Promoting Health Equity in School-based Dental Sealant Programs

An Introduction to Cultural Agility, Health Literacy, and Trauma Informed Care

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Housekeeping

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- If you have any technical issues during the webinar, please type the issue into the chat/questions feature.
- Please do not put your phone on hold or take a call on another line during the webinar. Hang up and rejoin if necessary.
- Audio test.





Housekeeping

• The webinar recording and presentation slides will be uploaded to the OHA website in about a week.

Link: http://www.healthoregon.org/sealantcert

- There will be stopping points after each topic. Questions may be asked during the pauses or at the end of the webinar.
- Please type your questions at any time into the chat/questions feature.





Introduction

- Consider this webinar an introduction to:
 - Cultural agility
 - Health Literacy
 - Trauma Informed Care
- Q&A after each section.
- Resources are available for additional guidance.





Objectives

- 1) To promote health equity in school dental sealant programs.
- 2) Learn and be able to apply the values of:
 - Cultural Agility
 - Health Literacy
 - Trauma Informed Care
- 3) Know where to access resources on these topics.





Why Health Equity?

- Health disparities: measurable differences in the frequency of health conditions, health status, and outcomes between groups.
- Health inequities: health disparities that are the result of the systematic and unjust distribution of the essential elements of health (social determinants).
- Health equity occurs when everyone in a community has the ability to achieve the highest level of health possible, regardless of who you are, how much money you have, or where you live.





Why is this important?

Our programs serve vulnerable and underserved populations. Promoting health equity means we remove as many barriers to access as possible.

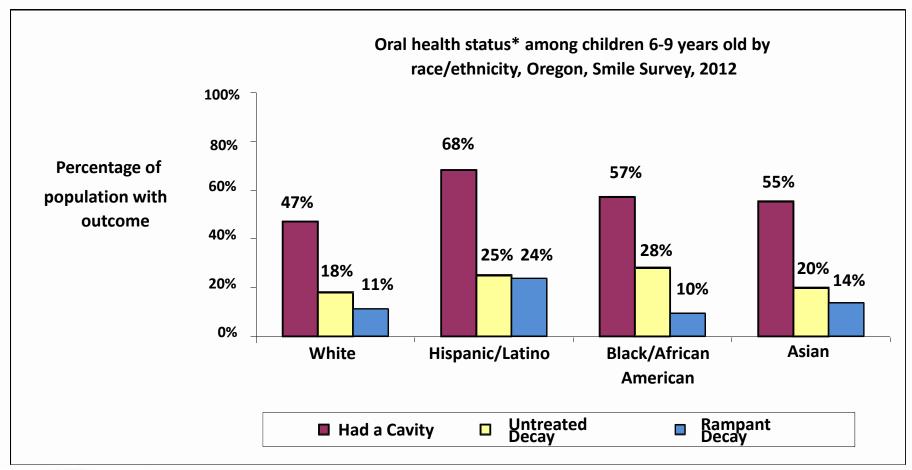
Cultural Agility, Health Literacy and Trauma Informed Care help us remove some of these barriers.

This means our most vulnerable and underserved populations can receive the care they need.





2012 Smile Survey Data





*Primary and permanent teeth



Cultural Agility





Cultural Agility

Cultural Agility: the capacity to relate to or allow for different cultural perspectives and being flexible enough to experience a shift in your own perspective.

Organizations are moving away from using the term **Cultural Competency**, and moving toward using the terms **Cultural Agility** or **Cultural Responsiveness**.

These terms acknowledge that honoring all ways of knowing is a process that requires thought, situational awareness, and action.





Poll Question





5 Essential Elements to an Institution's Cultural Agility

- Valuing diversity
- Capacity for cultural self-assessment
- Being conscious of cultural interaction
- Having institutionalized culture knowledge
- Adapting to cultural diversity in service delivery





Cultural Agility

- All staff should receive cultural agility training:
 - Program Coordinators/Administrators
 - Clinicians
 - Referral Coordinators/Case Managers
- This can help ensure that:
 - Patients have positive experiences at every point of contact.
 - Staff have tools to interact respectfully with each other.
- https://www.thinkculturalhealth.hhs.gov/education/oral-healthproviders



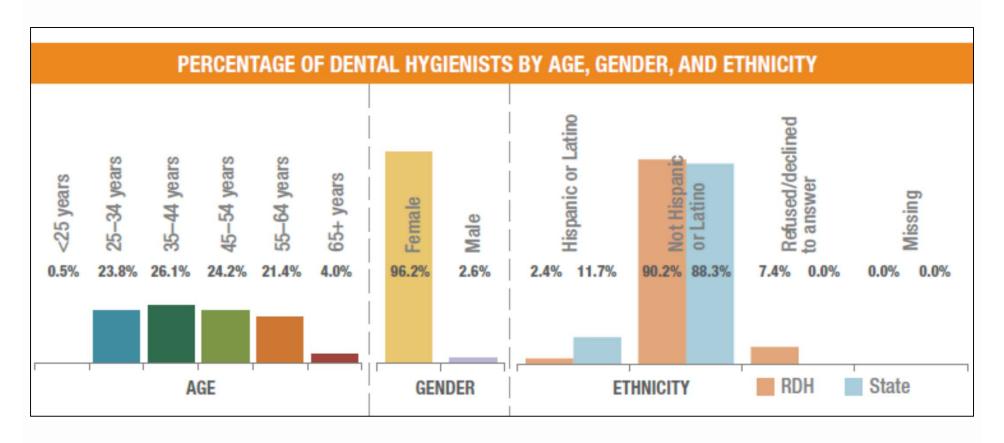


Why it matters:

- Workforce should reflect the population demographics.
- Racially and ethnically diverse providers are more likely to work in underserved areas.
- Oregon dental hygienists do not reflect current population demographics.
- Fosters participation and compliance in health care recommendations.
- Improves health outcomes.



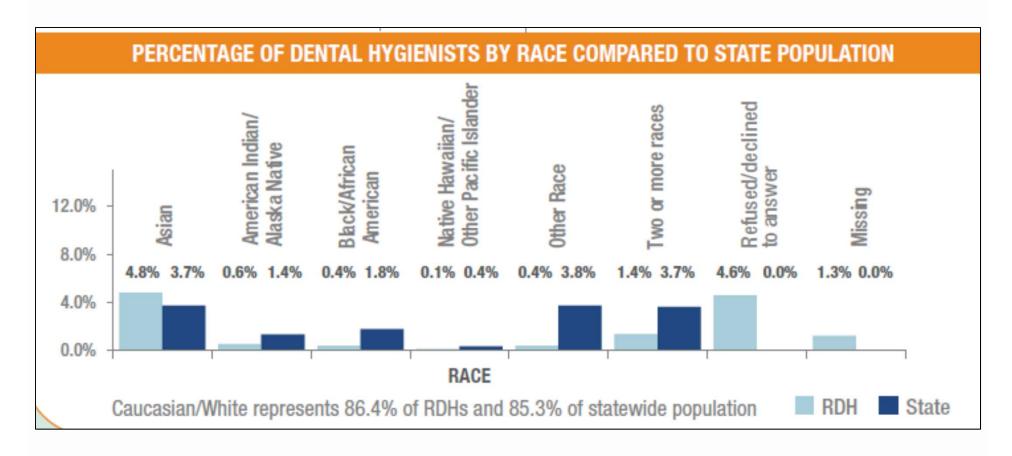






2014 Oregon Health Professions: Occupational and County Profiles http://www.oregonhwi.org/resources/reports.shtml







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- Recruit hygienists & assistants who:
 - Are racially and ethnically diverse;
 - Are bilingual; and
 - Have experience working in culturally diverse situations.
- Promote loan forgiveness programs if eligible.
 - https://nhsc.hrsa.gov/loanrepayment/index.html
- Provide staff with ongoing training opportunities:
 - Encourage language courses or phrase books.
 - Bring in culturally specific guest speakers.





- Implement hiring practices that support diversity:
 - Blind the name, address and gender categories on applications to reduce "unconscious bias".
 - Include interview questions that illustrate how the applicant has experience working with racially diverse populations, as well as other forms of diversity.
 - Use diverse hiring panels, whenever possible, so that diverse individuals are involved in the decision making.
 - Seek panel members from outside your program.





Oral Health Beliefs

- Some cultures have different beliefs regarding oral health.
- This can overlap with dental health literacy, socio-economic status, and personal experiences.
- You may experience this at different levels from:
 - Parents
 - Community
 - School Administrators





Cultural Agility Example

After receiving dental sealants, Nina needs to be referred for additional care. She does not have a dental home. Her parents call you for help finding a dentist. They speak Spanish at home.

Potential barriers:

- Language barrier: Using an interpreter.
- Access to care: Persuade parents of the need for timely treatment.





Cultural Agility Resources

- Think Cultural Health: https://www.thinkculturalhealth.hhs.gov/
 - Cultural Competency Program for Oral health Providers (E-Learning Program).
 - Free, online education tool with CE credits for Full Course.
 - Overview:
 https://www.thinkculturalhealth.hhs.gov/resources/present
 ations/15/the-cultural-competency-program-for-oral-health-professionals
 - Full Course:
 https://www.thinkculturalhealth.hhs.gov/education/oral-health-providers





Cultural Agility Resources

- Office of Minority Health
 - National Good starting point
 - Think Cultural Health program
 - https://minorityhealth.hhs.gov/
- Office of Equity and Inclusion
 - Oregon Good starting point
 - Trainings, resources, and support for promoting health equity
 - http://www.oregon.gov/oha/oei/Pages/index.aspx





Questions?





Health Literacy





Health Literacy

- Health literacy: a person's capacity to access and understand health information and services to make informed health-related decisions.
- 9 out of 10 adults struggle to understand and use health information when it is unfamiliar, complex or jargon-filled.

CDC: https://www.cdc.gov/healthliteracy/shareinteract/TellOthers.html





Poll Question





Health Literacy Matters

- Affects how we communicate with parents about their child's health and treatment.
- Poor health literacy may impact whether a parent chooses to allow their child to participate in the program.
- Oral health is particularly difficult because dental terminology is even less familiar and more difficult to understand than health care terminology.





Types of Communication

- A program may communicate with a parent:
 - Written forms (permission forms, fact sheets, results forms, email)
 - Verbally (phone conversations & face-to-face interactions with children or parents)





Health Literacy and Forms

- Forms are the primary means of communication with parents.
- Parents need to be able to read and understand them easily.
- Health literacy is important for <u>all materials</u> designed for children and parents.
- Forms and materials should be translated.
 - OHA offers: Spanish, Arabic, Hmong, Russian, Simplified Chinese, Somali, Korean, and Vietnamese.
- Forms should be in Plain Language.





Electronic Forms

Special note: Recommendations and best practices apply to electronic forms as well.

- Additional considerations:
 - Make sure hard copies are still available for those who may not have access to the internet.
 - Additional instructions may be necessary depending on how the form is to be submitted.





Forms Best Practices

- Identify your purpose, audience, and key messages.
- Arrange key messages in order of importance.
- Write in Plain Language.
- Add organizational aids.
- Design the format for readability.





Plain Language

- Plain Language: Writing that your audience can understand easily and quickly.
- Your audience needs to be able to :
 - Find what they need;
 - Understand what they find; and
 - Use what they find to meet their needs.





5 Elements of Plain Language

- 1. Friendly tone
- 2. Active voice
- 3. Brief paragraphs
- 4. Simple sentences
- 5. Familiar words





Plain Language Example

- The tooth is prepared for the dental sealant by brushing and etching. The dental sealant material is placed in the pits and fissures of the tooth, and is then lightcured. The sealant is examined for retention.
- 35 words/ 3 sentences

- The tooth is brushed. A
 tooth cleaner is used to
 get the tooth ready for the
 dental sealant. The
 sealant is put on the pits
 and grooves of the tooth.
 A light is used to harden
 the sealant. It is checked
 to make sure it stays on.
- 47 words/ 5 sentences





Plain Language

- Grade level recommendations: 5th to 8th grade level.
- How do you know your forms are reaching the appropriate grade level recommendations?
 - Word counts & formulas have limitations.
 - Review the forms multiple times and field test whenever possible.
- Forms should be available in multiple languages.
 - Review translations.





Plain Language

- Compromising with "legalese":
 - Legal departments may require certain language to be included on the forms.
 - This language should still be as accessible as possible.
 - Work with your legal department to make forms accessible.





Forms Best Practices: Format for Readability



School Sealant Program Permission Slip



Your child's school has been chosen to participate in the DENTAL3 School Sealant Program. Dental sealants are plastic coatings put on the back teeth to seal out germs and prevent cavities. The screening and sealants are **free** and are done by dental professionals.

Name of Child:			
	(Last)	(First)	(Middle Initial)
Teacher: Grade:			
\square YES, I want my child to have a dental screening and dental sealants.			
*Even though your child may have received sealants last year, please mark yes so we can check them.			
\square NO, I don't want my child to have a dental screening or get dental sealants.			
If yes, please complete and sign below Return by:			n by:
Family Information	Parent/Guardian:	Child's date of birth: / / Mo / Day / Year	
	Mailing address:	Permission to text? ☐ Yes ☐ No	
	Daytime phone number:	Mobile phone number:	
	Email address:		
	My child is taking (list medications):		None: □
	My child is allergic to:		None: □
	Any current medical problems? (If yes, please describe):		
표	□ None □ Behavioral considerations □ Other		
Insurance	Health Insurance (check one) Oregon Health Plan (OHP) / Medicaid ID# Private Dental Insurance Company No health insurance		These services are provided at <u>no cost</u> to you.
Please Read	If you said YES to screening and sealants, your signature below indicates: As the legal parent/guardian, I hereby consent to the release and exchange of information, including any personal health information, between the dental sealant staff, school staff, insurance carriers, the child's dentist, applicable Coordinated Care Organization, and/or the Dental Care Organization of record. I have received a copy of "Notices of Privacy Practices." I also understand a dental student closely supervised by a licensed dental professional may provide treatment.		
Parent/Guardian Signature: Date:			

Forms Best Practices: Key Messages & Organizational Aids





Dental Sealants Fact Sheet

What do parents need to know about Dental Sealants?

- Dental sealants can prevent tooth decay (cavities).
- Your child can get FREE sealants at school through Oregon's School-based Dental Sealant Program.
- A licensed provider puts on the sealant and checks your child's teeth.
- Getting sealants does not hurt;
 no anesthetic is needed!
- Dental sealants only protect the molars.
- It is very important that your child keeps brushing and flossing each day, and using fluoride either at home or at school.

Did you know?

- Tooth decay is almost 100% preventable.
- Dental sealants "seal out" germs to prevent cavities in the molars (back teeth).





Before

After

Keep your child smiling by brushing and flossing every day!

Although very rare, an allergic reaction is possible. If you notice any unusual symptoms in your child after treatment, please call your child's doctor and the Oral Health Program at 971-673-0348.



CENTER FOR PREVENTION & HEALTH PROMOTION
Oral Health Program
www.healthoregon.org/schooloralhealth

This document can be provided upon request in an alternate format for individuals with disabilities or in a language other than English for people with limited English skills. To request this publication in another format or language, contact the Oral Health Program at 971-673-0348 or 971-673-0372 for TTY. For more information, visit www.healthoregon.org/schooloralhealth.

Verbal Communication Best practices

- Good Listening Skills
 - Fully concentrate, understand, and respond.
- Motivational Interviewing (R.U.L.E)
 - Resist telling them what to do.
 - Understand their motivation.
 - Listen with empathy.
 - Empower them.
- Teach Back Method
 - Have the individual repeat back the information you just gave them.



Health Literacy Resources

CDC Health Literacy

- Planning, evaluating, and testing tools
- https://www.cdc.gov/healthliteracy/

Plain Language

http://www.plainlanguage.gov/index.cfm

Maximus Center for Health Literacy

- Quick Plan Language Checklist
- http://www.maximus.com/sites/default/files/MAXIMUS_C
 HL PlainLanguageChecklist.pdf





Health Literacy Resources

Legacy Health Literacy Conference Half-day Workshop:

- Design for Readability: Creating Visual Order
- Exercise: Putting Concepts into Action
- http://www.legacyhealth.org/our-legacy/legacyvalues/health-literacy/health-literacyconference/2017-health-literacy-conferencepresentations.aspx

American Association of Public Health Dentistry:

 https://aaphd.memberclicks.net/oral-health-literacyand-dental-public-health

Frameworks Institute



http://www.frameworksinstitute.org/childrens-oral-health.html

Questions?





Trauma Informed Care





Poll Question





Adverse Life Event (Trauma)

- An estimated 60% of adults in the U.S. experience an adverse life event (trauma) at least once in their lives.
- 26% of children in the U.S. will witness or experience a traumatic event before they turn four.
- 4 of every 10 children in America say they experienced a physical assault during the past year.
- More than 60% of youth age 17 and younger have been exposed to crime, violence and abuse either directly or indirectly.

Your staff, as well as the children receiving dental sealants may have experienced trauma.

http://www.recognizetrauma.org/statistics.php



Trauma

- Trauma victims may:
 - Suffer from anxiety;
 - Have difficulty trusting others;
 - Develop coping methods that evolve into health risk behaviors such as eating unhealthy food or overeating, smoking, and abusing drugs and alcohol; and
 - Exhibit psychological reactions such as the triggering of traumatic memories:
 - when touched by a dental hygienist,
 - when lying down in a dental chair,
 - or when having items in their mouths.





Trauma Informed Care (TIC)

"A program, organization, or system that is traumainformed **realizes** the widespread impact of trauma and understands potential paths for recovery; **recognizes** the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and **responds** by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively **resist retraumatization**"





Why Is It Important?

- Trauma is pervasive.
- Trauma's impact is broad, deep and life-shaping.
- Trauma differentially affects the more vulnerable.
- Trauma affects how people approach services.
- The service system has often been activating or re-traumatizing.







Trauma Informed Care

Trauma Informed Care (TIC) recognizes that traumatic experiences *terrify, overwhelm, and violate* the individual. TIC is a commitment not to repeat these experiences and, in whatever way possible, to **restore** a sense of safety, power, and worth





Commitment to Trauma Awareness

Understanding the Impact of Historical Trauma

Agencies demonstrate Trauma Informed Care with Policies, Procedures and Practices that







Create Safe Context

through:

Physical safety

Trustworthiness

Clear and consistent

boundaries

Transparency

Predictability

Choice

Restore Power

through:

Choice

Empowerment

Strengths perspective Skill building

Promote Self Worth

Collaboration

Respect

Compassion

Mutuality

Engagement and

Relationship

Acceptance and Non-

judgment

Trauma Informed Care (TIC) Best Practices

- Incorporate basic knowledge of trauma into your required annual clinical training.
- Staff should be aware of typical reactions trauma survivors may have, and be knowledgeable that a student may be nervous because the setting has the potential of replicating past trauma.
- Explain the dental sealants procedure before you begin.





Trauma Informed Care (TIC) Best Practices

- Establish a signal with the student so they can notify you when it is too difficult for them to continue.
- Have a soft object the student can hold or squeeze that may distracting and calming.
- Allow staff to take time for self-care, both for their own wellness and their ability to provide high-quality services.





Trauma Informed Care Resources

Trauma Informed Oregon
http://traumainformedoregon.org/

Center for Health Care Strategies
Advancing Trauma Informed Care
http://www.chcs.org/project/advancing-trauma-informed-care/

Substance Abuse & Mental Health Services Admin. (SAMHSA)
Trauma

http://www.integration.samhsa.gov/clinical-practice/trauma





Questions?





Thank you!

- A brief post-webinar Survey Monkey will be sent to you after the webinar.
- We encourage you to respond. We appreciate your feedback!





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