

Communities of Practice Questionnaire

1.	Name of your organization	City of Berkeley, Public Health Division		
2.	What is the structure/type of your organization? Please select from the following.			
	☐ County Health Department	□ FQHC □ Non-profit		
	☑ Other (please describe)	Local Health Jurisdiction (City)		
3.	Please briefly describe the history/background of the program.			
	The Berkeley Dental Sealant Program started in early 2001 in collaboration with the Alameda County Office of Dental Health (AC ODH). The program provides screening, sealants, and other dental services to all 11 elementary schools that form part of the Berkeley Unified School District (BUSD). The City of Berkeley contracts with AC ODPH for delivery of dental services, while the outreach portion is conducted by program staff.			
4.	Which population is being served by the program? The population served by the Berkeley Dental Sealant Program include 2nd and 5th grade students from the 11 BUSD elementary schools. Services are provided at no cost to students regardless of insurance status.			
5.	What type of service delivery model is/are used in the program? Please select all that applies.			
	☑ Dental clinic model (e.g. per	manent setting) 🗵 Mobile- portable model		
	☐ Virtual model (e.g. telehealt	h/teledentistry) □ Event-based model		
	☑ Outreach and education mo	del		

What type of dental a	nd oral healt	h services are provided? Please select all that applies.		
⊠ Screenings ⊠ Cle	eanings 🗵	Fluoride varnish ⊠ Sealants □ X-rays □ Fillings		
☑ Referrals to dental	☑ Referrals to dental and oral health services ☑ Care coordination/case management			
☑ Patient education	☐ Other (pl	ease describe)		
7. What type of integration	on service is	/are provided? Please select all that applies.		
☐ Medical services	☐ Behaviora	aI health services □ Vision services □ Hearing services		
☐ Transportation ser	vices □ Tr	anslation services □ Nutrition services ☑ None		
8. Who are the staff that	supports the	e program? How many staff are involved in the program? What are their roles?		
Staff	Number	Role		
	of Staff			
Dentist				
Dental Hygienist	1	Visual dental exam, screenings, sealant application, and other dental services.		
Dental Assistant	1	Assists the hygienist with screenings, sealant application, and other dental		
		services. In addition, records findings and assists with logistical flow of students		
		and education.		
Non-dental clinical staff				
Community health workers	1	Assists on screening day, provides individual education, and follows up with		
		outreach to parents/guardians of 3, 4s (e.g., severe or emergency dental		
		cases) to assure dental visits and appropriate referral. Also, helps with follow-		
		up to ensure		
Other		compliance.		
9. What is the source of	funding?			
☐ Foundation/orga	•	nt		
	_			
	_	duals, businesses)		
	, -			
☑ Other (please describe) City General Funds (~\$50,000/year)				

10. How is the program evaluated?

All student information is entered into the Alameda County electronic records system. In addition, the system is used to record all screening and treatment outcomes for all students. At the conclusion of all dental services, data is aggregated and a tally of all services rendered is recorded. Percentages are calculated between current and past years to assess changes in trends for the various indicators, best practices, lessons learned, and future procedural items that can be implemented for the following year.

11. Are there any reports?

At the end of the school year, aggregate reports are produced and provided to each school. The report includes aggregate data on number of screenings, consents, tooth status, history of caries, treatment urgency, children with sealants at time of exam, children eligible for sealants (non-kindergarten), children receiving sealants, number of retention checks, early childhood caries, permanent teeth caries, primary teeth caries, fluoride/prophys, treatment outcomes, and teeth sealed.

12. Are there any barriers/challenges to your program?

With any program, there are barriers to achieving optimal care and efficiency. These are some areas identified by staff:

- Work schedule (9AM-5PM) make it difficult to do phone outreach as most parents/guardians are at work.
- Lack of online health record, thus continued use of paper forms is required.
- No central database that is linked to wider Public Health records in order to streamline care.
- Low turn-in rate/compliance for treatment consent forms.
- Family is insured, but there is a low utilization rate of insurance and/or dental provider.
- Missed appointments.
- Language barriers; staff do not speak all the languages of the student population so setting up appointment and receipt of services can be difficult.