

Creating a Community of Oral Health Care for Very Young Children



Maine: Targeted State Maternal and Child Oral Health Service Systems Grant Program

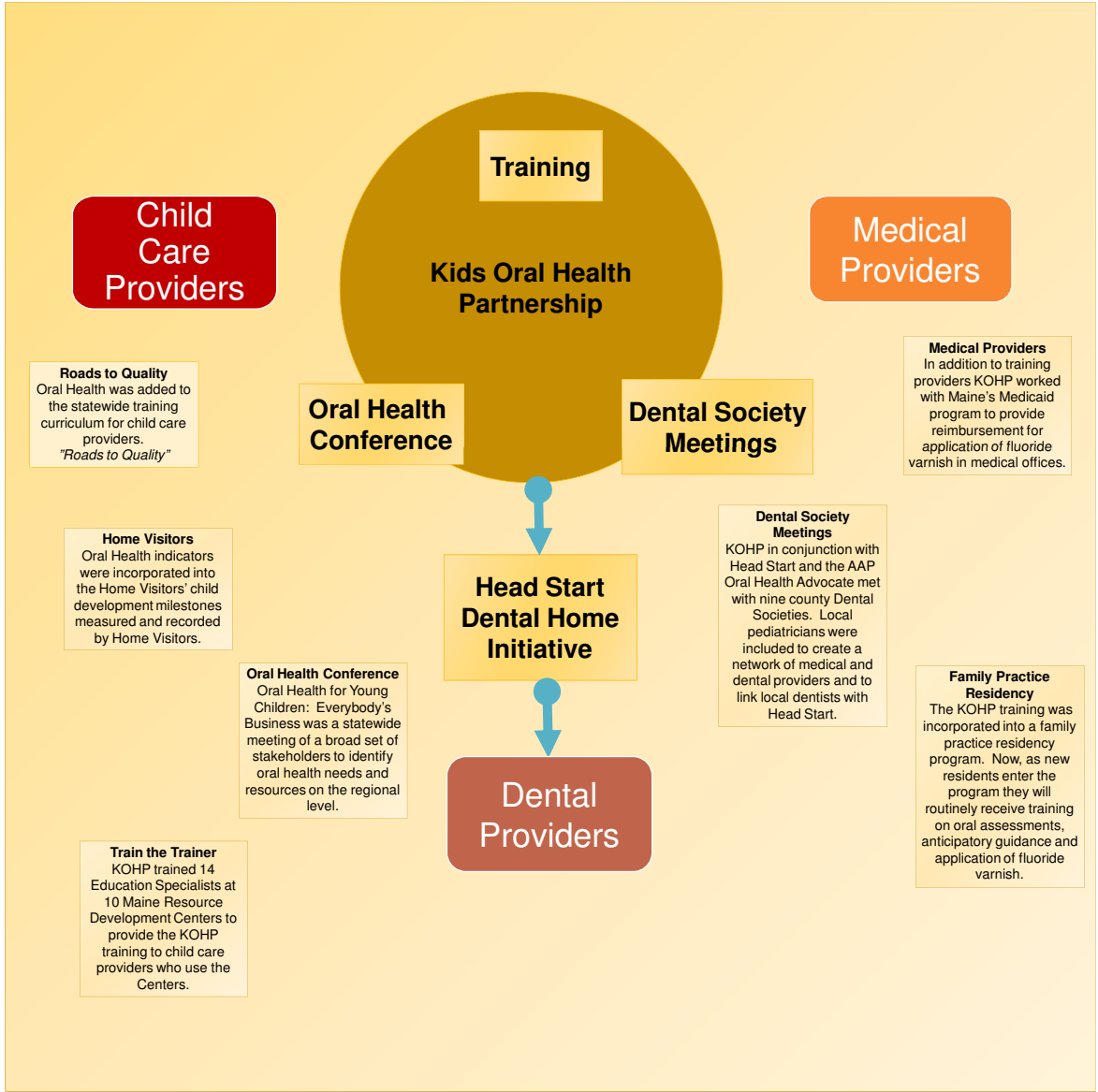
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Introduction

In 2007 the Oral Health Program of the Maine Center for Disease Control received funding from HRSA's Maternal and Child Health Bureau under the Targeted State Maternal and Child Oral Health Service Systems grant program. The broadly conceived goal of the project was to increase the ability of non-dental providers to recognize oral diseases in very young children (ages 0-5) and to follow up when appropriate with anticipatory guidance, preventive interventions and appropriate referral. The anticipated outcome was systemic change that would increase the likelihood that very young children at increased risk for oral disease would receive preventive intervention and ultimately find a dental home.

The program devised was titled the **Kids Oral Health Partnership** (KOHP) and the curriculum, developed in collaboration with the Maine Dental Access Coalition was *Maine Smiles Matter*. Two versions of the curriculum were developed, one targeted at medical providers which included information on fluoride varnish, the other targeted at childcare providers. Implementation of the program was contracted to the Oral health Program of Medical Care Development.

Over the four years of the project over 876 child care providers were trained in how to protect the oral health of young children, and over 888 health care providers were trained to do oral exams and apply fluoride varnish. Follow up surveys indicated a significant increase in knowledge and confidence in both groups and a greater willingness to refer to a dentist. These results have been reported elsewhere. Here we describe the efforts to introduce sustainable change in how young children encounter the oral health care system.



Lessons Learned

The establishment of an **Advisory Committee** including representatives from a wide variety of organizations and groups including other health delivery systems was an important aspect of the project. Advisory group membership evolved over the project as opportunities to collaborate arose. The members contributed advice and provided connections to opportunities for training over the course of the four years of the project. An advisory group is a good way to bring together a variety of professionals who work with young children to work together on behalf of oral health and to build relationships not just with the KOHP but with each other as well. The endorsement of the program by statewide medical and dental associations was also helpful.

Integration of oral health into education and data collection systems was also a key element of sustainability. Training individual providers is important, but when funding ends the training can continue if core programs have incorporated the message into their own training. The continuous collection of data provides both information on need and a means of monitoring progress over time.

Collaboration with other groups doing similar work is more productive than competition. There is more than enough work for everyone to do. KOHP collaborated with a privately funded initiative (From the First Tooth) and with the American Academy of Pediatrics Maine Chapter to leverage resources and create efficiency. Another important collaborator was Maine's state wide coalition, the Maine Dental Access Coalition.

A **conference** at the conclusion of the project was an effective means of reinforcing the message and priming the audience for the next step. Maximizing the opportunities for networking through small group meetings organized by region provided an opportunity for dental, medical and child care providers who live in the same area to exchange information about needs and make personal connections.