#### **Program/Service Information Report**



### **Oral Health Program**

Healthy Smiles Ontario January – December, 2017 Oral Health School Screening 2016/2017 School Year

TO: Board of Health MEETING DATE: April 4, 2018

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## **Key Points**

 The Healthy Smiles Ontario (HSO) program is the single point of access to dental care in Ontario for qualifying low-income children ages 0-17.

- Ministry of Health and Long-Term Care (MOHLTC) program statistics show provincial HSO program utilization rates at 58% while the percentage of children experiencing tooth decay in elementary school continues to hover around 50%<sup>1</sup>.
- WDGPH offers the Fluoride Varnish program to children in 12 high-risk elementary schools.

# **Strategic Directions & Goals**

Service Centred Approach - We are committed to providing excellent service to anyone interacting with public health.

- We will improve access to public health programs and services while enhancing the client experience.
- We will increase community awareness of public health programs and services.
- We will engage communities with more opportunities for collaboration.

Organizational Capacity - We will improve our capacity to effectively deliver public health programs and services.

- We will work to improve health services for priority populations.
- We will implement processes for continuous quality improvement (CQI).
- We will enhance our understanding of the local needs and priorities of the communities we serve and develop programs and services in response to those needs.

### **Operational Plan Objectives**

#### **School Screening and Surveillance**

• To screen 100% of eligible children in schools.

- To submit HSO and screening reports to MOHLTC as required.
- To provide case management/service coordination and follow-up for children who have been identified with urgent needs during school screening.
- To educate students, teachers and principals about the importance of oral health.
- To educate school personnel about the HSO program.
- To educate students and their families about the availability of HSO services.

#### Fluoride Varnish:

- To provide fluoride varnish in 12 high-risk elementary schools.
- To decrease the percentage of children identified during school screenings with urgent dental needs.
- To introduce early oral health interventions to children during well-baby visits with primary care.

#### **Healthy Smiles Ontario Program Objectives:**

- To assist low-income families with applications to the HSO program.
- To provide case management, system navigation and service coordination to low-income families seeking dental services for their children.
- To provide proficient and expert dental care for children under the HSO program.
- To improve access to oral health care for low-income children with dental needs.

# **Summary of OPHS Program Requirements**

### **OPHS Program: School Health**

#### Goals:

- The Board of Health achieves timely and effective detection and identification of children and youth at risk of poor oral health outcomes, their associated risk factors and emerging trends.
- Children and youth from low-income families have improved access to oral health care.
- The oral health of children and youth is improved.

### Strategy:

- Disease Prevention
- Health Promotion and Policy Development
- Assessment and Surveillance

### **Requirements:**

- 1. The Board of Health shall conduct surveillance, oral screening and report data and information in accordance with the Oral Health Protocol, 2018 (or as current) and the Population Health Assessment and Surveillance Protocol, 2018 (or as current).
- 2. The Board of Health shall provide the HSO program in accordance with the Oral Health Protocol, 2018 (or as current).

3. The Board of Health shall offer support to school boards and schools to assist with the implementation of health-related curricula and health needs in schools, based on need and considering, but not limited to (oral health).

# **Accountability Indicators:**

Deliverables	Achievement
School Screening Accountability Indicators 2016-2017 School Year	
100% of children will receive a school screening	100% • 979 children or 8.2% absent • 267 or 2.2% refused/excluded
Total number of children screened	11,905
# of schools screened (publicly funded + private + parochial)	<ul> <li>127 schools screened in total</li> <li>89 public elementary</li> <li>16 private schools</li> <li>22 parochial schools</li> </ul>
% of children identified with urgent needs	2%
% of children identified with non-urgent needs	8.4%
Number of children with urgent needs based on visual inspection	237
Kindergarten oral health class instruction by Oral Health staff to each JK/SK class which covers:  • healthy eating • how to brush your teeth • encouragement to see dentist	225 classes
JK/SK packages given to each JK/SK student as part of the kindergarten class instruction. Package contains:  • Toothbrush • 2-minute timer • HSO pamphlet with WDGPH Dental Line	5,500 JK/SK children received an oral health package
HSO Clinic Program Indicators January 1 – December 31, 2017	
# of Preventive Services Only (PSO) applications	772
# of Emergency and Essential Services Stream (EESS) applications	534
# of children screened in HSO preventive clinics	567
Total # of children seen in WDGPH preventive clinics	1,699

# and % of children identified through HSO preventive clinics with urgent needs	579 children or 34%
# of dental cleanings performed in preventive clinics	1,092
# of sealants performed in preventive clinics	43 children required a total of 96 sealants (temporary fillings)
Calls to Dental Intake Line	1,530
Dental outreach activities	81
Fluoride Varnish Program Indicators 2017	
# of applications	1,445 school applications in 12 fluoride varnish schools
	16 applications in primary care (Guelph Community Health Center)
	46 applications at Newcomers Group
	3 applications at Come Understand Parenting (CUP) in Orangeville
	1,510 total applications in all settings
Average participation rate of all eligible school children	45%

# Performance variance or discrepancy identified:

No

### **Highlights**

The Oral Health School Screening and Surveillance program occurs in:

- 89 publicly-funded elementary schools
- 15 publicly-funded high schools
- 16 private schools (7 in Guelph, 3 in Orangeville and 7 in Wellington)
- 22 parochial schools

In total, WDGPH serves a student population of approximately 46,000 students in 143 schools in our combined geography.

The Fluoride Varnish program occurs in 12 high-risk elementary schools within Wellington Dufferin Guelph and focuses on the JK-Grade 2 population.

The Oral Health team achieves timely and effective detection and identification of children and youth at risk of poor oral health outcomes through the Oral Health School Screening and Surveillance, the Fluoride Varnish and HSO Clinic Screening programs.

Children and youth from low-income families have improved access to oral health care through HSO clinics at the WDGPH Guelph, Fergus, Orangeville, Mt. Forest and Shelburne locations as well as the five portable clinics which are held in rural areas to reach priority populations which may face transportation barriers. WDGPH also offers a Dental Intake Line which received over 1,530 calls in 2017 from parents, youth, dental providers and community partners. To further the reach and ensure eligible families and communities are aware of, and have improved access to the HSO program, the Oral Health team participated in 81 outreach activities in 2017 with a combined total attendance of 2,749 children and 2,370 adults.

The oral health of children and youth in Wellington Dufferin Guelph has improved as evidenced by our decreasing percentage of screened children identified with urgent dental needs from a high of 4.3% in the 2010/2011 school year to 2% in the 2016/2017 school year.<sup>1</sup>

### References

1. Wellington-Dufferin-Guelph Public Health. Oral Health Status Report. 2015. Retrieved from <a href="http://wdgpublichealth.ca/sites/default/files/wdgphfiles/2015\_March\_oral\_Health\_Status\_%2">http://wdgpublichealth.ca/sites/default/files/wdgphfiles/2015\_March\_oral\_Health\_Status\_%2</a> OReport Full report.pdf.