

# Lunch & Learn: Introducing the School-Linked Program Manual

May 18, 2023

## **Speakers**

Paula Lee, Office of Oral Health, California Department of Public Health

Lisa Berens, COHTAC, UCSF

LOHP panelists from Butte, Contra Costa, Solano, and Yolo LOHPs

## **Facilitators**

Aubri Kottek, COHTAC, UCSF

Kristin Hoeft, COHTAC, UCSF

# Housekeeping

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

# Learning Objectives & Agenda

## Objectives

- Learn how to navigate through the School-Linked Dental Program Manual and its resources on the COHTAC website
- Learn from the first-hand experiences of several LOHPs and their school oral health programs
- Share best practices in implementing school-linked dental programs

## Agenda

- Introduction – Paula Lee
- Manual overview – Lisa Berens
- Panel discussion – Aubri Kottek & representatives from Butte, Contra Costa, Solano, and Yolo LOHPs
- Summary – Kristin Hoefft
- Q & A



# Kickoff Poll

# LOHP Lunch & Learn Series School Screening Manual

MAY 18, 2023

PAULA LEE, RDHAP, MPH  
DENTAL HYGIENIST CONSULTANT  
STATEWIDE SCHOOL DENTAL PROGRAM COORDINATOR

California Department of Public Health  
Center for Healthy Communities  
Office of Oral Health



California Department of Public Health  
**OFFICE OF ORAL HEALTH**

## In California...

- More than **60%** of students have experienced tooth decay by third grade.\*
- **1 in 5** kids have untreated tooth decay.\*
- Approximately **440,000** children missed at least one day of school due to a dental problem in 2018.\*\*

# Tooth Decay and Children



\*2018-20 3rd Grade Basic Screening Survey, California Office of Oral Health  
\*\*2018 California Health Interview Survey, UCLA Center for Health Policy Research

# Laws

- ▶ Kindergarten Oral Health Assessment (KOHA)

AB 1433, SB 379

- ▶ Child Health and Disability Prevention Program (CHDP)

The CHDP program oversees the screening and follow-up components of the federally mandated Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) program for Medi-Cal eligible children and youth.

# Cavity Free Children in California

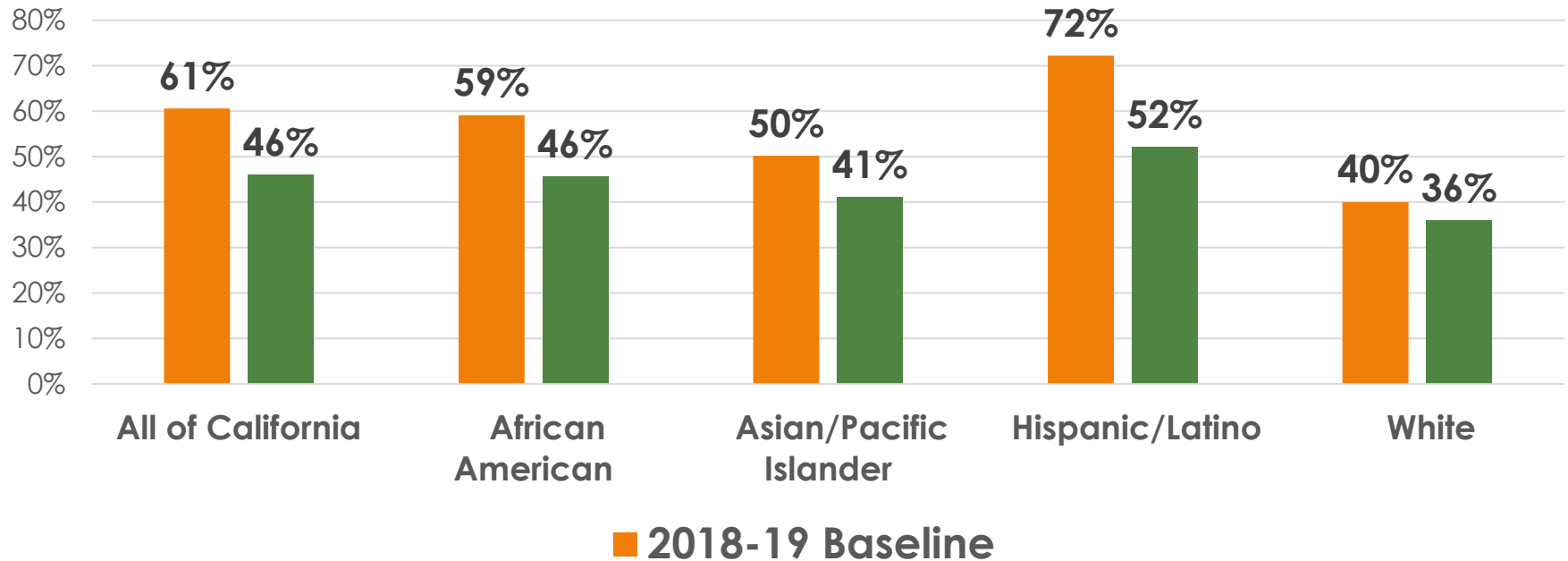


Jayanth Kumar, DDS, MPH - California State Dental Director

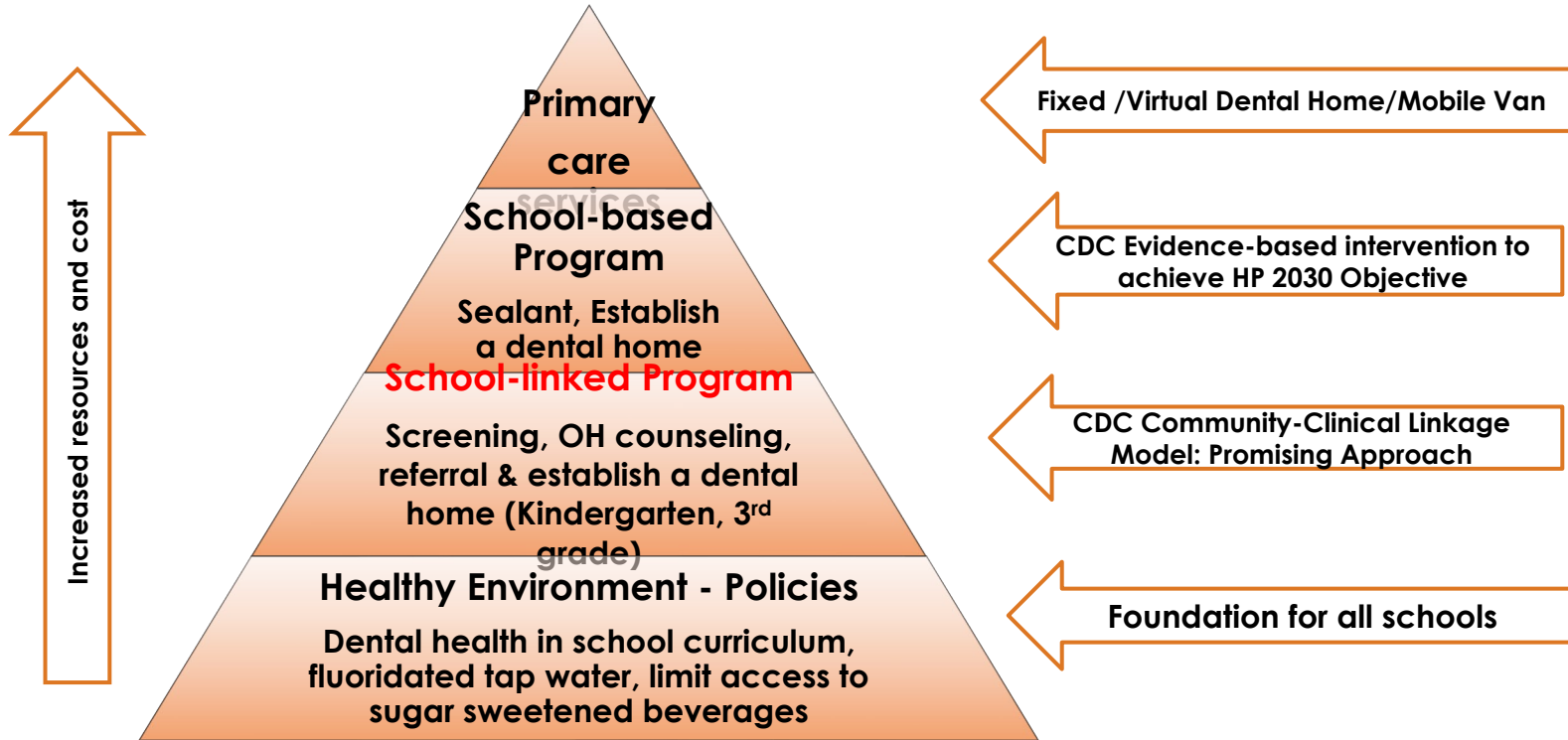


Goal: 50% reduction in oral health disparities  
in children by 2030

### Caries Experience among 3<sup>rd</sup> grade children



# Building interventions in schools: Intensity matched to need



# School Dental Program: “Screen Seal Refer”

Eligible schools (priority): **All rural schools and urban schools >50% FRMP**

## #1 Screen

- ▶ School-linked
- ▶ ALL kindergarten students (KOHA), 3<sup>rd</sup> grade



## #2 Sealant

- ▶ School-based
- ▶ Seal 1<sup>st</sup> Molars (3<sup>rd</sup> Grade)



## #3 Refer

- ▶ Connect each child to a dental home
- ▶ Dental referral management system

# CalAIM & Medi-Cal Dental Program

The overall goal of this initiative is to

- Establish a dental home for all Medi-Cal members,
- Increase patients' return to the same dental office year-after-year for continuity of care
- To improved health/dental outcomes
- To achieve at least 60% utilization rate for children

# Pay for Performance Payment: Continuity of Care

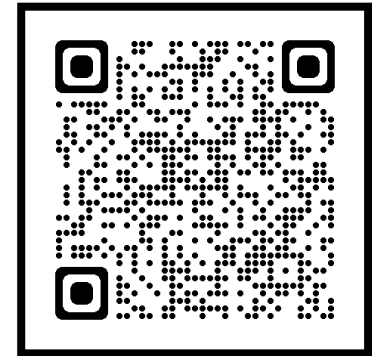
The goal of this performance payment is to increase statewide utilization of preventive services for all Medi-Cal members. **A flat rate performance payment of \$55** for continuity care for dental exam/evaluation.

- D0150 - comprehensive oral evaluation – new or established patient
- D0145 - oral evaluation for a patient under three years of age and counseling with primary caregiver
- D0120 - periodic oral evaluation - established patient

# Announcements

- Student Dental Program Work Group Re-launched May 15<sup>th</sup>, 2023
- RBA Training June 13, 2023

[Results-Based Accountability \(RBA\) | California Oral Health Technical Assistance Center \(ucsf.edu\)](#)



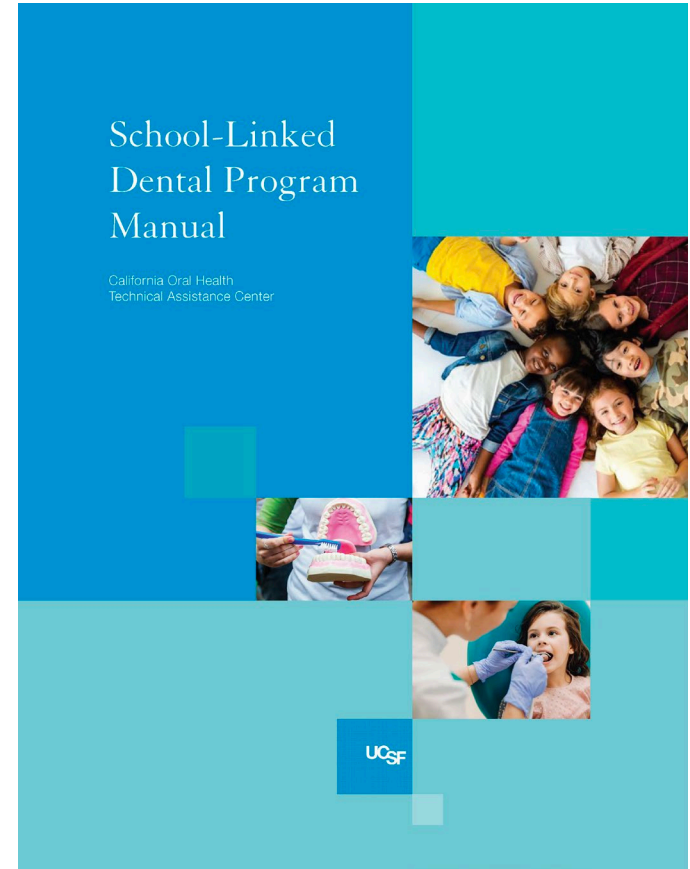
Thank you!

Paula.Lee@cdph.ca.gov



California Department of Public Health  
OFFICE OF ORAL HEALTH

# Overview of the Manual





# Steps to Implementing a School-Linked Dental Program

May 18, 2023

Lisa Berens DDS, MPH

## Step 1: Preparation

- Find and establish partnerships
- Communicating effectively with potential partners
- Developing a memorandum of understanding
- Create a quality improvement (QI) plan

## Step 2: Program Setup & Logistics

- Prioritizing screenings based on school grade
- Establishing a referral pathway
- Obtaining parent/guardian consent
- Scheduling

## Step 3: Implementing the Program

- Conducting oral health assessments
- Oral health education
- Oral health counseling
- Referring students to dental care

## Step 4: Referral Management & Care Coordination

- Identifying dental care coordinators
- Resources for dental care coordinators
- Communication strategy for dental care coordination
- Using a referral management system



## Step 5: Program Evaluation

- Track progress
- Performance management: Results-Based Accountability (RBA)
- Continuous QI cycle
- Reporting data

# Preparation

- Building partnerships
- Developing MOUs
- Quality Improvement plan



# Program Setup & Logistics

- Identify schools and grades
- Establish dental referral pathway
- Parent/guardian consent
- Scheduling



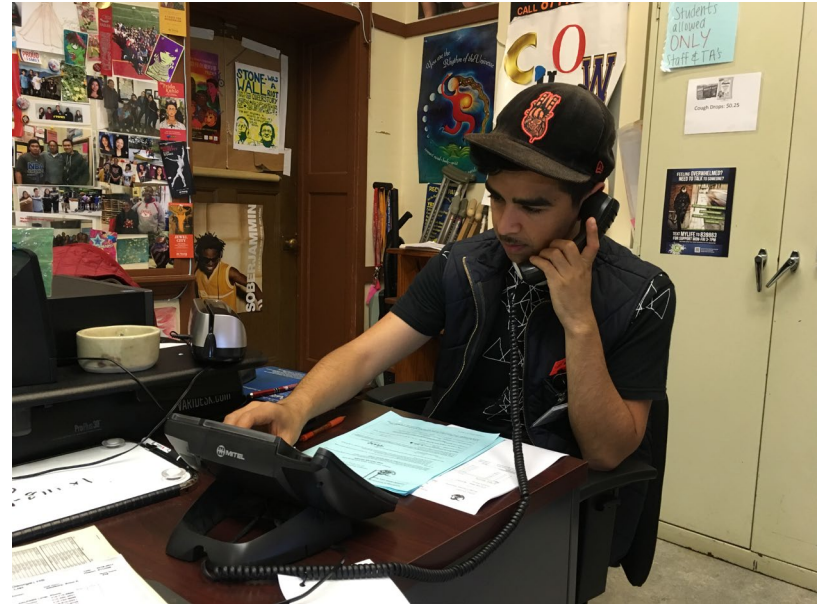
# Implementing the Program

- Oral health assessment
- Oral health education
- Oral health counseling
- Referrals for dental care



# Referral Management & Care Coordination

- Identify and train care coordinators
- Care coordination process
- Communication strategies
- Referral management system



# Program Evaluation

- Track progress
- Results Based Accountability
- Continuous QI cycle
- Reporting data





# Panelist Introductions



# ButteCounty

CALIFORNIA



## County Overview

- Population of >209,000 with around 20% children and adolescents
- 70% White, 18% Hispanic, 5% Asian, 2% Black or African American, 0.3% American Indian, Alaskan or other
- 14 school districts with >29,000 children

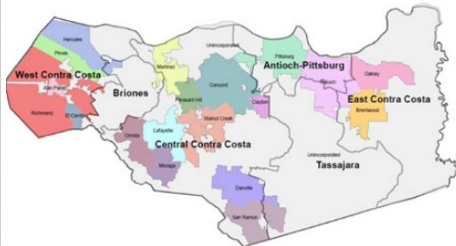
## School Programs

- Part time RDH works in the schools, Health Education Specialist coordinates with schools, Program Manager leads MOUs and budgeting
- Services provided:
  - Oral health presentations and toothbrush kits
  - Screenings (K-3, can screen whole school if <100 students)
  - FV
- Soon – RDHAP to offer school-based cleanings, sealants, FV
- Planning phase for MOUs with First 5 and California Department of Education, Early Head Start Programs (29 State Funded ECE Sites in Butte County)

# Contra Costa

## County Overview

- San Francisco Bay Area
- 716 mi<sup>2</sup> and 19 incorporated cities
- Nearly 1.5 million people, appx 25% are children and adolescents
- About 18 school districts with >170,000 children
- Around 160 elementary schools with >13,000 kindergarteners



## Children's Oral Health Program

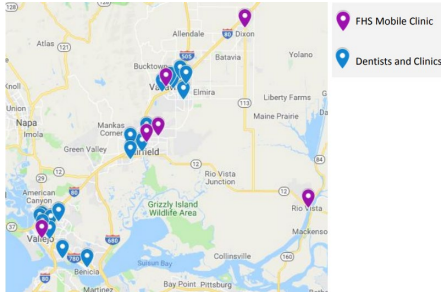
- Est. in 1977, currently in 5 school districts
  - 17-23 priority elementary schools (TK-6)
  - Several partners accepting referrals
- Team: RDAs (lead), PT dentist and/or contracted RDHs
- Services: education for all; screenings, FV, sealants to consenting students
- Strengths: longstanding relationships, leverage partnerships, provide preventive services



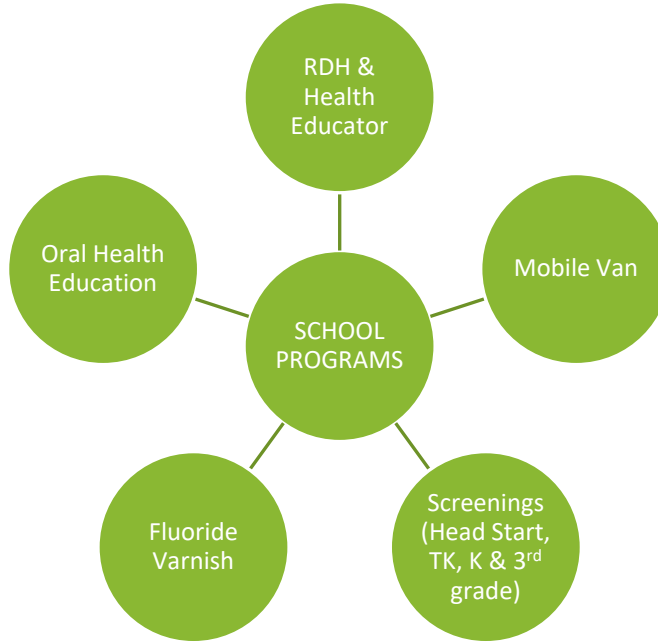
# Solano

## COUNTY OVERVIEW

- San Francisco Bay Area
- Around 500k people, 23% are children
- 7 school districts with 5,095 kindergarteners and 4,546 3<sup>rd</sup> graders
- Longstanding program with RDH

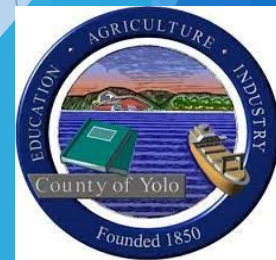


Source: Denti-Cal Referral List.



# Yolo County Oral Health Program

- ▶ ~220,000 residents (~40,000 UC Davis Students)
- ▶ 6 school districts: Davis, Woodland, West Sacramento, Winters, Esparto, Yolo County Office of Education and ~31,000 students
- ▶ 19 high-need elementary schools with >50% FRPM enrollment and ~8,000 students
- ▶ YC LOHP: Began 2017; 1.5 FTE Public Health Staff (no dentists, RDHs or RDAs)
- ▶ 2 FQHC agencies have dental programs that screen majority of high-need elementary schools
  - ❖ FV and sealants provided with active consent
  - ❖ OH education provided
- ▶ YC LOHP piloting Dignity Health grant to screen the rest of the high-need elementary schools
  - ❖ FV provided with active consent; refer for sealants
  - ❖ OH education provided
- ▶ YC LOHP coordinates screenings for other elementary schools with local dentist society member dentists
  - ❖ Passive consent; refer for FV and sealants
  - ❖ OH education provided with dental puppet shows



# Panel Discussion – Steps 1-3

# Step 1 – Preparation

- Panel questions
  - Tell us about the community partners you have and how you initiated and maintain those relationships.
  - Talk to us about the MOUs you have executed and how you have overcome any challenges with these.



### **School RNs are given consent forms for school staff and parent/guardian. Gatekeepers.**

- Challenges – Many RN's want Active consent. With updated CA Dept of Education KOHA form and OH requirement we are now asking to screen TK-3<sup>rd</sup> graders with passive consent
- Best practice – Health Education Specialist and RDH schedule and provide OH Education day in schools, TB kits and education material. deliver the paperwork, (make copies of all consent forms, KOHA forms, report cards and dental provider referral lists.
- Track all activities and material distribution on excel. Looking into new data tracker program Apricot.

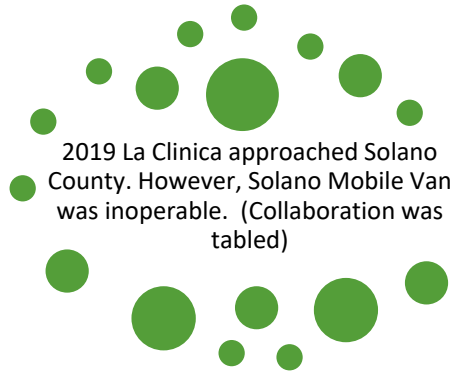
### **Partnership with Rural Health Clinic, Adventist Health Dental for School-Based Sealant Program – 3-year MOU**

- Challenges - AH partnership has high turnover.
- Best practice - monthly check in meetings and Butte County RDH coordinates schedule with RDH-AP's for sealant day.

### **Lessons learned**

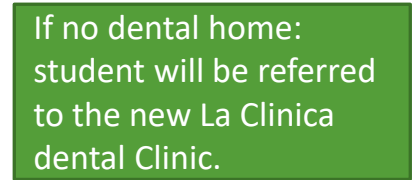
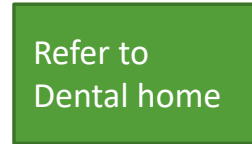
- Dedicated staff willing to be flexible and pivot at any given moment.
- Constant communication with partners and schools

# Step 1: Preparation



2021 Solano County received one time funding from the OOH and Solano reached back out to La Clinica and began the MOU to utilize new dental equipment that was purchased.

Services include: screening, fluoride varnish, sealants and minor restorative care





# Preparation cont.

- La Clinica has separate MOU with Vallejo City Unified School District to render services
  - The schools selected are 5 Title 1 schools in the first year

## Challenges:

- The process of developing the MOU

# Step 2 – Program Setup & Logistics

- Panel questions
  - Let's talk about dental referral pathways and how you have found and maintain your provider network.
  - What does your consent process look like?
  - Now let's talk about all the prep work and logistics that go into scheduling the screenings.

# Step 2: Program Setup & Logistics

## 1. Email Office Manager and/or Principal

The following information is needed to schedule services:

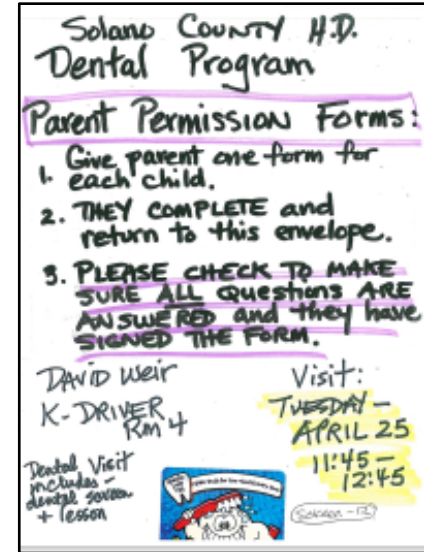
- TK/K or 3<sup>rd</sup> grade Teacher names
- Room numbers of classes
- # of students per class
- Bell schedules for the TK/K classes & 3rd grade classes and
- If there is a certain day that is better than another based on School Testing, PE, library, early release times, please let her know.

## 2. RDH drops off envelopes to each teacher that is participating

- “Active” Permission slip
- KOHA for TK/Kinder students



## 3. Keep in touch

- HES emails teachers to let them know forms were dropped off one or two days after and then HES will send a “friendly reminder” email a week to three days before visit with time and date of visit.



# Step 3 – Implementing the Program

- Panel questions
  - Now you've done all the legwork and the day of the assessments is here. Walk us through what it looks like on the day of the screenings.
  - After the screening, what does the report card look like? What are kids sent home with after the screening?

Dental Screening/FLUORIDE VARNISH  
Health Promotion and Community Wellness Bureau  
Solano Oral Health Education Program

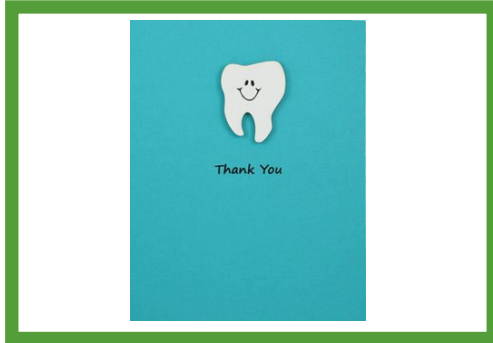
SCHOOL: \_\_\_\_\_ GRADE: PRE/T/K/ ROOM#: \_\_\_\_\_ CITY: \_\_\_\_\_



TEACHER: \_\_\_\_\_ DATE: / /2021 SCREENER: Carol Ann, RDH




STUDENT'S NAME	M	D	M	A	M	C	H	S	S	P	F	O	KOHA	EL
	1	2	3	4	5	6	7	8	9	10	11	12	13	14
1														
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NUMBER OF CHILDREN PRESENT/RECEIVING EDUCATION: \_\_\_\_\_

EL VARNISH # \_\_\_\_\_ KOHA # \_\_\_\_\_ SEALANTS/ WAX # \_\_\_\_\_ REC # \_\_\_\_\_ EDUCATION PACKET # \_\_\_\_\_



**Report of Dental Screening and/or Fluoride Varnish**

Dear Parent(s) or guardian(s) of \_\_\_\_\_

Today \_\_\_\_\_ your child received:  
 Visual Dental Screening  
 Fluoride Varnish

by a Registered Dental Hygienist with Solano Public Health. This screening does **NOT** take the place of regular dental check-ups and x-rays. Below are the results of the screening and what action you can take now. Please share this report form with your dentist.



**EMERGENCY:** Your child needs **IMMEDIATE** dental care. Contact your dentist, or call the numbers provided on the attached handout, to schedule a dental appointment. It is possible that your child has:  
 Abscess  
 A large cavity  
 Many cavities  
 Broken tooth  
 Other \_\_\_\_\_

Your child needs to see a dentist soon. Contact your dentist, or call the numbers provided on the attached handout, to schedule a dental appointment. It is possible that your child is in need of or has:  
 A complete dental examination  
 X-rays  
 Professional cleaning  
 Dental sealants  
 An orthodontic evaluation  
 Fluoride varnish  
 Possible areas of decay (cavities)  
 Other \_\_\_\_\_

Your child needs to improve brushing/flossing at home. It is recommended that your child brush their teeth twice a day (after breakfast and before bed), floss once a day (before bed) and get regular dental check-ups every 6 - 12 months.  
 Fluoride varnish recommended  
 Dental sealants recommended (For 6-year molars at next dental visit)

Your child has no obvious decay or gum disease. Continue to have your child brush their teeth twice a day (after breakfast and before bed), floss once a day (before bed) and get regular dental check-ups every 6 - 12 months.

If your child has not been to a dentist in over a year, please call and schedule an appointment soon. If you need dental care for your child, please refer to the attached handout. For additional information on taking care of your teeth and maintaining good oral health, visit the VibeSolano website or any VibeSolano social media handle.

 @VibeSolano  VibeSolano

275 Bush Ave. MS 5-240, Fairfield, CA 94533 Phone: (707) 784-8863 Fax: 84-2023

Photo: Health Division | Health and Social Services Department

# Step 3: Implementing the Program

- Be prepared with necessary paperwork
  - Dental Screening report (color coded for T/K & 3<sup>rd</sup> grade)
  - Student Roster
  - Dental Directory
  - Schedule of visits
- Bring extra of the materials you will be handing out
  - Toothbrushes, flossers, books, pencils etc.
- RDH will introduce herself, will screen first-will call two students at a time, and then do lesson.
  - HES is helping to fill out the roster and KOHA. Then will put dental report in educational packet. (Packets are put to the side to not distract, teacher will hand out to students)
  - Send "thank you" card at the end of the visit

# July 2022-May 2023 TK/K and 3<sup>rd</sup> grade numbers

## July 2022-May 2023 TK/K:

- Screened-890 students
- In-person education-1,461 students
- Educational packets provided-1,692 students
- Fluoride Varnish applications-254 students

## July 2022-May 2023 3<sup>rd</sup> grade:

- Screened-353 students
- In-person education-1,207 students
- Educational packets provided-1,322 students

## Grand total=

- Screened 1,243 students
- In-person education given to 2,668 students
- Educational packets provided to 3,014 students
- Fluoride Varnish applications on 254 students



# Summary

- **Communication**
- **Relationships and rapport**
- **Attend meetings of partner organizations**
- **Be prepared! Be flexible!**
- **Use nametags**
- **Leverage software and partner resources when you can**

# Summary

## Step 1: Community Partners & MOUs

- Community partners: teachers, schools, school nurses, libraries, local dental assistant school (externship hours), First 5
- To get partners: presentations or 1:1 meetings
- Pizza party for friendly competition between classes and buy-in
- RDHs and RDHAPs can be helpful
- Wins: diverse team (including languages), experienced staff
- Challenges: space, high admin staff turnover
- Make MOUs as long time period as possible
- Maintain relationships – even if you can't do MOU right away, keep up relationship until situation changes and you can move forward
- Work with partners for shared resources, donations, shared software licenses, etc.



# Summary

## Step 2: Dental Referral Pathways

- Maintain list of providers, keep it on your website, distribute
- Aim for local placement first, then branch regionally
- Partner with your local dental society to assist with care coordination
- Possible referral management software: Medical Dental Referral and Navigation (MDRAN), Apricot 360
  - \*\*\*Working on state referral software contract, expected 2024
- Use RDH and County CHDP dental provider list

## Summary

### Step 2: Consent

- Teachers and other champions to help get the word out and get consent forms returned
- Translate consents into needed languages
- Track negative consent as returned consent
- Send consents through Aeries
- Aim for passive as much as you can for screenings, but respect community needs to start with active and keep up communication to switch to passive when possible
- FV and other services require active consent
- Use robo texts to increase consent returns
- Challenges: limited staffing, SCOHR

## Summary

### Step 2: Day-of

- Accept late consents
- Collect all bell/event schedules from school; schedule two weeks ahead
- 15 minutes dedicated per class
- Redline the list of names for “no” consents
- Detailed process and flow of steps
- Transport paperwork in a locked bag

## Summary

### Step 3: Implementing the Program

- Double-check all your forms
- Bring extra materials
- Send thank-you card at end of visit
- Be flexible to adapt to each school's needs
- Pass out educational materials and toothbrush kits
- Can use nametags to ensure correct name
- Report cards get sent home with each student– level of decay and what that means; data is also in a screening list; using a referral management software helps here
- Level 3 decay gets support from school nurse to ensure care is obtained
- Include a tooth chart in the report card for parents

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Thank you!