

Communities of Practice Questionnaire

1. Name of your organization Contra Costa Health Services Family, Maternal & Child Health Program – Community Oral Health Program

2. What is the structure/type of your organization? Please select from the following.

County Health Department FQHC Non-profit

Other (please describe) _____

3. Please briefly describe the history/background of the program.

The Children's Oral Health Program is part of the Family, Maternal and Child Health (FMCH) Programs within Contra Costa Health Services. It was founded in 1977 to provide preventive dental services to low-income children in a school-based setting within several parts of the county. The program works in collaboration with districts, pre-school and school-age sites, and community partners to increase access to low or no cost oral health services. This includes:

1. Providing oral health education, screenings, and application of fluoride varnish and sealants for children in a school setting;
2. Coordinating linkages to dental services with two community partners 1) Ronald McDonald Dental collaborative: John Muir, La Clinica and Lifelong agencies and 2) Contra Costa Health Services, School-Based Dental program;
3. Working with local Registered Dental Assistant (RDA) schools to develop RDA workforce

More recently, the program name was updated to reflect the Prop 56 local oral health planning process. Combined, with Prop 56 and the Children's Oral Health program-the name was updated to the "Community Oral Health Program."

4. Which population is being served by the program?

Children's Oral Health: Pre-K – 6th grade
Children's Oral Health – Workforce development component: College students
Prop 56: Community Partners

5. What type of service delivery model is/are used in the program? Please select all that applies.

- Dental clinic model (e.g. permanent setting) Mobile- portable model
 Virtual model (e.g. telehealth/teledentistry) Event-based model
 Outreach and education model

6. What type of dental and oral health services are provided? Please select all that applies.

- Screenings Cleanings Fluoride varnish Sealants X-rays Fillings
 Referrals to dental and oral health services Care coordination/case management
 Patient education Other (please describe) _____

7. What type of integration service is/are provided? Please select all that applies.

- Medical services Behavioral health services Vision services Hearing services
 Transportation services Translation services Nutrition services None

8. Who are the staff that supports the program? How many staff are involved in the program? What are their roles?

Staff	Number of Staff	Role
Dentist	.3 FTE (1 total)	1. Provides leadership and general policy direction for clinical oral health activities within FMCH Programs including reviewing and approving clinical protocols, implementing quality assurance activities and biannual clinical observations of oral health staff. 2. Assures licensed oral health professionals are following and are following infection control and the California Dental Practice Act, including dental sealants and fluoride varnish application. 3. Reviews and approves program protocols and procedures, chart and/or case reviews for adequacy of assessment, documentation and appropriate intervention. 4. Conducts oral health visual screenings of children that participate in the Children’s Oral Health Program, including placement of fluoride varnish. 5. Provides clinical supervision of licensed oral health staff in Children’s Oral Health during select sealant clinics in participating schools. 6. As time allows and needed, represents the Community Oral Health Program on oral health work groups, coalitions, and advisory boards.
Dental Hygienist	.8 FTE (2 total)	1. Performs oral health assessments for children participating in Public Health’s Children’s Oral Health Program. 2. Provides oral hygiene instruction to patients. 3. Provides clinical therapeutic hygiene services such as teeth cleanings, sealants, scaling, or other necessary oral hygiene services 4. Works closely with program staff to set up and operate portable dental equipment 5. Follows appropriate sterilization protocol for all procedures and insures proper disposal of contaminated materials 6. Coordinates day to day clinic operations amongst teachers, children, and staff, and RDA volunteers
Dental Assistant	2.1 FTE (3 total)	Lead RDA: 1. Provides lead direction to Registered Dental Assistants and other staff in the Community Oral Health Program. 2. Plans and coordinates program activities, as well as the work of the Registered Dental Assistants during school visits. 3. Communicates changes in policies and procedures to Registered

- Dental Assistants and assists administration in providing necessary training.
4. Provides feedback to administration for Registered Dental Assistants and participates in performance evaluations.
 5. Conducts oral health education for children, parents, and others at outreach events such as health fairs or other community events and/or activities.
 6. Provides preschool and elementary school teachers and children with oral health education on dental disease prevention, resources and referrals to low-cost or no-cost dental care.
 7. Assists with dental screenings for children and youth to determine their oral health status and provide them with resources to Denti-Cal providers, low-cost or no-cost dental care.
 8. Provides case management services for high-risk children who have Denti-Cal, are uninsured, are undocumented, and/or are living in low service provider areas.
 9. Coordinates care for clients that do not meet the criteria for Denti-Cal Programs and links them with local oral health programs that are no-cost or low-cost.
 10. Works with other programs in the Public Health Division to enhance their knowledge of dental disease, treatment and referral sources.
 11. Represents the Community Oral Health Program on oral health work groups and coalitions.
 12. Demonstrates understanding of program protocols and procedures, chart and/or case reviews for adequacy of assessment, documentation and appropriate intervention.
 13. Participates in trainings for this classification, including quality assurance, case management, infection control trainings, CPR, and California Dental Practice Act.
 14. Under the clinical supervision of the Public Health Registered Dental Hygienist, performs duties assigned to Registered Dental Assistants in accordance to the California Dental Practice Act such as placing dental sealants and fluoride varnish for eligible children.
 15. Sets up and operates portable dental equipment, including break down and proper storage of portable dental equipment and supplies.
 16. Follows appropriate infection control protocols for all procedures, insures proper disposal of contaminated materials.
 17. Responsible for inventory and ordering of dental supplies and paperwork, including consents, parent brochures, dental health report cards, and program handouts.
 18. Acts as a liaison between COHP and School-Based Health Center staff.
 19. Prepares regular reports on program activities to document progress toward achieving program goals and objectives. Ensures their accuracy prior to submission to Program Manager.
 20. Meets the essential functions of the Lead Registered Dental Assistant classification for Contra Costa County.

RDA

1. Conducts oral health education for children, parents, and others at outreach events such as health fairs or other community events and/or activities.
2. Provides preschool and elementary school teachers and children with oral health education on dental disease prevention, resources and referrals to low-cost or no-cost dental care.
3. Assists with dental screenings for children and youth to determine their oral health status and provide them with resources to Denti-Cal providers, low-cost or no-cost dental care.
4. Provides case management services for high-risk children who have Denti-Cal, are uninsured, are undocumented, and/or are living in low service provider areas.
5. Coordinates care for clients that do not meet the criteria for Denti-Cal Programs and links them with local oral health programs that are no-cost or low-cost.

		<ol style="list-style-type: none"> 6. Works with other programs in the Public Health Division to enhance their knowledge of dental disease, treatment and referral sources. 7. Represents the Community Oral Health Program on oral health work groups and coalitions. 8. Demonstrates understanding of program protocols and procedures, chart and/or case reviews for adequacy of assessment, documentation and appropriate intervention. 9. Assists lead RDA in the assessment of availability of dental services by Denti-Cal providers and updates the list of Denti-Cal providers in Contra Costa County. 10. Participates in trainings for this classification, including quality assurance, case management, infection control trainings, CPR, and California Dental Practice Act. 11. Under the clinical supervision of the Public Health Registered Dental Hygienist, performs duties assigned to Registered Dental Assistants in accordance to the California Dental Practice Act such as placing dental sealants and fluoride varnish for eligible children. 12. Sets up and operates portable dental equipment, including break down and proper storage of portable dental equipment and supplies. 13. Follows appropriate infection control protocols for all procedures, insures proper disposal of contaminated materials. 14. Prepares regular reports on program activities to document progress toward achieving program goals and objectives. 15. Meets the essential functions of the Registered Dental Assistant classification for Contra Costa County.
Non-dental clinical staff (Clerk)	.5 FTE (1 total)	<ol style="list-style-type: none"> 1. Preparing documents for 20 + Children's Oral Health school sites. This includes inputting information from parent/caregiver consents, generating and printing screening and sealant forms, and urgency treatment list 2. Inputting children's dental data into excel database 3. Creating and retrieving reports, which highlights how many children participated, educated, assessed, and who received fluoride varnish
Community health workers	None	
Epidemiologist	0.1 FTE (in-kind)	<ol style="list-style-type: none"> 1. Developed Children's Oral Health database 2. Responsible for reviewing the accuracy of the oral health data collected
Other - Manager	1.0 FTE (1 total)	<ol style="list-style-type: none"> 1. Provides oversight of activities and administration of both projects within the Community Oral Health Program.

9. What is the source of funding?

- Foundation/organization grant
 - Public funding (e.g. local, state, federal)
 - Private donations (e.g. individuals, businesses)
 - Other (please describe) County General Fund
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10. How is the program evaluated?

We currently evaluate certain components of the program. This includes:

- Oral health education presentations to children – a classroom evaluation is provided to the teachers
- Sealant retention checks are completed by team at the end of each school year
- Comprehensive data collection system developed and implemented for services rendered to children

11. Are there any reports?

Yes, in collaboration with the CCHS Epidemiologist, an extensive database was developed to capture per school site (approximately 20 schools and 4 districts). Database captures:

- How many children participated
- Number of children educated
- Dental assessments
- Fluoride application
- Sealants
- Emergency referrals
- Parents educated
- Principals educated
- # of community events
- # of kindergarten oral health assessments completed

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

- Sustainability of staffing model
- Infrastructure within internal system: FQHC dental clinics and Children's Oral Health not housed in same department – different program approaches
- Temporary RDH staff classifications

13. What are the lessons learned and/or are there any plans for improvement?

PROGRAMMATIC LESSONS LEARNED

Oral Health Education:

- Increase parent awareness of program
- Participate in teacher staff meeting
- Integrate child friendly characters as part of workflow
- Implement evidenced-based curriculum
- Add oral health pictures for higher grades
- Increase parent, caregiver, legal guardian education
- Increase presence at school site at the beginning of the school year
- Provide pamphlets to parent, caregiver, legal guardian and teachers
- Disclosing tablets
- Ensure oral health program is implemented in a classroom w/ sink

Screenings and Fluoride Varnish:

- Incentivize parents, caregivers, legal guardians to turn in consents
- Improve consistent workflow between all staff
- Improve teacher/ staff response to program

Sealants:

- Can last up 10 years but have experienced that it only last 3 years

PLANS FOR IMPROVEMENT

Programmatic Plans:

- Shifting from educating children and adding parents, caregivers, and/or legal guardians and teachers component
- Identifying opportunities for sustainable funding, which includes permanent positions
- Working closely with school districts versus coordinating directly with school sites i.e., how to institutionalize oral health as a priority within a school district system
- Collaborating with other local dental FQHC agencies to increase school sites receiving sealant program
- Implement care coordination component

Administrative Plans:

- Assessment of current staffing model – maximizing staff utilization

If you are interested in learning more about this program, please contact COHTAC at oralhealthsupport@ucsf.edu.