



# Program Funding & Expansion

Dental  
Hygienist  
Model  
Best Practice

# Background

Once upon a time  
there was an  
**Oral Health  
Coalition**  
that was filled  
with...



## Community Partners

Healthy Start  
United Way  
Allegany-Franciscans  
Children's Services Council  
FL DOH-Martin  
Tobacco-Free Partnership  
Shared Services Network-  
Executive Roundtable;  
Private dental providers  
Martin Health System  
Charitable institutions;  
Private citizens;  
School Health Advisory Council,  
etc...

# Background-Past

## *Focus and Accomplishments:*

### **Primary prevention**

- Healthy Start and other prenatal service providers-baby teeth cleaning stressed
- Early Child Care Educational centers; tooth-brushing programs
- Fluoride Campaign-successful in only one municipality
- School-based-no services

### **Secondary Prevention**

- DOH-Martin Dental operatory expanded for routine dental activities
- Federally Qualified Health Center providing dental services in Indiantown
- Restorative services-relationship based
- School-based-no services

### **Tertiary Prevention**

- Out of County
- Relationship-based

# Background-present

## Primary prevention

- Fluoride continues in one municipality
- Unknown what childcare center preventive dental programs exist (survey in progress through QI Project with Healthiest Weight)
- Healthy Start dental program not being done consistently
- **School-based-Dental Sealant Program pilot**

## Secondary prevention

- Federally Qualified Health Center providing dental services in Indiantown and now in Stuart (took over CHD dental services)
- **School-based-Dental Sealant Program expansion**

## Tertiary Prevention

- Out of County
- Relationship-based

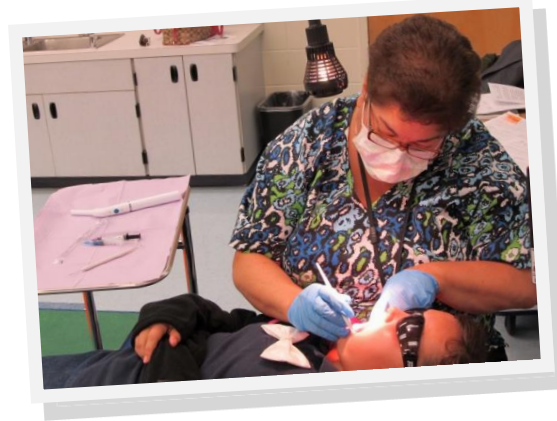


# Background

- Transition of dental services to FQHC left Martin with and “abundance” of DNSPJ funds to fund the pilot (22K)
- Conversations with Dr. Solovan-Gleason, Christina Vracar, and Shannon Harp about the appropriate expense of the dollars and the School-based Hygienist Model
- Successful Hygienist-based program using Hygienist in the schools in Charlotte County
- Availability of coaching and oversight-Kimberlee McCarren
- Initiated program in Martin County with outstanding support of the School District.
- **Hired the right person-Milly Ruiz! Thanks Kimberlee!**



# Pilot Results



- 900+ children examined
- 100% received dental hygiene education
- 100% received an oral hygiene kit
- 80% received a fluoride varnish
- 22% had urgent dental needs
- 25% had untreated dental caries
- Only 5% of children with urgent needs were able to be seen for a variety of reasons

# Results

- FY 14-15 Revenue sources:
  - DNSPJ-22K
    - (carry-over plus 6K annual DNSPJ)
  - Medicaid revenue-\$9,932
- Received a dental van to assist with equipment movement from school to school
- Presentation of results created a great deal of interest among community partners.
- Strong community support for the program
  - FY 15-16 received \$118K from Martin County Children's Services Council for 1 FTE Hygienist and .5 FTE clerical.



# Strategies for Sustainability

- **Talk to your partners and learn about past experiences**
  - Who were the champions?
  - Who is willing to be a champion?
  
- **Review the Strategic Plans of funding organizations to find out who is interested in dental issues and what they are interested in funding**
  - *Identify a best-practice model-match-up and sell parts of the model to relevant funders*
  
- **Make your case to community partners; media; and public:**
  - **Qualitative:**
    - Real stories or pictures of children who are impacted
    - Real stories of parents that can't afford dental care for their children
  
  - **Quantitative:**
    - Literature search-why is this important
    - Data-hospital impact-cost analysis
    - Cost-benefit to society (loss of school time due to dental disease; chronic disease impact of dental disease; missed educational opportunities)



# How to find or expand funding

## Marketing

- Share your message at every possible forum

## Coalition-building

- Find like-minded interested partners to share your vision

## Partnership with region and State to develop uniform billing opportunities

- MHA negotiations used a private consultant to negotiate with Medicaid Managed Care companies (along with St. Lucie County)
- DOH-Martin at a disadvantage due to lack of primary care
- Dental oversight (Dr. Zapert) that allowed uniform billing and hygienist practice.



# Conclusion

- Community Partnerships
- Coalition building-key informant interviews about past dental activities
- Advocacy-strategic and intentional marketing of the extent of the problem with both qualitative and quantitative data.
- Personal/professional relationships important in all counties in Florida
  - In medium to small counties it's critical !  
(one degree of separation)



# Questions?

