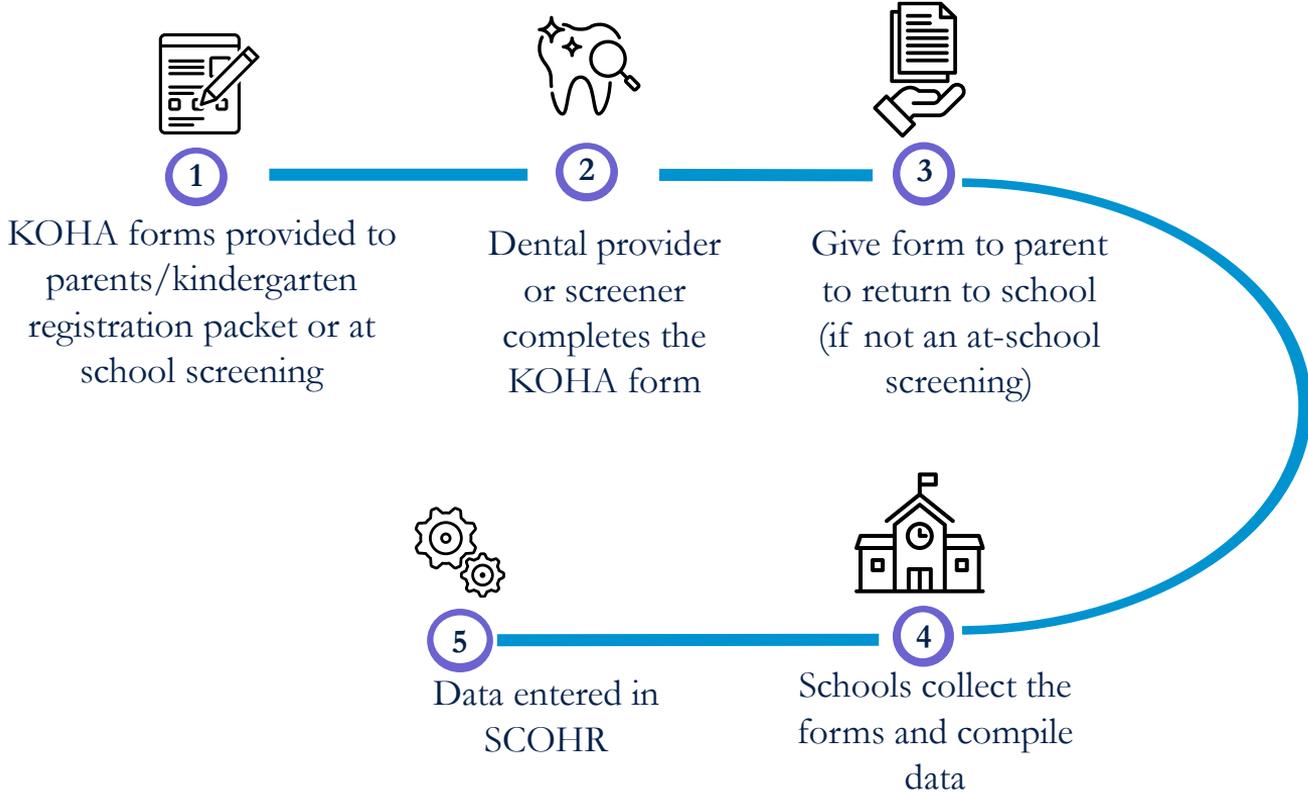
- (a) (1) A pupil, while enrolled in kindergarten in a public school, or while enrolled in first grade in a public school if the pupil was not previously enrolled in kindergarten in a public school, no later than May 31 of the school year, shall present proof of having received an oral health assessment by a licensed dentist, or other licensed or registered dental health professional operating within the professional's scope of practice, that was performed no earlier than 12 months before the date of the initial enrollment of the pupil.
- (2) For purposes of this section, "kindergarten" includes both transitional kindergarten and kindergarten. The proof described in subdivision (a) shall be required only once during a two-year kindergarten program.

KOHA Goals

- Promote school readiness
- Identify children suffering from untreated dental disease
- Help establish a dental home for child
- Understand and track dental health of CA children



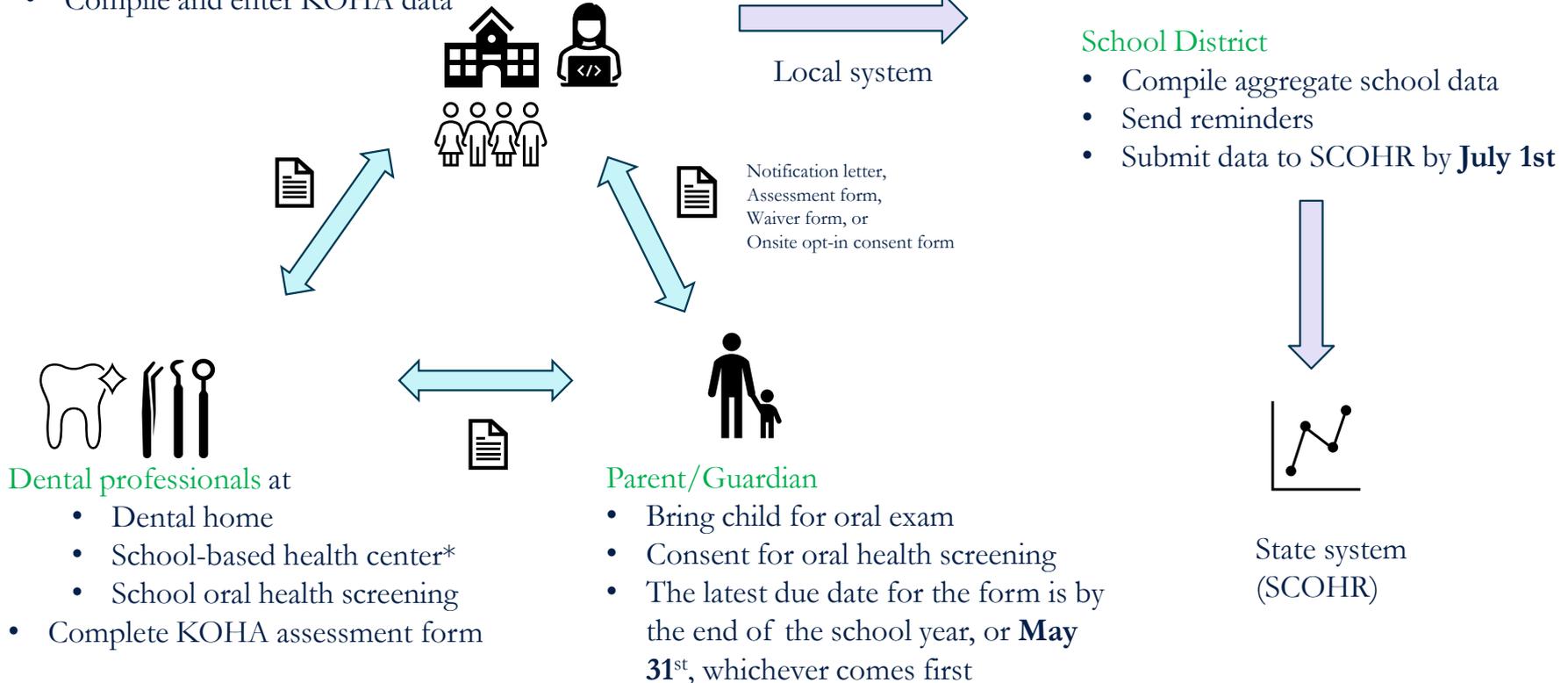
KOHA Process



KOHA Process

Schools

- Distribute and collect form
- Send reminders
- Compile and enter KOHA data



School District

- Compile aggregate school data
- Send reminders
- Submit data to SCOHR by **July 1st**

Dental professionals at

- Dental home
- School-based health center*
- School oral health screening
- Complete KOHA assessment form

Parent/Guardian

- Bring child for oral exam
- Consent for oral health screening
- The latest due date for the form is by the end of the school year, or **May 31st**, whichever comes first

Accessing the KOHA Form



COHTAC website has the most updated form:
<https://oralhealthsupport.ucsf.edu/our-programs/school-programs/KOHA/koha-forms>



Available in: English, Spanish, Korean, Chinese (simplified), Chinese (traditional), Tagalog, Vietnamese



Download/print

KOHA Form: 3 Sections

California Department of Public Health
July 2022– Page 1 of 2

Oral Health Assessment Form

California law (*Education Code* Section 49452.8) says every child must have a dental check-up (assessment) by May 31st of his/her first year in public school. A California licensed dental professional must do the check-up and fill out Section 2 of this form. If your child had a dental check-up in the last 12 months, ask your dentist to fill out Section 2. If you are unable to get a dental check-up for your child, fill out the separate Waiver of Oral Health Assessment Requirement Form.

This assessment will let you know if there are any dental problems that need attention by a dentist. This assessment will also be used to evaluate our oral health programs. Children need good oral health to speak with confidence, express themselves, be healthy and, ready to learn. Poor oral health has been related to lower school performance, poor social relationships, and less success later in life. For this reason, we thank you for making this contribution to the health and well-being of California's children.

Section 1: Child's Information (Filled out by parent or guardian)

Child's First Name:	Last Name:	Middle Initial:	Child's Birth Date: MM - DD - YYYY
Address:			Apt.:
City:		ZIP Code:	
School Name:	Teacher:	Grade:	Year child starts kindergarten:
Parent/Guardian First Name:	Parent/Guardian Last Name:	Child's Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Child's Race/Ethnicity:	<input type="checkbox"/> White <input type="checkbox"/> Native American <input type="checkbox"/> Black/African American <input type="checkbox"/> Multi-racial <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> Unknown <input type="checkbox"/> Other (please specify) _____		

Continued on Next Page

California Department of Public Health
July 2022– Page 2 of 2

Section 2: Oral Health Data Collection (Filled out by a California licensed dental professional)

IMPORTANT NOTE: Consider each box separately. Mark each box.

Assessment Date: MM - DD - YYYY	Untreated Decay (Visible Decay Present) <input type="checkbox"/> Yes <input type="checkbox"/> No	*Caries Experience (Visible decay and/or fillings present) <input type="checkbox"/> Yes <input type="checkbox"/> No
Treatment Urgency: <input type="radio"/> No obvious problem found <input type="radio"/> Early dental care recommended (caries without pain or infection; or child would benefit from sealants or further evaluation) <input type="radio"/> Urgent care needed (pain, infection, swelling or soft tissue lesions)		
_____ Licensed Dental Professional Signature		_____ CA License Number MM - DD - YYYY Date

*Check "Yes" for Caries experience if there is presence of untreated decay or fillings
Check "No" for Caries experience if there is no untreated decay and no fillings

Section 3: Follow-up to Urgent Care (Filled out by entity responsible for follow up)

Parent notified that child has urgent dental care need on:	MM - DD - YYYY
A follow-up appointment for this child has been scheduled for:	MM - DD - YYYY
Did child receive needed treatment?	<input type="radio"/> Yes <input type="radio"/> No (If no, entity responsible for follow-up will be encouraged to check back in with parent) <input type="radio"/> I don't know

The law states schools must keep student health information private. Your child's name will not be part of any report as a result of this law. This information may only be used for purposes related to your child's health. If you have questions, please call your school.

Return this form to the school *no later than* May 31st of your child's first school year.

Original to be kept in child's school record.

Differences between Head Start requirement and KOHA

Head Start

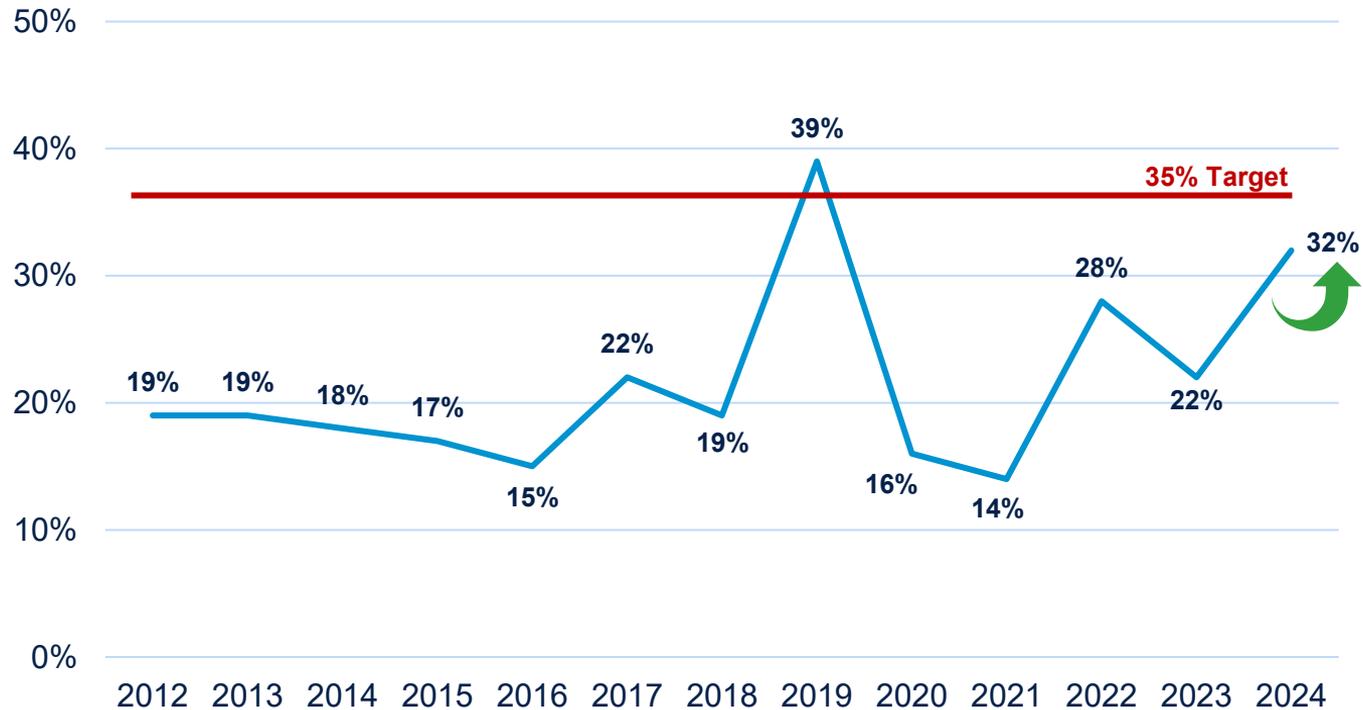
- within 90 days of enrollment: **determination** if child is up-to-date on dental periodicity schedule
- dental **exam** (by dentist) required on file
- treatment plan must be completed/followed up
- if child completes exam while in Early Head Start (0-3 years), still require another exam in Head start

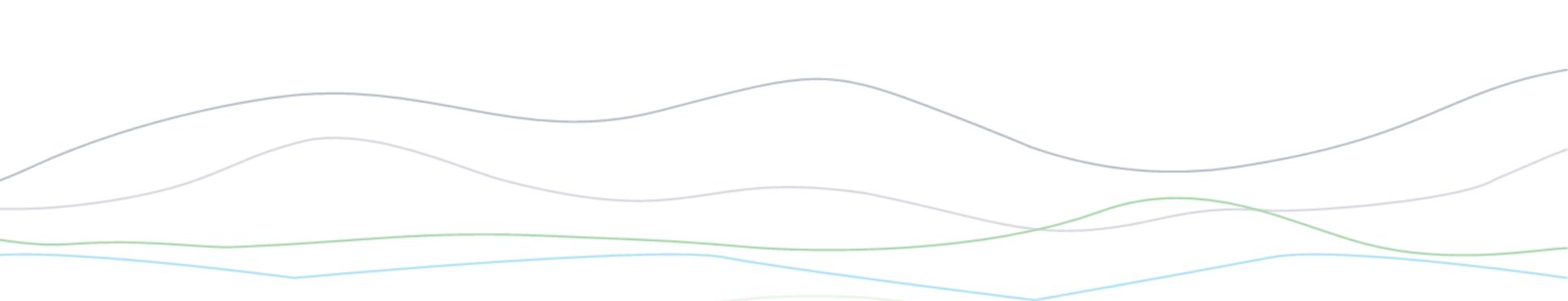
KOHA

- within first year of TK/kindergarten, by May 31
- oral health **screening** by dental professional (dentist, RDHAP, RDH)
- treatment follow up indicated on form
- one assessment is sufficient across TK/K

KOHA Data

Percentage of CA Children with Reported KOHA





Madera County

Evelyn Ramirez (Madera LOHP),
Mayra Gonzalez (Madera LOHP)



Madera County Local Oral Health Program and Headstart Partnership Overview

Evelyn Ramirez, Health Education Specialist
Mayra Gonzalez, Health Services Content Specialist



@MADERACOUNTY
maderacounty.com



PUBLIC HEALTH



MADERA COUNTY DEPARTMENT OF PUBLIC HEALTH

MISSION: LEAD. PROTECT. EMPOWER.

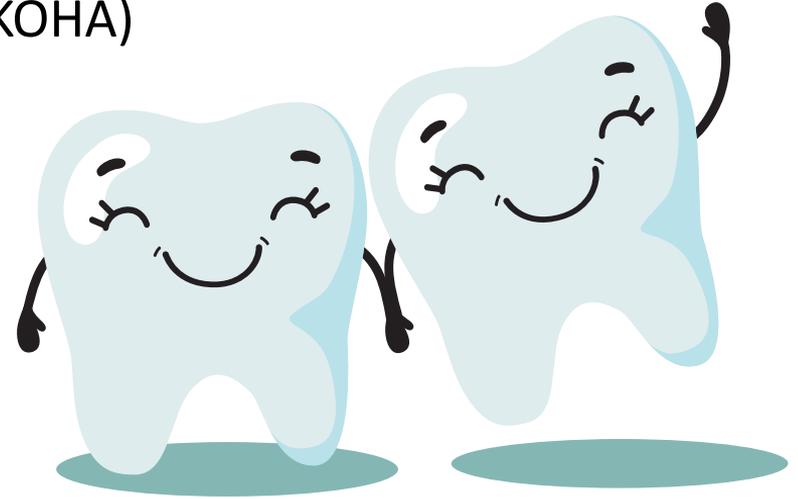


INTEGRITY • COLLABORATION • EQUITY • INNOVATION • SERVICE



Background

- 5- Year Oral Health Program 2022-2027
- Kindergarten Oral Health Assessment (KOHA)
- Head Start Dental Requirement



Collaboration

- Oral Health Education and Promotion
- School Based Oral Health Programs and Oral Health Assessments



Programs Objectives

- Long-Term Changes:
 - For all children to receive the dental care they need and reduce dental decay
 - Provide linkages to dental treatment services
- Short-term Changes:
 - Improve oral health assessments
 - Increase oral health education to children and caregivers



Challenges/Growth Opportunities

- Implementing an electronic Rereferral System
- Improving KOHA return rates in all school districts in Madera County
- Difficult for RDHAP to see all students



Questions/Comments ?



For more information Contact:



Tiara Munoz
Public Health Program Manager
Local Oral Health Program
Tiara.Munoz@maderacounty.com
559-675-7893



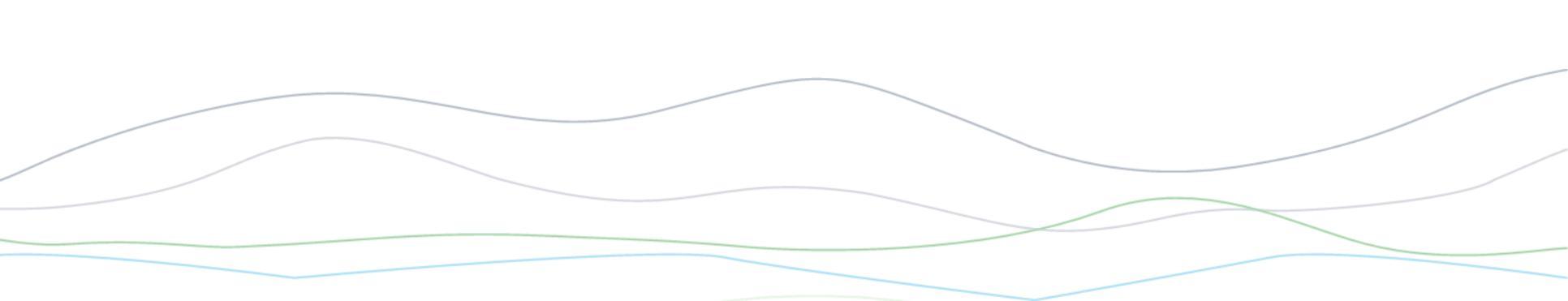
Evelyn Ramirez
Health Education Specialist
Local Oral Health Program
Evelyn.Ramirez@maderacounty.com
559-675-7893

Mayra Gonzalez
Health Services Content Specialist
CAPMC- Head Start Programs
magonzalez@maderacap.org
559-507-8031



maderacounty.com • @MaderaCounty





Santa Clara County

Brandy Mattson (Santa Clara LOHP),
Chriselda Gonzalez (Santa Clara Head Start),
Somayeh Bolourchi (Santa Clara LOHP)



COHTAC Share and Learn: Head Start and Our Local Oral Health Program

COUNTY OF SANTA CLARA PUBLIC HEALTH, LOCAL ORAL HEALTH PROGRAM (LOHP)

FEBRUARY 19, 2026 @ 10:00 AM

Our model for supporting programs, families, and children in the community



Our local oral health program



Partners and Providers



Public

SOMAYEH BOLOURCHI, MPH - Program Manager II

BRANDY MATTSON, RDH, OMT - Planning Specialist III

JANKI PATEL, MPH - Health Education Specialist, Extra help

SUMA DENKANIKOTTAI, BDS, MPH - UCSF Volunteer, Dental Public Health Resident

ANGELICA DIAZ, MPH - Director, Healthy Communities Branch

GABRIELA CAMBEROS, MPH - Program Manager III, Clinic to Community Linkages

Santa Clara County
PUBLIC HEALTH



Healthy Communities Branch



5 Umbrellas - 11 Teams

Safe and Peaceful Communities

- Active and Safe
- Violence Prevention

Tobacco and Substance Use Prevention

- Healthy Cities
- Substance Use Prevention
- Tobacco Free Communities

PHD Admin and Operations



Clinic to Communities

- Diabetes Prevention
- Healthy Brain
- Oral Health Program



Food Systems & Climate and Health

- CalFresh Healthy Living
- Community Nutrition
- Climate and Health



Our LOHP: What we do

Oral health/oral systemic health educational trainings (Train-the-trainer)

- Community/professional organizations
- ★ • School nursing/health staff
- Health plan providers
- Community health workers
- County agency staff

Resource connections

- Oral health literacy projects, curricula
- Flyers/tabling for events
- Toothbrushes, floss, timers
- Provider lists, toolkits, social media

Policy and advocacy

- Data-driven, County-level advocacy
- Program, County, and State-level systems change advocacy

Collaborations

- ★ • School-based programs
- Annual Happy Teeth events
- Medical-dental integration

Technical assistance

- Partner connection
- Youth urgent referral connection



Oral health 101 trainings

- Oral Health 101 is part of workforce development
- Oral health literacy strengthens the workforce to train their communities
- This is key to our framework

Why do Teeth Matter?

Our teeth have "jobs":

- Baby teeth hold space for adult teeth while the jaw develops and keeps adult teeth from crowding
- Teeth aid in chewing to help digest foods
- Teeth help with speech development
- If formed properly, they create space for the airway to develop correctly
- Teeth can give us a confidence when we smile



Baby Bottle Tooth Decay

- Only breast milk or formula in bottles and not in crib
- Wipe gums twice a day with a soft, clean cloth in the morning after the first feeding and right before bed to wipe away bacteria and sugars that can cause cavities
- Talk to a dentist or doctor about fluoride varnish treatment for a child's teeth as soon as the first tooth appears.
- To see if your community's water is fluoridated, you can view your water system on CDC's [MyWater's Fluoride website](http://MyWater'sFluoride.website).



Sealants and varnish

- Dental sealants and fluoride varnish can be beneficial to teeth.
- Both help fight tooth decay.



Cavity germs are contagious

- Adults are usually responsible for children's cavities
- Did you know this?
- What are some of the ways this can happen?



Toddlers (Ages 3-5)

Healthier Mouth Tips

- Reinforce importance of baby teeth
- Review [Dental Guidance Tip](#)
- Parents should lead by example and establish a routine, sing or make it a fun game
- Parent brushes toddler teeth but allow child to some
- Brush 2X daily for 2 minutes, using proper amount of toothpaste with fluoride (rice grain)
- Floss teeth that touch at least once a day
- Let child sit away from teeth to check for spots at bedtime & 3 months
- Avoids most drinks have sugar (milk, juices, etc.) clean teeth within 20 minutes after having food and drink, if possible



Healthy habit #3: Setting good examples

- Have children watch you while you brush and floss
- Make brushing fun with singing or incentives
- Don't skip meals and teach healthy eating by making grocery shopping or cooking fun for the whole family
- Allow children to watch during adult dental exams



Other types of projects

3rd Annual
Happy Teeth Event
Thursday, May 15, 2025

Santa Clara County Fairgrounds
 11:30 a.m. to 4 p.m.
 Main Gate at 344 Tully Rd., Gate B
 Fiesta Building
 San Jose, CA 95111

- Free dental screenings
 - Ages 0-18
 - Foster youth to age 26
 - People who are pregnant
- 30 community booths with resources

Logos for Santa Clara County Health Plan, Santa Clara Valley Healthcare, WIC, and SCCDS are visible at the bottom.

Santa Clara County
PUBLIC HEALTH

¡Empieza una nueva rutina!
Cepillarse, Libro, Cama

Cada noche:

- Ayuda a tus hijos a cepillarse los dientes y a utilizar el hilo dental.
- Lee su libro favorito (o dos).
- Llévalos a dormir a la misma hora cada noche.

scsphd.org/OralHealth

Dry mouth is associated with oral disease.

scsphd.org/OralHealth

Teeth and Nutrition

- Limit sugary and acidic foods
- Brush after eating sticky and chewy foods, like breads, rice, pastas, and dried fruits
- Drink water to rinse away food particles
- Choose healthy fruits and veggies to help keep teeth healthier

scsphd.org/OralHealth

SCHOOL READINESS
 5-Year Exit Program Resource Handbook

SCHOOL SUCCESS TIPS

- Enroll children ages 3-5 (and at least 10-15)
- Enroll children ages 3-5 (and at least 10-15)
- Enroll children ages 3-5 (and at least 10-15)
- Enroll children ages 3-5 (and at least 10-15)
- Enroll children ages 3-5 (and at least 10-15)

REINTEGRATE ORAL HEALTH ASSESSMENT (RHS)

- Enroll children ages 3-5 (and at least 10-15)
- Enroll children ages 3-5 (and at least 10-15)
- Enroll children ages 3-5 (and at least 10-15)
- Enroll children ages 3-5 (and at least 10-15)
- Enroll children ages 3-5 (and at least 10-15)

ORAL HEALTH TIPS

- Brush 2x a day with fluoride toothpaste
- Use the correct brushing technique
- Visit the dentist for a checkup and cleaning
- Use fluoride mouthwash
- Limit sugary and acidic foods and drinks
- Wear your seat belt and buckle up
- Use your seat belt and buckle up
- Use your seat belt and buckle up

TOOTH DECAY
 How does a cavity form?

GUM DISEASE
 What can cause gum disease?

Oral Hygiene and Reading

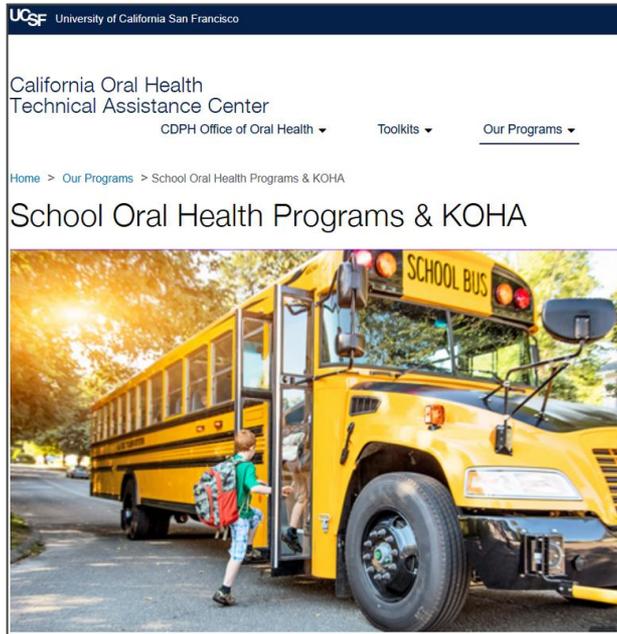
Who	Why	Time	Set-Up	Objectives	Materials
Parents and children	To promote oral health and reading skills	15-20 minutes	Simple materials and a quiet space	Children will be able to identify and name different types of teeth and understand the importance of brushing and flossing.	Brush, toothpaste, floss, mirror, toothbrush, dental floss, and a book about oral health.

An Annual Event or Campaign

Social Media, Newsletters, Translations

Educational Materials

State-Level Work



UCSF University of California San Francisco

California Oral Health
Technical Assistance Center
CDPH Office of Oral Health ▾ Toolkits ▾ Our Programs ▾

Home > Our Programs > School Oral Health Programs & KOHA

School Oral Health Programs & KOHA



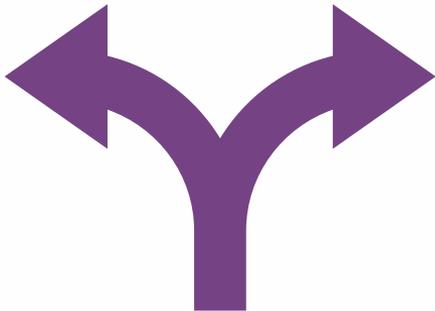
Oral health education/promotion (Train-the-trainer)

- KOHA toolkit, school district KOHA manual
- School programs landing page
- Reviewing oral health education standards-California Department of Education (TK-12)

<https://oralhealthsupport.ucsf.edu/our-programs/school-programs>

Partnering with our LOHP

- Bi-directional benefits
- Shared vision and goals
- Complementary Strengths
- Use “Smartie” Goals
- Ensure measurable outcomes
- Promote each other whenever possible



Goals



- Specific
- Measurable
- Ambitious
- Realistic
- Time-bound
- Inclusive
- Equitable

Ways to partner



Is your child in TK
or Kindergarten?

KOHA
PROMOTION



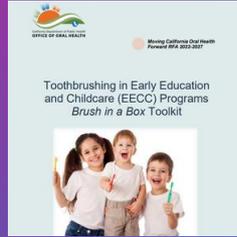
National Children's
Dental Health Month
EACH FEBRUARY



National Dental
Hygiene Month
EACH OCTOBER



BRUSH, BOOK,
BED

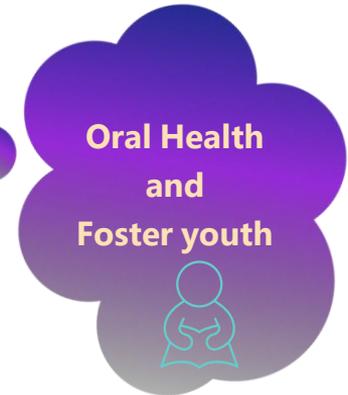


BRUSH
IN A BOX



Topic ideas collaboration

- Health managers and coordinators
- Mental health and wellness staff
- Nutrition managers and registered dietitians
- Disabilities and inclusion coordinators
- Family services staff and home visitors
- Early Head Start managers and prenatal specialists
- Program directors and site supervisors



Example 1 : Brush, Book, Bed

American Academy of Pediatrics

Start healthy habits and routines early

- Oral health emphasis
- Reading a book versus screen time
- Parent-child interactions
- Reinforcing routines, which kids prefer

Santa Clara County
PUBLIC HEALTH

¡Empieza una nueva rutina!
Cepillarse, Libro, Cama

Cada noche:

1. Ayuda a tus hijos a cepillarse los dientes y a utilizar el hilo dental.
2. Lee su libro favorito (o dos).
3. Llévalos a dormir a la misma hora cada noche.

sccphd.org/OralHealth
Funded by the CDPH under Grant #22-10198

Our Head Start Partnership:

- Trainings: Streamlined for all sites at once versus one site at a time
- Next training: Scheduled 2/19/2026
- LOHP manager actively joins Head Start Health Services Advisory Committee (Quarterly)
- Head Start manager actively joins the LOHP's Oral Health Needs Assessment and Improvement Plan Workgroup (Bi-monthly)



Our Head Start Oral Health Champion

Chriselda Gonzalez

Supervisor - Family Health Services

Early Learning Service

Santa Clara County Office of Education





Oral Health In Our Head Start

- Basic Oral Care
- Toothbrushing at School
- Routine Exams
- Support with scheduling appointments
- Nutrition and Oral Health
- Kindergarten Transition





Head Start

A [program](#) must promote effective oral health hygiene by ensuring all children with teeth are assisted by appropriate staff, or volunteers, if available, in brushing their teeth with toothpaste containing fluoride once daily. (1302.43)

Staff and Parent Training

- Staff training for local sites, next scheduled training: (2/19/26)
- Providing Parents with Oral Health Workshop

Health and Mental Committe

- Provide support and resources
- Brainstorm together

Happy Teeth Annual Event

- Referrals and Recruitment
- KOHA for Kinder Transition

Brush, Book, Bed

- Establishing Routine
- Learning Opportunity

Head Start Website



[Head Start | Santa Clara County Office of Education](#)



<https://www.sccoe.org/depts/educational-services/early-learning-services/Pages/ehs.aspx>

My email: cgonzalez@sccoe.org

Our Purpose	<h2>EARLY HEAD START</h2> <p>Quality Child Care and Early Learning Services</p> <p>Serving Children Birth to 3 Years</p> <h3>TODAS LAS FAMILIAS BIENVENIDAS!</h3>  <p>HOME VISITING</p>  <p>FAMILY CHILD CARE</p>  <p>CENTER BASED</p> <p>Click here for Interest Form <i>scroll down for more information</i></p>
Application Process	
Eligibility Guidelines	
Education Readiness	
Family Engagement	
Health Services	
Program Calendars	
Parent Voice	
Accountability	
Contact Information	
Program Events	
Staff Links	

Visit our LOHP websites!

The screenshot shows the 'Oral Health' page on the Santa Clara County Public Health website. The header includes the County of Santa Clara logo and navigation links for 'County Services' and 'About the County'. Below the header is a search bar and a 'Provider Site' button. The main navigation menu includes 'Services', 'Health and Safety Alerts', 'Health Information', 'Disease Information', and 'How Do I...?'. A large banner image shows a group of people brushing their teeth. Below the banner, there is a breadcrumb trail: Home > Health Information > Oral Health. The main heading is 'Oral Health'. A blue button says 'Stay connected: Get email updates'. Below that is a paragraph of text: 'Healthy bodies need healthy mouths. Did you know that poor teeth or gum health can lead to heart problems, cause issues with pregnancy and childbirth, worsen diabetes, and make it easier to get pneumonia? Health conditions like immune system disorders or Alzheimer's disease and related dementias can also make oral health worse. Taking good care of your teeth, gums, and mouth is important to your overall health.' Below the text is the section 'Local Oral Health Program'. To the right, there is a 'Quick Links' section with a list of links: 'LOHP Provider Page', 'Resources for Parents and Caregivers', 'Healthier Kids Foundation Dental First for Schools', 'CDC Oral Health Fast Facts', and 'First 5 of California Oral Health Resources'.

The screenshot shows the 'Oral Health Providers' page on the Santa Clara County Public Health website. The header includes the County of Santa Clara logo and navigation links for 'County Services' and 'About the County'. Below the header is a search bar and a 'Main Site' button. The main navigation menu includes 'Home', 'Reporting', 'Diseases', 'Programs', 'For Schools', 'Long-Term Care Facilities', and 'Health Alerts Archive'. A large banner image shows a woman smiling while brushing a child's teeth. Below the banner, there is a breadcrumb trail: Home > Programs > Oral Health. The main heading is 'Oral Health'. Below that is a paragraph of text: 'The Public Health Department's Local Oral Health Program partners with medical and dental providers, community-based organizations, county programs, schools, and local professionals to increase access to oral health resources in the County of Santa Clara. We offer oral health education and trainings to various professionals and organizations, help increase access to dental services for families, and work as a safety net to help school districts connect families to dental services.' Below the text is the section 'Review the sections below to find oral health state requirements, information, and resources relevant to your'. To the right, there is a 'Links Heading' section with a list of links: 'Oral Health Public Site', 'KQHA Online Digital Form', 'Smile, CA Education Toolkits', and 'CA Oral Health Technical Assistance Resource Center'.

Oral Health Information
sccphd.org/oralhealth



Oral Health Providers
sccphd.org/oralhealthproviders





Somayeh Bolourchi, MS
Program Manager II
Clinic to Community Linkages Team
Oral Health Program

Somayeh.Bolourchi@phd.sccgov.org

Somayeh /SO-MAY-UH/ Bolourchi, MPH is the Program Manager II for the Santa Clara County Oral Health Program housed within the Clinics to Community Linkages team. She joined the Oral Health Program in 2019, following roles in Tobacco-Free Communities, Nutrition Education and Obesity Prevention (NEOP), and Lead Poisoning Prevention, focused on upstream prevention strategies to improve children’s health. In her current role, Somayeh leads collaborations with community partners to build better oral health equity and awareness. Somayeh obtained her MPH in Research Epidemiology from Loma Linda University and completed her research project at UC Berkeley. In her free time, she enjoys playing outdoors with her 8-year-old son and 6-year-old daughter.



Brandy Mattson, RDH, OMT
Health Planning Specialist III

Clinic to Community Linkages Team
Oral Health Program

Brandy.Mattson@phd.sccgov.org

Brandy Mattson, RDH, OMT, HPS III, is a Health Planning Specialist III for the Santa Clara County Oral Health Program housed within the Clinics to Community Linkages team. She is a Registered Dental Hygienist and Orofacial Myofunctional Therapist with nearly 30 years of experience working in various dentistry settings, and currently serves as the team's lead education and communications specialist. She has degrees in Health Care Management and Dental Hygiene and has worked in private practices, public health clinics, periodontics, cosmetics, and university emergency dental services. She has spent her career advocating for both youth and older adults, addressing the needs of those with special circumstances and advancing gum disease. Brandy is currently a member of the Office of Oral Health State School Dental Workgroup and Resources Subcommittee, the Society for Health Communications, the American Association for Community Dental Programs, and the National Network of Healthcare Hygienists.



Chriselda Gonzalez
Supervisor of Health Services
Head Start/Early Head Start
Santa Clara County Office of Education

cgonzalez@sccoe.org

Chriselda Gonzalez is the Supervisor of Health Services for Head Start/Early Head Start with over 18 years of experience working children and families. Working in collaboration with the community to provide services to young children in their developmental journey and education has been my journey. Following community work in health education, I began my Head Start journey as a Family Advocate and focused on advocating for children and families by developing community awareness, educating families and providing comprehensive services for children and families. In 2022 I transitioned into my role as Supervisor- Health Services and have had the opportunity to continue with community partnership to strengthen opportunities of support in health and nutrition. I truly believe in building awareness and connections to strengthen children's educational opportunities through health and nutrition as a vital component to healthy learning.



 <https://www.sccoe.org/depts/educational-services/early-learning-services/Pages/ehs.aspx>

Thank You!



Somayeh Bolourchi - PM II
somayeh.bolourchi@phd.sccgov.org

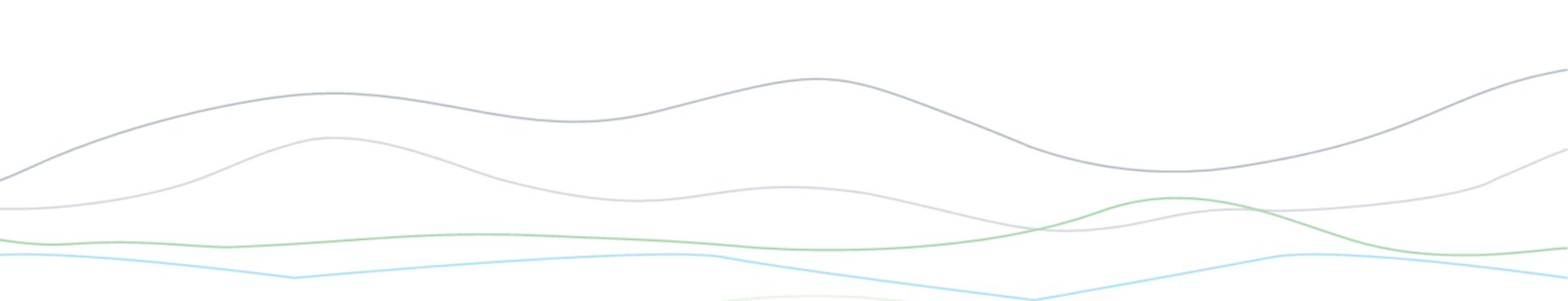
Brandy Mattson - HPS III
brandy.mattson@phd.sccgov.org

**Chriselda Gonzalez - Supervisor, Head
Start Family Health Services, Early
Learning Services**
cgonzalez@sccoe.org



Santa Clara County
**PUBLIC
HEALTH**

County of Santa Clara Public Health Department - Oral Health Program
Funded by the California Department of Public Health (CDPH) under Grant #22-10198



Solano County

Rosario Manjarrez (Solano LOHP).
Carol Ash (Solano LOHP)



Building Bridges for Children's Oral Health

The Partnership Between Solano Oral Health Education Program and Napa Solano Head Start
A Story of Collaboration, Trust and Impact



Presented by : Rosario Manjarrez, HES
and Carol Ash, RDH



A FOUNDATION BUILT OVER TIME

30 Years of Service

The Registered Dental Hygienist (RDH) has been working with Head Start Programs on and off for the past **three decades**, providing services to children with the most need in our community.



A Relationship Built on Shared Values

The Head Start Director became an active member of the Solano County Health Advisory Committee (SOHAC), bringing the perspective of early childhood education and family services to our coalition.



Coalition Brought Together:

- Public Health Leadership
- Community Advocates
- Early Childhood Educators
- Oral Health Experts
- Solano School Nurses and much more!

Shared Goals:

- ✓ Improve child oral health
- ✓ Promote prevention
- ✓ Reduce childhood caries
- ✓ Provide services to families most at need

Opportunity

Through coalition discussions and shared data, both organizations recognized a natural partnership opportunity that could significantly impact children's oral health.



Why this Partnership makes sense:



Same Target Population

Both serve families with young children



Trusted Setting

Head Start provides a safe, familiar environment for services



Complementary Missions

Both organizations prioritize education and healthy habits



Resource Efficiency

Leverage existing infrastructure and family relationships

ROLES AND RESPONSIBILITIES

Stakeholder

Prime Responsibility

Dental Professional

Provide screenings, fluoride varnish and Parent education; sign off on required documentation.

Head Start Staff

Coordinate appointments, integrate oral health hygiene into lessons including making sure all students including home based children brush daily with a pea size amount of fluoridated toothpaste immediately following breakfast, and track health records.

Parent/Guardians

Maintain home hygiene routines and attend scheduled dental visits.



BRIDGING THE GAP

- ✓ **No extra transportation needed**
- ✓ **No missed work for parents/guardians**
- ✓ **Familiar, trusted environment**
- ✓ **No cost to families**
- ✓ **School Readiness: Healthy teeth support better nutrition, speech and learning and much more!**



IMPACT & OUTCOMES



Increased Access

More children receiving preventive care



FY 24-25 At A Glance

258

Children screened

210

Fluoride Varnish applied

15

Head Start sites visited

46

classes participated



Reduced Barriers

Eliminated transportation and time obstacles



Family Support

Education and resources for parents/guardians



VISION

We envision that all Solano County residents enjoy good oral health which will positively impact their overall health

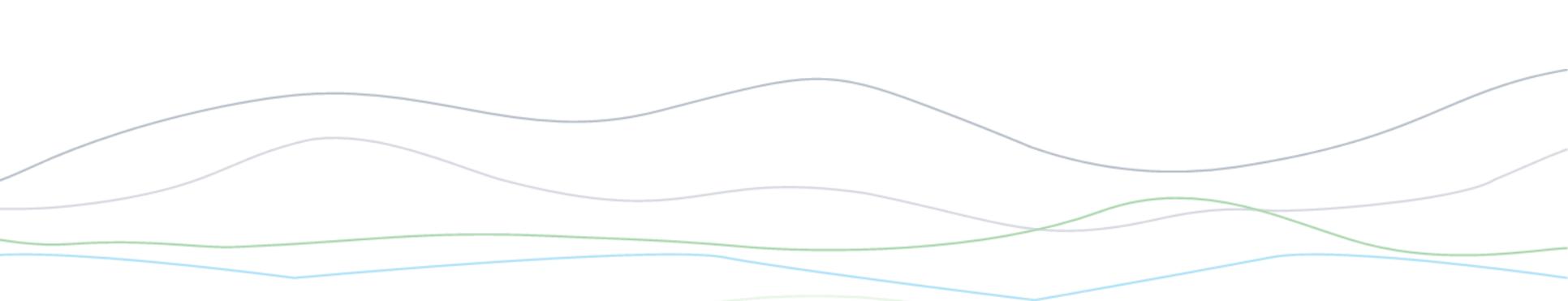
MISSION



The Solano Oral Health Advisory Committee strives to improve oral health, especially among the most vulnerable, through collaborative efforts in planning, implementation and coordination of public health interventions with community partners.

THANK YOU





Tehama County

Jena Roof (Tehama LOHP),
Hannah Bergen Ziyadinova (Tehama LOHP)

Tehama County



Public Health

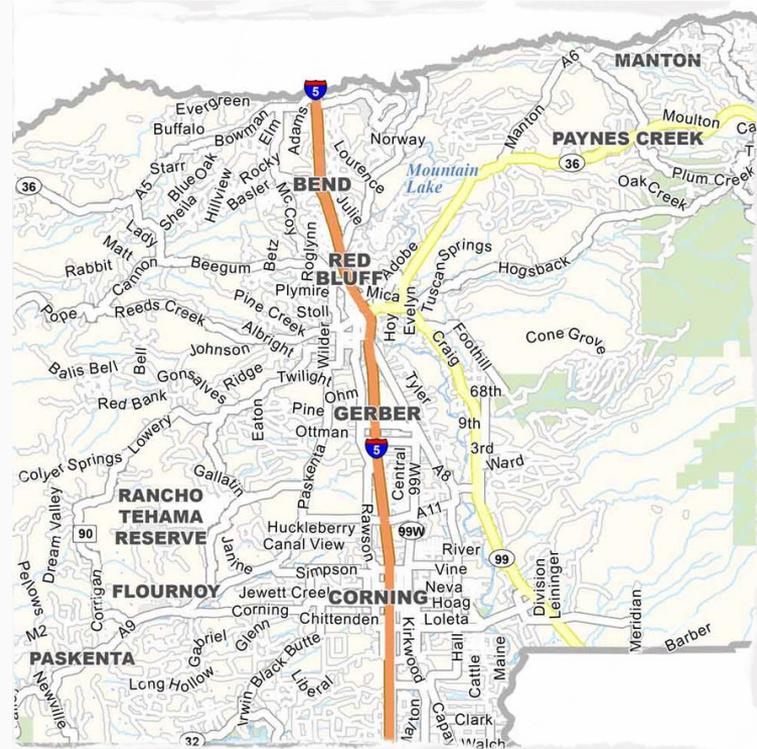


Tehama County

Tehama County lies approximately midway between Sacramento and the Oregon border. Largely rural, Tehama has identified access to healthcare (including dental) as its top priority in its 2025 Community Health Assessment.

Population: 64.45K

Covering an area of 4,823 miles (7,762 km²)

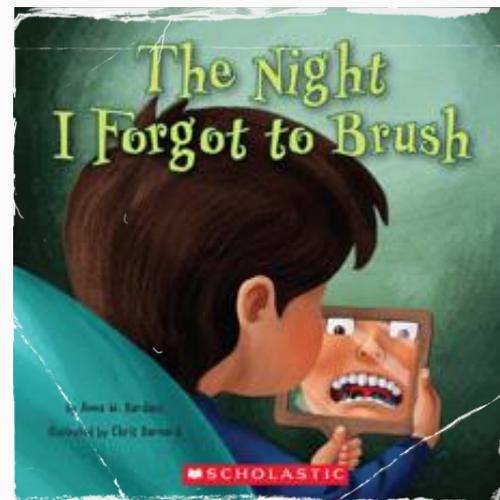
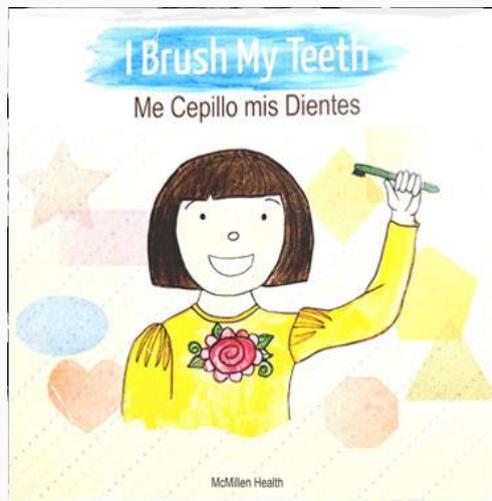
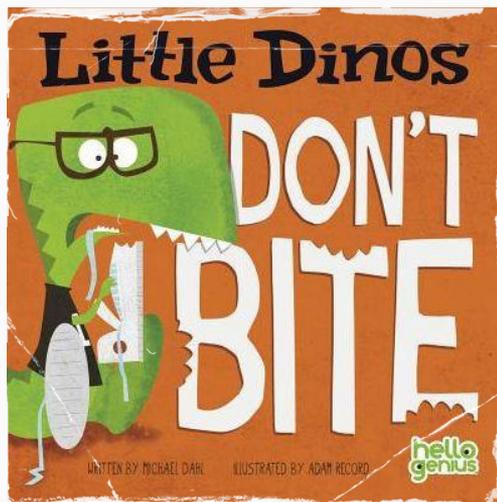
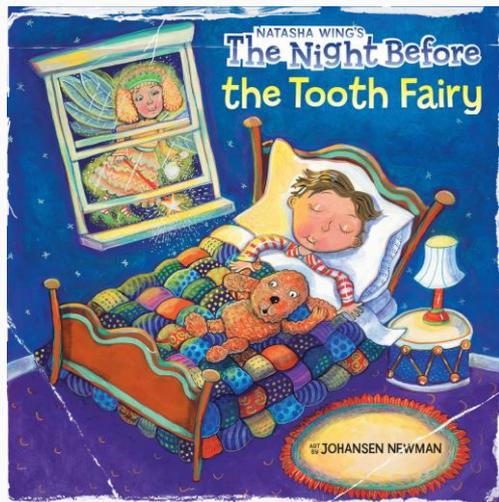


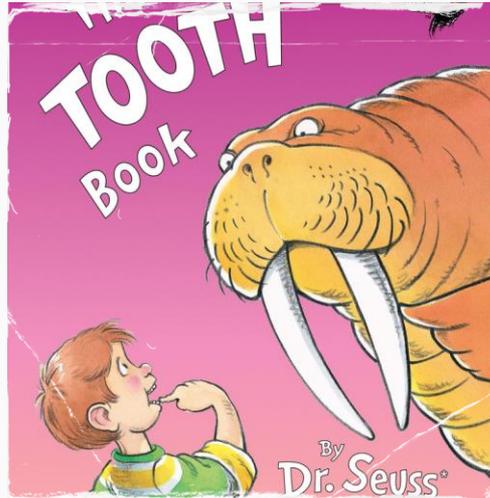
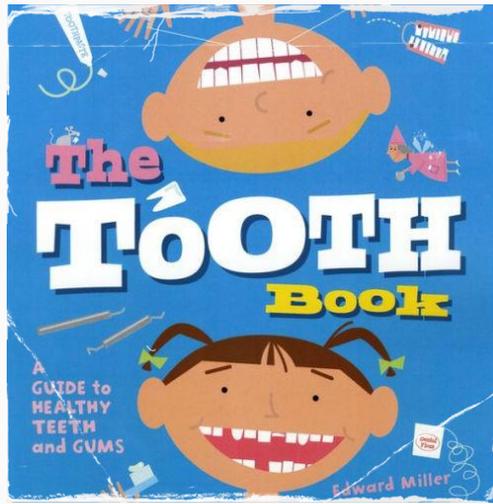
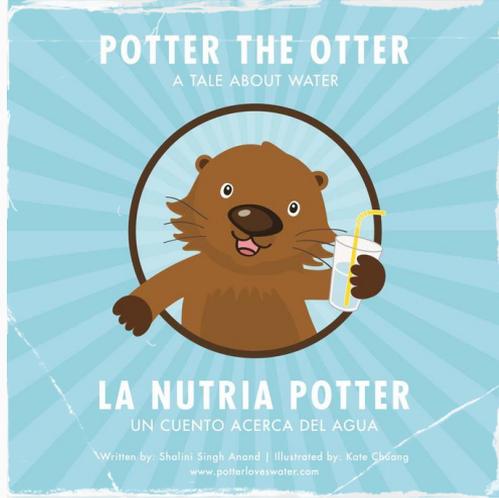


in partnership with First
5 Tehama

Books for Business

Books are in businesses around the
community free to families.







Dolly Parton's Imagination Library is eligible for all Tehama county residents.



Continuing our
Partnership

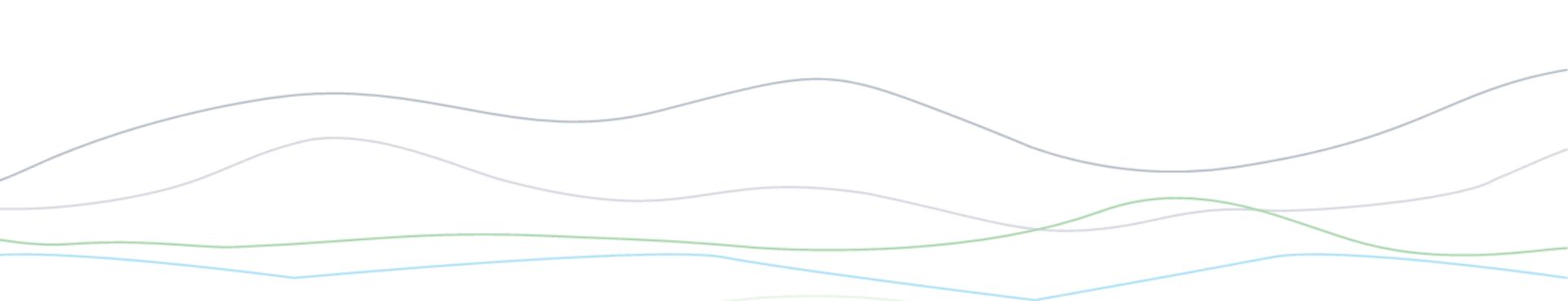
Future Plans

- Books for Business
- Parent Nights



Thank you
very much

tehamaoralhealth@tchsa.net



Resources & Next Steps

Janelle Urata (COHTAC)

Resources



Overview

- California Oral Health Technical Assistance Center (COHTAC) provides technical assistance and oral health resources to the Local Oral Health Programs throughout California

<https://oralhealthsupport.ucsf.edu/>

- Searchable Resource Center, educational resources hub, oral health toolkits and trainings



Brush in a Box Toolkit

- Downloadable pdf with resources and guidance on classroom toothbrushing program

<https://oralhealthsupport.ucsf.edu/brush-box-toolkit>

- Includes
 - Toothbrushing guidance for different ages in English and Spanish
 - Sanitation guidelines in English and Spanish
 - Tips to support families to brush at home
 - Checklists
 - Resources on ordering supplies
- There is an overview webinar to walk you through the toolkit in detail



Getty Images

Educational Resources

- Toddlers [https://oralhealthsupport.ucsf.edu/our-programs/education#Toddlers%20\(1-4\)](https://oralhealthsupport.ucsf.edu/our-programs/education#Toddlers%20(1-4))
- Toothbrushing positions and techniques for parents, including video
- Coloring sheets
- Games and apps for kids
- Videos about visiting the dentist (Daniel Tiger, Sesame Street)
- Nutrition tips, too!



Kindergarten Oral Health Assessment (KOHA)

- <https://oralhealthsupport.ucsf.edu/our-programs/school-programs/KOHA> →

KOHA Steps to Completion

[KOHA School District Flowchart](#) | [KOHA Flow](#)

1 KOHA Forms

2 Reminders

3 Data

4 Urgency Referrals

5 Waiver

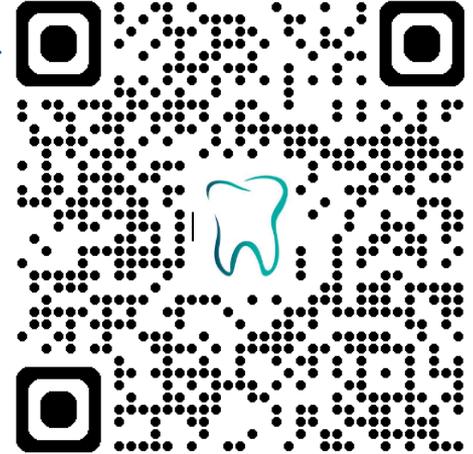
6 Communication



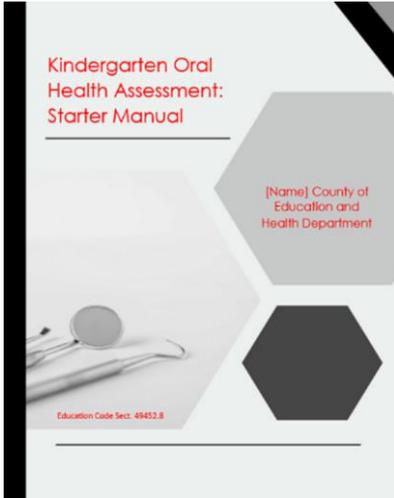
Tips and Promising Practices for Implementing KOHA

Frequently Asked Questions (FAQs)

KOHA Templates for Schools



Kindergarten Oral Health Assessment (KOHA)



Say Hello to the KOHA Forms!
Parent Notification Letter: describes what the KOHA requirement is and what parents/caregivers need to do. It includes information about how to access dental care in the county as well as basic oral health information.
 Access the Parent Notification Letter in other languages below:
[Spanish](#) • [Chinese \(Simplified\)](#) • [Chinese \(Traditional\)](#) • [Korean](#) • [Tagalog](#) • [Vietnamese](#)

California Department of Public Health
 July 2022 - Page 2 of 2

Section 1: Child's Information (filled out by parent or guardian)

Child's First Name: _____ Last Name: _____ Middle Initial: _____ Child's Birth Date: _____
 Address: _____ City: _____ State: _____ ZIP Code: _____
 School Name: _____ Teacher: _____ Grade: _____ Year child starts kindergarten: _____
 Parent/Guardian First Name: _____ Parent/Guardian Last Name: _____ Child's Gender: Male Female
 Child's Race/Ethnicity: White Black/African American Native American Multi-racial Hispanic/Latino Native Hawaiian/Pacific Islander Asian Unknown Other (please specify) _____

Continued on next page

California Department of Public Health
 July 2022 - Page 2 of 2

Section 2: Oral Health Data Collection (filled out by a California licensed dental professional)

IMPORTANT NOTE: Consider each box separately. Mark each box.

Assessment Date: _____
 Unreported Decay (Visible Decay Present) Yes No
 Care's Experience (Visible decay and/or fillings present) Yes No

Treatment Urgency:
 No urgent dental care recommended (Carries without pain or infection of child would benefit from lessons of further evaluation)
 Urgent dental care needed (pain, infection, swelling or soft tissue lesions)

 Licensed Dental Professional's Signature CA License Number: _____ Date: _____

*Check "yes" for Caries experience if there is presence of unreported decay or fillings
 Check "no" for Caries experience if there is no unreported decay AND no fillings

Section 3: Follow up to Urgent Care (filled out by parent responsible for follow up)

Parent notified that child has urgent dental care need on: _____
 A follow-up appointment for this child has been scheduled for: _____
 Did child receive needed treatment? Yes No (If no, entity responsible for follow up will be encouraged to check back in 60 days)
 I don't know

The law states schools must keep student health information private. Your child's name will not be part of any report as a result of this law. This information may only be used for purposes related to your child's health. If you have questions, please call your school.

Return this form to the school no later than May 31st of your child's first school year.
 Original to be kept in child's school record.

[COHTAC Share & Learn: New School Dental Program Resources - YouTube](#) time stamp 17:45 - 29:35

AB 2630 Implementation Guidance



FAQs about KOHA from OOH

CDPH Health and Human Services
 California Department of Public Health
 1601 Franklin Street, Sacramento, CA 95834
 (916) 227-8900 • www.cdph.ca.gov

Original Date of Birth Worksheet (used for child health surveillance)
 (Immunization Record) (IIR)

1. Reporting the surveillance system is based on the child's date of birth. If the child is deceased, the date of death should be used for the parent or guardian's contact information. If the child is deceased, the date of death should be used for the parent or guardian's contact information. If the child is deceased, the date of death should be used for the parent or guardian's contact information.

2. If the child is deceased, the date of death should be used for the parent or guardian's contact information. If the child is deceased, the date of death should be used for the parent or guardian's contact information.

3. If the child is deceased, the date of death should be used for the parent or guardian's contact information. If the child is deceased, the date of death should be used for the parent or guardian's contact information.



Partner with Your Local Counterpart

- Working to support oral health in your community
- Have experience with KOHA
- Opportunities for partnership and collaboration
- Find your Local Oral Health Program or Head Start program contacts

<https://oralhealthsupport.ucsf.edu/document/lohp-and-head-start-contacts>

LOHP contacts



Head Start contacts



Find Dental Providers

Smile, CA Outreach Representative Map and Information



Smile, California Outreach Team

Member Outreach & Provider EDI Supervisor
Paula Lee | 916-720-3976
chamepaula.lee@gainwelltechnologies.com

Provider Outreach Supervisor
Rebecca Murray | 279-221-0304
rebecca.murray@gainwelltechnologies.com

Dental Services Advocacy Director
Dr. Gene Gowdey
gene.gowdey@gainwelltechnologies.com

MEMBER REPRESENTATIVES

Northern
Darren Vinson | 279-667-0742
darren.vinson@gainwelltechnologies.com

Central
Dwayne Calloway | 916-720-2587
dwayne.calloway@gainwelltechnologies.com

Western Southern
Jose Morales | 279-667-0682
jose.morales@gainwelltechnologies.com

Eastern Southern
Yanique Guy | 279-667-0744
yanique.guy@gainwelltechnologies.com

PROVIDER REPRESENTATIVES

Northern
Ben Nguyen | 279-221-0279
ben.nguyen@gainwelltechnologies.com

Central
Marie Dawn Rodriguez | 916-407-4289
dawnmarie.rodriguez@gainwelltechnologies.com

Western Southern
Vivian Lin | 916-604-8301
vivian.lin@gainwelltechnologies.com

Eastern Southern
Elsie Barrow | 279-667-0712
elsienore.barrow@gainwelltechnologies.com

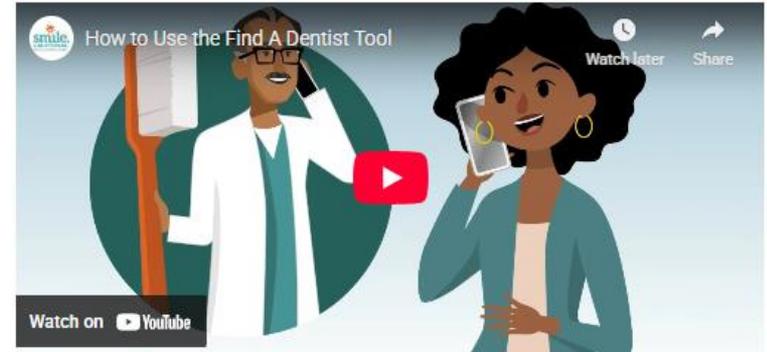
This Regional Representative contact list is for respective member and provider representatives to assist stakeholders with local events, questions about Smile, California, and provider recruitment opportunities. This list is not for public distribution. Please refer all members to the Telephone Service Center Line at 1-800-322-6384 and providers to the Provider Telephone Service Line at 1-800-423-0507 for general inquiries and customer service support.

[https://www.dental.dhcs.ca.gov/MCD_documents/Providers/Outreach Representative Map December 2025.pdf](https://www.dental.dhcs.ca.gov/MCD_documents/Providers/Outreach_Representative_Map_December_2025.pdf)

Find Dental Providers

- <https://smilecalifornia.org/find-a-dentist/>
- <https://smilecalifornia.org/visiting-the-dentist/what-to-expect-during-the-ex>

How to Use the Find A Dentist Tool



Find a dentist using the following links. These links will take you to the Medi-Cal Dental website.

- [Provider Directory Search](#)
- [Teledentistry Providers](#)
- [Dental Clinics Serving Medi-Cal Members](#)
- [Registered Dental Hygienists in Alternative Practice \(RDHAP\)](#)
- [InsureKidsNow Search](#)

Dental Care Coordination Form

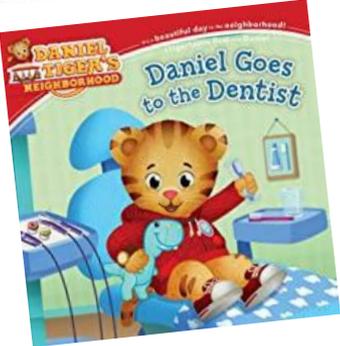
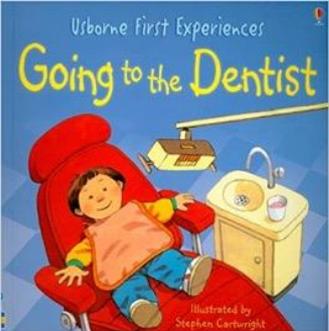
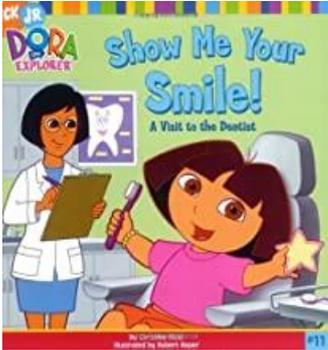
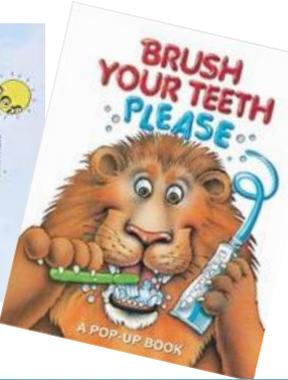
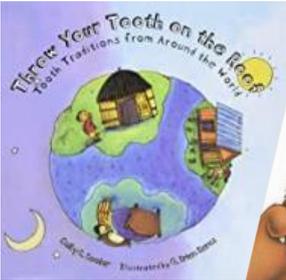
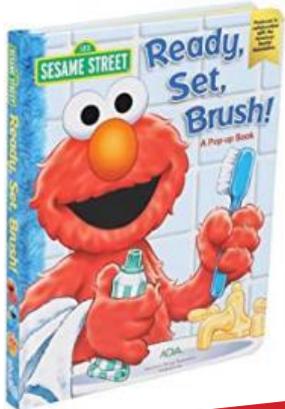
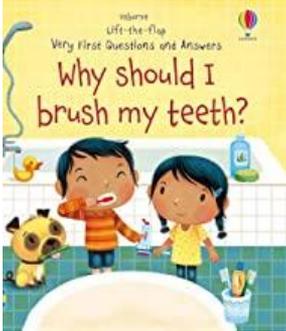
https://dental.dhcs.ca.gov/Providers/Medi_Cal_Dental/CareCoordinationReferralForm

Care Coordination Referral Form

1. Member's Name
2. Member's Legal Guardian (if applicable)
3. Member's Medi-Cal ID (BIC Number) if known
4. Date of Birth



Picture Books about Oral Health



Head Start Resources



<https://headstart.gov/oral-health>



Steps for Toothbrushing at the Table: Growing Healthy Smiles

Toothbrushing at the classroom table is a quicker, more structured way to have children brush than individually at the sink. In this video, learn how to prepare, model, clean up, and store supplies.

[Learn More](#)

Healthy Habits for Happy Smiles

This series of handouts provides simple tips on oral health issues. Staff are encouraged to share the handouts with families to promote good oral health. They are available in English and Spanish.

[Learn More](#)



Brush Up on Oral Health

These Brush Up on Oral Health tip sheets provide information on current practices and practical strategies to promote good oral health for pregnant women, children, and their families.

[Learn More](#)

Dental Hygienist Liaisons (DHLs)

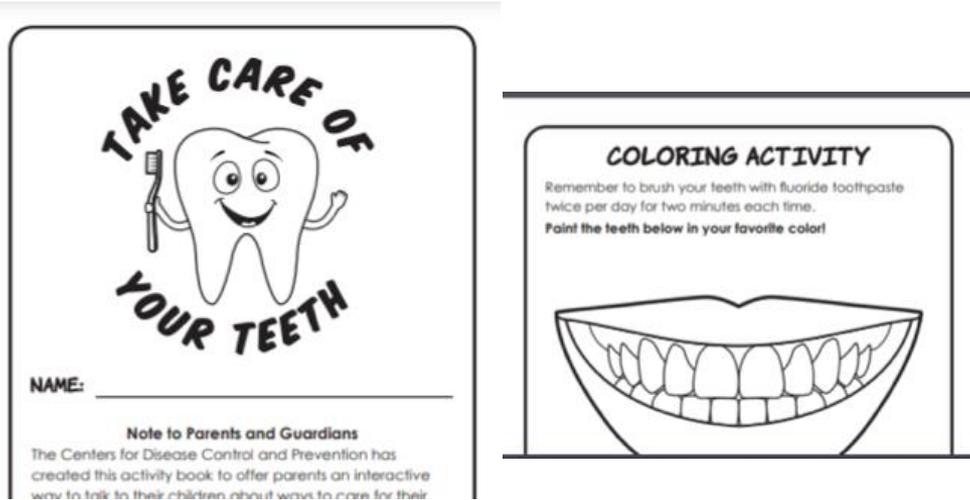
- DHLs promote oral health in Head Start programs by:
 - Connecting Head Start programs with statewide oral health partners.
 - Supporting partnerships, training, and access to care.
 - Promoting oral health education and prevention.
 - And more!



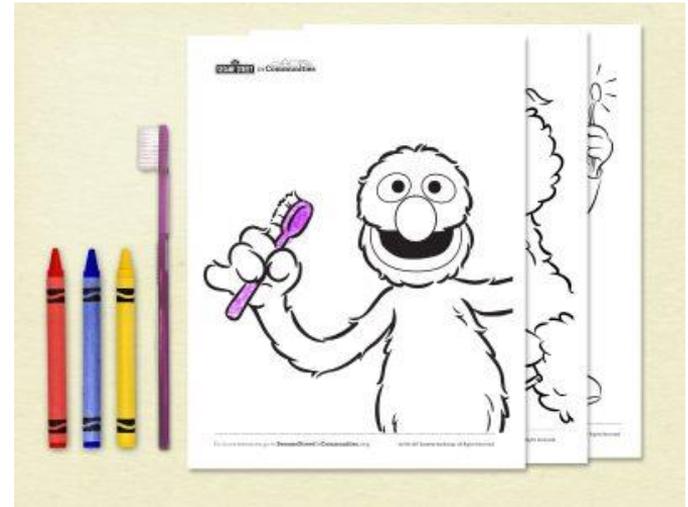
Learn more here!



Oral Health Coloring & Activity Booklets



Available in multiple languages <https://www.cdc.gov/oral-health/print-material/take-care-of-your-teeth-an-activity-book-for-children.html>



<https://sesamestreetincommunities.org>

Sesame Street in Communities Oral Health

<http://sesamestreetincommunities.org/subtopics/oral-health/>

All Teeth Resources

Find resources, activities, and videos all about learning to care for children's teeth.

Age Group ▾ Language ▾ Resource Type ▾ Activity Length ▾ Sort By ▾



Brushy Book Nighty Night
Build toothbrushing into bedtime routines in a fun and positive way.

Health and Hygiene Ages 1-4



Elmo's Toothy Dance
Groove along with Elmo and his toothy friends as they teach the steps of brushing teeth.

Health and Hygiene Ages 1-4



How Much Toothpaste?
Children under three need just a tiny smear of toothpaste on their brush; older children should use a pea size amount of toothpaste.

Health and Hygiene Ages 1-4



Starting Early
Schedule a first dental visit within six months after kids' first tooth, or by their first birthday, then visit the dentist twice a year.

Health and Hygiene Ages 1-4



Tools of the Trade
Learn how two trusty tools help keep kids' tooth healthy.

Health and Hygiene Ages 1-4

First 5 California Kit for Parents

First 5 California's Kit for New Parents is available in five languages: English, Spanish, Chinese, Korean, and Vietnamese. Order 1 or 100, and it will be shipped to you for free.



Oral Health in the Kit



Advice for Pregnant People

The kit explains why oral healthcare is important during pregnancy and helps parents find a dentist and get care.



Nutrition Information

Offers advice on good nutrition, including eating calcium-rich foods and avoiding sugary snacks and drinks.



Oral Health Advice for All Ages

The kit provides age-appropriate oral health advice. This includes information on:

- How to clean a baby's gums
- How to brush a toddler's teeth
- When children are old enough to brush on own
- When a baby should see a dentist
- Ways to prevent tooth decay
- How to find a dentist and affordable dental care

Order for Free Now

To order a single kit, scan the QR code with your phone.



WHAT'S IN THE KIT

The kit comes in a reusable shopping bag and contains these items:

- California Parent Guide
- What to Do When Your Child Gets Sick book
- Touch and feel baby/toddler book
- Poison Control brochure and magnet
- Paid Family Leave brochure
- Brain development card and brochure



For Free Bulk Orders

To order the kit in bulk, email parentkit@first5.ca.gov. Include all of the following in your email:

- Subject line "Kit bulk ordering account"
- Your organization's name
- Your name, email address, and phone number
- Your county
- Requested quantity of kit by language

First5 Kit for New Parents Bulk Orders

- Email parentkit@first5.ca.gov
- Include:
 - Name and phone number
 - County and organization name
 - Mailing address
 - Quantity of kits by language

Next Steps



Ways to get your partnerships started

Connect with your
LOHP or Head Start
program counterpart

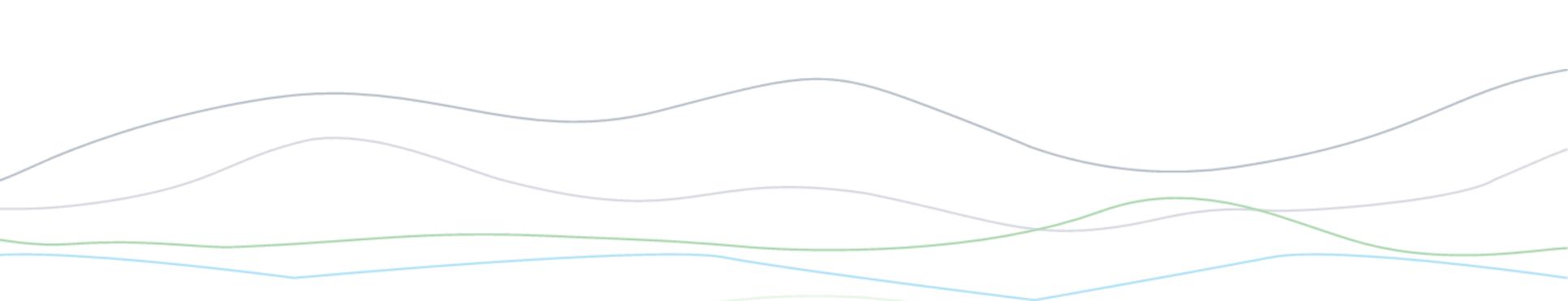
Share resources

Set collaborative goals

Join each other's boards

1. **Head Start:** Health & Mental Health Services Advisory Committee
2. **LOHP** Community Advisory Board/Committee

Join forces to advance
KOHA!



Announcements

CA Head Start Association Social Media



[Facebook](#)



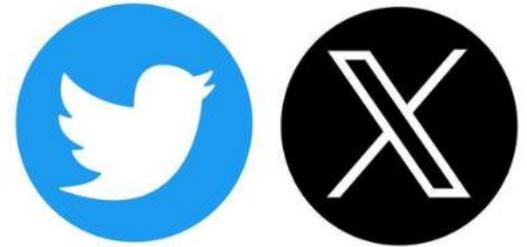
[Instagram](#)



[LinkedIn](#)



[Twitter](#)

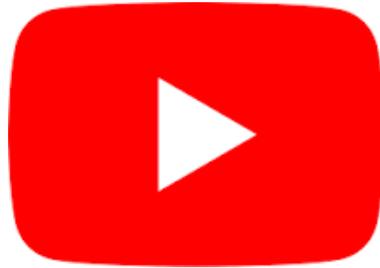


Connect With COHTAC & Each Other

[LinkedIn](#)



[YouTube](#)



[Slack](#)



[Facebook](#)



Upcoming LOHP Activities



LOHP Engagement Meeting:

Registration invitations were sent to LOHPs from Lindsey Thompson Serpico



COHTAC Meet & Greet:

Orientation to COHTAC for new LOHP staff



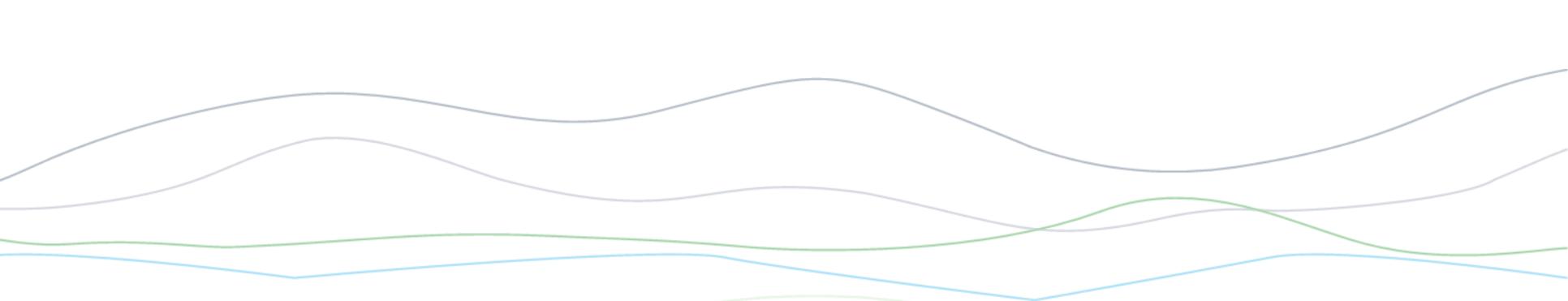
OOH SharePoint Trainings for LOHPs:

Check COHTAC's event page



COHTAC Office Hours: "Check-in and Chat"

No formal agenda, check COHTAC's event page



Thank You