

### What is a NACDD Oral Health Opportunity Grant?



The National Association of Chronic Disease Directors (NACDD), with funding from the Centers for Disease Control and Prevention (CDC), has provided Oral Health Opportunity Grants to more than a dozen state health departments over the past several years. The grants are competitively awarded to states that demonstrate a commitment to improving oral health surveillance and increasing access to and use of services intended to improve oral health among older adults.

One of the primary goals of the NACDD Oral Health Opportunity Grants has been to advance implementation of the Basic Screening Survey (BSS) for older adults. The BSS was developed by the Association of State and Territorial Dental Directors (ASTDD), with funding from the CDC, in response to the need for improved data on oral health status and access to dental care. The Oral Health Opportunity Grants have advanced implementation of the BSS by supporting states in their efforts to develop oral health surveillance plans, pilot the BSS for older adults, and/or conduct a state-wide BSS for older adults.

In 2011, the Michigan Department of Community Health was awarded a NACDD Oral Health Opportunity Grant to pilot a project focused on identifying the best techniques for gathering oral screening data from those 65 years and older in Jackson County, Michigan. The 18-month pilot project was designed to provide a basis for launching a statewide senior oral health screening. The project was entitled, the Jackson County Senior Smiles Survey (JCSSS).

### What key activities were conducted as part of the Jackson County Senior Smiles Survey?

Between August 2011 and October 2012, 192 Michigan adults ages 65 years and older received an oral health screening at 13 different sites participating in the pilot program. The Association of State & Territorial Dental Directors (ASTDD) *Basic Screening Survey for Older Adults* tool kit, as well as lessons learned from the 2010 *Senior Smiles Survey in Michigan*, was used to develop the pilot program. The screenings took place at a variety of facilities, all of which included a congregate meal site for seniors. The sites were contacted by Smiles on Wheels using telephone and/or e-mail to seek permission to set up an oral screening station and to coordinate a date. The sites were randomly selected; all were located within Jackson County, and they all offered the seniors a meal. Each screening was staffed by the same two registered dental hygienists and one assistant who attended all screenings.



### What was learned as a result of this work?

- **The Jackson County Senior Smiles Survey was effective in reaching and serving seniors in need of oral health care**

The JCSSS helped reach 192 Michigan seniors and provided oral health screening and care to them. Of these, 17 (8.9%) were in need of periodontal care or urgent treatment that they may not have received otherwise.

Almost half (48.6%) of the seniors that were screened reported that they did not have insurance that covered dental care and one-third (33.0%) did not receive dental care because of cost in the past year.

- **The screened population had numerous oral health conditions that require treatment and/or follow-up**  
Nearly one out of four seniors screened reported severe dry mouth (22.9%). Almost a quarter of those screened had substantial oral debris (23.4%), 12.5% had severe gingival inflammation, 10.9% had untreated decay, 9.9% had root fragments, 9.4% had suspicious soft tissue lesion(s) and 4.2% had obvious tooth mobility. These oral health conditions do not represent the healthy oral cavity that is necessary for all people of all ages to achieve total health.
- **Congregate meal sites provide a useful way to reach older adults**

In the JCSSS, all of the screenings were at congregate meal sites that provided lunch to seniors, except one. With the support of the site administrators and/or coordinators, these congregate meal sites were a simple way to access seniors. It was demonstrated through the screenings that having the support of the coordinator was imperative for several reasons: (a) The coordinator is a familiar and friendly face to the seniors. If the coordinator demonstrates the importance of the screening then the seniors will be more comfortable with consent; (b) Many, if not all, of these sites had ongoing activities (i.e., bingo, karaoke, card tournaments, exercise classes, etc.) that competed with the screenings. If the site coordinator can plan the time so that seniors do not risk missing out on the social event it will increase the number of seniors screened; (c) If the coordinator will announce the screening to the group in a positive and encouraging manner it naturally supports the project; (d) The coordinator can help with planning the best day to have access to the highest number of seniors because they are experienced in their positions, know the seniors well, and can forecast attendance for food preparation needs.



- **When congregate meal sites are not available, other sites can be used to reach older adults**  
In the JCSSS, a variety of other sites were used to conduct screenings with seniors when congregate meal sites were not available. These alternate sites included faith-based locations, senior-focused health fairs, legislative-focused events, holiday events, and at assisted living facilities.
- **Several factors can help enhance the success of the oral health screening program**  
The JCSSS program demonstrated that several factors can help enhance the success of the oral health screening program, including: (a) Privacy screens — the screens increased participation in the screenings because they allowed seniors to feel more comfortable with the open mouth survey and removal of dentures and partials; (b) A supportive site coordinator who knows seniors by name can sometimes increase participation rates; (c) Have a list of nearby dentists. There were multiple times that a referral was given and appointments were made on site during the screening; (d) Posters and advertisements will increase the turn out; (e) Incentives — seniors received quality oral health aids, such as Crest spin brushes, denture adhesive, dry mouth aids, and reusable shopping bags as incentives.

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