

**NEW MEXICO
EARLY HEAD START/HEAD START AND ORAL HEALTH FORUM
MAKING CONNECTIONS: EMBRACING THE FUTURE
REPORT AND ACTION PLAN**

The Early Head Start/Head Start (EHS/HS) and Oral Health Forum was held on May 8th and 9th, 2003 in Albuquerque, NM at the Albuquerque Convention Center. The Forum brought together over 100 persons to address oral health issues and provide input for development of an action plan aimed at improving the oral health status of the State's EHS/HS population.

The New Mexico Department of Health (DOH)/Office of Dental Health (ODH) provided the leadership in soliciting funds from the Association of State and Territorial Dental Directors (ASTDD), and the Maternal and Child Health Bureau/Health Resources and Services Administration (HRSA) and plus the following sponsors:

The New Mexico Department of Health/Office of Primary Care & Rural Health,
New Mexico Head Start Collaboration Office,
Texas Tech University/Head Start Quality Improvement Center,
New Mexico Dental Association,
New Mexico Chapter of the Hispanic Dental Association,
New Mexico Dental Hygiene Association,
Albuquerque Area Dental Support Center/Indian Health Services,
New Mexico Health Resources, Inc., Affiliated Computer Services (ACS), and
Delta Dental Plan of New Mexico.

The ODH convened the following partners to participate in the planning process and program activities:

New Mexico Department of Health/Office of Dental Health,
Office of Primary Care & Rural Health,
Women, Infants and Children (WIC) Program
La Madrugada Early Head Start/City of Albuquerque;
New Mexico Children, Youth, and Family Department/Head Start Collaboration Office;
New Mexico's EHS/HS Programs and Tribal Head Start Programs;
Albuquerque Area Dental Support Center (AADSC),
University of New Mexico Dental Hygiene and Division of Oral Health;
New Mexico Oral Health Council;
Mira Consulting, Inc., ACC Consultants, Inc., Participa! Dental Service;
Community Dental Services and Inc., La Clinica de Familia.

Background Justification

An EHS/HS Head Start and Oral Health Forum was considered to be beneficial for New Mexico because it would be an opportunity to develop innovative and comprehensive statewide approaches to achieve improved oral health for the state's children enrolled in Head Start Programs as well as the pre-school population. The Forum was an opportunity

to bring key stakeholders together to develop and strengthen both public and private partnerships for the purpose of developing an action plan for prevention of dental disease, for enhancing dental care access, and for improved oral health of New Mexico's children. A forum was necessary in order to develop methods to determine how to effectively incorporate prevention, education, and dental services into the Head Start Programs; expand the dental safety net; broaden provider networks; and develop more cost-effective state financing and purchasing strategies to eliminate disparities in health status among the State's various population groups.

The potential barriers and challenges to prevention and reduction of dental disease in the Early Head Start (EHS) and Head Start (HS) population are as follows:

- Socioeconomic indicators for New Mexico (NM)—NM ranks 49th in the country in oral health access, 50th in poverty, and 49th in uninsured residents; 2nd in the proportion of American Indians and has the highest proportion of Hispanics, 22% of NM residents live in poverty compared to 13.2% U.S. residents living in poverty.
- Lack of dental providers— NM faces a serious shortage of dentists. The Federal Standard for dentists serving population is 1 full time equivalent (FTE) per 1,050 persons. NM's median is 1 FTE dentist per 3,297 persons. None of New Mexico's counties meet the Federal Standard for dentists serving population. Three counties have no full-time dental service.
- NM does not have a dental school.
- NM lags behind other states in oral health status and dental access. Results from the Office of Dental Health's 2000 Statewide Oral Health Survey of third grade children showed that:
 - 65% had caries experience,
 - 35% had untreated decay,
 - 37% needed dental treatment (routine and urgent),
 - 5% needed urgent treatment,
 - 19 % had a toothache in the last month,
 - 65% had visited a dentist in the last year,
 - 10% had never been to a dentist, and
 - 27% needed care but could not get it.

The partners in providing oral health services to EHS/HS children consists of ~~include~~ a strong public-private network including the NMDOH/Office of Dental Health and several private independent dental providers. Gaps exist because New Mexico is a large rural state with many Head Start Centers located in areas where dental providers are lacking. This is compounded by the few dentists willing to accept Medicaid.

As justification for convening a Forum, the Office of Dental Health outlined past oral health accomplishments including two statewide dental summits. The first summit was held in January 2000 in Santa Fe and the second was held in April 2002 in Las Cruces. Over one hundred individuals participated in each summit. During the summits issues important to the EHS/HS population were identified and discussed throughout both summits. Topics addressed in the various sessions included finance and legislation,

border health, prevention, workforce/systems capacity. Although having convened both Summits, the ODH determined that it would be important to specifically address the challenges of dental care access and oral health needs of the EHS/HS population.

Planning Process/Group

To ensure full geographic and diverse participation in the Forum, the ODH identified representatives to assist in the planning process from each of the State's four public health districts. Participants for the core-planning group included representatives from the following:

DOH/Office of Dental Health/Office of Primary Care & Rural Health/WIC,
New Mexico Head Start Association,
New Mexico Head Start Collaboration Office,
New Mexico Oral Health Council,
University of New Mexico Dental Hygiene Program and Division of Oral Health,
Indian Health Service,
Head Start Tribal Organizations,
New Mexico Health Resources, Inc.,
Region VI Administration for Children and Families (ACF) consultant, and
Head Start staff and parents.

The planning group held their first meeting in January 2003 to identify goals and objectives, issues and priorities. Key stakeholders were identified and workgroups were formulated. Meetings were held monthly with the following objectives and timelines:

- By February 2003, agenda, time, date, location of the forum was determined.
- By March 2003, participants, speakers, mailing lists, and invitations sent.
- By April 2004, confirm presenters, finalize program and Forum brochure/mail/distribute, access logistics, determine meals/menu, and assign facilitator responsibilities.
- By May 2004, registration, conference arrangements were handled by NM Health Resources, Inc. who also served as the fiscal agent.

Methods to Develop an Action Plan

One statewide Forum was convened over a two-day period. The expert planning group developed an agenda relevant to the needs of New Mexico's preschool children, which would lead to the development of an Action Plan. The facilitated, regionally grouped, roundtable sessions provided an opportunity for participants to provide input for the development of the Action Plan. The agenda is as follows:

Day One-

- Master of Ceremonies, Ron Kubiak, DDS, La Clinica de Familia
- Welcome and Introductions--Jerry Harrison, PhD, Executive director, NM Health resources: Ron Romero, DDS, MPH, State Dental Director, NMDOH; Fred

Sandoval, MPA, Deputy Secretary, NMDOH, Keynote Address--Phil Weinstein, PhD, Professor, Dental Public Health Sciences, Pediatric Dentistry and Psychology, University of Washington, Sponsored by Albuquerque Dental Support Center

- Head Start Survey Results--Diane Rodriguez, State Coordinator, Head Start Collaboration, NMCYFD
- Legislative Results-- Jerry Harrison
- Break (Sponsored by NMDA), Networking, Exhibits
- Panel Presentation: Addressing Access Issues--Ginny Berger, RDH, ACC Consultants, Inc., Dan Mirabal, CEO, Mira Consulting, Inc., Sandy Roe, RDH, Participa! Dental Services
- Making a Connection: Dental Health and Disease--Christine Nathe, RDH, MS, Associate Professor, UNM Dental Hygiene Program
- Dinner: Embracing the Future--Ernie Garcia, DDS

Day Two-

- Introduction of Daily Activities--Ron Kubiak
- Facilitated Roundtables to identify specific issues, actions, and plan.
 - District I: Harvey Licht, Office of Primary Care and Rural Health
 - District II: Ron Romero, Office of Dental Health
 - District III: Diane Rodriguez, Head Start Collaboration Office
 - District IV: Mary Altenberg, Albuquerque Dental Support Center
- Presentations
 - Dental Track (New Tools to Control Caries, Phil Weinstein, PhD)
 - Head Start Track (Nutrition & Dental Health, Deanna Torres, WIC; Mary Altenberg, Albuquerque Dental Support Center)
- Break/Networking/Exhibits (Sponsored by NMDA)
 - Head Start Track (New Tools to Control Cavities, Phil Weinstein, PhD)
- Lunch
- Reports from Roundtable Sessions
- Wrap up and Adjourn

Invitees/Participants

The Planning Group's goal was to assure diversity and representation from major stakeholders. Representatives from state agencies, EHS/HS organizations and stakeholders, academic institutions, professional associations, public/private organizations, community health centers, Tribal organizations, the four public health districts, policy makers, and parents. (See Attachment A for list of participants)

Attendees included representatives Head Start and Early Head Start Staff, Regional Administration for Children and Families Office staff, The Health Resources and Services Administration (HRSA) Regional Office Dental Consultant and Maternal and Child Health Consultants, Medicaid Regional and State Staff, Regional Training and Technical Assistance providers with Quality Improvement Centers, members of

state dental and dental hygiene professional associations and academic institutions, Head Start and Early Head Start Directors, Health Coordinators, State Head Start Associations. Health Start State Collaborations Officers and participants from community-based organizations, WIC staff, Primary Care and Rural Health, School Health staff, state dental director, the Office of Dental Health staff, Oral Health Council, legislators/policymakers, and parents.

Expense	Estimated	Budget		In-Kind	Sponsors
		Actual			
Meeting Facility		\$1,000	\$4,000		
Meeting Room/Space		\$800	\$ 3,500		ASTDD
AV Rental		\$200	\$ 500		ASTDD
Travel		\$3,500	\$2,500		
Parents/Teachers/Staff		\$2,000	\$ 800		ASTDD
Speakers		\$1,000	\$1,500	\$1,500	AADSC
Planning Committee		\$500	\$ 200		ASTDD
Facilitators		\$1,000		\$1,000	DOH,CYFD,AADSC
M of C				\$ 500	La Clinica de Familia
Printing/Copying/Phone		\$750		\$ 750	HSQIC
Mailing/Marketing		\$500		\$ 500	NMDOH,NMHR
Supplies		\$750		\$ 750	NMDOH NMDOH,NMHR,CYFD
Staffing		\$1,000		\$1,000	D
Breaks and Lunch		\$2,000	\$2,750		
Continental Breakfast		\$500	\$ 500	\$ 500	ACS, NMDHA, NMHDA
Midmorning Break		\$250	\$ 375	\$ 375	NMDA
Lunch		\$1,000	\$ 1,500	\$1,500	Delta Dental, NMHR
Afternoon Break		\$250	\$ 375	\$ 375	NMDA
Total		\$10,000	\$9,250	\$8,750	

Evaluation

Two forms of evaluation were used to evaluate the Forum. An overall Conference Evaluation was used. Participants were asked to rate the of the conference in terms of:
 New information, skills and or techniques to which you were exposed;
 Flow of the conference;
 Comfort and adequacy of the conference facility; and,

Accommodations and meals.

Participants were asked to provide recommendations for improving future conferences. Because Continuing Dental Education credits (7) could be earned for attendance at the Forum, eligible participants were asked to complete another evaluation for the educational track of the program.

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ACTION PLAN**

Goal 1: Change Perceptions to Oral Health

Actions Steps:

By the end of School Year 05:

1. Head Start parents and staff will work and collaborate with local health care providers and community leaders to bring awareness to the needs of local Head Start programs.
2. Head Start staff will invite local providers to attend Head Start meetings and events to inform the health care community of its needs and requirements.
3. Head Start parents and staff will participate in local events to provide the community with information about the needs and challenges as well as the benefits and services of the Head Start program.
4. Head Start parents will educate local policymakers about the challenges of the Head Start children accessing dental services (i.e., lack of local dental providers in their area, lack of comprehensive care, travel in accessing care).
5. Head Start agencies will work with Head Start Collaboration Office to advocate for policy development and funding in areas that would enhance access to dental care for Head Start children (i.e., Medicaid reimbursement rates, investigate regulatory changes, alternative payor sources and funding).
6. The Oral Health Council will work with stakeholders and policy makers to bring awareness to the issues and challenges regarding access to care for the pre-school population in the State.

Goal 2: Build infrastructure

By the end of SY 04:

1. The Office of Dental Health will explore funding opportunities to develop a State Oral Health Surveillance System to assess the public health impact of oral diseases and conditions, to identify gaps, to demonstrate the need for interventions/resources, and to enhance data collection, analysis, and dissemination.
2. The Office of Dental Health will inform dentists about incentives for providing care to the Developmentally Disabled population and training opportunities.
3. The Office of Dental Health will develop an Early Childhood Caries Prevention Program to include the benefits of fluoride interventions (i.e., varnish/topical, rinses, and community water fluoridation).
4. The Head Start State Collaboration Office will assess oral health educational resources to enhance dental knowledge for Head Start staff and parents and will distribute best practices to Head Start programs.
5. The Office of Primary Care and Rural Health will develop a provider directory of State funded community health dental clinics and distribute to all Head Start programs and will work on expanding the dental workforce in rural areas.

Goal 3: Remove barriers to care:

By the end of SY 05:

1. The Office of Dental health will seek funding opportunities to develop and implement an oral health case manager/care care coordination program to link children to services/find dental homes, assist with transportation issues as well as assist with removing barriers to care for Head Start children.
2. The case manager will work with Head Start parents and staff to provide education materials and follow-through on treatment needs.
3. The case manager will engage parents and encourage family involvement on the parental role in prevention, oral hygiene and home care techniques to maintain the oral health of their children.
4. The Office of Dental Health/Dental Director and the Medicaid/Dental Director will work together to increase the Medicaid provider network statewide.
5. The Oral Health Council will work with the Human Services Department and other agencies to address the Medicaid issues including reimbursement rates and benefits; to expand the scope of Medicaid-covered oral health services to include services for post natal coverage; to advocate for resources for public dental clinics; to identify funding streams for pilot projects that would address oral health awareness and improvement.