

Dental Public Health Project Descriptive Report Form

Please provide a description of your organization's successful dental public health project by completing this form. Add extra lines to the form as needed but stay within **word limits**.

Please return the completed form to Lori Cofano: lcofano@astdd.org

Name of Project

Smile Across Montana - Improving Access to Care

Executive Summary (250-word limit))

Smiles Across Montana (SAM) is a non-profit organization whose mission is to eliminate oral health disparities in Montana. SAM's team of experienced dental assistants, dental hygienists, and dentists provide preventive diagnostic and minimal restorative dental services using mobile and tele-dental equipment to the many Montanans who are financially or otherwise unable to access dental care. We do so by setting up portable and mobile dental clinics in schools, nursing homes, Head Start classrooms, WIC clinics, homeless shelters, and community centers while forming close connections with the communities served. The program has ten portable clinics and one three-chair mobile clinic.

SAM empowers patients, families, and communities by providing education about oral health. Our goal is to have every patient who cannot be seen consistently in a dental office visited at least three times a year to maintain continuity of care, which allows us to improve oral hygiene habits, catch disease progression early, and ensure that those in need are getting the help they require.

Furthermore, SAM's objectives include increasing advocacy and helping navigate further care for patients facing barriers related to finances, insurance, mobility, or otherwise, as well as furthering the spread of knowledge about oral health disparities through collaboration with like-minded groups and educational webinars. SAM also seeks to improve medical-dental integration by providing nursing students with knowledge on general oral health, the connections between dental health and overall health, and the services that they, as healthcare providers, can implement to communicate better, refer and document oral health concerns.

Name of Program or Organization Submitting Project

Smiles Across Montana (SAM)

Essential Public Health Services to Promote Health and Oral Health in the United States

Place an "X" in the box next to the Core Public Health Function(s) that apply to the project.

Х	Assessment

- X Policy development
- X Assurance

http://www.astdd.org/state-guidelines/

Project submissions will be categorized by the Core Public Health Functions on the ASTDD website.

Healthy People 2030 Objectives

List Healthy People 2030 objectives related to the project.

- Reduce the proportion of adults with active or untreated tooth decay OH-03
- Increase the proportion of oral and pharyngeal cancers detected at the earliest stage — OH-07
- Increase use of the oral health care system OH-08
- Reduce the proportion of children and adolescents with lifetime tooth decay OH-01
- Reduce the proportion of children and adolescents with active and untreated tooth decay — OH-02
- Reduce the proportion of people who can't get the dental care they need when they need it AHS-05
- Reduce the proportion of older adults with untreated root surface decay OH-04
- Reduce the proportion of adults aged 45 years and over who have lost all their teeth — OH-05
- Reduce the proportion of adults aged 45 years and over with moderate and severe periodontitis — OH-06
- Increase the proportion of low-income youth who have a preventive dental visit OH-09
- Increase the proportion of children and adolescents who have dental sealants on 1 or more molars — OH-10

This information will be used as a data resource for ASTDD purposes.

Keywords for sorting the project by topic.

Provide **three to five** keywords (e.g., access to care, children, coalitions, dental sealants, fluoride, policy, Medicaid, older adults, pregnant women, etc.) that describe the project. Keywords are used to categorize submissions.

- Access to care
- Mobile dentistry
- Preventive care
- Children
- Older adults

Project Overview

(750-word limit)

1. What problem does the project address? How was the problem identified?

Many individuals lack access to dental care for a variety of reasons. People face financial barriers to access, such as not being able to afford dental insurance or the out-of-pocket costs for dental services. There are also shortages of dental providers in certain areas and limited options that accept certain insurance plans. Others, such as children and older adults, may have difficulty securing transportation to and from dental providers. To mitigate these barriers, SAM provides preventative and diagnostic services through mobile and teledental equipment to those in need at no cost to the patient.

Communities are reaching out to our program for much-needed services. As we all know, there are health provider shortage areas across the nation, and many communities do not have any dental providers in their area.

2. Who is the target population?

SAM primarily serves vulnerable populations, such as children and older adults, who would financially or otherwise be unable to receive care. We reach these individuals by visiting schools, Head Start classrooms, WIC clinics, homeless shelters, migrant clinics, and community centers throughout the state.

3. Provide relevant background information.

SAM provides preventative and diagnostic services through mobile and tele-dental equipment to Montanans facing various barriers to accessing dental care by visiting schools, Head Start classrooms, WIC clinics, homeless shelters, migrant clinics, and community centers throughout the state. SAM was founded on the idea that EVERYONE deserves access to equitable oral health care. Two dental hygienists to start with, and we have grown to 20 team members. The founder actually spent her own time and money to build this program in the beginning stages, learned how to apply for and write grants, and sought out partnerships with like-minded groups and dental companies.

4. Describe the project goals.

SAM provides preventative and diagnostic services through mobile and tele-dental equipment to Montanans facing various barriers to accessing dental care by visiting schools, Head Start classrooms, WIC clinics, homeless shelters, migrant clinics, and community centers throughout the state Our goal is to have every patient that cannot be consistently seen in a dental office visited at least three times a year by SAM to maintain continuity of care, which allows us to better change oral habits, catch disease progression early, and ensure that those in need of care are getting the help they require. We also strive to educate our patients, their caregivers and families, and the staff and administration of the facilities we visit to help them take ownership of and improve the dental health of the community.

We are working toward hosting dental clinics in more facilities and communities to expand our capacity to serve people in areas of low access to dental care, including in Native lands, and developing. We have also developed a recruitment strategy that targets diverse dental and healthcare professionals to ensure that SAM staff members reflect the diversity of the communities we aim to serve. We are working to improve our ability to serve these communities by implementing cultural competency training, a patient feedback system, and a language access plan for patients with limited English proficiency. We will continue to work with and establish new partnerships with community organizations that serve diverse populations to increase awareness of SAM's services and identify the community's specific health needs.

Another goal is to outfit a trailer to become a fully equipped mobile dental clinic. We currently bring our mobile equipment into senior facilities and clinics. This can hinder care due to the limited availability of space in many of our partner nursing facilities. We often must work in cramped spaces, which can be uncomfortable for the patient and the provider. In some of these more difficult places to work, we have difficulty finding a sterile or clean space to see the patient. We have, on occasion, not been able to see the patient due to the inability to find a space. We would be able to bring patients from the facility into the mobile clinic to complete their care in a safer, more efficient manner.

Resources, Data, Impact, and Outcomes

(750-word limit)

1. What resources were/are necessary to support the project (e.g., staffing, volunteers, funding, partnerships, collaborations with other agencies or organizations)?

Our staff includes dental hygienists and dental assistants across the state of Montana who facilitate our mobile dental clinics in different parts of the state. Our work is primarily financed by grants and donations from philanthropic organizations or initiatives. We also rely on partnerships with other healthcare organizations such as the Department of Public Health and Human Services, Montana State College of Nursing, Head Start Health Managers, Indian Health Service, Montana Pediatrics, and Tribal Health to facilitate clinics.

Dental hygienists and assistants are paid to provide services. When possible, insurance is billed for services rendered. Grant funding and donations help to cover the cost of providing services to the uninsured.

- 2. (a) What process measure data are being collected (e.g., sealants placed, people hired, etc.)?
 - (b) What outcome measure data are being collected (e.g., improvement in health)?(c) How frequently are data collected?

We track sealants placed, services provided, etc., on a daily basis and we are working on the ability to track oral health improvements. Our program tracks some health equity data, but there are several reasons such as lack of resources, data infrastructure, and software issues that have made it difficult to track sufficiently. One of our goals is to develop a system for efficiently tracking this much needed data.

A recent upgrade to our software allows us to track all services completed, referrals made and referrals completed.

3. How are the results shared?

The results are shared with our funder for our grant reporting. Some of the results are part of a grant/research project with Montana State University (MSU) Nursing. Those results are shared through MSU.

Budget and Sustainability

(500-word limit))

Note: Charts and tables may be used.

1. What is/was the budget for the project?

\$650,000

2. How is the project funded (e.g., federal, national, state, local, private funding)?

The project is funded by private donations, private grants, subgrant, federal and insurance.

3. What is the sustainability plan for the project?

We are able to sustain but not grow without funding.

Lessons Learned

(750-word limit))

(a) What lessons were learned that would be useful for others seeking to implement a similar project?

We would work on using non-dental providers to do more administrative work and increase communication in communities and with our patients.

(b) Any unanticipated outcomes?

Improvements in the oral health of our patients. The number of patients we see continues to grow, and the number of people with access to preventative services is helping to improve not only oral health but the overall health of our communities.

(c) Is there anything you would have done differently?

Resources

List resources developed by this project that may be useful to others (e.g., guidelines, infographics, policies, educational materials). Include links if available.

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To Be Completed By ASTDD			
Descriptive report number:	29004		
Associated BPAR:	Early Childhood Caries Prevention and Management		
Submitted by:	Smiles Across Montana		
Submission file name:	DES29004MT-sam-improving-access-2023		
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