

FINAL REPORT FORMAT

Follow-Up Activities to EHS/HS State/Territorial Oral Health Forums

Date: May 27, 2008
State: Tennessee
Person Submitting Report: Janet Coscarelli, Director
TN Head Start State Collaboration Office
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A. Activities originally proposed and how they relate to State action plan:

1. Write TN Head Start Oral Health Forum Follow-up proposal with input from TN Head Start Association and TN Department of Health and assist in writing final report of the TN Head Start Oral Health Forum. **COMPLETED; FOLLOW-UP ORAL HEALTH PROPOSAL WAS APPROVED**
2. Generate several groups to be invited to one day meeting in spring of 2008 as Follow-up to the TN Head Start Oral Health Forum. **COMPLETED**
3. Prepare invitation letter, find meeting site, prepare agenda and meeting materials. **COMPLETED**
5. Investigate payment of lunch arrangements for invitees. **COMPLETED**
6. Engage primary and potential dental providers from invited list in dialogue at one day spring meeting to discuss TN Head Start Oral Health State Plan of Action which has three major areas of concern including family and parent involvement in oral dental care, accessibility of oral health services and prevention of oral health problems in young children. Other oral health agenda items will be added and discussed at this meeting. **COMPLETED**
7. Develop, prepare and maintain an exhibit on the *TN Head Start Oral Health Program* at the TN Dental Association annual conference at the Peabody Hotel, Memphis, TN on May 8-10, 2008. **COMPLETED**
8. Prepare written final report on TN Head Start Oral Health Follow-up activities and submit to ASTDD in spring 2008. **COMPLETED AND ENCLOSED**

B. Activities accomplished, include process used, participants, partners and significant dates/timelines:

ACTIVITY 1. Follow-up to the TN Head Start Oral Health Forum

The Tennessee Head Start Oral Health Forum was held on May 17, 2007 at the Nashville Convention Center in conjunction with the TN Dental Association annual conference. Expenses for planning the Forum and executing the Forum were funded to Tennessee through a grant of \$5,000 from the Association of State and Territorial Dental Directors (ASTDD). An additional grant for \$2,500 from ASTDD was awarded to Tennessee to provide follow-up on the activities of the May 17 th Oral Health Forum. After the initial Forum several professionals who attended the Forum formed an Oral Health Sub-Committee that would meet on a regular basis, in person or through conference calls to

discuss issues and legislation relevant to quality oral health services in Tennessee. Jacqueline Clouse, TN EPSDT Coordinator for Doral Dental of TN managed the Oral Health Sub-Committee's meetings and conference calls. Janet Coscarelli, director of the TN Head Start State Collaboration Office participated on the Oral Health Sub-Committee. It was decided by the Oral Health Sub-Committee members to have a follow-up, full-day meeting with professionals interested in quality oral health services to children and young adults and who could influence oral health policies and pending state legislation. Issues presented at the initial Forum would be a part of the agenda items discussed at the follow-up meeting. The follow-up meeting was held on March 12, 2008 in the conference room at the TN Dental Association's office with approximately 30 attendees. The meeting was entitled, ***Oral Health of Individuals Under Age 21***. *A copy of invited guests to this meeting is attached to this document.*

Immediate outcomes for ACTIVITY 1.

The meeting entitled, ***Oral Health of Individuals Under Age 21*** was held on March 12 with very good attendance. The agenda included presentations from state departments (Health, Education and Children Services), Head Start and Doral Dental. *A copy of the invitation with agenda is attached.* After presentations, participants broke up into small groups and developed several collaborative activities.

Additional follow-up activities planned for ACTIVITY 1.

Jacqueline Clouse collected and summarized activities and sent out an update to meeting participants. *The updates are attached to this document.*

ACTIVITY 2. Head Start exhibit at TN Dental Association annual conference

Tennessee Head Start exhibited at the annual TN Dental Association conference held at the Peabody Hotel in Memphis TN on May 8-10, 2008. The exhibit booth was complimentary from the TN Dental Association. The exhibit was well attended and received many compliments from participants. *Photos of the TN Head Start exhibit display are attached to this document.*

Immediate outcomes for ACTIVITY 2.

Doral Dental is the company who administers TennCare's oral dental program. Three dentists' secured applications from Doral Dental for acceptance to provide services to TennCare patients, including children. Dentists were very complimentary of the oral health services required by the Head Start programs.

Additional follow-up activities planned for ACTIVITY 2.

Head Start will exhibit at the 2009 annual TN Dental Association conference if the booth continues to be complimentary from the dental association.

ACTIVITY 3. Enact legislation for more oral health services

Two state pieces of legislation was enacted during the 2008 session which encourages and requires TN Department of Health Regional Dental clinics to render more services to TennCare patients.

Immediate outcomes for ACTIVITY 3.

Both pieces of state legislation passed.

Additional follow-up activities planned for ACTIVITY 3.

TN Department of Health will be required to hold more oral health dental clinics at the regional health offices. Data will be kept indicating the number of clinics held and number of patients served.

E. Budget Explanation, include how ASTDD funds were used, other funds expended, including source and in-kind support, include source

ASTDD grant funds

- Supplies and handout copies for March 12 meeting
- Travel, lodging and per diem for two persons (Coscarelli and TN Head Start representative) to attend the May 8-10, 2008 TN Dental Association conference
- Handouts for TN Dental Association conference, 400 each
 - What dentists Should Know About Head Start *attached*
 - What Dentists Should Know About Early Head Start *attached*
 - Colored map of Head Start programs in Tennessee *attached*
 - Head Start PIR data that illustrates TN oral health data *attached*

In-Kind support

- Director of TN Head Start State Collaboration Office's time and commitment to Oral Health Sub-Committee
- Time spent by Collaboration Office and TN Head Start Association to develop handouts for TN dental exhibit

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US DEPARTMENT OF HEALTH & HUMAN SERVICES

HEAD START

HELP A HEAD





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Highland Rim Head Start
 Sharon Davis, Director
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 FAX 931-289-3220
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Clarksville / Montgomery County CAA Head Start
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Mid-Cumberland CAA Head Start / Early Head Start
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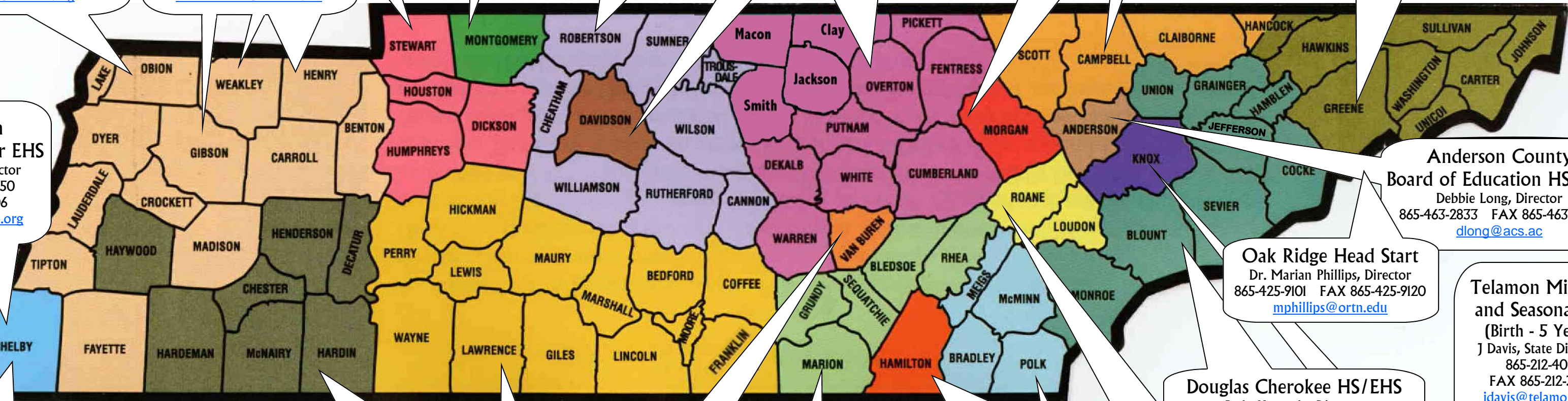
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Carter County Head Start
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South Central HRA Head Start / Early Head Start
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Check out our interactive map at www.TNHeadStart.org



MEETING GUEST LIST

Project: Dental Sub-Committee

Meeting Date: March 12, 2008

Facilitator: Jacqueline Clouse

Place/Room: TDA Conference Room

Name	Title	Company	Address	Phone	E-Mail
Dr. Jim Gillcrist (Committee)	TennCare Dental Director	Bureau of TennCare	310 Great Circle Road Nashville, TN 37243	615-507-6494	james.a.gillcrist@state.tn.us
Dr. Suzanne Hayes (Committee)	Oral Health Services Director	TN Dept. of Health	425 5 th Ave. North 5 th floor Cordell Hull Bldg. Nashville, TN 37247	615-741-8618	suzanne.hayes@state.tn.us
Dr. Morris Robbins (Committee) Not Attend		UT College of Dentistry Memphis	585 South Greek, Unit 303 Memphis, TN 38111	901-448-6287	mrobbins@utmem.edu
Susanne Roy (Committee)	EPSDT Outreach Manager	Bureau of TennCare	310 Great Circle Road Nashville, TN 37243	615-507-6904	Susanne.roy@state.tn.us
Janet Coscarelli (Committee)	Director	Head Start	946 Percy Warner Blvd. Nashville, TN 37205	615-741-4849	Janet.coscarelli@state.tn.us
Jena Napier (Committee)	Children's Care Coordinator	GOCCC	2700 TN Tower 312 Eighth Ave. North Nashville, TN 37243	615-741-5266	Jena.napier@state.tn.us
Lynn Pollard (Committee)	Nurse Consultant	DCS	436 6 th Ave. North 8 th floor Cordell Hull Nashville, TN 37243	615-532-9447	Lynn.pollard@state.tn.us
Renee Roberson (Committee) Not Attend Gretchen Taylor Attending	TENNderCare Outreach Program Director	Metro Davidson Health Dept.	311 23 rd Ave. North Nashville, TN 37203	615-340-2223	Renee.roberson@nashville.gov
Sarah Sharp (Committee) Not Attend	Education Consultant	DOE	710 James Robertson Pkwy. 4 th floor Andrew Johnson Tower Nashville, TN 37243	615-532-4885	Sarah.sharp@state.tn.us
Teresa McCathern (Committee)	TENNderCare Coordinator	Bureau of TennCare	310 Great Circle Road Nashville, TN 37243	615-507-6447	Teresa.mccathern@state.tn.us
Jacqueline Clouse (Committee Chair)	TN EPSDT Coordinator	Doral Dental of TN, LLC	PO Box 7329 Knoxville, TN 37921	888-683-6725	jfclouse@doralusa.com
Dr. Andrea Willis Not Attend	Medical Director	CoverKids	310 Great Circle Road Nashville, TN 37243		Andrea.willis@state.tn.us

MEETING GUEST LIST

Project: Dental Sub-Committee

Meeting Date: March 12, 2008

Facilitator: Jacqueline Clouse

Place/Room: TDA Conference Room

Name	Title	Company	Address	Phone	E-Mail
Michele Blackwell	Executive Director	Doral Dental of TN, LLC	3200 West End Ave. Ste 500 Nashville, TN 37203	888-683-6725	mblackwell@doralusa.com
Sara Smith	Coordinator	Coordinated School Health	710 James Robertson Pkwy 5 th floor Andrew Johnson Tower Nashville, TN 37243	615-253-4664	sara.smith@state.tn.us
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Christy Grandstaff Not Attend Jane Jumbelick Attending		TN Primary Care Assoc.	416 Wilson Pike Circle Brentwood, TN 37027	615-329-3836 x26	christi@tnpca.org
Dr. Tom Catron Not Attend		GOCCC	2700 TN Tower 312 Eighth Ave. North Nashville, TN 37243		Tom.catron@state.tn.us
Vicki Peterson	TENNderCare Outreach Director	Dept. of Health	425 5 th Ave. North Cordell Hull 4 th floor Nashville, TN 37247	615-741-0378	Vicki.k.peterson@state.tn.us
Dr. Walter Owens Not Attend		MeHarry Dental School Pan-TDA	617 Woodland St. Nashville, TN 37206	615-256-2321	walterowensdds@comcast.net
David Horvat	Executive Director	TDA	660 Bakers Bridge Ave. Ste 300 Franklin, TN 37067	615-628-0208	dsh@tenndental.org
Dr. Harry Legan Not Attend		Vanderbilt Univ. Div. of Orthodontics	1500 21 st Ave. South VAV Ste 3400 Nashville, TN 37212	615-343-0633	harry.legan@vanderbilt.edu
Dr. Fred Heros (Registered but did not attend)		TDA	PO Box 281512 Memphis, TN 38168	901-377-6800	
Dr. Rhonda Switzer	Executive Director	Interfaith Dental Clinic	1721 Patterson Street Nashville, TN 37203	615-329-4790	Rhonda@interfaithdentalclinic.com
Charlene Ellis	Director of Program Services	March of Dimes	322 Nancy Lynn Lane, Ste 11 Knoxville, TN 37919	865-694-6003	cellis@marchofdimes.com
Rosie Wooten Not Attend		Maternity Child Health (ECCS)		615-253-8393	Rosie.wooten@state.tn.us

MEETING GUEST LIST

Project: Dental Sub-Committee

Meeting Date: March 12, 2008

Facilitator: Jacqueline Clouse

Place/Room: TDA Conference Room

Name	Title	Company	Address	Phone	E-Mail
Dr. Pitts Hinson		American Academy Pediatric Dentist AAPD	612 Eaton Ct Franklin TN 37064	773-354-2166	pittshinson@bellsouth.net
Dr. Cherry Houston	Director	Division of Minority Health		615-741-9443	Cherry.houston@state.tn.us
Dr. Michelle Bell	Director Oral Health	Davidson Co. Metro Health Dept.	1015 E Trinity Lane Nashville, TN	615-862-6727	Michelle.bell@nashville.gov



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1. You may do a quick search by zip code by entering Tennessee as the state, your zip code and TennCare as the program in the top box labeled “Your Information”.
2. Or you may choose to do a detailed search by entering Tennessee as the state, your zip code and TennCare as the program in the top box labeled “Your Information”. You may then choose other options for special needs, handicap accessible, accepting new patients, provider specialty and office language spoken.

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Your Information

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City

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Zip *

Program * - Select a program -

Search Details

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Mequon, WI 53092

HEAD START BY THE NUMBERS ..



19,893
Low-income children and their families served by Head Start



12,172
Four-year-olds served by Head Start



6,381
Three-year-olds served by Head Start

4,762
Number of people working for Head Start



17,428
Children receiving dental exam

2,962
Children receiving dental treatment

2,307
Children with diagnosed disability

2,605
Children with no health insurance at beginning of year

633
Children with no health insurance at end of year



19,136
Children screened for developmental, sensory, and behavioral concerns

6,466
Two-parent families

11,945
Single-parent families

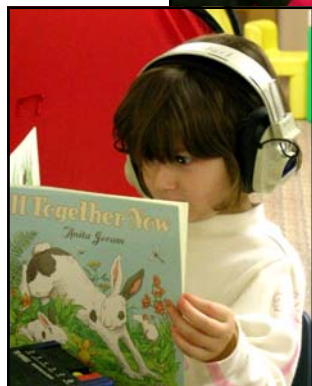
3,559
Parents receiving job training or in school



14,913
Families participating in developing a Family Partnership Agreement

38,885
Number of Volunteers

8:1
Ratio of volunteers to employees



For further information contact:
Judy Graham, President,
Tennessee Head Start Association
President@TNHeadStart.org • www.TNHeadStart.org
1-800-762-8432

Or:
Janet Coscarelli, Director
Tennessee Head Start State Collaboration Office
615-741-4849 (office) 615-428-8762 (cell) FAX 615-532-4989
Janet.Coscarelli@state.tn.us

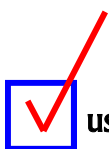


Head Start Has Many Faces

Tennessee's 29 Head Start programs help high-risk children from low-income families by providing comprehensive services that link high-quality early childhood education with families strengthened by parent education and ties to community services.

Head Start:

- Serves nearly 20,000 children in Tennessee with classrooms available all across the state.
- Provides and/or coordinates medical, dental, nutritional, and mental health services.
- Administers screenings and assessments for development, sensory, and behavioral concerns and integrates the results into individualized instructional plans.
- Reserves 10% of enrollment opportunities for children with disabilities.
- Stresses family and community partnerships.
- Encourages professional staff development.



us out at www.TnHeadStart.org

Tennessee

Head Start



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DENTAL SCREENING FORM



Name of Child: _____
(Last) (First) (Middle)

Current Address: _____
(Street) (City) (State) (Zip)

Date of Birth: _____ **SSN** _____ **TennCareSMMCO** _____

Parent / Guardian Name: _____ **Telephone Number:** _____

Report of Dental Inspection:

- Child has a need for *immediate* professional dental care. It is recommended that a dentist be seen as soon as possible to start care.
- Child has a need for professional dental care. It is recommended that a dentist be seen soon to start care.
- Child has no obvious need for dental treatment at this time. However, this is not a complete dental examination. Child should see dentist twice a year for checkup.
-

Date of Screening

Doral Dental Services of Tennessee, Inc.
3200 West End Ave. Suite 500
Nashville, TN 37203
615-783-2853

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Dental Care for Children with Special Needs

A special needs child requires patience, attention and love. The child's dental health is one more important need.

A healthy mouth is an important part of total health. If dental care is started early every child can enjoy a healthy smile.

Your child will benefit from:

- A first dental visit by their first birthday
- Regular 6 month dental check ups
- Good brushing
- Flossing
- Healthy snacks
- Fluoride treatment.
- Sealants

Choosing a dentist for your child:

- A pediatric dentist is prepared to care for special children
- Their education focuses on care for children with special needs
- Many pediatric dental offices are designed for special patients

Children on TennCareSM have TENNderCARE (EPSDT) dental services until they reach the age of 21. These services include regular 6 month check ups, fluoride treatments and sealants.

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- **For questions about your TennCareSM dental benefits**
- **For help with interpretation and translation**
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What Dentists Should Know about Head Start

Head Start is a comprehensive early childhood development program that provides a wide array of services to low-income children ages 0-5 and their families.

- Head Start, which was founded in 1965 to improve the school readiness of poor children, serves low-income children ages 0-5. Infants and toddlers (0-3) and pregnant women are served through Early Head Start. In 2005, Head Start served 1,054,740 children.
- The four major content areas of Head Start are: education, health services, disabilities and family and community involvement.
- Head Start is a federal program administered through grants to local public agencies, private organizations, Native American Tribes, and school systems.

Head Start children receive important health services directly through the program or by a referral to another community resource.

- Head Start programs are required to ensure that children receive immunizations, nutrition, dental and mental health care.

Head Start children are at-risk for dental disease.

- Life conditions brought on by poverty can have a large impact on the importance families assign to dental care. Head Start helps families understand prevention and oral health care, along with the importance of establishing a dental home early in life.

Family involvement and support services are a central component of Head Start.

- Programs build relationships with parents from the moment of enrollment by working with parents to create family partnership agreements that identify family goals, as well as strategies and timetables for meeting those goals.
- Head Start Program Performance Standards require that programs involve parents and help link parents to other resources in their community, like education, job training, mental health services and health education.

Research shows that Head Start is effective.

- Children in Head Start have demonstrated increases in word knowledge, letter recognition, math skills, and writing skills in comparison to national norms, as well as gains in cooperative classroom behavior, reductions in hyperactive behavior, and improvement in other problem behaviors.

Head Start Focus on Breaking the Chain of Disease

- A network of professional oral health consultants was created for the 12 EHS/Head Start regions. For more information, please click on the following link: <http://www.mchoralhealth.org/HeadStart/RegionalConsMap.html>
- National Head Start Oral Health Resource Center at Georgetown University was created in 2006. Resources and training materials are available to Head Start programs. <http://www.mchoralhealth.org/HeadStart/index.html>
- The Office of Head Start funded Oral Health Initiative projects to promote collaboration and innovation at 54 Head Start/Early Head Start pilot sites across the country.

Dentists can get involved by:

- helping families access Head Start
 - Children are eligible for Early Head Start if they are between the ages of zero and three and if their families meet the federal poverty guidelines (\$20,000 for a family of four in 2006). To apply, families should contact the Head Start agency in their community at 1-866-763-6481 or at <http://www.acf.hhs.gov/programs/hsb/hsweb/index.jsp>
- accepting referrals of Head Start children
- establishing blocks of appointments for Head Start children in the summer and early fall months
- participating in local Head Start's Health Services Advisory [planning] Committees
- emphasizing preventive practices

Additional Resources for Dentists

- National Head Start Association, <http://www.nhsa.org/index.htm>
- U.S. Department of Health and Human Services, Administration for Children & Families, Office of Head Start, <http://www.acf.hhs.gov/programs/hsb/index.htm>



What Dentists Should Know about Early Head Start

Early Head Start (EHS) was created to enhance the development of infants and toddlers, promote healthy prenatal outcomes, and promote healthy family functioning.

- In response to research stressing the importance of the first three years for children's development, EHS was established by Congress in 1994 with the reauthorization of the Head Start Act. While the larger Head Start program serves primarily preschool age children, EHS serves low-income children ages 0 to 3 (81,914 in 2005), as well as pregnant women (10,485 in 2005).
- Most families served are low-income, working families with no more than a high school education. Just over half of the children served had full-day and/or full-year child care needs and these needs were met by EHS for 72 percent of these children.
- As with Head Start, EHS is a federal program administered through grants to local public agencies, private organizations, Native American Tribes and school systems. While Head Start programs tend to be mainly center-based, EHS programs are more evenly split between center-based and home-based programs. In home-based programs, families are supported through weekly home visits and group socialization experiences.

Early Head Start children and pregnant mothers are at-risk for dental disease.

- Life conditions brought on by poverty can have a large impact on the importance families assign to dental care. Early Head Start helps families understand prevention and care, along with the importance of establishing a dental home early in life.

Early Head Start provides health services, prenatal services for pregnant women, and family support services.

- As part of the Head Start Performance Standards children entering EHS must receive screenings for developmental, sensory and behavioral issues within 45 calendar days of enrollment. In addition, programs are required to ensure that children receive immunizations, nutrition, dental services and mental health care.
- Services are designed to be family-centered and to be built around individual families' needs and strengths. Families are linked to resources within the community like education, job training, mental health services and health education.
- Toothbrushing and good nutrition are emphasized in center-based and home based programs. Dental sealants and fluoride varnishes are applied. Additionally, in communities where water supply is suboptimal for fluoride, age appropriate children receive supplemental fluoride.

Research shows that Early Head Start is making a positive difference in the lives of children and families.

- Compared to a control group, children in EHS scored higher on a scale of cognitive development and were less likely to score in the at-risk range of developmental functioning; scored higher on a test of receptive language; and demonstrated more positive social-emotional outcomes, including higher levels of engagement with their parents and lower levels of aggression.
- Compared to a control group, parents in EHS were more emotionally supportive to their children and provided more nurturing home environments and were more likely to participate in education and job training activities and be employed.

Early Head Start Focus on Breaking the Chain of Disease

- A network of professional oral health consultants was created for the 12 EHS/Head Start regions. For more information, please click on the following link: <http://www.mchoralhealth.org/HeadStart/RegionalConsMap.html>
- National Head Start Oral Health Resource Center at Georgetown University was created in 2006. Resources and training materials are available to Early Head Start programs. <http://www.mchoralhealth.org/HeadStart/index.html>
- The Office of Head Start funded Oral Health Initiative projects to promote collaboration and innovation at 54 Head Start/Early Head Start pilot sites across the country.

Dentists can get involved by:

- helping families access Early Head Start
 - Children are eligible for Early Head Start if they are between the ages of zero and three and if their families meet the federal poverty guidelines (\$20,000 for a family of four in 2006). To apply, families should contact the Head Start agency in their community at 1-866-763-6481 or at <http://www.acf.hhs.gov/programs/hsb/hsweb/index.jsp>
- accepting referrals of Early Head Start children
- establishing blocks of appointments for EHS children and pregnant women in the summer and early fall months
- participating in local EHS programs' Health Services Advisory [planning] Committees
- emphasizing preventive practices

Additional Resources

- ZERO TO THREE, www.zerotothree.org
- Office of Head Start, <http://www.acf.hhs.gov/programs/hsb/programs/index.htm#ehs>