SEAL INDIANA Final Report: State Oral Health Collaborative Systems Grant Program (SOHCS)

Indiana University School of Dentistry is extremely grateful for funding made available to the SEAL INDIANA program by the State Oral Health Collaborative Systems Grant Program. Without this funding the program may not have been sustained during this time period. Grants totaling $291,738 were allocated between October 2003 and August 2007.

SEAL INDIANA is a not-for-profit state-wide program of Indiana University School of Dentistry that works in cooperation with Indiana dentists and Indiana State Department of Health to:

1. Locate rural and urban children who are not receiving dental care
2. Provide oral examination, with parental consent, and when indicated, apply sealants and fluoride varnish for prevention of dental caries
3. Help to find local dental homes to insure restorative services and continuity of care
4. Provide service-learning experiences for dental and dental hygiene students to foster greater understanding of issues related to community oral health and access to dental care
5. Engage in research that will promote optimal oral health and more equitable access to care

SEAL INDIANA has, from its inception in March 2003, been a cooperative program that engaged Indiana State Department of Health and Indiana University School of Dentistry in its development. Faculty members and State Health Department staff were members of the planning committees. Each institution funded half of the start-up costs. Both institutions now participate in guiding its progress.

Evaluation takes place on many levels and is tied to the program goals and Healthy People 2010 Objectives.

Healthy People Objectives relevant to this program that serve as goals include:

- 21-1 Reduce the proportion of children and adolescents who have dental caries experience in their primary or permanent teeth. Target: 11 percent
- 21-2 Reduce the proportion of children, adolescents, and adults with untreated dental decay. Targets vary by age category.
- 21-8 Increase the proportion of children who have received dental sealants on their molar teeth. Target 50 percent
- 21-12 Increase the proportion of children and adolescents under age 19 years at or below 200 percent of the Federal poverty level who received any preventive dental service during the past year. Target: 57 percent
- 21-13 Increase the proportion of school-based health centers with an oral health component. No target established

To enable measuring against Healthy People 2010 objectives, monthly reports are prepared to quantify and document the number of sites served, children examined, sealants, x-rays and fluoride varnish treatments provided. These monthly reports are submitted to Indiana State Department of Health and University officials. Epidemiological data are collected on demographics, oral health status and services provided. Data were entered into scan-able records and, as SEAL INDIANA returned to sites year after year, information was used to track sealant retention and the potential impact of SEAL INDIANA on the ultimate oral health of the children.
being served. Subjective evaluation was also sought from schools, migrant programs, Head Start and community health centers staff, to assess their perception of the importance of oral health and also their perception of the SEAL INDIANA program.

**Progress Narrative**

**September 1, 2006 through August 31, 2007**

**Goals and Achievements**

SEAL INDIANA is a not-for-profit state-wide mobile dental sealant innovation that incorporates collaboration, education, treatment, advocacy, research and service-learning into its program. A 40’mobile clinic with two chairs is the clinical center for the program, although beginning in 2007, portable equipment is predominantly being used. Each of the 100 fourth year dental students join the staff for three day required rotations. Some of the 50 second year dental hygiene students worked one day with the mobile team. Both groups of students prepared for the experience by doing Web searches to learn more about the community where they will work, the racial and socio-economic characteristics of the community and the identity of the legislators who serve the people of the community where they will work. The students also learned about the agencies they would be serving; Title I schools, Community Health Centers and Head Start Programs. Following the rotation, students engage in guided reflection, and evaluation.

During this, the final funding period, from September 2006 through August 2007, extensive preventive services have been provided for Indiana children from low-income families. The following table summarizes services during that period, the previous period and for the entire time since SOHCS funding began in 2003.

**Oral Health Services Provided by SEAL INDIANA during SOHCS Funding Periods:**

<table>
<thead>
<tr>
<th></th>
<th># sites</th>
<th># examined</th>
<th># Sealants</th>
<th># F Varnish</th>
</tr>
</thead>
<tbody>
<tr>
<td>9/03 – 8/04</td>
<td>164</td>
<td>3225</td>
<td>5550</td>
<td>2007</td>
</tr>
<tr>
<td>9/04 – 8/05</td>
<td>152</td>
<td>2590</td>
<td>4063</td>
<td>1848</td>
</tr>
<tr>
<td>9/05 – 8/06</td>
<td>167</td>
<td>3088</td>
<td>3537</td>
<td>2575</td>
</tr>
<tr>
<td>9/06 – 8/07</td>
<td>162</td>
<td>2697</td>
<td>3983</td>
<td>2235</td>
</tr>
</tbody>
</table>

**Characteristics of the Population Served during SOHCS Funding Periods:**

<table>
<thead>
<tr>
<th></th>
<th>Head Start Children</th>
<th>% Medicaid</th>
<th>% Untreated Caries (Ages 6-18 yrs)</th>
<th>Under-represented Minorities</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number Examined</td>
<td>Few-Moderate</td>
<td>Severe</td>
<td>All</td>
</tr>
<tr>
<td>9/03 – 8/04</td>
<td>547</td>
<td>52%</td>
<td>33%</td>
<td>17%</td>
</tr>
<tr>
<td>9/04 - 8/05</td>
<td>497</td>
<td>52%</td>
<td>38%</td>
<td>19%</td>
</tr>
<tr>
<td>9/05 - 8/06</td>
<td>585</td>
<td>58%</td>
<td>38%</td>
<td>18</td>
</tr>
<tr>
<td>9/06 – 8/07</td>
<td>520</td>
<td>62%</td>
<td>32%</td>
<td>24%</td>
</tr>
</tbody>
</table>
Fulfillment of Performance Measures

Performance Measure 1: To increase the percentage of eligible children from low income families who receive an oral examination by SEAL INDIANA

- The number of children receiving examinations and preventive services through SEAL INDIANA remained relatively constant through the years of funding through the SOHCS grant. The program worked at near capacity, considering that staffing was predominantly fourth year dental students. A new group of students entered the rotation each week; therefore it is not the most efficient method for delivering services, but it is an effective method of teaching dental students about the complexities of disparities in access to care. Ultimately, recruitment of children requires the cooperation of school nurses, Head Start health coordinators and directors of community health centers. SEAL INDIANA surveys sites about their level of satisfaction with the program. This survey accompanied a thank-you letter and summary of the services that were completed at their site. Sites have reported an extremely high level of satisfaction with SEAL INDIANA’s staff and services. Following are a sample of comments from school nurses regarding SEAL INDIANA’s services:
  - Everyone working with you was impressive.
  - The mobile unit staff was very caring and understanding.
  - Very friendly personnel and bilingual to meet our children’s needs and understanding.
  - Our staff and parents really appreciate your services.
  - Paper consent forms are much improved!
  - Great service! Wish you came to all my elementary schools.
  - Thanks for being efficient and flexible!
  - I really appreciate the opportunity you have given our schools to be part of such a great program. We are looking forward to next year!
  - We appreciate your willingness to alter fees when needed.
  - This is a wonderful chance for our children to learn the importance of good dental care.
  - I have enclosed a picture that appeared in our local paper.
  - Thank you for offering this very valuable service.
  - Wonderful program that is very beneficial to the kids. Thanks!

Performance Measure 2: Inform, educate and empower people about health issues

Dental students working with SEAL INDIANA provide classroom education for the Title I schools where services are being provided. Numerous local newspapers have included information about SEAL INDIANA including descriptions of dental sealants and their role in oral health. SEAL INDIANA’s work with the Special Olympics State Games includes individualized educational work with the athletes, in addition to the preparation of a mouth guard and directions on its appropriate use.

Performance Measure 3: Link children to needed oral health services and assure the provision of oral health services when otherwise unavailable.

SEAL INDIANA has a program of follow-up for children found to have severe dental caries. Dr. Armando Soto, a dentist who is bilingual English/Spanish, telephones the parents of each child who has severe caries and/or pain and infection. Dr. Soto helps the parents to understand the importance of oral health and explores the reasons that the child has not received
dental services. He gives parents information about eligibility for Hoosier Healthwise (Indiana’s Children’s Health Insurance Program) and supplies a toll-free number where they can apply for coverage. Dr. Soto also helps the families find a local provider or clinic that will accept Medicaid / Hoosier Healthwise reimbursement. Dr. Soto is making follow-up calls after several months to determine the status of the child’s access to dental treatment.

Performance Measure 4: Assure a competent dental public health and personal health workforce.
SEAL INDIANA is committed to fostering a new generation of dental professionals through service-learning. Fourth year dental students serve a three day rotation with SEAL INDIANA, and volunteer students, faculty and staff provide sealants in Indianapolis homeless shelters that house children. The combination of service and learning is powerful. The two factors work synergistically to create a student who has a better understanding of the complexity and interrelationship of social and health problems and feels more committed to addressing the underlying issues behind the problems. By integrating service and learning, students learn to respect other cultures, learn how to work collaboratively with other people on real problems and realize that their lives and work can make a difference. This experiential exercise is intended to foster dental professionals who are more responsive to the oral health needs of underserved populations and to increase the workforce available to provide oral health services for children in community based settings through programs such as SEAL INDIANA.

In preparation for their rotation with SEAL INDIANA, fourth year dental students completed an on-line exercise that familiarized them with various social service agencies and teaches them to find public health information with internet resources (See appendices). Students come to the rotation prepared to understand Medicaid, Indiana’s Children’s Insurance Program (SCHIP), the federal poverty guidelines, and the form and function of Title I schools, community health centers and Head Start programs. Following the rotation dental and dental hygiene students reflect on the experience that they have had working with SEAL INDIANA. Following are some of their comments.

• This rotation is an eye opener in that, as dental care providers we especially dental students only see the patients that come through our door. We rarely think of all of the people in the community that do not receive dental care.
• It certainly helped not to just treat areas within the inner city, but see how programs run in more rural areas (i.e. like my hometown).”
• The knowledge that I gained through this experience was priceless. It gave me a belief in mankind that although small as a dental community we can make a difference in the life of people.”
• I learned that there is a need for dentists and that not everyone can afford them.
• I learned that if I see a child with gross caries, I really think it’s best to have a 1-on-1 conversation with that child’s parents
• This experience was good because it helped me realize what need there is out there for dental service and how we need to be more willing to participate in helping to promote care for children.
• This rotation helped me to learn about Head Start and other program in the community and what they entail.
• I was amazed at how many children go without dental care. I was grateful to have participated with the program. I will think twice about judging these poor children who honestly don’t know any better.
• I came to appreciate the work that the faculty and other staff do quite often without any help from students. I’ve developed a greater respect for their charity. I was really able to see that this work does have an impact on the lives of these children.
• I plan to continue to volunteer at these sorts of things and even am trying to get the schools in my county to agree to bring SEAL INDIANA to our schools. I will continue to help them and plan to participate after graduation as well.
• I think one of the strengths of SEAL INDIANA is how many rural areas they have reached. Look at the pins in the map, it’s amazing.
• I plan to be involved with the community locally and globally; SEAL INDIANA offered insights about how I can do that.
• I didn’t know there were so many people in Indiana who can’t speak English. Through this rotation I learned where to find resources about social service agencies.
• What would happen if more dentists actually would take a hit to give their services at least once a month to the disadvantaged? Sounds to me like this might be something to consider.

Performance Measure 5: Research for new insights and innovative solutions to children’s oral health problems

Because the program has collected extensive data on the children who have been examined, SEAL INDIANA is able to provide Indiana State Department of Health with useful epidemiological data. Information was provided to Indiana State Department of Health, including the percentage and distribution of children with few to moderate untreated dental cavities and the percentage with emergency need for dental services.

Each February since 2004, fourth year dental students who served a three-day rotation with SEAL INDIANA met for a day of learning about the oral health policy process and then took action by visiting the Indiana State Legislature and speaking with legislators about important oral health policy issues. This activity is a part of the students’ SEAL INDIANA rotation and is intended to enhance their knowledge, skills and intention to enter into oral health policy advocacy activities.

Please do not hesitate to contact me for additional information.

Prepared by
Karen M. Yoder, RDH, MSD, PhD
Associate Professor and Director, Division of Community Dentistry
Department of Preventive and Community Dentistry
Indiana University School of Dentistry
kmyoder@iupui.edu