

PROJECT IDENTIFICATION

Project Title: Providence Smiles

Project Number: 1 H45 MC 00030-01

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Grantee Organization: St. Joseph Health Services of
Rhode Island

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ABSTRACT
CISS-COMMUNITY AND SCHOOL BASED SEALANT PROGRAM
1 H45 MC 00030-01

I. PURPOSE OF PROJECT AND RELATIONSHIP TO SSA TITLE V
MATERNAL AND CHILD HEALTH (MCH) PROGRAMS: Providence

Smiles, the school-based dental program, was instituted in 1997 at 10 inner city elementary schools in Providence, Rhode Island. This is a dental prevention and treatment program targeting low-income, immigrant children.

Linkages to the Maternal and Child Health Services Block Grant Programs provide oral health education and outreach opportunities that are non-reimbursable by third party payers but are important to the long-term success of school-based dental health programs.

II. GOALS AND OBJECTIVES: Providence Smiles has three major goals: 1) increasing access to preventive dental care for low-income, immigrant children; 2) reducing the rate of untreated dental disease through referrals to a family dentist or the hospital's Pediatric Dental Center; and 3) increasing the children's awareness and practice of oral hygiene measures through classroom education.

Hygienists will provide services for children as

identified by the dentist, and apply sealants when indicated; 2) Dental assistant will document dentist's findings on 100% of the children examined in each school; 3) Hygienists will complete 100% of referrals for those children with untreated dental disease; 4) Outreach worker will follow-up with over 90% of the referrals issued by the dentist/hygienist; 5) Hygienists will provide classroom education to students in grades K-5 using the curriculum developed by program staff.

II. METHODOLOGY: Three half-time dental hygienists, a dentist and dental assistant each work 20 hours per week. A full-time outreach worker follows-up with children and families to ensure compliance with referrals for treatment and address family concerns regarding sealants and/or the need for dental treatment. Children with parental consent receive cleanings, fluoride treatments, and sealants on site in the schools.

III. EVALUATION: An independent consultant completed a formal, comprehensive evaluation of Providence Smiles in 2000. This evaluation included: 1) a review of the project's goals and objectives; 2) a series of interviews with program partners; 3) focus groups with project staff, parents and school personnel. A survey was administered to

teachers in each of the ten schools, and a chart review of third graders was conducted.

Ongoing evaluation is done by reviewing and analyzing dental record statistics, conducting school personnel interviews, referral process monitoring, and following up on children referred for treatment.

V. RESULTS/OUTCOMES (POSITIVE & NEGATIVE): Uninsured children and families were informed about Rite Care, the state's Medicaid managed care program for children and families. Our trained outreach worker determined Rite Care eligibility and assisted families with completion of mail-in applications. This coverage improves access to care.

There were 4,988 children who received oral health education. The dentist performed 4,603 examinations reflecting 76.7% of enrolled students. Parents returned 3,590 consent forms, representing 59.8% of the students enrolled. There were 1,708 cleanings and fluoride treatments performed, an increase of approximately 9% over the prior year. There were 421 children who received 1,200 sealants.

In the fall of 2000, we successfully participated in the replication of Providence Smiles in three schools in Pawtucket, Rhode Island. The hospital provides technical support, staffing and medical supplies for the program,

while the Pawtucket School Department secures funding. Pawtucket Smiles reaches over 2,000 students in this core city.

VI. PUBLICATIONS/PRODUCTS: While no new pamphlets, forms, surveys, manuals, questionnaires, videotapes, slides, newsletters were produced for Providence Smiles, we did update the existing parental consent form.

VII. DISSEMINATION/UTILIZATION OF RESULTS: At year end, statistics on outcomes are disseminated to principals and nurse-teachers at each of the schools involved, the Providence School Department Office of Health Services, and the Rhode Island Department of Health.

VIII. FUTURE PLANS/FOLLOW-UP: Since third party reimbursement alone is inadequate to fully fund the school-based dental program, St. Joseph Health Services of Rhode Island continues to pursue public and private funding to supplement third party reimbursement.

Short term, Providence Smiles has had a major impact on access to oral health services for low-income children, reducing the incidence of dental caries among school age

children and addressing the need for oral health education for both children and parents.

Long term, we hope to impact on the shortage of pediatric dentists in Rhode Island by starting a dental residency training program in affiliation with the Lutheran Medical Center in Brooklyn, New York.

IX. TYPE/AMOUNT OF SUPPORT AND RESOURCES NEEDED TO REPLICATE: In addition to third party reimbursement, private/ public sector support (one-quarter to one-third of the operating budget) is critical. Bilingual staff are necessary, as is a dental practice willing to take referrals.

ANNOTATION: Providence Smiles is a dental prevention and treatment program serving Providence, Rhode Island elementary school children. This project has three major goals including: 1) increasing access to preventive dental care for low-income, immigrant children; 2) reducing the amount of untreated dental disease; and 3) increasing the children's awareness and practice of preventive hygiene measures through classroom education. Program staff provide services on site in ten inner city elementary schools. Various program materials have been developed and will be revised as needed.

KEY WORDS: Access to health care, Children's Health Insurance Program (CHIP), Collaboration, Community Based Health Services, Community Based Preventive Health, Community Health Centers, Cost Effectiveness, Cultural Diversity, Data Collection, Dental Sealant, Families, Health Insurance, Health Maintenance Organizations, Medicaid, Medicaid Managed Care, Oral Health, Outreach, Pediatric Dentistry, Robert Wood Johnson Foundation, School Health Services, School Nurse-teachers, Schools, Southeast Asians, Surveys, Third Party Payers, Uninsured, Urban Population.