

Dental Public Health Activity Descriptive Summary

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Early Dental Disease Prevention Initiative (EDDPI)

The Early Dental Disease Prevention Initiative (EDDPI) became official legislation in 2015. It is a statewide initiative to increase awareness of the importance of early preventive dental intervention for infants and toddlers. EDDPI is based on the assumption that Medicaid eligible infants and toddlers visit Child and Teen Checkup (C&TC) clinics more frequently and regularly than they visit dental clinics. Therefore, EDDPI provides early and culturally competent Prenatal to Three Anticipatory Guidance based on a simple standard of pediatric oral health care; risk assessment, anticipatory guidance and referral to a dental home. EDDPI in conjunction with fluoride varnish application collectively constitutes the dental component of C&TC checkups. Professionals, both dental and non-dental, need to begin to understand the importance of achieving and maintaining good oral health as an integral part of total health in order to address the emerging oral health crisis. To prepare for these changes, dentists and the providers with whom they collaborate will need to know how to best serve their multi-ethnic patients using low literacy educational tools and practice applying their knowledge in the community.

Rationale

Early Childhood Caries (ECC) is the single most common chronic childhood disease, five times more common than asthma. Studies show that more than one-third of children have dental caries by the time they reach kindergarten. Many children with ECC require costly, restorative treatment in an operating room under general anesthesia. Such operations may range from \$2,000 to \$5,000 per child per year. The good news, however, is that ECC is nearly 100% preventable with early intervention.

Objectives

- Prevent and/or delay progression of early dental disease through motivational interviewing, education & behavior modification.
- Lower peak burden on healthcare infrastructure.
- Diminish overall cases and impact of early dental disease through a combination of targeted oral health promotion and grassroots efforts.

Impact/Effectiveness/Efficiency

EDDPI has fostered medical-dental integration in true sense by conducting an advisory group, providing non-dental workforce training, developing partnerships with maternal child health programs and medical/dental providers.

Collaboration/Integration

EDDPI has demonstrated innovation in integration by sharing a maternal child health educator with the oral health program. The educator focuses on improving the capacity of the non-dental provider to implement fluoride varnish application in clinical and community settings. The educator also integrates maternal child health and dental activities for the prenatal to three population. EDDPI collaborated with fifteen entities to conduct promising practices program across the state of Minnesota.

Demonstrated Sustainability

EDDPI is funded through the state and is thus a sustainable model. It is Minnesota's legislative commitment to prevent early dental disease.

Evaluation Measures/Outcome Indicators

- Approximately, 3,000 oral hygiene kits have been distributed through diverse partners in Minnesota.
- Over 25 presentations have been completed to promote EDDPI.
- A symposium was held.
- Nearly, 50 new partnerships have been developed.
- Four advisory committee meetings were held.
- Approximately 200 nursing students were trained on fluoride varnish application and EDDPI.

Lessons Learned:

A statewide coordinated approach to prevent early dental disease can bring together multiple community-based organizations to create a collective impact. This approach reduces redundancy and increases efficiency to provide education and oral hygiene supplies equitably.

A legislative commitment to prevent early dental disease is a great way to make prevention a sustainable model in any state.

Additional funding is required to meet the needs of oral hygiene supplies for infants and toddlers.

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