

# United For Kids' Smiles

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## *Project Proposal*

### **GOAL**

Improve dental health among children age 0-6 in the Louisville region by bridging the gap between medical and dental providers.

### **OBJECTIVES**

1. Expand fluoride varnish in pediatric primary care setting.
2. Navigate families to dental home.
3. Educate on importance of preventative care (brushing, flossing, no sugary drinks).

### **INDICATORS ADDRESSED**

- Improve access to care
- Oral health services
- Oral health literacy
- Preventative care solutions

### **CURRENT SITUATION AND BACKGROUND**

The 2016 Oral Health Study of KY Youth, led by Delta Dental, shows concerning trends in the deteriorating dental health of KY youth. While access to dental insurance has increased since 2001, the need for treatment has also increased significantly. 2 out of 5 3rd and 6th graders across KY have untreated cavities. More than half of 3rd and 6th graders do not have sealants. The study found that socio-economic status is a significant factor in oral health. Furthermore, children covered by Medicaid rarely have professional dental care. (APHA, 20017)

With this background data in mind, an inter-agency team of stakeholders has chosen to address the problem of childhood carries by focusing on preventative care in Medicaid population age 0-6 with aim to improve outcomes in patients as they grow and thrive. Norton Children's Foundation and Norton Children's Prevention and Wellness will lead project administration. The project outreach efforts will focus on key community partners and Norton Children's Medical Associates in south and west Jefferson, Shelby and Bullitt counties.

## Lead Organization Background

The Children's Hospital Foundation is the philanthropic arm for Norton Children's Hospital. The mission of the Children's Hospital Foundation is to enhance pediatric patient care by generating funds and friends for Norton Children's Hospital. The Children's Hospital Foundation supports programs and services in the areas of capital equipment; clinical research; child advocacy and health education for patients, parents, physicians, staff and the community.

The history of Norton Children's Hospital is long and distinguished. Established in 1892, Norton Children's Hospital remains the only full-service, free-standing pediatric tertiary care facility dedicated exclusively to caring for children within the Commonwealth of Kentucky and Southern Indiana.

For the past 125 years, the dedicated staff at Norton Children's Hospital has worked to provide top-quality medical care for children. The caliber of that care has received national recognition. The quality and scope of care at Norton Children's Hospital has drawn children and their families from all 120 counties in Kentucky and 35 counties in Southern Indiana. Families come to Norton Children's Hospital because of the number of specialties practiced by experienced physicians and for the reputation of the hospital in caring for the needs of the entire family. Patients are cared for regardless of their ability to pay. Last year, over 170,000 children received medical treatment and services at NCH.

NCH is a 300-bed hospital with the region's only Congenital Heart Program, and its 101-bed Neonatal Intensive Care unit is one of only two units in Kentucky designated as a Level 4, the highest level of intensive care for neonates. The hospital also operates a Level 4 designated Epilepsy Program, the highest level of certification. The Wendy Novak Diabetes Center serves kids diagnosed with Type 1 and Type 2 diabetes; and Addison Jo Blair Cancer Care Center, which treats more than 650 children each year for cancer, is one of only 11 accredited programs in the nation.

Established in 1991, Norton Children's Prevention & Wellness, takes an active leadership role in teaching healthy habits for children including injury prevention and educating children and their families on healthy lifestyle choices. Advocacy and outreach educational programs are at the heart of the Norton Children's mission. Norton Children's Prevention & Wellness efforts are focused around:

- Safety and injury prevention
- Promoting Healthy lifestyles
- Key Community Partnerships

Our trusted pediatricians with Norton Children's Medical Associates (NCMA) provide routine well check and preventative medicine, as well as treat minor illnesses and injuries in newborns to teenagers. With 20 locations across the region, care and

compassion are never far away. From September 1, 2016 to September 30, 2017, the (then) 19 NCMA saw 31,104 unique patients from birth to six years old; thereby showing the scope possible to help improve children's dental health during well checkups through our pediatric associate offices.

## **SCOPE AND MAJOR DELIVERABLES**

A part time registered hygienist will be hired as the program coordinator and the face of the program. She/he will be tasked with connecting with each of the 20 NCMA's, additional participating pediatric practices and community partners to introduce the project and assist each practice in implementing the project scope by their clinical staff (fluoride varnish at well checks, navigation to dental home, preventative care education). The project coordinator will also assist with introducing the data collection and navigator tool *Healthify* to each practice and help promote its utilization and data collection function. Healthify is an electronic navigation and care coordination tool that will allow all participating medical practices to refer patients to a dental home using this tool and have access to data showing referral outcomes. Healthify can be integrated into existing electronic medical record system so that coordination of care is seamless. All participating pediatric practices and dental practices will have access to Healthify and ability to see patients' progress.

Dental partners will be determined and sent to Healthify to be added to their referral database. (Healthify can also perform a thorough community assessment and build the database, however due to time constraints of the project, we will assist with this piece) Core Committee members (KYA, NCPW, and SCHC) will determine the dental partners and add'l ones can always be added to the referral network. The dental providers will have access to Healthify so that both the medical and dental providers can coordinate care and share information about patients, while complying with privacy laws.

The Healthify platform does allow for referral to other social/health services, however for the purposes of this project, we will focus only on referrals to dental home and outcome tracking. Full utilization of Healthify can expand in year 2, as the tool becomes more usable and sustained by internal funding. At that time we will expand its use to the full range of social services. Dental home referrals will still be an important focus but families are dealing with many barriers that once addressed can alleviate stress and allow families to prioritize overall health.

Furthermore, the project coordinator will plan and implement a one-time in-service as well as multiple lunch and learn sessions to further increase awareness of the project, share best practices, resolve barriers, etc. As time allows the project coordinator will provide education during key community events and in day care settings.

Preventative oral health education, will be reinforced via marketing efforts, incentives for patients and families and educational materials for the pediatric practices. Marketing efforts will include digital ads, online news stories about dental health and social media posts. These efforts will be coordinated by the project coordinator and partnering org's marketing teams. As part of the project marketing plan, the project coordinator will work

with Norton Healthcare marketing and PR to explore opportunities for media exposure highlighting project deliverables. Project coordinator will also work with the NCPW team and partner organizations to write blogs, ANR/PSA, internal communications, and submission to professional journals.

Incentives will be used to reinforce the dental health message and encourage follow up with dental provider. Incentives will include take-home items for patients and families such as tooth brushes, toothpaste, floss, water bottle (possibly in-kind from Louisville Water Company and Delta Dental). Educational materials will consist of 3-D models and dental health visuals to be placed in participating pediatric practices along with patient education print materials. All materials will focus on the zero sugary drinks message, regular brushing, flossing and dental checkups and will be co-branded with participating organizations logos.

The training of clinical staff will be done on site at pediatric practices using the Smiles for Life online video Curriculum. Fluoride varnish training is brief and can be completed in one hour. Due to the time constraints of physicians, it may be best for practice nurses to be trained in the process and in charge of delivering fluoride varnish. Each practice team can work with the project coordinator to select several of their team members to be trained in administering fluoride varnish. All staff will learn more about preventative dental health during lunch and learns provided by project coordinator. Once the project is underway, a mid-year in-service for pediatric and dental providers will serve as a check point to discuss best practices, barriers, outcomes, share successes, etc.

## **PARTNERING ORGANIZATIONS**

Delta Dental of Kentucky  
KY Youth Advocates  
Norton Children's Foundation and NC Prevention and Wellness  
Louisville Dental Society  
Louisville Water Company  
Shawnee Christian Health/Dental Center  
Home of the Innocents

Partnering organizations worked to developed Louisville region plan and will continue to support project implementation. Core committee (KYA, NCPW, and SCHC) will oversee deliverables and meet routinely to discuss progress.

## **BUSINESS CONSIDERATIONS AND REQUIREMENTS**

As the organization tasked with administering the *United for Kids' Smiles* project, there are several considerations underway as we prepare for the project implementation. First and foremost, the process flow for varnish implementation is being examined by NCPW medical director and key NCMA leadership. Risk of too-frequent varnish application were examined with experts in the field. Our partnering organizations -KY Youth Advocates, Louisville Dental Society, and Shawnee Christian Health/Dental Center

have been instrumental in connecting us with training resources and experts in the field. Timeline for integrating the navigation and data tracking tool Healthify into our electronic medical record system is being examined in preparation for project launch. Other considerations include ensuring open communication between dental and medical providers.

## **TECHNICAL CONSIDERATIONS AND REQUIREMENTS**

Bandwidth and IT resources for Healthify integration are required. Additional storage capacity will be required for fluoride varnish. Vendor and purchasing information is being examined as well as billing for reimbursement.

## **PERFORMANCE CRITERIA AND MEASURES OF SUCCESS**

We will measure the success of *United for Kids' Smiles* by tracking the following performance criteria:

- Number of pediatric patients receiving fluoride varnish at baseline and 6 month intervals.
- Number of families navigated to dental home
- Navigation outcomes
- Attendance at in-service
- Long term outcome measures (changes in dental health trends)
- Track success stories

## **BENEFITS**

Upon fully implementing *United for Kids' Smiles* project and sustainability of this approach, we seek to find a reduction in childhood dental carries, increased utilization of dental homes and improved population health approach in meeting community needs among the Medicaid population.

## **PRIORITIES**

Current priority is project review by Delta Dental. Upon project launch, the priority will be in hiring a project coordinator, integrating Healthify into current EMR and developing a time line for project implementation.

## **ASSUMPTIONS**

Delta Dental will cover cost of up to \$200,000 for program expenses (Jan-Dec 2018) Norton Children's Foundation and NCPW will administer grant project with support from key community organizations.

## CONSTRAINTS

Budget is a common constraint. We believe that our project plan is achievable and sustainable long term. At the conclusion of the Dental Dental grant, the pediatric practices identified in the project will have the capability to continue the fluoride varnish application, education and navigation to dental home. Ongoing funding will allow for continued data tracking and close project coordination.

Another common constraint is time. In particular, the hiring process cannot be rushed. The key is finding the right fit for this job – someone who is passionate about children's health, expert in dental hygiene and has a good understanding of public health principles.

## RISKS

Every project incurs its risks. *United for Kids' Smiles* risks include possible turnover, extended time it takes to gain provider buy-in, integrate tracking tool, and collect data and time it takes to see community impact.

A core committee consisting of key community partners will meet routinely to assess progress and resolve challenges.

## INTERDEPENDENCIES TO OTHER PROJECTS

Sustained incentives are dependent upon availability of resources from partnering organizations such as water bottles from Louisville Water Company and dental care items from Delta Dental.

## SUSTAINABILITY PLAN

Reimbursement of fluoride varnish is a major advantage in sustaining this project. In year one project coordinator will assist each NCMA practice to get the project off the ground with training and fully implementing fluoride varnish, navigation to dental home and preventative education. In year two, the coordinator position will no longer be funded, however practices will continue the project deliverables as part of routine care. Navigation and tracking tool Healthify can help make this a more seamless and measurable process. However sustaining this tool and scaling it to address and navigate patients to other social/medical services will take significant additional funds. Norton Children's Foundation will continue funding Healthify in year two, with an evaluation of the tool at the completion of year two.

**Budget:**

#	Description	Estimated Amount
1	Salaries (program coordinator- 1 yr salary, benefits)	\$ 75,000
	NCH admin costs	\$ 20,000
2	Cell/computer	\$ 2,000
3	Incentives (take-home by patients/families)	\$ 20,000
4	Education (within pediatric practices)	\$ 10,000
5	Marketing/communications	\$ 10,000
6	In-service (speaker fees, food, education)	\$ 15,000
7	Healthify navigation/data tool (50 authorized users)	\$ 48,000
	<b>Total</b>	<b>\$ 200,000</b>

## MAJOR MILESTONES AND HIGH-LEVEL TARGET DATES

#	Deliverable	Estimated Duration
1	Planning phase	1 to 3 months
2	Hiring phase	1 to 3 months
3	Training	1 to 2 months
4	Project implementation w. impact measures	6 to 9 months

## APPENDIX

- Norton Children's Medical Associates location listing
- Healthify overview

*High Level Work Breakdown Structure*

