



Eau Claire Healthy Communities Action Team Meeting

Oral Health Promotion

Thursday July 26th, 2018

Eau Claire City-County Health Department Room G302

7:30am-9:00am

Present: TJ Atkins, Katie Pospishil, Sarah Pedersen, Savannah Bergman, Gina Schemenauer, Lisa Vang, and Tammy Raeder

1. Introductions and Announcements

2. Approval of June 28th, 2018 minutes- Approved

3. Update

- a. Wisconsin Oral Health Conference: Debbie will be presenting. Sarah and Savannah will be attending the conference as well.

4. Community Health Improvement Plan

- a. Recap of last "Data Walk" meeting: At our last meeting we decided to focus on Residents 2+ that did not have a dental visit in the past year and 3rd graders with untreated dental decay.
- b. Root Cause Analysis (20 mins)
 - i. Why do 3rd graders (7-8-year-old) have untreated dental decay?
 - 1. Cost, Education of Parents, not important to parents, transportation to get the care is a challenge, not enough dentist that will take MA, takes forever to get in, long waiting periods, don't have the time to go, not a priority to Parents, don't have insurance, language barrier, parents can't time off from work. Lack of education in schools.
 - a. Why Cost? Parents only come in when it hurts and then its more expensive. Fillings are too expensive
 - b. Why don't parents find it important/lack education? Lack of understanding of the amounts of sugar in products (drinks and foods) that impact tooth decay. Lack of knowledge of the exposure of sugar intake throughout the day vs. in a shorter timeframe. (Would be nice to have billboards, social media posts, visual images of effects of tooth decay and contributing factors) Parents own fears either of the cost or past experiences. Parents are transitioning kids. Parents don't know they are receiving education. Just note the visit was like 5 minutes. Cost of beverages- sugary drinks cheap. They don't

like water. They don't read or understand food labels to see how much sugar is in a drink or food.

- c. Why isn't MA accepted? Reimbursement is not the greatest (33%), not a priority for state legislature. (Katie reports River Valley is not serving Menomonie area any longer. Kristo and Smile and Motion are anticipated to combine into Simco.) Parents can go to the Forward Health website, but it make not list who has openings so they don't know where to go. Often insurances separate dental vs. medical services.
 - d. Why is transportation a barrier? Parents have other bigger issues such as homelessness.
 - e. Lack of education in schools- Toothbrushing emphasized at younger ages but not at the high school level.
 - f. What contributes to language barriers? Providers don't provide these services or materials in other languages. Providers may use a child or another family member to translate and may misinterpret things. Language line is expensive. Cultural values may impact the importance of the issue and maybe viewed as not important.
- ii. Why don't 2 year old have an annual dental visit?
- 1. Parents attitude as they think they are baby teeth and will come out and don't need to do anything with them. They don't realize dentist will see them that young. Not include as part of the medical wellness check up and making a referral. Cost of the visit and the visit is short. Parents can't take time off. Medical education is lacking on the important at this young age. Not sure its stressed as important in private or licensed day care settings. Parents lack knowledge of the importance of a dental visit can happen prior to age 2. So many other things in life dental is just not a priority.
 - a. Why is there a lack of education for parents? Parents don't see it as important, Parents have decay and will share it with the child via pacifier vs washing it off. Attitude that its only a couple of teeth. Parents don't brush child's teeth at home. Parents fear the child will miss behave at the appointment. Parents feel they know it all or they can get the education elsewhere.
 - b. Access: Doctors don't refer to dentist. Dentist don't see kids younger than 2 and those that do have limit service areas and a wait list. (see c. above for previous problem.)
 - c. Why is cost an issue? Parents don't have time to take off. Parents feel the visit is short.
 - d. Why can't medical providers do basic dental care as part of well check? They don't feel comfortable. They don't feel its

important. If they did an oral health check could they do fluoride. If they can't could a C.N.A do it.

- iii. Review why and focus on the following areas:
 - 1. For 3rd graders with dental decay
 - a. Education of parents important.
 - i. Prevention
 - ii. Raise awareness of what causes decay
 - iii. Outreach to day cares/schools- topic specific a little at a time, target small communities or specific day cares? Teachers?
 - b. Address language barriers with materials to help
 - 2. For 2 year old who didn't have a dentist visit within a year
 - a. Access- continue list of providers
 - b. Education
 - i. Parents attitude on baby teeth
 - ii. Provide knowledge that a dental visit can happen prior to age 2
 - 1. Breakdown the cost of a 1 year visit vs a 2x visit a year
 - 2. Timeline what to expect at different ages and why
 - c. Outreach- Family resource centers, child development days (pre k screening.) Halloween events @ Trunk and Treat events

5. **Next meeting: Thursday, August 23rd from 7:30-9am**

You can find all minutes and agendas on our website located at www.ehealthycommunities.org.