

REPORT TO THE TWENTY-FIFTH LEGISTURE

STATE OF HAWAII

2009

**PURSUANT TO SECTION §321-63
HAWAII REVISED STATUTES REQUIRING
THE DEPARTMENT OF HEALTH TO
SUBMIT AN ANNUAL REPORT ON
DENTAL HEALTH ACTIVITIES,
EXPENDITURES, AND RECOMMENDATIONS**

**PREPARED BY:
STATE OF HAWAII
DEPARTMENT OF HEALTH
NOVEMBER, 2008**

Executive Summary

The Dental Health Division is the sole dental public health agency in the State of Hawaii. *National Oral Health Report Cards* released in 2002 and 2003 by Oral Health America, a leading oral health non-profit advocacy organization based in Chicago, have given Hawaii among the highest grades in the nation, ranking Hawaii among the top five states. These reports take into account many factors, including Hawaii's high rates of dental insurance coverage and dental care utilization among both children and adults. This recognition is a testament to the hard work of public and private sectors working together to improve oral health in our community. National report cards have not been released in more recent years; however, all objective indications are that Hawaii continues to fare well by most indicators of community oral health in contrast with other states.

While Hawaii has done well on national scales, such reports have not considered the problems we continue to face with tooth decay rates in early childhood which far exceed those found on the U.S. mainland, and limited access to care for many of our most vulnerable populations. Dental caries or “tooth decay” is the most prevalent chronic disease affecting children nationally. Caries is an insidious and progressive disease process which can put children and adults at risk for potentially life-threatening infection. The health impact of tooth decay, periodontal (gum) disease and other oral diseases is apparent to most people. The social impact, including the high rates of missed school and work days due to chronic oral disease, the stigma associated with poor dental condition, the general wellness and health risks associated with chronic oral infection and the public and private expense of dental disease, is less so.

In addition to high rates of tooth decay among young children which are disproportionately high in contrast with the U.S. mainland, we continue to have limited access to basic dental care for persons with disabilities. This is a concern for medically fragile individuals, including residents of long-term care facilities, and persons with behavioral problems related to chronic mental illness or developmental disabilities. It is acute on the neighbor islands where access to dental care for persons with such disabilities is more limited than on Oahu.

In working towards the development of consensus strategies to help address the long-standing oral health problems affecting our communities, the Department of Health facilitates and actively participates on the Hawaiian Islands Oral Health Task Force. Through this collaboration of private for-profit, non-profit and State government dental care providers, funders, and dental insurance industry representatives, we are hopeful that oral health care delivery system enhancements can be made to help address the problems we face.

**Report to the Legislature Pursuant to Section 321-63, Hawaii Revised Statutes,
Requiring the Department of Health to Submit an Annual report on
Dental Health Activities, Expenditures and Recommendations**

Program Objectives:

To promote oral health and reduce the incidence and severity of problems associated with oral diseases and abnormalities through preventive programs targeting young children and treatment programs targeting persons with severe chronic disabilities, and by increasing public awareness and professional education.

Program Activities:

New methods of preventing and controlling dental diseases are evaluated, and if feasible, proposed for implementation as public health programming.

1) Dental care services

Dental care services are provided by program personnel to patients housed at Hawaii State institutions, including Hawaii State Hospital on Oahu and Kalaupapa Nursing Facility on Molokai as well as to community-based clients at the Department's regional mental health centers. Treatment services are provided primarily to indigent, developmentally disabled, mentally ill and medically fragile Hawaii residents. Over the past three years, the Division treated an average of 2,240 needy individuals and performed over 15,200 dental procedures annually.

2) Prevention Activities

Training: Training is provided statewide on oral health risks and risk management and appropriate oral hygiene practices to assist disabled persons. Training is provided for teachers, caregivers, and other health care providers. Annual training is required for staff providing care for persons residing in State- licensed long-term care facilities.

Education: During FY 2008, Dental Hygiene Branch staff had direct contact with over 23,000 school children at 93 public schools statewide through 1,197 classroom educational presentations on oral health care. Teachers were provided assistance with curriculum development on dental health. The Branch's dental hygienists had contact with an additional 6,480 individuals through 362 presentations for community groups such as preschools, private schools, senior centers, parent-child programs, and populations at-risk for substance abuse, delinquency, and truancy.

Oral health screening and topical fluoride applications: More than 6,890 public school children in grades K-12 statewide were screened for dental problems. Referrals for urgent or acute dental treatment were made for 1,988 children. Topical fluoride to reduce the incidence and severity of tooth decay was applied to 5,159 children in selected grades on Oahu and Molokai. Fluoride mouth rinse programs have been implemented in selected schools on Kauai, Lanai, and Maui through a partnership of personnel from the Dental Hygiene Branch and volunteers from the school community, including school administrators, teachers and parents.

3) Collaborations

Division staff work with other State and private agency personnel in the coordination of programs designed to enhance community dental health. These programs include but are not limited to: Honolulu Community Action Program; Hawaii Head Start Association; Healthy Start; Women, Infants and Children (WIC); University of Hawaii School of Nursing & Dental Hygiene; John A. Burns School of Medicine Maternal and Child Health Leadership Education in Neurodevelopmental and Related Disabilities Project (MCH LEND); University of Hawaii affiliated medical residency programs; The Queen's Medical Center General Practice Dental Residency program; Clinical Research Center; Kapiolani and Maui Community College Dental Assisting Programs; Life Foundation; Pacific Basin Dental Association; Hawaii Dental Association; Papa Ola Lokahi; Hawaii Special Olympics; Crime Victims Compensation Commission; Department of Commerce and

Consumer Affairs; Department of Public Safety; and the Department of Human Services.

Plans to Meet Its Objectives:

The Dental Hygiene Branch (DHB) has established partnerships with other Department of Health programs that assist in funding Branch activities. With these partnerships the Branch will continue to provide dental hygiene programs to every neighbor island in selected schools and grades.

The Division Administration and Hospital and Community Dental Services Branch (HCDSB) will be able to fulfill their clinical program objectives. Comprehensive oral health services will be provided to many of the most needy and vulnerable in our community. Currently, the Division provides treatment services to this population on Oahu and Kalaupapa, Molokai. The Division lacks the capability to provide direct clinical services on other islands. Critical problems requiring surgical intervention are addressed by transporting clients at Medicaid program expense to Honolulu for treatment by Division personnel or at The Queen's Medical Center Dental Residency Program for hospital-based dental services.

Program Performance:

The Dental Hygiene Branch designs and executes programs taking into consideration each school's or community group's needs. Programs within the Department of Health and Department of Human Services that have federal grant-related oral health performance standards collaborate with the Dental Hygiene Branch to be in compliance. These programs include the Maternal & Child Health Branch, WIC, and Head Start.

The Dental Health Division was integral in planning and developing Hawaii State Hospital's oral

health policies and procedures. Due to the Hospital and Community Dental Services Branch's ongoing comprehensive dental care of Hawaii State Hospital patients and the Dental Hygiene Branch's oral health education for residents and staff, the hospital fulfilled The Joint Commission accreditation standards that addressed preventive, urgent, and comprehensive dental treatment services and oral health education.

Persons who are medically indigent, have mental and/or developmental disabilities, and persons affected by HIV/AIDS often experience difficulty accessing dental care from private sector providers. They receive preventive, restorative, prosthodontic, endodontic and oral surgery dental care from Hospital and Community Dental Services Branch staff at State-operated dental clinics located in regional mental health centers on Oahu.

Problems and Issues Encountered by the Program:

Access to dental services

Medicaid recipients, other low income residents and medically compromised individuals have limited access to dental care through private sector dental care providers. Patients with acute access barriers are referred to the Dental Health Division by State and federal government, public health, and social service agencies, and private sector health care providers for treatment services.

The Department does not operate dental clinics on the neighbor islands. Access to even emergency dental care to relieve pain and infection is limited.

While a variety of community surveys have shown that the rates of dental insurance coverage and utilization of care are relatively high statewide, there is definitely a need for additional pediatric

dental specialists and general dentists trained and willing to provide routine care for young children and for adults with complex disabilities. This includes the need for hospital-based care for some individuals. The development of a system for hospital-based dental services is contingent upon the availability of dentists trained and experienced in hospital dentistry, the availability of adequately equipped and supplied as surgical suites and the active support of hospital administrators, hospital staff and anesthesiology personnel.

The capacity of Hawaii's system of community health center dental clinics is limited and they have particular difficulty addressing the needs of young children and persons with complex disabilities.

Program Recommendations

The Division will continue to work and collaborate with State and federal agencies, social service providers and private sector dental and other health care providers to assure they are aware of the problems faced by underserved populations in accessing dental treatment services and are prepared to respond to future needs.

The Division will continue to work with State agencies to assure that public assistance programs designed to address oral health problems are administered to maximize access to necessary basic dental services in all communities and assure cost-efficiency.

**Expenditures and Encumbrances for FY 2008
(MBPE02-A as of June 30, 2008)**

(pos'n ct.)	(25.00)
Personal Services	1,171,332
Other Current Expenses	<u>514,579</u>
TOTAL	(25.00)
General Fund	1,685,911

Expenditure information from July 1, 2007 through June 30, 2008.