

SUMMIT
COUNTY
DENTAL
TASK
FORCE
REPORT

**ORAL
HEALTH**

**THE STATUS OF ORAL
HEALTH IN SUMMIT
COUNTY**

2007

PREFACE

In the fall of 2000, the Summit County Dental Task Force, a broad coalition of interested parties, convened to consider the issue of oral health and access to dental care in Summit County. In 2001, the Task Force presented to the community *The Status of Oral Health in Summit County* providing information on the oral health of the community and an inventory of available oral health care resources. Among our findings in 2001, we reported that there were NO dental emergency treatment services in Summit County. The report offered five recommendations that we assumed if adopted, would help close the gap in dental services. Each of the five recommendations has been addressed with mixed success.

The Summit County Dental Task Force has remained committed to monitoring the oral health status and efforts to address access to dental care. It is appropriately six years later, that the status, community actions and services be reexamined and presented in this report.. Our review of health status in this year's report finds expanding access to oral health services facing a population with continuing dental health issues.

Despite impressive achievements, oral health in our community unfortunately remains our most significant healthcare issue. Poor oral health, untreated oral diseases and conditions have a considerable impact on quality of life including loss of self-esteem, decreased economic productivity, poor performance at school and potentially, death.

The Task Force is pleased to present a new series of recommendations for addressing these issues. Access to care is vital for acute episodes of oral pain. Our expanded goals include prevention of oral disease, sustaining good health and an understanding on how to utilize existing health care services. Our appreciation goes out to all the individuals, agencies and institutions that accepted the challenges articulated six years ago, who are making our community a healthier place to live.

Gene Nixon, RS, MPA
Health Commissioner, Summit County Health District
Chair, Summit County Dental Task Force

The mission of the
Summit County
Dental Task Force
is



***To Assure That All People In
Summit County
Have Access To
Dental Care***

DENTAL DISPARITY

Oral disease is still a major affliction of the nation. Severe dental problems not only lead to poor performance or absence from school or work, but can also have an impact on overall health and serious health problems such as heart and lung disease, stroke, diabetes, low birth weight and premature births. Oral infections and dental diseases are costly for families, employers and the government. *The Surgeon General's Report: Oral Health in America* has called attention to this important connection. The report states that if left untreated, poor oral health is a "silent X-factor promoting the onset of life-threatening diseases which are responsible for the deaths of millions of Americans each year."

"The Oral Health America National Grading Project, an organization that releases state-by-state report cards measuring the status of oral health across the nation, gave the nation an overall grade of C for oral health in 2003. The state of Ohio fared somewhat better, achieving a grade of B-. Although Ohio was the only state to receive an A for prevention, access to dental health care was a significant area of concern." -- *Health Policy Institute of Ohio*

Oral diseases include tooth decay, gum disease, oral infections, and oral cancer. They can also serve as the contributing factor to adverse effects in pregnancy and/or birth defects. Through preventative measures, improved oral health is on the rise, however the majority of adults still suffer from gingivitis or gum disease. In Ohio, over 50 percent of adults have had one or more teeth removed due to dental disease, and nine percent have lost *all* of their teeth due to decay or gum disease. Older adults suffer significantly from poor oral health. Chronic health conditions common in the elderly can exacerbate existing oral health problems or complicate dental care. Many elderly individuals are currently living in long-term care facilities, of which, many are ill-equipped to provide appropriate dental care.

The most common chronic childhood disease is tooth decay, which is five times more common than asthma and seven times more common than hay fever. In Ohio, the last oral health screening survey conducted by the Ohio Department of Health found that 60.5% of all third graders had experienced tooth decay, 25.3% had untreated cavities, 44.3% had one or more sealants, 25.3% had early or urgent dental needs and 10.9% had experienced a toothache. *According to the Surgeon General, "the social impact of oral diseases in children is substantial."*



Dental care remains the number one unmet health care need for Ohio children. Racial and ethnic minority children, those from low-income households and those without private dental insurance are less likely to have a recent dental visit than others, and more likely to have an unmet need for dental care.

--ODH *Oral Health & Access to Dental Care for Ohioans, 2007*



ORAL HEALTH STATUS

Healthy People 2010, a national public health agenda, identifies several objectives related to increasing access to dental care and reducing the rates of tooth decay and untreated caries. Several of the oral health objectives are relevant to this report and are presented below with baseline measures and targets for each objective. (Note that these objectives are set for the entire population. The low-income population generally starts from a baseline that is significantly below that of the general population.)

	Target 2010	Baseline	Summit County	Ohio
Reduce the number of children with dental caries in primary or permanent teeth.	2-4 yrs. 11% 6-8 yrs. 42% 15 yrs.	2-4 yrs. 18% 6-8 yrs. 52% 15 yrs	6-8 yrs. 54%	(third graders) 55%
Reduce the number of children with untreated caries.	2-4 yrs. 9% 6-8 yrs. 21% 15 yrs. 15%	2-4 yrs. 16% 6-8 yrs. 29% 15 yrs. 20%	6-8 yrs. 34%	26%
Increase the number of children with sealants on their molars.	8 yrs. 50% 14 yrs. 50%	8 yrs. 23% 14 yrs. 15%	8 yrs. 39%	43%
Increase the number of children and adults who use the oral health care systems each year.	83%	65% (>2 yrs. age, 1997)	*	*
Increase the proportion of the population served by water systems with optimally fluoridated water.	75%	62% (1992)	98.7%	91%
Increase the number of children (<200% of federal poverty level) receiving any preventive dental care.	57%	20% (1996)	33.5%	21%

* Information not available

ACCESS TO DENTAL CARE

The *Oral Health and Access to Dental Care for Ohioans, 2007*, a report released in March, states that “dental care remains the top unmet health care need for children and low-income adults.”

Many factors influence a person’s ability to access dental care in a timely manner and to achieve the best possible oral health outcomes. Some of these barriers include:

- Lack of dental insurance
- Lack of available dental resources
- Financial constraints
- Availability of dental providers, particularly Medicaid providers
- Dental care being a low priority compared to other financial issues
- Transportation issues

Access to dental care means that people can get the dental care they need when they want it. To get that care, a person must have resources: availability of a private dental office or safety net clinic and a means to pay for the care.

The most significant factor affecting oral health and use of dental services is family income. Families with little or no disposable income are more likely to have dental problems, and those problems are more often left untreated.

--Surgeon General’s Report on Oral Health, 2000

OHIO HEALTH INSURANCE DISPARITY

Insurance coverage for Ohioans also demonstrates the challenge to families seeking dental care.

- 38% of Ohioans, (approximately 4.25 million) do not have coverage for dental care. (If the same percentage is applied to Summit County, 204,044 people would not have dental insurance.)
- 10.7 % of Ohioans, (approximately 1.2 million) have no health insurance. (If the same percentage is applied to Summit County, 57,454 people would not have health insurance.)

As shown above, the issues and concerns that are applied to oral health are almost identical to those that apply to health care in this country.

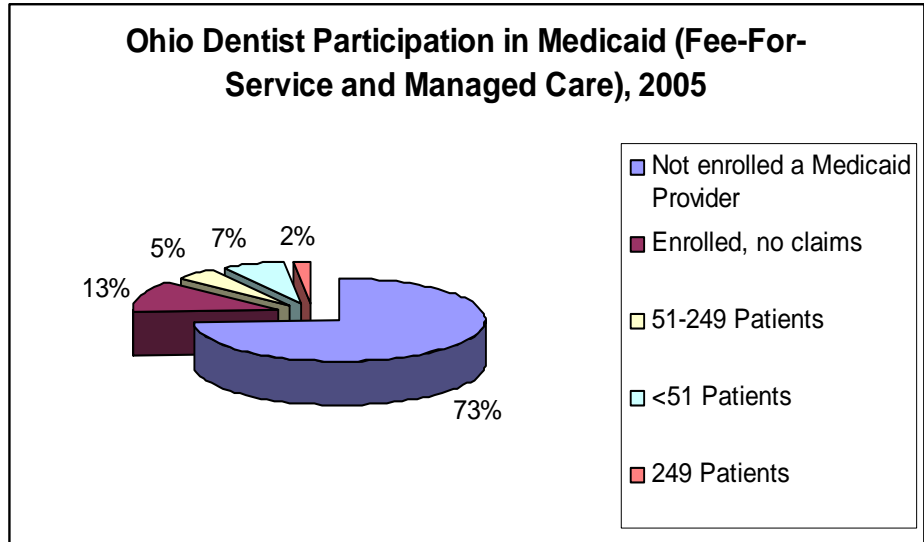
MEDICAID DENTAL SERVICES

According to the Ohio Department of Job and Family Services, in Summit County there were a total of 96,986 individuals who were enrolled in Medicaid at any time in 2006. Of the 96,986 clients enrolled, only 28,812 clients received dental services in 2006, which represents only 30% receiving dental care. There are 351 dentists and dental groups listed in the provider file in Summit County.

Health insurance is a strong predictor of access to dental care. Uninsured children are 2.5 times less likely than insured children to receive dental care. Children from families without dental insurance are 3 times more likely to have dental needs

than children with either public or private insurance. For each child without health insurance, there are at least 2.6 children without dental insurance.

Surgeon General's Report on Oral Health, 2000



Less than two thirds of adults report having visited a dentist in the past year. Those with incomes at or above poverty level are twice as likely to report a dental visit in the past 12 months as those who are below poverty level.

Surgeon General's Report on Oral Health, 2000



Larry is a 67-year-old single male. He has had multiple teeth become infected due to periodontal disease and decay. Recently, several teeth have been extracted, and a periodontal debridement performed. "I have Medicaid and very little income. I was in so much pain from my teeth, and now I'm not. It's hard to find someone who takes Medicaid."

There are 351 licensed dentists and dental groups in Summit County, of which 94 are Medicaid dental providers.

In 2006, average enrollment of managed care enrollees for Medicaid was 50,129, and 27,391 fee for service enrollees.

There were a total of 96,986 clients enrolled in Medicaid at any time in 2006.

Of the Medicaid recipients residing in Summit County, only 28,812 clients received dental services during 2006.

Dental Needs and Medicaid Dental Providers - Summit County

Summit County Medicaid Dental Providers (2007)

Population Density of Residents Below 200% of Poverty Per Census Tract (2000)

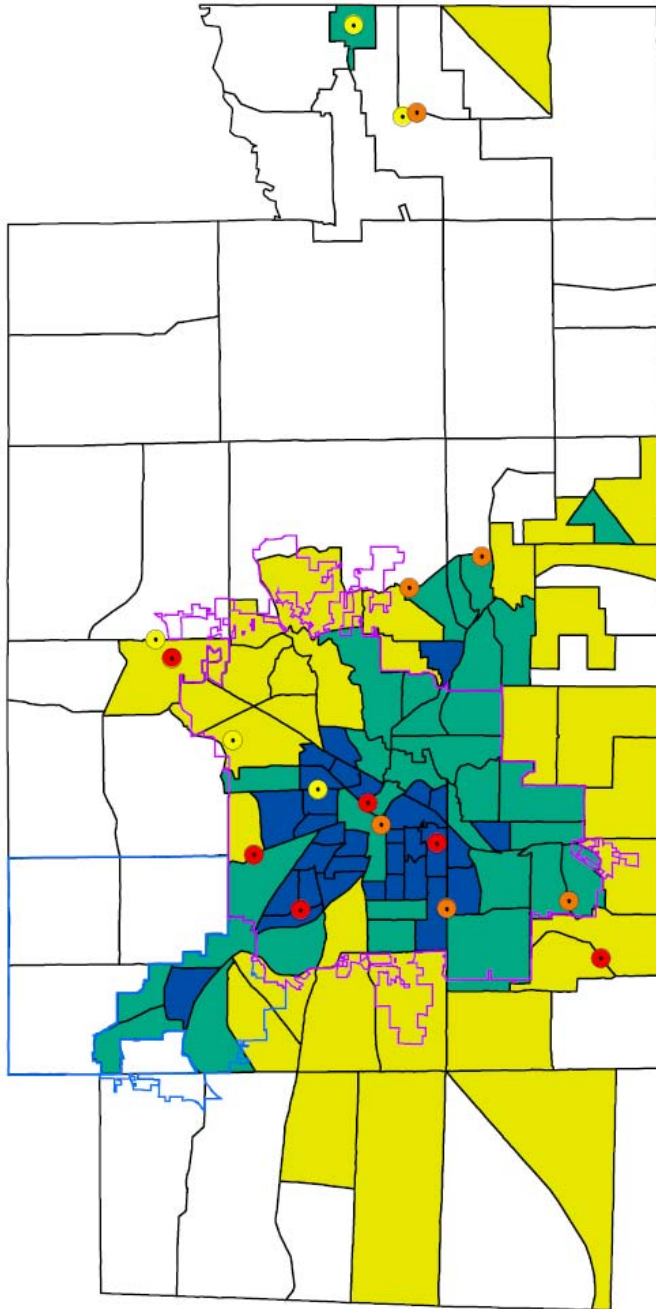
Capacity of Medicaid Dental Providers (# of Patients)

- 30 - 100 (n=5)
- 101 - 1000 (n=7)
- 1001 - 3500 (n=6)

People per Square Mile living below 200% Poverty

- 13 - 137
- 138 - 698
- 699 - 1827
- 1828 - 8960

- Akron
- Barberton/Norton



5/10/2007

THERE ARE FEW DENTAL EMERGENCY TREATMENT SERVICES IN SUMMIT COUNTY

There are limited dental emergency treatment services in Summit County for treating children's dental emergencies. Children and adults with urgent dental needs are seen in hospital emergency rooms. They receive antibiotics and pain medication, but no treatment for the underlying dental problem. Those individuals treated in emergency rooms must find a dentist willing to accept Medicaid, reduced or partial payment. The Center for Dental Health offers emergency dental services; the opening of this residency program was a major accomplishment for Summit County. Funding is a major problem for the success of Safety Net Dental Clinics. Kaiser Permanente granted \$50,000 to help run the Akron Community Health Resources clinic in Akron. The Safety Net Dental Clinic closed at the end of 2004, reopened under the management and ownership of a local Federally Qualified Health Center, Akron Community Health Resources, in October of 2005, only to close again in mid-2007 due to lack of available funding. The Akron Health Department's Safety Net Dental Clinic provided Summit County with over 1,000 dental treatment appointments after it re-opened in the fall of 2005.

- Hospital emergency rooms in Summit County offer palliative treatment only. The patient's pain or infection may be relieved temporarily, but he or she must make an appointment to see a dentist for treatment of the dental problem. Often, a dentist is not seen because of barriers such as cost or transportation, and unfortunately a repeat visit to an emergency room is the outcome. The only exception to this problem is the newly opened the **Center for Dental Health**, located at Akron City Hospital.
- Locating a dentist willing to accept Medicaid or provide treatment on a payment plan or at reduced cost is often challenging, especially for the adult population.
- The emergency room may bring temporary relief, but this lack of definitive care increases the risk for recurrence, resulting in additional costs to the health care system.

DENTAL TASK FORCE EMERGENCY ROOM VISITS FOR DENTAL TREATMENT: SUMMIT COUNTY HOSPITALS

	Primary Visits	Secondary Visits
Cuyahoga Falls General 2006	66 Primary	9 Secondary
Barberton Citizens Hospital 2006	232 Primary	43 Secondary
Summa Health Systems 2006	1,789 Primary	421 Secondary
Children's Hospital 2006	246 Primary	83 Secondary
Akron General Hospital 2006	2,877 Primary	51 Secondary

- ✚ Primary: an individual went to the emergency room for a dental emergency.
- ✚ Secondary: an individual went to the emergency room for something other than a dental emergency, but a dental need was identified.

At-a-Glance: Oral Health and Access to Dental Care for Ohioans, 2007

Children Oral Health:

- (0-17 Years)**
- ◆ **Cavities:** 26 percent of children in third grade and 28 percent of 3-5-year-old Head Start children have untreated cavities.
 - ◆ **Toothaches:** One in ten children has had a recent toothache.
 - ◆ **Disparities:** Disease rates are significantly higher among children from low-income families and those from Appalachia.

Access to Care:

Dental care is the number one unmet health care need for children.

- ◆ **Disparities:** The children most likely to have untreated cavities are poor, non-white and/or reside in Appalachian counties.
- ◆ **Uninsured:** 23 percent of Ohio children (about 670,000) are uninsured for dental care.
- ◆ **Medicaid:** Only five percent of Ohio Medicaid consumers under age three, and 44 percent of those ages 3-18 years had a dental visit in 2005.

Adults Oral Health:

- ◆ **Loss of Teeth:** In 2004, 46 percent of adults have had at least one tooth removed due to tooth decay or gum disease (improved from 50 percent in 2000), including six percent who had all of their teeth removed (versus nine percent in 2000).

Access to Care:

Dental care is the number one unmet health care need for low-income adults and is second to prescription needs for adults overall.

- ◆ **Disparities:** The adults most likely to have dental problems are poor, non-white, and/or reside in Appalachian counties.
- ◆ **Uninsured:** 43 percent of Ohio adults (about 3.6 million) are uninsured for dental care.
 - 38 percent uninsured among adults aged 18-64.
 - 66 percent uninsured among adults aged 65+.
- ◆ **Medicaid:** Only approximately one-third of Ohio Medicaid consumer's ages 19 through 64 years, and one-fourth of those aged 65 and over had a dental visit in 2005.

Ohio Infrastructure

Dentist Shortage Areas: Ohio has more than 50 federally-designated dental health professional shortage areas (HPSAs), mostly due to inadequate numbers of dentists who serve low-income patients. There may be additional potential dentist shortage areas that have not applied for designation.

ORAL HEALTH CARE NEEDS WITHIN SUMMIT COUNTY

At first glance, Summit County seems to have the oral health care resources to provide oral health care for the resident’s within the county. Unfortunately, the oral health care need has overwhelmed the current resources. In addition, the oral health status within our county is below the state average for many of the 2010 Oral Health Objectives.

Oral Health Resources in Summit County

Ratio of DDS to Total Population:	1:1853	(Total of 295 DDS)
Ratio of Medicaid DDS to Population:	1:1215	(Total of 76 Medicaid DDS)
Ratio of Options DDS to Population:	1:4523	(Total of 34 OPTIONS DDS)
Ratio of SN clinics to Population:	1:182201	(Total of 3 Safety-Net Programs)

DDS: Doctor of Dental Surgery SN: Safety-Net Programs
 OPTIONS: Ohio Partnership To Improve Oral health through access to Needed Services

ORAL HEALTH RESOURCES IN SUMMIT COUNTY

Summit County is a metropolitan county located in northeastern Ohio. In 2005, the American Community Survey estimated the county’s population at 536,957. Thirty-one communities are located within the county’s boundaries. Akron, located in the center of the county, is the largest city, with a 2005 estimated population of 210,795. The next largest community is Cuyahoga Falls, (50,494), with the smallest community in the county being the village of Peninsula (664).

Three health departments are located within the county: Akron City Health Department, Barberton Health District and Summit County Health District. Collaboration among the health departments is excellent, with each assuming a “lead” role in various activities. In fact, Summit County is the only county in Ohio in which the Boards of Health hold an annual combined meeting.

- Estimates for 2005 show 17% (90,261) of the population are at or below 200% of the federal poverty level and 11% (60,317) of the population is at or below 100% of the federal poverty level.
- The majority of county residents do have access to fluoridated water supplies; however, 52,336 residents utilize water supplies that are not fluoridated.

There are four safety net dental programs in the county

- The Center for Dental Health
- Summit County Health District
- East High School (formally Central-Hower) Dental Assisting Program
- Akron Community Health Resources, Inc.

AKRON CITY/SUMMIT COUNTY DENTAL SEALANT PROJECT

The current dental sealant project is a continuation of the combined effort by the Akron City Health Department and the Summit County Health District, in cooperation with the Barberton Health District. The Dental sealant project provides dental care in Akron, Summit County and Barberton school districts. The Project utilizes the Summit County Health District's Mobile Dental Clinic, staff, and portable equipment provided by the Ohio Department of Health. The Akron City Health Department serves as the lead agency and fiscal agent and will be responsible for all reports. The program is funded by a grant from ODH, Medicaid reimbursement and local support.

The target population includes elementary and middle school students in 24 Akron Public Schools, five Barberton City Schools and one Springfield Local School. All schools have a free/reduced lunch rate of greater than 50%. Few children in these schools have access to basic dental care.

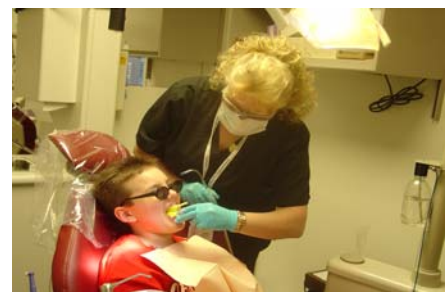
Since 1996, the Akron Health Department has operated a sealant project.. The Akron program currently provides sealant services to students in 20 Akron City elementary schools. The goal of the program is to reduce pit and fissure caries through the application of dental sealants, provide basic dental education and to identify and refer critical dental problems, thus reducing untreated dental disease among Summit County's most needy students.

Students needing follow-up dental care and who are uninsured or Medicaid participants were referred to the Akron Community Health Resource's Safety Net Dental Clinic, the Barberton Community Health Clinic, or for follow-up treatment with the mobile dental clinic.

The Summit County Health District directs the operations of the sealant program in six schools outside of Akron. Project staff continues to work with the Barberton and Springfield districts to schedule sealant applications and short and long term follow-up, based upon free school lunch eligibility.

Evaluation:

The project dentist screens previous year's sealant recipients for sealant retention. The Summit County Health District anticipates screening sealant recipients in third and seventh grades for retention in future funding years of the project.



A combined effort of the safety net dental programs provides dental care for children and adults.

SUMMIT COUNTY HEALTH DISTRICT

The Summit County Health District has provided school dental health services to the children of Summit County for over 50 years. The Summit County Health District owns a state-of-the-art mobile dental van that travels to school districts in the county. Children who financially qualify receive basic dental services on the dental van at a reduced rate and in the Barberton School District at no charge, due to funding from the Barberton Health Clinic. Grant funding is often sought to expand the school dental health program. Kaiser Permanente provided a \$20,000 grant to expand dental services provided in Summit County by installing a generator on the mobile dental van to power its use in locations where special electric receptacles needed for connection are not available. This grant was obtained through the work of Healthy Connections Network.

Dental care is limited to children attending schools that contract for the dental assessment and dental van service. Three school districts participated in the school dental program during the 2006-7 school years, and two private schools received dental assessments. This represents 3,068 children who received a dental assessment for 16 individual schools enrolled in grades one through eight. Of the eligible children who were assessed, 641 were identified with a dental need and sent home with a referral, of which 140 received dental treatment on the Summit County Health District's dental van. A grant from the Tuscora Park Health and Wellness Foundation made it possible to treat two school districts, Coventry and Springfield for the 2007 school year.

The Summit County Health District also offers dental clinics at the central location on Graham Road and at the south location at Edwin Shaw Hospital. These dental clinics on the mobile dental van are available by appointment and are available to adults and children. Medicaid insurance is accepted and a sliding fee is available for those without dental insurance. A special preschool clinic is also offered once a month, and this clinic accepts children ages one through five years old. The parent and child are given thorough oral hygiene instructions, nutritional counseling, and advice on dental care for the child. An exam, prophylaxis (dental cleaning), and fluoride varnish is applied. It is a great way to acclimate the child for a positive dental experience.



Above & right: Summit County Health District's school dental van.

EAST HIGH SCHOOL DENTAL ASSISTING PROGRAM

Akron's East High School Dental Assisting Program (located at Central-Hower) is a two year program designed to provide high school students with the knowledge and skills necessary for a career in dental assisting. A dentist works with the students 30 days a year for 6 hours a day as part of the training experience and the clinic runs from October to May. Students in the Akron Public School system who are financially eligible may receive dental treatment free of charge at this clinic. Three dental operatories (chairs) are present for this basic dental care. The program is funded through the Akron Board of Education and has a limited budget for clinical supplies. During the 2005-2006 school year, 188 students received dental services. As a result of the total funding of \$500 per school year, not all students had their identified dental treatment needs completed.

BEACON JOURNAL CHARITY FUND

The Beacon Journal Charity Fund was organized in 1946 to help families in need pay for eye, ear and dental care. Currently, disadvantaged Akron-area families who have exhausted all other resources can find support for their children's dental and eye care.

Since 1987, financing orthodontic care has become the charity's primary expenditure due to orthodontia's longer treatment time and greater financial cost, making it more inaccessible to the poor. The Beacon Journal Charity Fund spends in excess of \$140,000 annually for the dental and eye care needs of the children of the working poor. The program operates through a referral system. Public health nurses at Akron City Health Department, Barberton Health District and Summit County Health District submit the majority of referrals to this program. Cooperation from area orthodontists who reduce their treatment fees has allowed this charity to support 55-60 children per year.



Nancy Woolverton, Oral Health Educator for the Beacon Journal Charity Fund's "Dr. Milton Rubin Oral Health Education Program," and Fred E. Flossisaurus

The Fund relies on financial support through fundraising events and contributions. As requests for care increase, additional funding will be necessary to meet the needs.

The Beacon Journal Charity Fund also provides funding for an oral health education program. This program is offered to third grade students in all of the Summit County public, private and parochial schools. After the presentation on oral health, the students are given a toothbrush, disclosing tablets and dental floss.

"Thank you for teaching me about my teeth. Since you taught me about my teeth, I've been trying to floss. My mom even let me get my own floss kit! I've also been trying to brush better. I really thank you for teaching me about my teeth."



Dental OPTIONS (**O**hio **P**artnership **T**o **I**mprove **O**ral health through access to **N**eeded **S**ervices) is a partnership between the Ohio Dental Association and the Ohio Department of Health. Dental OPTIONS links Ohio's uninsured working poor, low-income seniors and persons who are medically, mentally or physically challenged with volunteer dentists to provide donated or discounted care.

To qualify for Dental OPTIONS, clients must meet income guidelines and *not* have any form of dental insurance or Medicaid. Potential clients can call the toll-free telephone number (1-888-765-6789) which will connect them to a regional office to receive an application or talk to a Referral Coordinator.

Dental OPTIONS is *not* an emergency program. The current wait list for services in Summit County is estimated at 16- 18 months. The majority of those patients on the waiting list are in need of extensive dental treatment. From January 2006 through December 2006, 20% of program application requests were from Summit County residents out of the 14 county regions (202 out of 992). The program does offer the option to travel to a neighboring county for faster care and also can provide phone numbers to dental clinics throughout northeast Ohio which offer sliding fee scale services.

Dental OPTIONS Telephone Calls

- ✚ 4,022 telephone calls received from 14 counties in northeast Ohio requesting assistance to obtain dental care in 2006.
- ✚ 2,412 telephone calls received requesting emergency dental treatment in 2006.
- ✚ 16-18 month wait for reduced dental services
- ✚ 18-20 month wait for donated dental services

CENTER FOR DENTAL HEALTH

The establishment of a dental residency program in Summit County was one of the recommendations of the Dental Task Force, and the opening of this dental center was a major accomplishment. Summa Health System has recently launched the Center for Dental Health which is located at 75 Arch Street, Suite 303 in Akron. The center opened in July 2007 and started scheduling patients on July 9th. The clinic is open from 8:30-5:00 p.m., Monday thru Friday. This center increases access to dental services for Summit County residents.

The Center for Dental Health has four residents and six dental operatories to serve patients. Services for dental care include a full range of treatment options, including crown & bridge, partials, dentures, oral surgery, endodontics, dental implants. Orthodontics will be offered in the future. The center works in conjunction with the Emergency Room staff and has a dental resident on call for evenings and weekends. Patients can pay for dental services by cash, check or credit card, and low income patients can pay on a sliding fee schedule. The center is currently a provider for Doral Dental USA, Delta Preferred, Delta Premiere and CareSource. Applications are being made to Medicaid and MetLife. The Center is happy to treat patients with any insurance plan that allows them to go to the dentist of their choice.

Individuals should call (330) 375-6262 to schedule an appointment.



Photo Courtesy of Ed Suba Jr./ Akron Beacon Journal
Above: the Center for Dental Health

Addressing the Problem

The Summit County Dental Task Force remains committed to monitor oral health status and efforts to address access to oral health care issues. Based on the updated data and knowledge of community resources and existing limits to dental access, the following recommendations have been developed.

- **RECOMMENDATION 1**
Provide sustainable support for the safety net dental clinic associated with the Federally Qualified Health Care system in Summit County.
- **RECOMMENDATION 2**
Assure that all community health care access strategies include an oral health care component.
- **RECOMMENDATION 3**
Expand school-based sealant delivery programs coupled with oral health promotion programs.
- **RECOMMENDATION 4**
Expand dental professional participation in OPTIONS program in Summit County.

Recommendation 1:

Provide sustainable support for the safety net dental clinic associated with the Federally Qualified Health Care system in Summit County.

In March 2001, the Ohio Department of Health provided funding from tobacco settlement monies to create new safety net dental clinics. The Akron area was offered this opportunity based on dental need as well as the status of initiatives already in progress. The clinic serves the uninsured, Medicaid and sliding fee schedule patients.

The Summit County Safety Net Dental Clinic also serves as a referral source for the Akron Public Schools' dental sealant program and children examined by the dentist on the Summit County Health District mobile dental van who require advanced oral health services not available on the van.

Although the clinic had to temporarily close its doors to reorganize, it will open again and the Dental Task Force will continue to provide support for the safety net clinic.

Recommendation 2:

Assure that all community health care access strategies include an oral health care component.

Establish an oral health information network to raise awareness of the importance of oral health and access to dental care. Implementation of a cross-organization/agency oral health information program will be necessary. Strong “grass roots” support from key community agencies and funding sources is essential for successfully completing and sustaining our goal of providing adequate dental access to all people of Summit County.

Recommendation 2 will involve increasing awareness of dental access barriers and challenges and it will encourage working together to develop attainable positive dental access results.

Recommendation 3:

Expand school-based sealant delivery programs coupled with oral health promotion programs.

As published in The Guide to Community Preventive Services, it is evident that despite substantial improvements in reducing tooth decay (dental caries) in the United States, tooth decay remains one of the most common childhood diseases. It can result in considerable financial burden, especially among poor children and adolescents aged 5 to 17 years, who are almost twice as likely to have untreated decay as other children. Fluoride use has been credited with much of the decline in dental decay over the past four decades but has limited effectiveness on the chewing surfaces (pits and fissures) of teeth. Today, most decay is found in the pits and fissures of molar teeth. Use of dental sealants – a plastic coating applied to the chewing surfaces – can prevent decay on these surfaces. Recommendation 3 can be expanded if funding continues, and especially with funding from the Ohio Department of Health.

Recommendation 4:

Expand dental professional participation in OPTIONS program in Summit County.

The OPTIONS program has grown to include \$890,000 worth of donated and discounted dental care since 2003, but it is still in need of more dentists to participate in Summit County. It has been an ongoing problem to recruit dentists in the OPTIONS program, and to recruit for safety net dental program volunteers. A community partnership needs to include private dentists, dental organizations, and public health officials to actively encourage volunteerism by practicing and retired dentists and other allied oral health care personnel. Often, financial incentives are overlooked and should be considered for all oral health care personnel able and willing to work in settings that serve vulnerable Ohioans.

CONCLUSION

The community must be aware of access to care issues, and collectively convene as a whole to help solve the dental problems that Summit County faces. Summit County has a long history of identifying needs within the county and working collaboratively to find solutions. Healthy Connections, a coalition of organizations involved in the provision of health care, has identified access to health care as a top priority, and has expanded this to include access to dental care.

Although not publicly recognized, many dentists within the county have provided free or reduced cost dental services for patients with special circumstances, and for February's Children's Dental Health month event "Give Kids a Smile". The four safety net programs in Summit County, as well as the OPTIONS program, are operating at capacity, with documented requests for dental care exceeding available capacity. The community as a whole realizes the need for additional oral health services and better accessibility of oral health care services within our county. Now is the time to come together collectively as a community to "assure that all people in Summit County have access to dental care." As we work together to expand our existing resources and services available in the county, we must also plan for the future to be able to financially retain these resources and increase funding to provide additional oral health care.

Financial support and grant funding is constantly being sought after for the expansion and utilization of the current safety net clinics. As we combine our efforts, our resources, our knowledge and our visions to create and implement oral health solutions for all people of Summit County, we must also keep our community groups and organizations involved and informed.

"Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it is the only thing that ever has".

--Margaret Mead (1901 - 1978)

To receive additional copies of this report or to become involved with the Summit County Dental Task Force, please contact the Summit County Health Department at (330) 926-5657 or contact a task force member directly.

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