



# Dental Public Health Activity Descriptive Summary

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## Kansas School Screening

The Bureau of Oral Health has implemented a statewide oral health screening program to satisfy the [Kansas State Statute for Annual Dental Inspection \(K.S.A.72-5201\)](#). The KDHE Screening Program utilizes volunteer dentists and dental hygienists to do simple oral health screenings for Kansas school children (K-12) in schools during the school day. Screeners use a standardized screening protocol based on the Basic Screening Survey. The screeners are trained and calibrated using an online training course: <https://ks.train.org/DesktopModules/eLearning/CourseDetails/CourseDetailsForm.aspx?tabid=62&CourseID=1015144>). Screeners record their findings on program forms and the results are aggregated by school staff and entered into a web based data system. Screening data is posted annually on the [Bureau of Oral Health's website](#). A summary of an individual child's screening results is sent home to parents, along with referral sources for dental care. A screening program toolkit containing details of the program and all forms is available on: [http://www.kdheks.gov/ohi/download/screening\\_initiative/Kansas\\_School\\_Screening\\_Toolkit.pdf](http://www.kdheks.gov/ohi/download/screening_initiative/Kansas_School_Screening_Toolkit.pdf).

The screening program has proved to be one of the Bureau's most popular and successful projects. The program engages private practitioners in a community activity and raises their awareness about unmet dental needs in their communities. Schools are happy for the assistance in meeting the statutory mandate, and often use this opportunity to educate their students on oral health topics. The screening program also provides the state with a wealth of school, district and county level oral health data on children grades K-12. The screening program doesn't replace the Basic Screening Survey in Kansas, but it does help the Bureau identify areas with high unmet needs. Using the screening data the Bureau chooses schools for school sealant programs, and monitors progress of school based preventive and educational programs. Oral Health advocates and researchers have used the screening data for advocacy efforts, research papers and policy discussions.

## KS School Screening Results 2013-2016

	2013-2014	2014-2015	2015-2016
Number of Children Screened	153,838	159,353	158,723
Counties Screened	89	93	92
Untreated Decay – Children with obvious untreated caries in at least 1 tooth.	15.79%	16.46%	15.56%
Treated Decay – Children with at least one restoration.	38.03%	37.65%	38.37%

3 <sup>rd</sup> Graders with Sealants	42.725	44.05%	43.47%
Urgent Care Needed (Pain/ Swelling Present)	2.71%	2.37%	2.44%

The startup costs of the Screening Program (staff, IT – database set up and online training) were funded by the Kansas Health Foundation Oral Health Program Infrastructure grant. The Bureau maintains the Screening Program as part of their School Sealant Program. For schools with sealant programs, the screening data provides a baseline from which progress can be measured, and the sealant program staff performs the screenings and data entry. Screening supplies (gloves, masks, toothbrushes, etc.) are donated by the Delta Dental Foundation of Kansas and distributed by the Bureau of Oral Health.

### **Lessons Learned:**

As with all school based oral health programs, it is crucial to have local school administration approval and involvement from the outset. Each school district is different and it is important to respect their process when asking for participation. It is also important to respect teachers, school nurses and students' time when planning and doing oral health screenings. Screenings are planned in collaboration with the school schedule to avoid common conflicts such as school testing days. We use local screeners that often have connections to the schools. Schools do not always welcome state level mandates when it comes to programs in their schools that require their students to be away from class. Using local people to do the screenings paves the way for participation.

We also use local safety net clinic providers as screeners. Often dental clinics and local health departments already are doing outreach programs in schools, and it is better to work with them to include our Screening program in their existing work than to try and supersede what they are already doing. These providers are often looking to expand their Medicaid patient base, and this is one way that they can reach children that potentially could come to the clinic for care. These clinics also are often providers for our School Sealant programs.

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