# SECTION I: PRACTICE OVERVIEW

## Name of the Practice:

**OPEN WIDE**

## Public Health Functions:

- Assessment – Acquiring Data
- Assurance – Population-Based Interventions
- Assurance – Oral Health Communications
- Assurance – Building Linkages & Partnerships for Interventions
- Assurance – Building Community Capacity for Interventions
- Assurance – Access to Care and Health System Interventions
- Assurance – Program Evaluation for Outcomes and Quality Management

## HP 2010 Objectives:

- 21-1 Reduce dental caries experience in children.
- 21-2 Reduce untreated dental decay in children and adults.
- 21-10 Increase utilization of oral health system.
- 21-12 Increase preventive dental services for low-income children and adolescents.

## State:

Connecticut

## Region:

Northeast
Region I

## Key Words:

Workforce development, non-dental provider, oral health training, education, anticipatory guidance; risk assessment, health promotion, disease prevention

## Abstract:

OPEN WIDE is an oral health-training program for non-dental health and human services providers throughout Connecticut, including physicians, nurses, nutritionists, childcare and outreach workers, and others. OPEN WIDE training is designed to:

- Educate health and human service providers about the importance of oral health in early childhood development;
- Build awareness and integrate oral health into existing health systems;
- Enable non-dental providers to recognize and understand oral diseases and conditions;
- Enable non-dental providers to engage in anticipatory guidance and prevention interventions, and make appropriate referral for improved oral health;
- Make a positive impact on overall health and well-being through improved oral health.

The components of OPEN WIDE include: calibrated and standardized trainer training, a trainer’s slide guide with presentation script, a full-production custom binder that includes a 70-page modular curriculum (with sections on Dental Decay, Early Childhood Caries (ECC), Risk Factors for Dental Disease, Prevention, What To Do, and How To Do It), laminated quick-reference fact sheets and clinical guides, extensive Appendices with a broad range of resources, a CD with a 45-minute slide presentation on ECC and over 50 additional slides for customizing presentations, and a continuous-loop DVD in English and Spanish for clients to view in waiting rooms. Currently, the training curriculum focuses on early childhood. Supplemental modules are being developed on Perinatal Oral Health and Geriatric Dentistry. An evaluation protocol will be implemented to assure the effectiveness of the curriculum and training methodology in achieving OPEN WIDE goals, and to identify the strengths and weaknesses in OPEN WIDE to guide further program modification and enhancement. The program began training the trainers in 2002.

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Section II: Practice Description

History of the Practice:
OPEN WIDE is an oral health-training program for non-dental health and human services providers. In the development of OPEN WIDE, the “best practices” from around the U.S. were critically reviewed, advisory and focus groups were convened, expert feedback solicited, and field-testing conducted. Grants were written and OPEN WIDE was successful in achieving funding from the State of Connecticut and two private health foundations. During 2000-2001, the purpose, goals, objectives, curriculum, resources, and timelines for OPEN WIDE were created. A total of 250 training kits were produced during FY 2002. In February 2002, after numerous revisions and enhancements based on internal and external reviews, OPEN WIDE went to press. The program began training the trainers in 2002. A training kit was distributed to each provider that was trained through the OPEN WIDE program.

In pilot testing the training program, a family practice physician was trained to be a Lead Trainer. He in turn conducted training sessions for OB-GYN residents. In May 2002, additional Lead Trainers were trained, contracts for evaluation and management of trainings were completed, and statewide trainings began in full force the following month. Approximately six Lead Trainers formed the core group for conducting the trainings, as well as for training additional support trainers. Lead Trainers served as peer trainers. For example, a physician lead trainer trained other physicians and a nurse lead trainer trained nurses. The Lead Trainers worked in partnership with volunteer dental specialists – local dentists and dental hygienists. All trainers were calibrated and standardized by the program’s contracted Evaluator (Urban Policy Strategies, Inc.). The Lead Trainers received a small per-diem to compensate them for their costs. The Connecticut Area Health Education Center (AHEC) Program was the contractor managing the statewide scheduling, coordinating and making local arrangements for the trainings. The Lead Trainers were established in the beginning of the program. At the present, funding is no longer available to contract with the AHEC program. Training is currently provided by staff within the Office of Oral Health.

Justification of the Practice:
Oral diseases and disorders can gravely impact general health and well-being. Oral disease, in the form of dental decay, is the most common chronic disease of childhood, being five times more prevalent than asthma. Dental decay and periodontitis are painful, transmittable and infectious bacterial diseases. These diseases have been linked to low birth weight and other adverse birth outcomes, cardiovascular conditions, cancer, diabetes, poor nutrition, speech impairments, and psychosocial problems. Oral disease has been reported among the most common reasons for children’s absence from or poor performance in school. The epidemic prevalence and severe impact of oral diseases and disorders clearly makes oral health the concern of all health and human services providers. An emerging awareness of the nature and severity of diseases and disorders in the mouth and their serious implications for overall health, as well as a nation-wide crisis in access to oral health care for populations with the most prevalent and advanced disease, has made it imperative that all health professionals engage more fully in oral health promotion and disease prevention. The OPEN WIDE program is an important step towards accomplishing this goal.

Administration, Operations, Services, Personnel, Expertise and Resources of the Practice:

Design of the OPEN WIDE Training Program
OPEN WIDE is an oral health-training program for non-dental health and human services providers throughout Connecticut, including physicians, nurses, nutritionists, childcare and outreach workers, and others. OPEN WIDE training is designed to:

- Educate health and human service providers about the importance of oral health in early childhood development;
- Build awareness and integrate oral health into existing health systems;
- Enable non-dental providers to recognize and understand oral diseases and conditions;
Enable non-dental providers to engage in anticipatory guidance and prevention interventions, and make appropriate referral for improved oral health; 
Make a positive impact on overall health and well-being through improved oral health.

Administration and Staffing of the OPEN WIDE Program

The Connecticut Department of Public Health Office of Oral Health administers the program. The Program Coordinator for the Office of Oral Health currently oversees the training of the OPEN WIDE program, as part of her duties as a full-time state employee. The Program Coordinator conducts the trainings and is focusing on early child care providers across the state. The updates in development for the OPEN WIDE training curriculum, which will include geriatric oral health and perinatal oral health, are being provided by two dentists from the University of Connecticut School of Dental Medicine under contracts with the Department.

The Training Curriculum

Currently, the training curriculum focuses on children’s oral health. Supplemental modules are being developed on Perinatal Oral Health and Geriatric Dentistry. OPEN WIDE provides the following training components:
- A full-color custom binder containing a modular curriculum (with sections on Dental Decay, Early Childhood Caries, Risk Factors for Dental Disease, Prevention, What To Do and How To Do It);
- Laminated quick-reference full-color fact sheets and clinical guides;
- Extensive appendices with a broad range of resources;
- A CD with a 45-minute slide presentation on ECC and over 50 additional slides for customizing presentations;
- A trainer’s printed slide guide with presentation script in English and Spanish;
- A continuous-loop DVD in English and Spanish for clients to view in waiting rooms.

Dissemination of OPEN WIDE Materials

The OPEN WIDE training curriculum and PowerPoint presentations are posted on the Connecticut Department of Public Health’s website (http://www.ct.gov/dph/cwp/view.asp?a=3125&q=388872).

In addition, since 2004, an online training curriculum is available on the National Maternal and Child Health Oral Health Resource Center’s website, which was adapted from the Connecticut OPEN WIDE curriculum (http://www.mchoralhealth.org/OpenWide/index.htm).

Target Provider Populations

At present, the target provider populations for the OPEN WIDE education sessions are primarily childcare providers, childcare center nursing consultants, WIC staff, child health providers, and advanced practice registered nurses (APRNs) in school-based health centers. The curriculum offered for the child health providers and APRNs has been modified to include fluoride varnish application and risk assessment criteria.

Evaluation

An evaluation protocol will be incorporated into the OPEN WIDE program to assess the level of integration of oral health/behavioral changes among the trained providers and their clients, assure the effectiveness of the curriculum and training methodology in achieving OPEN WIDE goals, and to identify the strengths and weaknesses in OPEN WIDE to guide further program modification and enhancement. Any needed enhancement or modification of the program will be accordingly implemented.

Outputs and Outcomes

OPEN WIDE program outputs include the following:
- An estimated 75 calls from persons interested in receiving information on OPEN WIDE or permission to use the curriculum are received by the Office of Oral Health per year;
Online access to the OPEN WIDE training materials has been posted on the Connecticut Department of Public Health’s website and on the National Maternal and Child Oral Health Resource Center’s website;  
- From February 2007 to March 2009, 30,015 individuals completed the online modules.

OPEN WIDE program outcomes include the following:
- The OPEN WIDE curriculum has gained significant local and national recognition, as evidenced by the numerous inquiries received from local and state oral health programs, as well as early childhood partners requesting toolkits and permission to adapt and personalize curriculum materials.  
- The curriculum is being utilized by local dental hygiene programs in their community outreach and education programs and in student presentations for programs serving underserved populations such as WIC, Head Start and Early Head Start.  
- The Child Health and Development Institute of Connecticut (CHDI), in partnership with the CT Chapter of the American Academy of Pediatrics and the CT Chapter of the American Academy of Family Physicians, has launched training initiatives to inform pediatricians and their staff about critical children’s health issues (in the comfort of their own offices), which includes an oral health module adapted from the OPEN WIDE curriculum.  
- Components of OPEN WIDE have been utilized by the CT Department of Social Services in the development of mandatory training curriculum for child care providers in fluoride varnish application and risk assessments, which is required for SCHIP reimbursement.  
- Within the Office of Oral Health, an initiative to integrate oral health into early childhood provider systems has been implemented (called “Home by One”). This initiative addresses age one dental visits, child health care providers’ involvement in oral health counseling, risk assessments, fluoride varnish application during well-baby visits, and parent education in oral health principles and preventive practices. The OPEN WIDE curriculum is the basis for all of the training curricula produced for this initiative.

Next Step
As a result of the success and interest raised by OPEN WIDE, supplemental modules focusing on perinatal oral health and geriatric dentistry will stress the vital impact of the oral-systemic linkages and how they impact other chronic disease conditions and health outcomes.

Budget Estimates and Formulas of the Practice:
The OPEN WIDE program had a budget of $93,000. Approximately 50 percent of the budget was devoted to the development and production costs (binder, contents, resource materials, evaluation, etc.) and 50 percent for media and marketing costs (original TV and radio spots, air time, etc).

With the OPEN WIDE curriculum and related material already developed and being made available to the public, costs to implement this program by other States should be substantially less.  

Budget elements to consider for program implementation could be (1) dedicated staff person to manage day-to-day operations of program; (2) costs to conduct training of trainers; (3) stipends for trainers; and (4) ongoing evaluation.

Lessons Learned and/or Plans for Improvement:
Considerable delays in production were encountered because of the need to do innumerable revisions based on the input, feedback, direction, and need for approval from many individuals. With a program this size, it is important to have a clear, well-defined protocol and timeline for input, feedback, edits and approvals – and it is important to adhere to this protocol and timeline. Communication lines need to be clearly defined among the different sectors of the primary agency working on the program, as well as between the primary agency and outside vendors, contractors and others.

The dedicated commitment of a staff person to manage the program and lead trainers is important to the success and sustainability of the program. If the trainers are to be recruited from outside the primary agency, their long-term commitment to the program is best assured by providing them with reasonable and appropriate monetary compensation.
Based on feedback from health care providers, the training curriculum offered specifically to health care professionals should be enhanced to include additional technical and scientific elements regarding the oral-systemic link.

With the absence of a dedicated staff person after the development of the curriculum to oversee the day-to-day management of the OPEN WIDE program in CT, the program went through a period of time with no oversight or coordination. There were, however, several training sessions that continued to be conducted by individuals who had received the initial training, who had all of the necessary materials, and who had opportunities to educate various groups and at-risk populations.

The curriculum included current oral health tenets and did not need any major revisions to content or practices.

OPEN WIDE is adaptable to modification and can be “customized” to meet the needs of a variety of audiences.

As a result of being educated in OPEN WIDE, several groups requested additional information and training addressing the oral health needs and considerations in other population groups such as children with special health care needs and older adults.

Available Resources - Models, Tools and Guidelines Relevant to the Practice:


- **Open Wide: Oral Health Training for Health Professionals**, a series of four online modules designed to assist health and early childhood professionals working in community settings (for example, Head Start and WIC staff) to promote oral health in the course of promoting general health for infants, children, and their families. Visit: [http://www.mchoralhealth.org/OpenWide/index.htm](http://www.mchoralhealth.org/OpenWide/index.htm)
SECTION III: PRACTICE EVALUATION INFORMATION

Impact/Effectiveness
How has the practice demonstrated impact, applicability, and benefits to the oral health care and well-being of certain populations or communities (i.e., reference scientific evidence, outcomes of the practice and/or evaluation results)?

The impact of the OPEN WIDE program is its integration of oral health into total health. By educating providers (e.g., physicians, nurses, nutritionists, childcare providers and outreach workers) on how to integrate oral health within their practices, the awareness of the importance of early intervention practices and disease prevention has expanded to reach at-risk populations who traditionally do not receive oral health guidance for infants and toddlers. The OPEN WIDE program promotes anticipatory guidance for oral health, providing dental screenings in the various care settings, and establishing a dental home for every child.

Outcomes included:
- The OPEN WIDE curriculum has gained significant local and national recognition and is a key training resource (four online modules based on OPEN WIDE) posted on the National Maternal and Child Oral Health Resource Center’s website.
- The curriculum is being utilized by local dental hygiene programs in their community outreach and education programs.
- The Child Health and Development Institute of Connecticut (CHDI), in partnership with the CT Chapter of the American Academy of Pediatrics and the CT Chapter of the American Academy of Family Physicians, has launched training initiatives to inform pediatricians and their staff about critical children’s health issues, including an oral health module adapted from the OPEN WIDE curriculum.
- Components of OPEN WIDE have been utilized by the CT Department of Social Services in the development of a mandatory training curriculum for child care providers in fluoride varnish application and risk assessments, which is required for SCHIP reimbursement.
- The Office of Oral Health’s initiative to integrate oral health into early childhood provider systems (“Home by One”), addressing oral health during well-baby visits and educating parents in oral health principles and preventive practices, uses the OPEN WIDE curriculum as the basis for all trainings for this initiative.

Efficiency
How has the practice demonstrated cost and resource efficiency where expenses are appropriate to benefits? How has the practice demonstrated realistic and reasonable staffing and time requirements? Provide unit cost analysis or cost-benefit analysis if appropriate.

The train the trainers is a cost-effective and efficient strategy. The OPEN WIDE program draws on the donated time and efforts of the volunteered trainers (contributed in-kind services) to promote and educate about oral health. It is essential to consider the need for personnel dedicated to program oversight to ensure sustainability.

Furthermore, the OPEN WIDE curriculum and related materials already developed are being made available to the public via the Internet. Consequently, costs to implement this program by other States should be substantially less.

Demonstrated Sustainability
How has the practice showed sustainable benefits and/or how has the practice been sustainable within populations/communities and between states/territories? What mechanisms have been built into the practice to assure sustainability?

The OPEN WIDE program was developed and began training the trainers in 2002. The training of non-dental providers has resulted in the development of a network of oral health advocates to educate families on a long-term basis.
Collaboration/Integration

How has the practice built effective partnerships/collaborations among various organizations and integrated oral health with other health projects and issues? What are the traditional, non-traditional, public and private partnerships/collaborations established by the practice for integration, effectiveness, efficiency and sustainability?

In the development and implementation of OPEN WIDE, collaboration and integration are key factors:

- State agencies and professional organizations in Connecticut, as well as other states, provided input and review in the development of the training curriculum.
- Volunteer dental specialists, local dentists and dental hygienists will provide training in their communities and throughout Connecticut.
- The oral health training program for non-dental health and human services providers throughout Connecticut will integrate oral health within the services provided by physicians, nurses, nutritionists, childcare and outreach workers, and others.
- Key components of OPEN WIDE have been adapted for use in a training curriculum utilized by the Child Health and Development Institute of Connecticut (CHDI), in partnership with the CT Chapter of the American Academy of Pediatrics and the CT Chapter of the American Academy of Family Physicians.
- Organizations in CT that have adapted OPEN WIDE curriculum into their training curricula include: Department of Social Services, dental hygiene schools, AHECs, school-based health centers, and maternal and child health partners.

Objectives/Rationale

How has the practice addressed HP 2010 objectives, met the National Call to Action to Promote Oral Health, and/or built basic infrastructure and capacity for state/territorial/community oral health programs?

The oral health training provided by OPEN WIDE will support efforts in making advances toward the following Healthy People 2010 objectives:

21-1 Reduce dental caries experience in children
21-2 Reduce untreated dental decay in children and adults
21-10 Increase utilization of oral health system
21-12 Increase preventive dental services for low-income children and adolescents

Extent of Use Among States

Describe the extent of the practice or aspects of the practice used in other states.

The train the trainer strategy has been widely used for promoting health in many disciplines. The 2009 ASTDD Synopses of State Dental Public Health Programs Report (data for FY 2007-2008) showed that 45 states reported having programs for oral health education/promotion.

The online training module available on the National Maternal and Child Health Oral Health Resource Center’s website (http://www.mchoralhealth.org/OpenWide/index.htm) has proven to be an effective means of distributing the OPEN WIDE curriculum to an extensive number of individuals. From February 2007 to March 2009, more than 30,000 individuals have completed the online modules.

The extent among other states utilizing the train the trainer strategy for non-dental providers in promoting oral health and obtaining behavioral changes in their practices is difficult to assess, as information on the number of programs utilizing or adapting the OPEN WIDE curriculum is not transmitted back to the Connecticut Office of Oral Health.