

Dental Public Health Activity Descriptive Summary

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Kansas School Oral Health Programs

Kansas has two school oral health programs, the Kansas School Screening Program and the Kansas School Sealant Program, that are administered by the Bureau of Oral Health (BOH). The state has a law that requires each child to have an annual "dental inspection." This is an unfunded mandate, and until recently was largely overlooked by schools and administrators. In 2007 the Bureau of Oral Health received a state foundation grant to create a standardized screening protocol and an online data collection system. The protocol mimics the Basic Screening Survey and uses volunteer dental professional screeners to collect and input the screening data. The Screening Program provides the Bureau with school, county and statewide data on children K-12. In the 2011-2012 school year the Screening Program was in 46% of all Kansas public schools. A searchable database of the oral health data is publically available at the Bureau's website.

In 2010 the Bureau of Oral Health received a grant from the Health Resources and Services Administration (HRSA) to provide preventive oral health services in schools. The Kansas School Sealant Program (KSSP) contracts with local safety net clinics, private dentists, and community based dental hygienists to provide sealants and other preventive oral health services (cleanings and fluoride varnish) to underserved children in a school based setting. KSSP targets schools with high numbers of children on Medicaid, and the Free and Reduced Lunch Program, as well as those schools whose school screening data indicates unmet dental needs. All providers participating in the KSSP do oral health screenings for all students in the participating schools. The screening data serves as a baseline to establish the oral health status of the students prior to the start of the School Sealant Program.

Lessons Learned:

One of the most significant problems faced by BOH in the implementation of the Kansas School Sealant Program has been the incorrect reporting of data on forms. This problem was addressed by personal visits or contact through email/phone to address issues, and consistent errors are brought up at the annual sealant meeting hosted by BOH. Another problem has been contracted providers that are in the same general area and providing services in schools in those areas; an example is the three safety net clinics located in Wichita, KS. The county health department mediated a discussion between those clinics and a tentative solution was reached, though there have still been some minor problems.

A significant problem faced by both the Kansas School Screening Program and the Kansas School Sealant Program has been the resistance of some schools to providers coming in and offering services to underserved children (it should be noted here that this resistance was for a variety of reasons). At the 2012 sealant meeting, advice was offered to contracted providers on how to establish relationships with schools and move forward with providing services in those schools. For the Kansas School Screening Program, BOH staff makes every effort to communicate effectively with schools, school districts, and screeners to ensure good relationships between all entities.

When contracting with safety net clinics for sealant program implementation, it is imperative that the clinic have good staff and the support of the clinic administration to be successful. Clinics cannot make a single hygienist responsible for the entire project. Many times a clinic puts the full program on the back of a single hygienist. Programs that utilize clinic staff to help make contacts with schools, make the schedule, do the follow up phone calls and enter the data are able to utilize the hygienist primarily for her clinical skills. These programs are more successful than those who have one person running the program.

The Sealant Program and the School Screening Program are supportive of each other. Schools that participate in the Screening Program are more receptive to in-school services. Providers that do the Sealant Program also compile the data for the Screening Program. The Screening data can be used to evaluate the Sealant Program.

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