

“No Tooth Left Behind” Dental Clinic

City of Springfield
Department of Health & Human Services
School-based Dental Services



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Why School-based?

- Springfield has a history of providing school-based dental services which goes back to the early 1900's
- Comfortable, structured, familiar environment for students to receive services
- Less time out of school for appointments, children are called when ready to be seated for services
- Captive audience between the hours of 9AM-3PM!



Choosing the Target Area

Involved planning in the form of:

- Assessment of community needs
- Assessment of community challenges
- Most current census information
- Community support
- Location
- Services to offer
- Sustainability

Assessment of Community Needs

During the planning process of this initiative, it was important to go where dental services were most needed

- The North End of Springfield was a particularly vulnerable population composed of approximately 11,000 residents
- Of the approximate 26,000 students in the Springfield Public School system, 2800 live in the North End and 85% are eligible for MassHealth dental benefits as evidenced by the number of children eligible for free/reduced lunch
- Only 2 dental providers out of the 7 in the community accept MassHealth

Assessment of Community Challenges

- **Transportation** - thought to be the largest access to care barrier due to unreliable / unavailable private transportation or public transportation that could take the better part of a day to utilize
- **Limited Providers** - In 2003, only 2 dentist in the area accepted MassHealth for a population of roughly 11,000 residents
- **Work** - parents who worked and couldn't take time away from work to take their child to a dentist and possibly have to wait 1-2 hours before being seen
- **Education** - Parents and children not educated about the benefits of good oral health nor see its importance to **overall** health

Census Information

- According to the most current Census information (2000), the North End of Springfield is considered the “poorest” neighborhood in the Commonwealth of Massachusetts
- Roughly 2800 residents fall into the K-8 grade age group
- 97% of the residents rent homes
- Only one out of every 4 residents has a job
- Median household income is \$7,271.00 (below the federal poverty level for a single person)

Community Support

- Springfield Public School System
- Neighborhood Community Health Center
- School Administration & Nurses
- Area Hospital
- Funding from the Oral Health Foundation/Community Foundation of Western Massachusetts & The Davis Foundation of Springfield

Location

- Which school offered the best possibility of impacting the most children in need
- Which school had enough existing space to house a dental clinic?
- Which school had school-based health services?

German Gerena Community School



German Gerena Community School

A Magnet School for Arts & Montessori

- “Campus” style environment composed of 3 elementary and 1 middle school which affords a certain level of shared resources
- One of the 5 public schools in the SPS with a school-based health center
- All schools are in walking distance to each other
- Have the ability to provide easy access to dental care to some of the poorest children in the Commonwealth
- Overwhelming support of school principal, nursing staff and school administration

Services to Offer

Springfield Department of Health & Human Services (SDHHS) utilizes a three prong approach in providing dental services to approximately 2800 students in the target area:

- Education- oral health and hygiene education, nutritional review, poster presentations and classroom education
- Prevention- dental prophylaxis, fluoride treatments, varnish application, sealants
- Restoration- Composite and amalgam restorations, pulpotomy, RCT, application of SS crowns & extractions



Children are our best form of advertisement in this setting!



It's important to note that the level of service provided to each child is dependent on each child's ability to cooperate with necessary treatment. Because we work in this very special setting, we need to be extremely sensitive to the fact that each child must return to the classroom in a "composed" manner after treatment. Extractions are generally performed after school and with a parent in the clinic.

Sustainability

Clinic operates on revenue generated from

- MassHealth
- Private insurance
- Self pay

Our Goals



Goal

- To further SDHHS mission to promote health and prevent disease through comprehensive health & human service planning, policy advocacy and education of the public through strong community partnerships



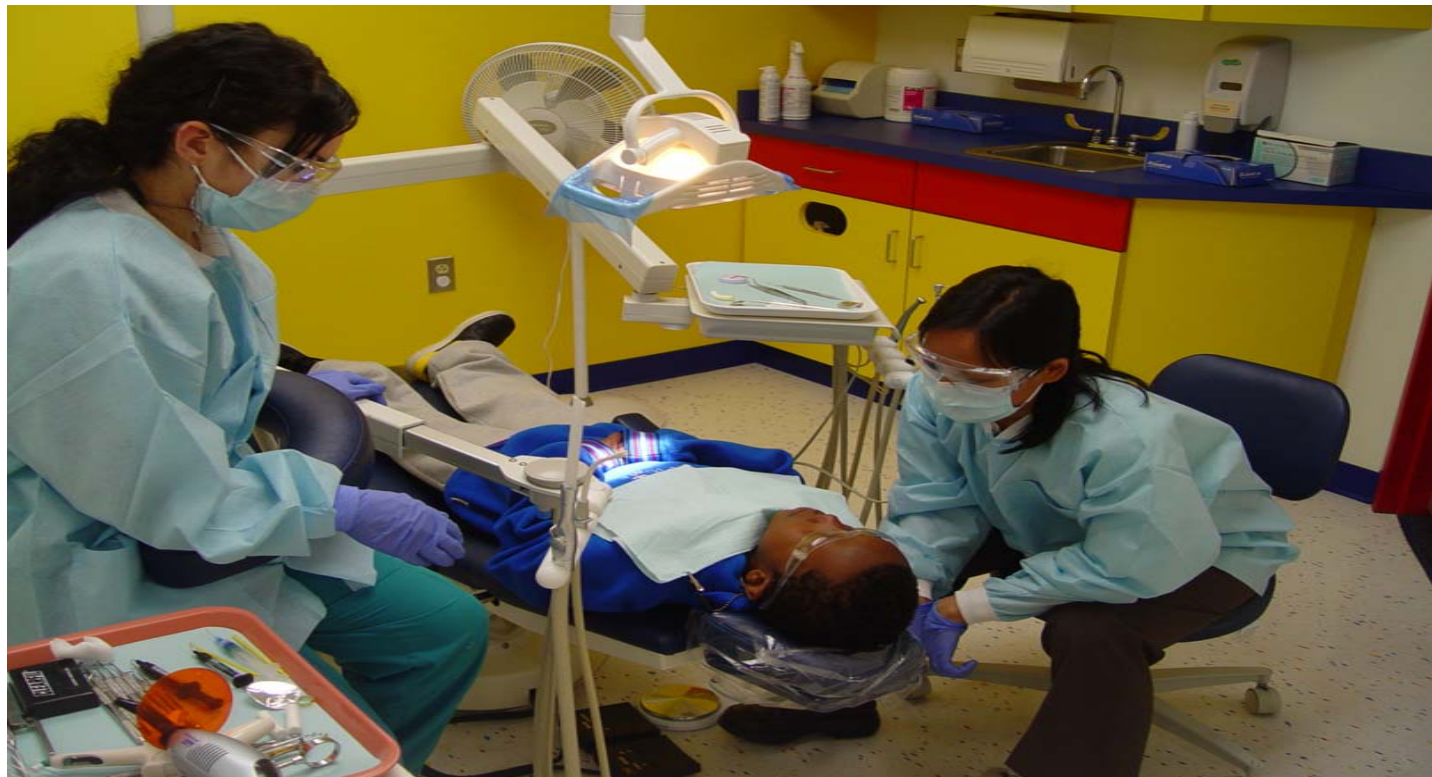
Goal



- Give a child without a dental home a place that he/she can go for excellent treatment in a comfortable and nurturing environment

Goal

- Recognize the importance of education and doing our best to serve each child and return him/her to the classroom



Goal

- Ensure that “No Child is Left Behind” in a classroom experiencing excruciating pain and therefore unable to concentrate on learning



Lessons Learned

- Size of clinic
- Staffing model
- Public vs. private insurance issues
- Seeing children from target schools
- Seeing children from the SPS system

Moving Forward!

- Establishment of a solid program
- Marketing of clinic
- Next area of need

