

Location: Hahnemann Family Health Center, Worcester
Time and Date: 5:30-7:00 pm, Monday August 31, 2009
Coalition Members Present: Hugh Silk (lead); Mary Leary; Anthony Boschetti; Christine Keeves
Community Attendees: Parents of special needs child and school-age children, elderly representatives, employed workers without dental insurance, hospital workers

Issues Discussed

- Why is the school system not responsive to providing oral hygiene in schools, with as much push as occurs for hand washing?
- Why is there no coverage of dental procedures for Medicare patients?
- Lack of access to dental providers for patients on government-run insurance with dental coverage (MassHealth, Commonwealth Care)
- Severe access issues for special needs patients, with regional resources virtually unavailable. Patients are referred to Boston, as very few dentists have the expertise to provide routine oral health services on these children.
- Financing dental treatment is problematic for most patients
- Lack of a clear understanding of dental insurance
- Communication between medical and dental providers lacking, sometimes causing difficulties for patients
- The administrative burden of seeing MassHealth patients is prohibitive for many providers
- Worcester is bearing a higher burden of oral health disease because there is no community water fluoridation.

What is Working?

- Worcester has an active dental society and local oral health champions trying to work on access to care issues
- Several schools have effective oral screening and sealant programs
- Safety net access to care at 2 Community Health Centers, Quinsigamond Community College and the UMass Memorial Ronald McDonald Care Mobile.

Suggested Solutions

- A public health campaign with clear messaging to increase awareness on oral health, high risk behavior and good nutritional practice, also utilizing prominent spokespersons.
- Fluoridation
- Expanding school dental programs to more schools, regardless of type.
- Integration of oral hygiene instruction and practices into the schools. Children should be encouraged to brush their teeth after lunch, and the earlier oral health instruction starts for children, the better.
- Improving access for special needs patients by providing regional/transportation/case management
- Integration and communication between medical and dental providers and establishment of a complete cycle of oral care.
- Universal access to dental care for children, utilizing their constant access to pediatricians.
- Improving access to dental care using mobile dentistry.