

# Oral Health (Oral Screening and Healthy Smiles Ontario)

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**To:** Chair and Members of the Board of Health

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## Recommendations

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It is recommended that the Board of Health receive this report for information.

## Key Points

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- Oral health disease is among the most common non-communicable diseases globally.<sup>1</sup>
- The burden of dental disease disproportionately affects vulnerable and disadvantaged people.
- In Wellington-Dufferin-Guelph (WDG), 70% of low-income residents reported they could not afford oral health care.<sup>2</sup>
- School dental screening program has resumed with over 60% of schools completed to date.
- Wellington-Dufferin-Guelph Public Health (WDGPH) continues to build strong partnerships with private providers to deliver the Healthy Smiles Ontario program.

# Background

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## Oral Health Status

The World Health Organization (WHO) defines oral health as the “state of the mouth, teeth and orofacial structures that enables individuals to perform essential functions such as eating, breathing and speaking, and encompasses psychosocial dimensions such as self-confidence, well-being and the ability to socialize and work without pain, discomfort and embarrassment.”<sup>1</sup> Untreated dental caries is the single most common condition globally, affecting an estimated 2.5 billion people. Severe gum disease is a major cause of total tooth loss and estimated to affect 1 billion people worldwide.<sup>1</sup> About 380 000 new cases of oral cancers are diagnosed every year.<sup>3</sup> Oral health is among the most common non-communicable disease globally and gaining an increased attention at global level.<sup>1</sup>

Poor dental health can negatively affect the general well-being of individuals. Oral pain in children has been associated with sleep loss, poor growth, poor learning and behavioral problems.<sup>4</sup> The burden of dental disease and illness is disproportionately evident in children of lower socio-economic status, indigenous people and new immigrants.<sup>4</sup>

In a survey of low-income Guelph residents, half of the respondents reported their poor oral health affects how they feel about themselves, and over a quarter reported their oral health needs affect their social relationships and mental health status.<sup>2</sup> These families are less likely to have dental insurance. This underscores the importance of a publicly funded dental program for low-income families as most oral health conditions are preventable and can be treated if detected early.<sup>3</sup>

The WDG Oral Health Status Report in 2015 aimed to explore oral health status and barriers to good oral health faced by WDG residents. The study found that:

- By Grade 2, almost half of WDG children will have experienced tooth decay.
- Approximately one fifth of WDG residents do not brush their teeth twice per day as recommended.
- Approximately one third of WDG residents experience teeth sensitivity and one tenth experience bleeding gums.
- 70% of low-income Guelph residents reported that dental treatment was recommended to them which they cannot afford.<sup>1</sup>

# Discussion

## Healthy Smiles Ontario (HSO)

Healthy Smiles Ontario (HSO) program is a government-funded dental program that provides free preventive, routine, and emergency dental services to eligible children and youth 17 years and younger to families with limited income. This includes providing urgent care to children and youth who cannot afford treatment and are experiencing pain or infection (such as gum abscess). In addition to emergency services, the program provides preventive dental care such as cleaning, sealants, and fluoride varnish. WDGPH provides routine dental care to children and youth in collaboration with private dental providers.

The HSO program is delivered through three streams:<sup>5</sup>

Preventive Services Only Stream	Core Services Stream	Emergency and Essential Services Stream
<ul style="list-style-type: none"><li>• Eligibility based on financial hardship and clinical need</li><li>• Preventive dental cleanings</li><li>• Delivered by Registered Dental Hygienists at WDGPH sites</li></ul>	<ul style="list-style-type: none"><li>• Eligibility based on income</li><li>• Routine dental care(exams, checkups, preventive services, extractions, fillings and x-rays)</li><li>• Delivered by community dentists</li></ul>	<ul style="list-style-type: none"><li>• Eligibility based on financial hardship and clinical need</li><li>• Emergency and essential dental treatment</li><li>• Delivered by community dentists</li></ul>

WDGPH Oral Health team provides dental screenings in schools and the community to determine if open cavities and other urgent oral issues are present, as well as determining eligibility for services through the HSO program. The team provides support with completing HSO applications and navigating the system for appropriate dental care.

WDGPH receives 100% provincial funding (no additional mandatory municipal dollars) from the Ministry of Health to deliver the HSO program. In addition, the County of Wellington provides a grant funding of \$3,500 annually to support necessary treatment not covered by the HSO Program for children and youth who reside in Wellington County. Services that have been covered include space maintainers, night guards, crowns and silver diamine fluoride. Since inception, an average of seven children access the County of Wellington funding yearly.

## HSO Clinic Program Indicators – Progress to date

The table below shows progress with the HSO indicators for 2019 and 2022. There is no data available for 2020 and 2021 because program staff were deployed during the period to work in pandemic response.

### HSO Clinic Program Indicators

<b>Deliverables</b>	<b>Achievement (Jan 01, 2019– December 31, 2019)</b>	<b>Achievement (Jan 01, December 31, 2022)</b>
# of Preventive Services Only (PSO) applications	739	534
# of Emergency and Essential Services Stream (EESS) applications	857	428
# of children screened in HSO preventive clinics	1038	439
Total # of children seen in WDGPH preventive clinics	2786	1454
# and % of children identified through HSO preventive clinics with urgent needs	857 (31%)	434 (30%)
# of dental cleanings performed in preventive clinics	1685	1008

### Successes

- Due to WDGPH response to the COVID-19 pandemic and the re-deployment of the Oral Health Program staff, there was a delay in re-opening HSO clinics. Preventive services at all locations (Guelph, Orangeville and Fergus) commenced in March of 2022.
- Dental screenings were always available during the pandemic on an emergency basis.

## Challenges

- Families may not be aware of the HSO program and are still having difficulty finding a dentist that will accept HSO coverage, especially after the pandemic.
- Dental offices are dealing with recovery from the pandemic, in addition to increased costs of supplies and personal protective equipment. Publicly funded dental services have a lower reimbursement scale than private dental insurance, often below the actual costs of providing the service.
- Early Childhood Caries remains the number one preventable disease treated under general anesthesia for children under age 5. Children within the WDG community identified as having urgent dental needs requiring general anesthesia are waiting approximately 3-6 months to be treated in a hospital setting depending on the location. These wait times are longer in the northern part of the region.

## Oral Health School Screening

Oral health screening is a quick visual assessment by a Regulated Dental Hygienist who identifies the need for dental care. Oral health screening is not a replacement for a complete dental examination conducted by a regulated dental professional.<sup>6</sup> Oral Screenings are not considered treatment but rather are a prophylactic observation of an individual's teeth from which recommendations for further care may be made.<sup>7</sup>

In accordance with the Oral Health Protocol, the school screening is offered to all schools (private and public) depending on their level of intensity as follows:

- JK, SK, and Grade 2 in low screening intensity schools
- JK, SK, Grade 2 and 7 in medium screening intensity schools
- JK, SK, Grade 2, 4, and 7 in high screening intensity schools

Intensity levels are determined by the decay findings of the school's grade 2 screening results.<sup>6</sup>

Due to the COVID-19 pandemic, oral health screening in schools was paused for about two years. The dental team resumed screening in schools at the beginning of the 2022 – 2023 school year. For this screening year, all schools were deemed as high intensity due to the two-year gap in screening to help determine a new baseline.

High-intensity schools as per the Oral Health Protocol states "*all students in JK/SK/Grades 2, 4 and 7 should be screened.*"<sup>6</sup> The WDGPH dental team will also screen siblings of students identified with urgent dental needs if they are outside the mandated grades.

The school screening year is still ongoing. A total of 125 schools (89 public, 15 private and 21 parochial) will be screened. The table below shows a comparison of the last screening year to progress made to date in the current school year.

**School screening results (2018/2019 and 2022/2023)**

<b>Indicators</b>	<b>September 2018 to May 2019</b>	<b>September 2022 to Mid February 2023</b>
Total # of students screened	12,943	8,524
# of students identified with Urgent Needs	196	280
# of students identified with Non-Urgent Needs	782	434

In comparison to the last full school screening year 2018-2019, screening so far, shows a 43% increase in the number of students identified with urgent needs. There are approximately 40 schools left to screen. The team continues to follow up with families to ensure they are accessing appropriate dental care for the children in need.

**Successes**

- The schools have been very excited and welcoming to see the program restarted.
- To improve the inclusion/exclusion process, which was done previously by phone, the team developed an online tool which parents can use to request to opt out of the screening or include a child in a grade that was not in one of the grades being screened. There has been an increase in families opting in for this service.

**Challenges**

- More students are being identified with urgent dental needs increasing the case management workload coupled with challenges of limited community dental offices who are willing to see HSO clients.
- High student absentee rates in the fall due to multiple respiratory infections.
- Difficulty recruiting private dental providers to support the HSO program. This issue has worsened due to the pandemic as most providers are in recovery mode and not willing to take on the HSO clientele as the low government fee guide does not even cover the dental overhead costs to provide the service.

## Next Steps

- The Oral Health team is committed to increasing awareness amongst families and service providers about the free dental services available at WDGPH and in the community.
- Plans for outreach programs and an oral health campaign in the coming months to educate the community on oral health and increase awareness of the HSO program and its benefits.
- Explore opportunities for identifying school populations with highest needs and most at-risk for tooth decay to implement additional oral health or other public health interventions/strategies.
- Restart the Fluoride Varnish program at high-risk schools to primary grade students. Fluoride varnish is a protective coating that helps to make teeth strong and prevent cavities. The program provides fluoride varnish application to children in schools identified as at greater risk for caries and to reduce future dental needs.
- Explore opportunities with private dental providers in increasing the acceptance rate for the HSO program.

## Health Equity Implications

Oral health is an important component of overall health but out of reach for vulnerable and low-income Ontarians. Ontario's oral health care is very expensive, heavily privatized and not covered by universal insurance plans like Ontario Health Insurance plan (OHIP). This means individuals need access to dental benefits through work, private insurance or pay out of pocket. This creates a significant barrier to accessing care for vulnerable groups such as low-income families, refugees and immigrants, older adults and rural and remote populations.

WDGPH aims to reduce oral health inequities across WDG by providing free services to children and youth of families experiencing financial hardships. WDGPH continues to build coalitions with community dentists to improve access to free routine and urgent dental care for eligible clients. In addition, WDGPH Oral Health team provides free preventive services in all locations. The team also undertakes outreach services including portable settings for eligible clients in addition to providing oral health education to the public and assisting eligible clients enroll into the HSO program.

## Conclusion

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Oral health affects overall health. The Oral Health team will continue to engage the WDG community in ensuring low-income children/youth have access to high quality, affordable oral health care. They will work with school boards to successfully complete the screening and intensify the follow up with families to ensure that children identified in need of urgent care receive the care they need. The Oral Health program aims to create an environment where all clients feel welcomed, accepted, and accommodated while having their dental needs met.

## Ontario Public Health Standards

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### Foundational Standards

- Population Health Assessment
- Health Equity
- Effective Public Health Practice
- Emergency Management

### Program Standards

- Chronic Disease Prevention and Well-Being
- Food Safety
- Healthy Environments
- Healthy Growth and Development
- Immunization
- Infectious and Communicable Diseases Prevention and Control
- Safe Water
- School Health
- Substance Use and Injury Prevention

## 2023 WDGPH Strategic Directions

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- People & Culture:** WDGPH has an organizational culture of engagement, inclusion and agility.
- Partner Relations:** WDGPH collaborates with partners to address priority health issues in the community.
- Health System Change:** WDGPH is positioned to be an agent of change within the broader health sector.



## References

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1. World Health Organization. Global oral health status report: towards universal health coverage for oral health by 2030. [internet] Geneva. 2022. [cited 2023 February 22]. Available from: <https://www.who.int/publications/i/item/9789240061484>
2. Wellington-Dufferin-Guelph Public Health. Oral health status report. [internet]. 2015 [cited 2023 February 22] Available from: <https://wdgpublichealth.ca/reports/2015-oral-health-status-report>
3. World Health organization. WHO highlights oral health neglect affecting nearly half of the world’s population. [internet] Geneva. 2022 November 18. [cited 2023 February 22]. Available from: <https://www.who.int/news/item/18-11-2022-who-highlights-oral-health-neglect-affecting-nearly-half-of-the-world-s-population>
4. Rowan-Legg A. Canadian Paediatric Society, Community Paediatrics Committee, Oral health care for children – a call for action, *Paediatrics & Child Health* [internet] 2013. [cited 2023 February 22]; 18 (1) 37–43. Available from: <https://doi.org/10.1093/pch/18.1.37>
5. Wellington-Dufferin-Guelph Public Health. BOH report. BH.01.SEP0419.R16 Dental Clinic Update [internet]. 2019 [cited 2023 February 27]. Available from: <https://wdgpublichealth.ca/board-health/board-health-meetings/september-4-2019-agenda/bh01sep0419r16-dental-clinic-update>
6. Ontario. Oral Health Protocol [internet]. 2021. [cited 2023 February 23]. Available from: [https://www.health.gov.on.ca/en/pro/programs/publichealth/oph\\_standards/docs/protocols\\_guidelines/Oral%20Health%20Protocol\\_2021.pdf](https://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/docs/protocols_guidelines/Oral%20Health%20Protocol_2021.pdf)
7. Ontario Agency for Health Protection and Promotion (Public Health Ontario). Best practices for oral health screening in schools Toronto, ON: Queen’s Printer for Ontario; 2022

## Appendices

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N/A