



Dental Public Health Activities Descriptive Summaries

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Nevada Head Start Oral Health Screening Survey

The Nevada Oral Health Program began a challenging endeavor to collect baseline data on oral health in the state, using indicators that were introduced by the Surgeon General's report and Healthy People 2010 oral health objectives for the nation. The Healthy Smile - Happy Child Screening Survey was created and first conducted in 2003 to collect oral health data on third graders in Nevada. The Nevada statewide screening survey was based on the methods outlined in the Association of State and Territorial Dental Directors (ASTDD) 1999 publication Basic Screening Surveys: An Approach to Monitoring Community Oral Health. For 2004, the survey focused on children ages 3 to 5 who were enrolled in the Head Start Program. The purpose of the survey was to establish baseline data, determine the oral health status and needs of children in Nevada, make program decisions that are data driven, and allow for meaningful program evaluation.

The Nevada State Health Division, Oral Health Program partnered with the Nevada Head Start State Collaboration to conduct the screening survey. With the cooperation of the Collaboration, children in 44 programs were screened. One Nevada licensed dental hygienist performed all the screenings using a flashlight, gloves, disposable mirrors, and cotton tip applicators when necessary to remove debris. The Oral Health Program Biostatistician accompanied the dental hygienist to enter data directly at the time of screening. The screening survey collected prevalence data on early childhood caries, caries experience, untreated decay, and the need for urgent dental treatment. In addition, the survey collected socio-economic data for each child screened (age, gender, race and ethnicity), dental insurance status and access to dental care in the past year. These questions were included in the consent form and information was provided by the parent/guardian. The screening took approximately three months to complete.

A total of 1,677 children were screened (63% response rate). Dental decay is a significant public health problem for Nevada's Head Start children: 54.0 percent of Head Start children had cavities and/or fillings (caries experience), 37.5 percent of Head Start children had untreated dental decay, 25.3 percent of Head Start children had early childhood caries (ECC), and 37.4 percent of Head Start children were in need of either restorative or urgent dental care. A large percentage of Nevada's Head Start children have limited access to regular dental care –22.0 percent of parents reported that they had trouble accessing dental care during the last year. The primary reasons were "could not afford it" and "no insurance." There are regional differences in the oral health of Head Start children. A higher proportion of children in Washoe County had caries experience (64.9%) than Clark County (50.3%) and rural areas (53.7%). The survey data indicated that there are large unmet needs in the Head Start population. This resulted in the Nevada Head Start Association and the Oral Health Program collaborating to convene three regional Head Start Oral Health Summits. The survey findings are being used to secure additional funding for programs that provide both preventive and restorative care and to support policy changes to improve access to care. The Oral Health Program intends to repeat the survey of Head Start children every three years. Following this plan, Nevada conducted the first survey of Head Start children in 2004 and completed the second survey in 2007. The [2004 Healthy Smile - Happy Child Head Start Survey Report](#) and the [2007 Healthy Smile - Happy Child Head Start Survey Report](#) are available online.

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