



Dental Public Health State Activity Submission Form

ASTDD’s goal in collecting information about successful state Dental Public Health activities (e.g., practice, program, service, event, or policy) is to share this information with other states, territories, and stakeholders who may be interested in implementing similar activities. We thank you for your time and willingness to share your experiences.

Please complete the form below and return to Lori Cofano, ASTDD Best Practices Project Coordinator, at lcofano@astdd.org

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STATE DENTAL PUBLIC HEALTH ACTIVITY (e.g., practice, program, service, event, or policy) Minimum=300 Maximum=500	
Activity title:	New Mexico Dental Sealant, Fluoride Varnish and Dental Screening Program (2019 – 2020)
State/Territory:	NM
Summary overview, which may include the following: <ul style="list-style-type: none"> • Objectives • Rationale • Personnel • Key partners • Costs & sustainability 	
<p>The activities of the New Mexico Department of Health (DOH), Office of Oral Health (OOH) are aimed to reduce oral health disparities and achieve oral health equity among underserved communities in New Mexico (NM). The OOH administers a school-based dental sealant program for elementary school children, that provides oral health education, dental screenings, dental sealant applications on first and second molars, and dental case management. In rural areas, all elementary school children are eligible to participate in the dental sealant program, from 1st to 5th grade. In urban areas, the services are limited to the first, second and third grade students. Program services are offered at no cost to parents or guardians of children enrolled in the participating schools. Elementary schools qualify for the program if they have at least 50% or more of its student population on the free and reduced school lunch program. An estimated 84%</p>	

of elementary schools qualify for the free and reduced lunch program. FY 2019-2020 the State of NM allocated an estimated \$900,000.00 general fund for the state dental sealant program. For the 2019 -2020 school year: 2,572 students participated in the program with a total of 4281 molars being sealed.

In addition to the sealant program, the OOH conducts a fluoride varnish program for Head Start and early Head Start centers. This program provides dental screening, three fluoride varnish application per year, oral health education, dental case management and home dental hygiene supplies (toothbrush and toothpaste). For the 2019-2020 school year 1515 children participated in the fluoride varnish program, and 1184 fluoride varnish applications were given.

The dental sealant program and fluoride varnish programs were developed to provide preventive services for school children to reduce dental caries, since many low-income children have limited or no access to preventive dental care. The two programs are supported by state staff and contracted private dental care providers. Dental case management is provided to children, who have dental caries and/or any other oral disease, to ensure they receive the dental care they need, especially among uninsured children.

The application of dental sealants is a best practice shown to prevent dental caries up to 80% on the chewing surfaces of the teeth. Due to the COVID-19 pandemic, participation in the sealant program has decreased during the last 2 years. However, OOH staff continue working to provide services and outreach to schools and parents to encourage participation in the program. Fluoride varnish can prevent up to 33% of dental caries in the primary teeth. Most of the parents of children enrolled in Head Start and early Head Start schools recognize the benefits of fluoride varnish application and participation in this program has been maintained and is increasing with lessening COVID-19 concerns. Oral health education and dental case management have been tools used to keep parents and guardians engaged with the oral health of their children during this challenging time. It is important to have the support of parents to reinforce proper oral hygiene habits at home since children spend so much of their time at school, where the usual practice of daily classroom toothbrushing has been suspended due to the pandemic.

Lessons learned (Successes and **Challenges**):

The success of school-based programs is based on providing quality care service and continued communication with school staff to schedule activities and keep schedules as consistent as possible. Lessons learned that would be useful for others looking to implement a similar activity include:

- Clearly communicate the program's expectations to each school; be sure the school nurse understands the program's requirement for space (many schools have limited space) and the length of time needed to complete the sealant services along with collecting the consent forms.
- Always have back-up equipment. Since the program requires traveling to schools that are located one to two hours from the home office, time is wasted if there is a need to return to the office for replacement equipment.
- Remain flexible with scheduling screening and treatment days and how to set up in each school.
- Building a strong relationship with the school nurses, school principals, superintendents, etc. helps to gain acceptance and respect of all school staff and the community and can encourage families to participate in the dental sealant and fluoride varnish programs.
- Providing students with a video or short presentation about what to expect when they are a patient helps to gain acceptance and reduce fear/anxiety. The video is shown by the teacher prior to the scheduled visit.
- Providing proper brushing and flossing techniques takes time but is a necessary part of doing this type of outreach. We should not assume that children know how to properly brush and floss.
- Oral health education is crucial for children and parents and teachers. Parents support children at home specially during this time of pandemic when oral health services decreased or were not available for children. Teachers can support children at school by integrating oral health topics into the school curriculum.

Some challenges encountered from conducting and delivering a dental sealant and fluoride program include:

- School nurses or health assistants are very important for outreach and to schedule dental sealant clinics. However, not all schools have their own nurse or health assistant and even when they do, they are very busy. Often times they are unable to assist with locating and retrieving student. It is a challenge to the program success.
- Language barriers may impact communication with parents and students participating in the programs, because about 50% of the students participating are Hispanic. Therefore, having staff who are bilingual helps to engage parents in the program and to provide dental case management both in English and Spanish as needed.
- Lack of participation especially during the time of pandemic. Holding parent meetings or having a presence during open house events can help to increase participation rates.

Plans for improvement

- OOH is planning to develop a new database to better track the dental sealant program services, retention rates, and identify the prevalence of dental caries, as well as fluoride varnish applications and dental case management.
- The OOH aims to increase the number of schools and students participating in the dental sealant and fluoride varnish program, especially after the pandemic.
- The OOH aims to increase the number of consent forms obtained by the local schools by providing incentives to the school nurse. Staff rewards school nurses with the highest consent form return rate by giving them an electronic toothbrush.
- The OOH aims to increase partnership with local communities to promote school- based oral health programs especially among Community Health Workers.

TO BE COMPLETED BY ASTDD	
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