Dental Public Health Activities
Descriptive Summaries

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Georgia Access to Dental Services I (GADS I) – Oral Health Integrated Systems Development Program

The Oral Health Section, Division of Public Health, Georgia Department of Human Resources initiated a project in FY 2004 called “Georgia Access to Dental Services” (GADS). The project was funded through the HRSA’s Oral Health Integrated Systems Development Grant ($50,000/year for the four year project period 06/02 -05/06). The goal of the project is to increase the dental prevention and treatment services availability in Georgia and to improve the access of low- and moderate-income children to these services. The project aims to develop and implement community level plans that increase the supply of dental providers, improve access to available services, educate stakeholders, providers and families about oral health and the service system, and provide outreach to identified population groups to assure use of services. Part I of the project (GADS I) worked with 13 health districts. An assessment was conducted to gather information to select communities/districts that will receive “seed” funds to begin planning, to promote building of coordinated, community-based oral health delivery systems. Contracts were awarded to the health districts for initial planning ($2,250 for each district) of system building activities. The Oral Health Section and a consultant who has specialized knowledge relating to community planning and evaluation was available to assist the “seeded” communities, during the initial planning year. Ten districts accepted initial planning funds ($2,250) but did not choose to apply for pilot funding to continue their efforts. Three districts wanted to be considered for Years 2-4 pilot funding and to continue the planning and implementation of their community oral health plans to build coordinated, community-based oral health delivery systems: (1) Dalton 1.2, (2) Dublin 5.1, and (3) Columbus 7.0. These three selected pilot communities completed their local oral health prevention plan and implementation plans by May 1, 2004. Strategies and activities that each district will utilize to achieve the preceding goals and objectives differ, reflecting the unique needs of the region and available resources. Districts guided by community planning are developing volunteer and community dental clinics, increasing loan forgiveness program enrollment, recruiting dental internships, providing community oral health education outreach and increasing the number of school fluoride mouth rinse programs. GADS funding for the pilot communities for implementation activities ($15,000 - $20,000/year for 2004-2006) have been allocated to the three pilot communities/districts. The state office provides district program staff with feedback on programmatic statistical data, training and technical assistance on issues related to program development, implementation and evaluation, and program compliance. The state office also monitors program performance with scheduled site visits and/or review of programmatic reports.

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