Professional Organization Forums on Head Start and Oral Health

Association of State and Territorial Dental Directors (ASTDD) Head Start Oral Health Project

Maternal and Child Health Bureau (MCHB) Liaison with Head Start Bureau

Ohio Head Start Special Project

Head Start Dental Screening Triage / Training Project

Regional Forums on Enhancing Partnerships for Head Start and Oral Health

Professional Organization Forums on Head Start and Oral Health
Head Start and Oral Health Partnership Projects

Abstract

In 1999 the national Head Start Partners Oral Health Forum was convened by Head Start, WIC, HRSA, HCFA to focus attention on early childhood oral health. The purpose of the Forum was to discuss strategies for improving oral health status among low-income children. Several papers were presented that reviewed current evidence related to oral health and nutrition, caries risk assessment and prevention, and access to oral health services. Also, this National Forum addressed issues and outlined strategies to increase collaboration at the federal, state, and local levels to improve oral health status and enhance access to oral health care services. Participants at the Head Start and Partners Oral Health Forum expressed support for replication of this type of activity at the regional, state, and local levels across the country.

One outcome of this Forum was the formulation of an Intra-Agency Agreement between the Administration for Children and Families (ACF), Head Start Bureau (HSB) and Maternal and Child Health Bureau (MCHB), HRSA to develop linkages to support oral health in Head Start. Several activities were initiated in 2001 and 2002. These projects include:

- Maternal and Child Health Bureau (MCHB) Liaison with the Head Start Bureau (HSB)
- Association of State and Territorial Dental Directors (ASTDD) Head Start Oral Health Project (assessment of state activities, identification of model programs and support of state forums)
- Regional Forums on Enhancing Partnerships for Head Start and Oral Health (to develop strategy plans for regional office service areas)
- Professional Organization Forums on Head Start and Oral Health (to enhance awareness of Early Head Start and Head Start Program needs)
- The Ohio Head Start Special Project
- Head Start Dental Screening / Triage Training Project – Chester County, PA

Summary information will be provided for all of the projects at the round table session. The round table presentation will focus on the ASTDD Head Start Oral Health Project the Regional Forums on Enhancing Partnerships for Head Start and Oral Health, and Professional Organization Forums on Head Start and Oral Health.

Participants are invited to share their current activities and involvement in oral health initiatives with Head Start at the local, state, regional, and national level.
# Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A.</strong> Background</td>
<td>1</td>
</tr>
<tr>
<td><strong>B.</strong> Maternal and Child Health Bureau (MCHB) Liaison with the Head Start Bureau (HSB)</td>
<td>3</td>
</tr>
<tr>
<td><strong>C.</strong> Association of State and Territorial Dental Directors (ASTDD) Head Start Oral Health Project</td>
<td>4</td>
</tr>
<tr>
<td><strong>D.</strong> Regional Forums on Enhancing Partnerships for Head Start and Oral Health</td>
<td>6</td>
</tr>
<tr>
<td><strong>E.</strong> Professional Organization Forums on Head Start and Oral Health</td>
<td>9</td>
</tr>
<tr>
<td><strong>F.</strong> The Ohio Head Start Special Project</td>
<td>10</td>
</tr>
<tr>
<td><strong>G.</strong> Head Start Dental Screening / Triage Training Project – Chester County, PA</td>
<td>12</td>
</tr>
</tbody>
</table>
A. Background

The Head Start and Oral Health Partnership Projects are a series of initiatives supported by an Intra-Agency Agreement. This Intra-Agency Agreement is between the Administration for Children and Families Administration on Children, Youth and Families, Head Start Bureau (HSB) and the Public Health Service (PHS), Health Resources and Services Administration, Maternal and Child Health Bureau.

The Head Start and Oral Health Partnership Projects build on previous activities occurring over many years in the field of oral health and early childhood development. These collaborations involve an array of Federal agencies, including the Health Resources and Services Administration (HRSA), the Administration for Children and Families (ACF), and the Center for Medicare and Medicaid Services (CMS, formerly the Health Care Financing Administration [HCFA]).

From 1966 to the mid-1990s, MCHB/PHS/HRSA and its predecessor dental programs had a close working relationship with Head Start. MCHB dentists provided dental training and technical assistance (T/TA) to Head Start programs across the country, and also assisted the HSB in developing meaningful dental program policies and standards. Dental T/TA networks were developed using the infrastructure of established State-run dental programs, professional dental organizations and training institutions representing dentists and dental hygienists. Appropriate best practice interventions and training programs were developed to support the dental consultant network assisting grantees to meet these needs. Dental consultant manuals were developed and annual workshops were conducted to train new consultants and to develop standardized interventions to address problems common to several grantees. In 1993, in an effort to consolidate T/TA services and to better meet the needs of Head Start grantees, the HSB ended its relationship with MCHB and revised its T/TA system to include health.

Oral health issues among economically disadvantaged children have gained considerable interest among various Federal programs recently. A review of Head Start Program Information Report (PIR) data indicates that access to oral health services is the number one health problem affecting Head Start children and families. It is the most frequent health concern expressed by ACF Regional Office Program Specialists, Head Start Directors, Health Managers, and parents. In 1994, Early Head Start (EHS), a new program for low-income families with infants and toddlers and pregnant women was established. EHS programs are required to follow the Head Start Program Performance Standards, and thus are expected to assist parents in obtaining dental services for their young children. These programs also report difficulties in obtaining both preventive and treatment services for pregnant women, infants, and toddlers.

In the past few years, improving oral health status and expanding access to oral health services, especially for young children, have become a growing national concern. Collaborative activities at the national, state, and local level have developed out of a growing understanding that oral health has a clear and long-range impact on a child’s general health and well-being and influences physical and mental health, social and emotional growth, and readiness to learn.

Recent Federal-level activities to improve early childhood oral health have included the first-ever Surgeon General’s Report on Oral Health and a U.S. Surgeon General’s Workshop and Conference on Children and Oral Health. Also, the National Institutes of Health held a consensus development conference on caries interventions and the Agency for Healthcare Research and Quality conducted a review of the evidence for caries management. Healthy People 2010 has focused attention for the next decade with targeted objectives to eliminate oral health disparities among young children and their families. Programs concentrating on specific needs of children,
including health programs such as Medicaid and State Children’s Health Insurance Programs (SCHIP), and educational programs such as Head Start and Early Head Start, have also emphasized ways of addressing the oral health needs of their enrollees.

In 1998, MCHB and the Health Care Financing Administration (HCFA) developed a joint Oral Health Initiative to address the oral health needs of children enrolled in Medicaid and the State Child Health Insurance Program (S-CHIP). In 1999, representatives from MCHB and the Special Supplemental Nutrition Programs for Women, Infants and Children (WIC) approached the HSB to discuss strategies for improving the oral health status of low-income children. An Oral Health Forum was held in September of that year to develop strategies that increase collaboration at the federal, state, and local levels and to improve oral health services for low-income children and families.

Each of the Federal partners supported the development of three research papers that were presented at the National Forum. The papers addressed oral health and nutrition, caries risk assessment and prevention, and access to oral health services, and were subsequently published in the summer 2000 issue of the Journal of Public Health Dentistry.

The importance of prevention and early risk assessment was described in the paper addressing caries prevention. The paper stated that in general, all children enrolled in WIC, Head Start and Early Head Start should be considered to be at high risk for tooth decay. Furthermore, early intervention, screening, risk assessment and preventive programs in WIC, Head Start and Early Head Start hold a great deal of promise for preventing tooth decay in these high-risk populations.

A paper entitled “Access to Dental Care for Head Start Enrollees” was also presented at the Forum. It suggests that the problem of access to care should be approached by linking the activities of child advocates, dental groups, including dental hygienists, dentists, and dental health foundations, WIC programs, early childhood development programs, and others concerned with child health.

This National Forum also addressed issues and outlined strategies to increase collaboration at the Federal, State, and local levels to improve oral health status and enhance access to oral health care services for low-income children and families. Participants at the National Forum expressed support for replication of this type of Forum at the regional, state, and local levels across the country.

An important outcome of the National Forum was the formulation of an Intra-Agency Agreement between the Administration for Children and Families (ACF), Head Start Bureau (HSB) and Maternal and Child Health Bureau (MCHB), HRSA to develop linkages to support oral health in Head Start. Several activities were initiated in 2001 and 2002. These projects include:

- Maternal and Child Health Bureau (MCHB) Liaison with the Head Start Bureau (HSB)
- Association of State and Territorial Dental Directors (ASTDD) Head Start Oral Health Project (assessment of state activities, identification of model programs and support of state forums)
- Regional Forums on Enhancing Partnerships for Head Start and Oral Health (to develop strategy plans for regional office service areas)
- Professional Organization Forums on Head Start and Oral Health (to enhance awareness of Early Head Start and Head Start Program needs)
- The Ohio Head Start Special Project
- Head Start Dental Screening / Triage Training Project – Chester County, PA
B. Maternal and Child Health Bureau (MCHB) Liaison with the Head Start Bureau (HSB)

Project Summary and Current Project Status

John Rossetti, DDS, MPH, Chief Dental Officer, Maternal and Child Health Bureau (MCHB), HRSA continues to serve as a liaison with the Head Start Bureau (HSB). He and other representatives from MCHB meet periodically with managers and staff of the Head Start Bureau (HSB).

Through these regular meetings they are able to discuss the progress of the projects supported by the Intra-Agency Agreement between the Administration for Children and Families (ACF), Head Start Bureau (HSB) and Maternal and Child Health Bureau (MCHB), HRSA. They have the opportunity to consider past and current activities and strategize about future directions to improve the oral health component of the Head Start program. They are interested in promoting model programs at the national, regional, state, and local levels in Head Start and Early Head Start. They look forward to expanding prevention, increasing access to dental care, and enhancing oral health education in Head Start through future collaborative efforts.

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C. Association of State and Territorial Dental Directors (ASTDD) Head Start Oral Health Project

Project Introduction and Summary

The Association of State and Territorial Dental Directors (ASTDD) has been supported to assess current relationships between state oral health programs, Medicaid/SCHIP dental programs and Early Head Start/Head Start programs. The Project involves collaborations between regional offices, state oral health and Medicaid/SCHIP programs to identify, compile and disseminate recommendations and models for oral health in Early Head Start and Head Start programs.

There is a range of relationships currently in existence between regional offices, state oral health programs, state Head Start agencies and local Early Head Start and Head Start programs. Some could be used as models of effective programs, while others have minimal contact or infrastructure. Formal interagency agreements no longer exist to coordinate efforts through regional offices and state oral health programs for dental training and technical assistance (T/TA). There are no standard protocols for T/TA consultants, no compendium of curriculum materials, and no common sharing of information on programs or performance measures. Guidelines may need to be adapted for Early Head Start programs. This project has been initiated to address these concerns and to develop models that can be adopted to remedy the high caries rate and increasing dental access problems experienced by Early Head Start and Head Start programs.

An assessment of state oral health programs and Regional Medicaid/SCHIP dental programs is being utilized to collect information on existing relationships between these programs and Early Head Start/Head Start. The assessment will determine current status and future needs of Early Head Start/Head Start technical assistance and program monitoring arrangements related to oral health as well as Medicaid/SCHIP coverage and creation of dental homes.

A question to determine state oral health program interest in support for a State Head Start Forum was included in the assessment. States will have the opportunity in the near future to apply for funds and hold a state forum to address oral health and Head Start. Reports from the State Forums, along with the assessment information will be submitted to the advisory committee. The advisory committee will meet to develop recommendations for models and steps to improve training, technical assistance, classroom/parent education, creation of dental homes, and monitoring of oral health performance measures in Early Head Start/Head Start programs at the national and state government level. Recommendations and models will be disseminated through ASTDD and partner organizations.

Project Goals and Activities

The Project Goal is for ASTDD to be engaged in a joint project with the regional offices, state oral health and Medicaid/SCHIP programs, and other partners to identify, compile and disseminate recommendations and models for training, technical assistance, classroom/parent education, creation of dental homes, and monitoring of performance measures for oral health for Early Head Start and Head Start programs.
The Project Activities are to:

- Assemble an Advisory Committee that represents a broad constituency of national and regional groups such as regional office dental consultants, ASTDD, AACDP, NNOHA, BPHC, CMS, MCHB, Head Start, NHSA, and others. The Advisory Committee will meet via teleconferences and a two-day face-to-face meeting.

- Assess activities of state oral health programs and Regional CMS Specialists through e-mail requesting copies of materials, T/TA plans, etc. to review, and solicit applications for State Head Start Forum support.

- Receive and process State Head Start Forum requests. Hold forums in states and submit written reports to the Advisory Committee.

- Communicate with regional offices that convene Regional Forums.

- Use Delphi process with committee members to identify characteristics that would constitute models for EHS/HS oral health programs. Review reports from regional, state and other meetings; rate materials using the criteria for best models; and summarize findings for discussion by Advisory Committee.

- Hold an Advisory Committee meeting and develop recommendations for models and future steps to improve training, technical assistance, classroom/parent education, creation of dental homes, and monitoring of oral health performance measures in Early Head Start and Head Start programs at the national and state government level.

- Disseminate information via multiple modalities to all partners.

**Current Project Status**

An advisory committee has been formed and regular communication has been established via teleconference and e-mail. Committee members are planning to attend a two-day meeting in July 2002. The assessment of state oral health programs and their activities with Head Start/Early Head Start has been completed and analysis of responses is in process. A Request for Proposal (RFP) for State Head Start Forums will be announced in June 2002, with funding available for forums starting in July 2002. A maximum of $5000 will be awarded to selected states.

Information and materials related to Oral Health and Head Start are being collected through attendance of the Project Coordinator at Regional Forums. Multiple opportunities are being utilized to interact with interested parties and to learn about current oral health related activities, models, and involvement with Early Head Start and Head Start.

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D. Regional Forums on Enhancing Partnerships for Head Start and Oral Health

Project Introduction and Summary

A series of Regional Forums will focus on enhancing partnerships for improvements in Head Start and oral health. The Forums will be held in 2001-2002 and are supported by the Maternal and Child Health Bureau (MCHB), Health Resources and Services Administration (HRSA) and Administration for Children and Families (ACF). They are being held in conjunction with the HRSA and ACF Field Offices. This project is coordinated by Health Systems Research.

Project Goals

The purpose of the Project is to assist the Maternal and Child Health Bureau (MCHB) in planning and implementing a series of Regional Forums. The aims are to assess oral health program needs, to collaboratively develop strategic plans to meet those needs, and to consider the development of materials and programs to implement these plans. Specifically, the project is designed to assist in the assessment of current practice and training needs and the development of a plan for recommended actions to address the training and technical support needs related to the oral health component in Head Start. The goals of the Regional Forums are to:

- Assess access to care and other issues that may improve or detract from oral health education and clinical services available to the Head Start and Early Head Start populations.
- Develop strategy plans for regions that include assessment of current regional issues, priority gaps, promising practices and problem areas.
- Identify strategies and the key roles of regional agencies and other entities for future action.
- Contribute to the development of a national strategic plan to improve the oral health of children in Head Start and Early Head Start.

Current Project Status

The two-day Regional Forum agenda includes both plenary and small working group sessions. These sessions allow participants to assess current practices and recommend regional actions to enhance the oral health component in Head Start. The series of recommendations are developed for the regional service areas by a broad-based group of representatives with a keen interest in oral health and Head Start.

Regional Forums have been held in: Region VII, December 4-5, 2001, Kansas City, Missouri
Region VI, February 21-22, 2001, Dallas, Texas

Regional Forums are planned in: Region VIII, May 14-15, 2002, Denver, Colorado
Region IX, June 25-26, 2001, Oakland, California

Regional Head Start and Oral Health activities are underway and ongoing in Region III. As the project progresses it is anticipated that other Regions (e.g., Regions I, II, IV, V, and X) will become involved in Regional Head Start and Oral Health activities. In addition, the Maternal
and Child Health Bureau is interested in working with the American Indian / Alaska Native Program Branch and the Migrant and Seasonal Head Start Program Branch within the Head Start Bureau as well as their associated partners.

The Forums involve representatives of diverse organizations, agencies, and professional groups from the public, private, and nonprofit sectors. Forum participants include representatives of Federal, Regional, and State government, universities, private partners, and dental providers. Regional Forum attendees may include:

- Regional representatives from ACF Head Start and Early Head Start, ACF Child Care, HRSA Regional Office Dental Consultant and MCH Consultants, Special Supplemental Nutrition Programs for Women, Infants and Children (WIC), Medicaid/S-CHIP Regional staff, and Regional Head Start Training and Technical Assistance (T/TA) providers with Head Start Quality Improvement Centers (HSQICs), and Disability Services Quality Improvement Centers (DSQICs), Regional Pediatrics and Pediatric Dentistry Representatives

- State MCH and Dental Directors, members of state dental and dental hygiene professional associations, Regional or State Head Start Associations, and State Head Start Collaboration Offices;

- Head Start and Early Head Start Directors, Health Managers as well as participants from academic dental institutions, community-based health organizations, and programs for migrant and seasonal farmworkers as well as American Indians and Alaska Natives.

The regional meetings have been developed to build on the hard work and accomplishments of Head Start and all those that serve infants, toddlers, and young children. Planning has also been informed by the successes of oral health services in states and communities. The overall aim of the Forums is to develop strategy plans for regional office service areas. These plans will outline collaborative efforts among organizations and agencies working together at a regional level to improve the oral health of participants in Head Start. The plans will delineate ways that Regions can combine efforts of the Administration for Children and Families (ACF), Centers for Medicare and Medicaid Services (CMS) (formerly HCFA), and Health Resources and Services Administration (HRSA) and other entities to improve oral health outcomes in Head Start.

The regional strategy plans will summarize the key issues and challenges, promising practices, and strategies to improve the integration of oral health into Head Start programs. The recommended strategies for regional action have focused on four cross-cutting areas:

- Assuring commitment to collaboration and leadership,
- Expanding effective oral health education,
- Enhancing prevention, and
- Increasing access to dental care.

**Conclusion**

The Regional Forums will provide continued impetus and support for efforts to eliminate oral health disparities and increase access to oral health care for young children. The Regional Forums can focus attention on improving oral health and access to oral health care for the Head Start and Early Head Start populations. The Regional Forums will further efforts to increase communication, deepen understanding, and improve collaboration and integration among a number of disciplines and organizations that share a concern with the oral health of young children and their families.
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E. Professional Organization Forums on Head Start and Oral Health

Project Introduction and Summary

The Maternal and Child Health Bureau is providing support to convene groups of representatives from two professional dental organizations. The purpose of the Forums is to discuss the potential for future public-private collaborations to improve oral health in Head Start. These Professional Organization Forums on Head Start and Oral Health will be held in 2002. This project is coordinated by Health Systems Research.

Project Goals

The goals of the project are to conduct two Professional Organization Forums to support Maternal and Child Health Bureau (MCHB) partnerships with two professional dental organizations to:

- Develop plans for programs and campaigns to raise public and professional awareness of the oral health needs of Head Start and Early Head Start programs;
- To facilitate the dental, medical, public health and other professions, as well as the general public, in becoming more aware of the oral health needs of Head Start and Early Head Start children; and
- Engage more dental and other health professionals in education, prevention, and treatment practices that benefit Head Start and Early Head Start children.

Current Project Status

Initial contacts and discussions have been initiated with two professional dental organizations. This project will offer the opportunity for the Maternal and Child Health Bureau to collaborate with the American Dental Association and the American Association of Pediatric Dentistry. The aim of the project is to promote future partnerships to enhance awareness of oral health program needs in Early Head Start and Head Start and implement collaborative initiatives to address these needs. In the coming months John Rossetti, DDS, MPH, Chief Dental Officer, Maternal and Child Health Bureau, HRSA, Jane Steffensen, Project Consultant, and Health Systems Research will work with managers and staff of the two Associations to organize and arrange the two Forums.

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F. The Ohio Head Start Special Project

Project Introduction and Summary

The Ohio Department of Health (ODH), Bureau of Oral Health Services (BOHS) has a long history of working with Head Start programs to address the challenge of providing access to the full range of health services required by the Head Start Performance Standards to an increasingly large number of children. An important, yet seemingly difficult performance standard to meet is ensuring that all children complete dental treatment during their enrollment. BOHS’s history in Head Start reflects the planning cycle of:

Assessment → Planning → Implementation → Evaluation

For years the BOHS has worked closely with federal, regional and state Head Start programs in various capacities with the intent of programs improving dental treatment completion for their children. BOHS staff participated on federal and state Head Start site review teams, provided technical assistance, dental health education resources, and training for Head Start staff and advocacy for the provision of dental care. Despite efforts to become outcomes oriented, the Program Information Report (PIR) data for Ohio still indicated that 40-50% of Head Start children needing dental care did not get their treatment completed. Although experience with PIR data has raised data quality questions, it is the only complete data set available.

In an effort to increase the rates for dental treatment completion for Head Start children and the dental PIR data for Ohio, BOHS retooled its technical assistance approach. A new project was planned and implemented called the Quality Dental Care-Technical Assistance Project (QDC-TAP). This project targeted the Head Start programs with the highest need according to the PIR data. From 1996-2000, BOHS worked with 16 Head Start programs that volunteered to participate after being identified via the PIR data as having 50% or more of enrolled children with dental treatment not completed. This technical assistance approach assessed factors that contributed to dental treatment not being completed, e.g., lack of, or ineffective provider linkages, poor tracking of treatment and parental resistance. Based on results of the program assessment and chart review, BOHS staff worked with Head Start staff and together developed an Action Plan consisting of objectives, strategies and activities to be implemented during the program year with technical assistance from BOHS.

At the end of 2000, this project, although well-received, was deemed to have questionable impact and was discontinued. Factors identified as major obstacles were: Head Start staff turnover (new staff have a lot to learn and this project was not a high priority); Head Start staff work load (no time to work on activities in the Action Plan); in addition, inconsistency in PIR reporting caused frustration. BOHS found, based on meetings with Head Start staff that PIR data are subject to bias and are interpreted and reported differently from program to program, making the data unreliable. To our knowledge there are no quality assurance procedures in place to make sure the PIR report is understood and numbers reported consistently.

Another example of intensive individual efforts that ultimately failed to be sustained is the Cincinnati Head Start Oral Health Collaborative. Upon follow-up evaluation, the success of this project proved to be short-lived. Currently the Cincinnati area has a four-county collaborative grant by a local health foundation with the goal of improving access to medical and dental care.
for Head Start children and families. Head Start programs participating in the project are recruiting providers for ongoing dental care and educating Head Start staff about preventive care and the need for providers. Evaluation of outcomes has yet to be completed on this project.

Previous efforts have not yielded sustainable results. Therefore, we are back to the assessment stage of the planning cycle. This assessment could be the first year of a multiyear project depending on the findings and ODH ability to receive additional grant funds. The assessment will seek to identify current practices that are successful and could serve as a basis for "best practices" or "models that work". With this current special project, ODH is taking a more structured approach to developing an effective new Head Start training and technical assistance project.

**Project Goals**

The assessment phase and the beginning of the planning phase for improving oral health outcomes in Head Start constitute the current Ohio Head Start Special Project, which will be accomplished by:

- Determining the baseline oral health status of Ohio preschool children;
- Learning about dental provider attitudes and practices related to serving Head Start children;
- Conducting one-on-one interviews or focus groups with Head Start staff and parents to determine attitudes and practices related to accessing dental care; and
- Preparing a compendium of successful systems, "best practices" or "models that work", including a small number of mini-case studies about the structure of collaboration and partnerships, operational challenges encountered, and fundamental program elements worthy of replication.

**Current Project Status**

The evaluation, undertaken in the first half of 2002 will continue through the year. ODH has contracted with The University of Cincinnati Evaluation Services Center (UCESC) to design survey instruments and begin to conduct the multi-pronged assessments, compile and analyze results and prepare a compendium of "models that work" for Ohio Head Start programs. ODH plans to use the compendium as a basis for developing a plan with the possibility of piloting a systems model if additional funding can be procured. A subsequent evaluation would be the next logical step in the cycle, pending funding.

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G. Head Start Dental Screening/Triage Training Project - Chester County, PA

Project Introduction and Summary

There are two main components of the project, the Association of State and Territorial Dental Directors (ASTDD) Basic Screening Survey (a surveillance and data collection component linked to national oral health objectives) and Dental Screening Training Project (a teaching component). Both components will be adapted to meet the needs of Head Start programs.

The proposed Head Start Dental Screening Training Project will enable Head Start staff to conduct dental screenings and collect data uniformly among their programs. By using a standard or uniform data collection method (ASTDD Basic Screening Survey) to screen Head Start children, more accurate comparisons and measurements of caries prevalence and other dental conditions could be made across Head Start programs. The proposed methodology is also used by state health departments and captures data consistent with several national oral health objectives.

A small Head Start program will be selected for the pilot or demonstration phase in Chester County PA. Head Start dental hygienists will receive training on how to conduct dental screenings using the ASTDD Basic Screening Survey methods. Sensitivity and specificity tests will measure Head Start dental hygienists training. (“Sensitive” = a high proportion who tested positive are true positives, and “Specificity” = high proportion who tested negative are true negatives).

All Head Start children will receive a complete dental examination and required treatment (both done by a licensed dentist). Screening/triage children helps to identify children that need to schedule a dental appointment immediately (due to an emergency), soon (within a week or two), or routinely (before the Head Start program ends that year). Dental screenings/triage conducted by trained Head Start dental hygienists will be done in accordance with dental practice acts and state laws.

Dr. Victor Alos will be responsible for coordinating with federal, state and grantee level officials all aspects of the Head Start Screening / Triage Training Project. Prior approval will be obtained from ACF Regional Director and HRSA Field /Division Directors and Head Start Grantee Executive Directors. An advisory committee (with families/parents input) will be created to assist planners develop and implement the program.

Training of Head Start dental hygienists will be done by Dr. Victor Alos, a dentist licensed to practice in the state of PA. Didactic sessions, role playing, and practical hands-on activities are part of the training program. Training manuals and videos will be distributed to trainees. Practice sessions (with fellow trainees) will be scheduled prior to conducting the actual screening.

Project Goals

The goals of the Head Start Dental Screening / Triage Training Project are to provide training to dental professionals (dental hygienists and dentists) and non-dental health professionals (registered nurses, if allowed by state laws and Head Start programs). The professionals will learn how to use a standardized data collection tool. This tool allows for estimates of the prevalence of dental conditions and dental sealants at the population and community level. The
tool incorporates information needed by the Head Start program to meet dental health performance measures compliance requirements.

Current Project Status

Training materials, supplies, and equipment have been obtained for the project. Federal and local program concurrences are in the final stages. Preliminary arrangements have been made with a small Head Start program that traditionally utilizes dental hygienists to conduct the dental screenings.

Conclusion

This project will assist Head Start program in their efforts to collect required dental screening data. The ASTDD Basic Screening Survey tool allows uniform comparisons of dental screening data. Head Start programs will also be able to collect local data on several national oral health objectives.

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Resources

Office of the Surgeon General


Website: http://www.surgeongeneral.gov/library/oralhealth/


Website: http://www.headstartinfo.org/publications/bullet.htm

Papers from Head Start and Partners Forum on Oral Health


Website: http://www2.acf.dhhs.gov/programs/hsb/about/init_pri/oralpaper/

- Creating Partnerships for Improving Oral Health of Low-Income Children
- Dietary Determinants of Dental Caries and Dietary Recommendations for Preschool Children
- Response to Dietary Determinants of Dental Caries and Dietary Recommendations for Preschool Children
- Response to Caries Risk Assessment and Prevention, Strategies for Head Start, Early Head Start and W.I.C.
- Access to Dental Care for Head Start Enrollees
- Response to Access to Dental Care from the State Perspective