

DESTINATION: ERADICATE DENTAL DISEASE IN KIDS

TARGET ONE



The Oral Health Progress and Equity Network (OPEN) is building power in states and communities to create the change needed to make our nation as healthy as it can be. We know that healthier mouths mean healthier people. And healthier people mean stronger communities. This DESTINATION is one of five on which OPEN is working collectively to achieve by 2020, in order to create a just oral health system — one where everyone has an equitable chance to thrive.

Target One: With a closing of disparity gaps, 85% of children reach age six without a cavity.

COMMUNITY TACTICS

- Support local community water fluoridation efforts by working bidirectionally with community members.
- Conduct local needs assessments of groups experiencing disparities in access to identify needed outreach and education strategies.
- Support community education and outreach in integrating oral health as part of overall health by through culturally and linguistically appropriate messaging.
- Provide interprofessional education and training to community health workers
- ☐ Provide education in places where parents take their children (e.g., daycare centers) by engaging community health workers and promotoras.
- Identify and advocate for promising components of care coordination and management that could be scaled up by engaging the community.
- Integrate oral health into other existing social justice movements (e.g., the Poor People's Campaign) by collaborating with community members.

STATE TACTICS

- Explore alternative workforce and care delivery models by engaging state partners such as state oral health coalitions, WIC state associations, Nurse-Family Partnerships, and home visiting programs.
- Support integration of oral health through budget and policy advocacy in:
 - Government programs focused on young children and families
 - Early childhood health programs (such as WIC and home visiting)
 - Early childhood social/education programs (such as Head Start)
 - Perinatal programs

State tactics cont.

- Collect and report statewide oral health data (disaggregated by age, income, language and race/ethnicity) by convening and working with state partners.
- Ensure regulations for every child to have a dental home by age 5.
- Ensure a mandatory oral examination by age 5.
- Ensure that all school district wellness policies includes oral health.
- Implement the pediatric dental periodicity schedule as a floor, not a ceiling, by working with states and enabling individualized preventive care plans
- Advocate for strong state Medicaid health and dental plan contracts, for example.:
 - Require coverage of and monitor compliance with the USPSTF recommendation on fluoride varnish applied by PCPs.
 - Require that each child has a designated dentist, chosen by a parent or assigned by the plan and changeable by the parent.
- Monitor and disseminate information to advance community water fluoridation and fight rollback attempts.
- Create community care linkage sites by working with early childhood programs.
- Develop and include consistent oral health measures, disaggregated by age, income, and race/ethnicity, in all State Kids Count organizations.

NATIONAL TACTICS

Advocate for the adoption of mandatory interprofessional education (IPE) requirements in oral health at medical, dental, and nursing schools (undergraduate, graduate, postgraduate, and continuing education) through the appropriate accrediting organizations and the National Center for Interprofessional Practice and Education,

TACTICS THAT WORK ACROSS ALL LEVELS

- Identify and create partnerships with a wide-range of community, state and national organizations and providers with a focus on health and well-being of children and that emphasize and prioritize disparity reduction and equity.
- Advocate for implementation of interprofessional education curricula/ practice in professional schools.

NOTES, IDEAS, AND PLANS

Check off the tactics you plan to use in getting OPEN to this goal. Work with your team, stakeholders and partners to design a pathway to action

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TARGET TWO



Target Two: 15% of Title 1 schools have oral health fully incorporated into their systems.

COMMUNITY TACTICS

- Promote equity and disparities reduction in school-based oral health programs by working with key stakeholders such as including faithbased communities and children's ministries of churches.
- Engage and provide Medicaid reimbursement to community health workers for providing oral health education.
- Build community leadership capacity to contribute to systems change.
- Support a community-driven sustainability and engagement plan that identifies and addresses community needs and expands oral health representation and advocacy on school advisory councils.
- Engage with parent or health liaisons at Title I schools and support in-school parent education that includes oral health.
- Develop and launch youth advocacy campaigns to engage school health advisory committees, PTAs/PTOs, departments of education, and community organizations to present a case for school-based oral health services.
- Engage students as community health workers focused on oral health through peer education, student clubs, etc.
- Develop and use compelling personal narratives that highlight oral health inequities and access challenges.

STATE TACTICS

■ Engage and support state-level champions working in school oral health and/or looking to expand oral health in schools.

State tactics cont

- Advance full integration of oral health into schools' educational curricula and health services in partnership with school districts.
- Require a mandatory oral health exam before entry into kindergarten at age 5.

NATIONAL TACTICS

- ☐ Create and distribute a value proposition of oral health integration in primary education across OPEN, school districts, state and local government education agencies/organizations, and other partners (e.g., YMCA, Boys and Girls Clubs).
- Develop partnership with National Association of Elementary and Secondary Education Act State Program Administrators.

TACTICS THAT WORK ACROSS ALL LEVELS

- Engage state and national partners to develop a standardized set of school-based measures, integration and implementation tools, and an analytical framework for schools and school districts to collect, analyze and report on oral health program data.
- □ Define levels of oral health integration within schools based on defined parameters (on the way to a comprehensive model); develop capacity to cross-walk levels with service delivery and financing options; and disseminate best practices.
- Ensure that every school district's wellness policy includes oral health.
- Share school-based resources in oral health programming and best practices across schools and OPEN through convenings, webinars, and other media.
- Support regular collection and public reporting of statewide oral health data, disaggregated by age, race/ethnicity, income, and geography by convening and engaging state partners in advocacy and work.

NOTES, IDEAS, AND PLANS

Check off the tactics you plan to use in getting OPEN to its goal. Work with your team, stakeholders and partners to design a pathway to action.

