COLUMBIA/BOONE COUNTY BOARD OF HEALTH MEETING MINUTES February 13, 2014

The Columbia/Boone County Board of Health met for a regularly scheduled meeting at 5:30 p.m., Thursday, February 13, 2014. The meeting was held at the Columbia/Boone County Department of Public Health and Human Services, 1005 W. Worley St. Public Health & Human Services Director, Stephanie Browning represented the staff. Senior Administrative Support Assistant, Brittany Klusman recorded the minutes of the meeting.

MEMBERS PRESENT:

MEMBERS EXCUSED:

MEMBERS NOT EXCUSED

David Sohl Jean Sax Dr. Sally Beth Lyon Mahree Skala Dr. Colin Malaker Harry Feirman Ilalyn Irwin Denise Stillson Dr. Michael Szewczyk Lynelle Phillips Dr. Beth Hussey

CALL TO ORDER

Vice Chair Mahree Skala called the meeting to order at 5:30 p.m., Chair Dr. Michael Szewczyk was unable to attend.

APPROVAL OF MINUTES

Dr. Lyon had a correction to the minutes in the section titled "Subcommittee Mission/ General Discussion" in the third paragraph, regarding the sentence that states, "Ms. McDavid explained that the "King's Daughters" screenings are "opt in" for students in K-2nd grade, which is causing the program to be referring less." Dr. Lyon wants to omit 'King's daughters' from the sentence; she clarified that the screenings are in fact Columbia Public Schools screenings. There being no additional corrections the minutes were approved.

REPORT FROM COMMUNITY FORUM BY MS. BROWNING

Ms. Browning thanked the Board members for participating in the forum. It was very successful having 120 people attend. There were excellent comments and discussions. The information has already been transcribed for each of the core groups. Now the core groups are working on the development of goals. Dr. Lyon commended Ms. Browning on the structure of the meeting. Dr. Lyon took some notes back to her school district of how the community forum was put together that allowed people to cycle through stations and give their feedback.

DENTAL HEALTH EDUCATION COMMITTEE

Dr. Lyon explained the Committee's purpose for the meeting is to listen. They want to understand what the reality is for our county and our communities around oral health from everyone's perspectives. This will allow the Committee to ascertain if there are things they might advocate for. Everyone who came to give their input introduced themselves. Dr. Lyon invited anyone who wanted to give their perspective on the three guiding questions to spend about five minutes doing so.

Gary Harbison, the Executive Director of the Missouri Coalition for Oral Health, spoke. Since he represents a state-wide organization that isn't focused solely on this community, he wanted to speak first and give some general information. He explained that the Coalition is a nonprofit organization that has been in existence for seven to eight years, but was re-organized in 2011. He described how oral health in mid-Missouri is very poor. He explained that the Pew Charitable Trust ranks Missouri with a "C" for Children's oral health and a "D" for use of sealants. Missouri is also ranked 47th in access to oral health among all states by the Centers for Disease Control & Prevention (CDC). The Coalition was able to get the State Dental Director reinstated for the first time in over ten years. He explained that states which have Dental Directors can access federal dollars which can help fund programs like dental sealants. He urged Boone County to look for opportunities to plug into state-wide projects that come up.

The Coalition was able to establish an oral health caucus in the Missouri Legislature that started in the 2013 session: Representative Donna Lichtenegger chairs that group, which is called the "Oral Health Issue Development Committee". He explained there are 32 members and that it is a Standing Committee in the House. This is important because it makes oral health less of a back burner issue and is now something that is being talked about. They are working on getting adult dental coverage reinstated in MO Healthnet. This coverage was removed in 2005. They have a bill (HB 1078) in the House, being sponsored by Rep. Lichtenegger, which will require a public water system to notify the Department of Natural Resourced, the Department of Health & Senior Services, and their customers at least thirty days prior to a vote to cease fluoridation. He shared some data from reports provided by the Department of Health and Senior Services about inappropriate ER visits dealing with dental care that was preventable. In 2011, 17.6 million dollars in Missouri went towards these ER visits, in which the patient typically just receives medication for the pain and not dental treatment for the problem. He mentioned Boone County has a high rate of ER visits for dental problems, but it is not as high as the State. Boone County has a disparity with African Americans who visit the ER for dental purposes more so than the white population. He also explained data from the Preventative Services Program (PSP) which showed that during the 2012-2013 school year, 11% of Boone County PSP participants had dental sealants, while state-wide rate was 17%. However, 94% of Boone County children had "good oral hygiene" while the state is at 80%. Only 4% had urgent dental needs in Boone County while the state is at 5.6%.

Dr. Lyon stated the Committee will take a couple of minutes after each speaker to ask any questions that are pressing of each of the guests. Dr. Lyon asked Mr. Harbison if he has a perspective on whether adults or children are more of a concern when dealing with oral health. He replied that they are both of great concern. He mentioned that with children, dental sealants give you more of a gain over many years. However, we have terrible access issues for adults. From the Coalition's perspective, they see the entire lifespan as equally important.

Gloria Crull, the CEO of Family Health Center, which includes Family Dental Center, spoke next. She stated most children, even low income, uninsured and undocumented, have access to oral health services in Columbia. The community-based providers would include Family Dental Center and Mid-Missouri dental clinic, while the funders include Heart of Missouri United Way and King's Daughters. Many low income, uninsured adults lack access to dental services. This information comes from the number of phone calls that come in with adults trying to see a dentist. Family Dental Center accepts patients that qualify for discounted services. Unfortunately, they cannot meet demand due to a limited federal grant which subsidizes the discounted services. That grant covers all medical, mental health and dental at all of their sites, which includes Columbia, Marceline and Salisbury. Ms. Crull explained the grant amount is \$1,200,000. She said public education on oral hygiene, the importance of oral health, and the impact of oral health status on physical health is still needed. There is a large percentage of the population that do not understand this relationship and lack the education. Ms. Crull believes that anything that can be done in that regard would be beneficial. She went on to explain some of the ways that Family Health Center impacts oral health. They directly deliver oral health needs of children, provide discounted services to low income adults, provide dental hygiene services including oral health education, and have a partnership with Columbia Public Schools and outlying Boone County school systems to provide oral health screening and application of fluoride varnish to children. The oral health screening and application of fluoride varnish to children. The oral health screening and application of fluoride varnish to school systems.

It was explained that the Family Health Center's schedule is broken into different "interest groups", which includes children, people with chronic care (includes nursing home patients), pregnant women and self-paid patients. These groups take priority on the schedule. If someone doesn't belong in one of those groups, then it's very hard to get an appointment. Children six years old and under are usually seen right away if they are in the high risk group, uninsured or on Medicaid. People 21 years old and younger have a two-week or less wait time, but the adults end up having the longer wait times. It was clarified that if someone had an emergency, then it doesn't take long to get in. The clinic has five half-days in a week designated to treat emergency situations. These half-days are open to the public but the "priority" groups would be family health center medical provider's referrals. If there are open spots after the "priority" groups, then they can be filled by the public. It was clarified that they cannot meet the demands and having more dentists would not resolve the problem since their grant money doesn't grow.

Lori Osborne, Coordinator of Health Services at Columbia Public Schools, was the third speaker. She explained that they do preventative care, dental screenings and fluoride varnish from preschool to fifth grade in all elementary schools. She explained that from 2006-2013, they have tripled the number of students that were screened and had fluoride varnish application. A barrier they see is preventative care. She explained that the children are educated. Kindergarten through first grade, they teach the importance of brushing, flossing and going to the dentist. The problem can be the parents' education and them not seeing oral health as a priority in their home. It was clarified that if a student comes in with dental pain, then the nurse will contact the parent to see if they have insurance or if they need assistance. If they are under-insured or have no insurance, the nurse will usually contact King's Daughter's. If they have Medicaid, then they assist them in getting an appointment with Family Dental Center. Dr. Malaker suggested Columbia Public Schools add himself and Dr. Todd to their list of who to call with Medicaid students. Ms. Osborne explained how the schools have Health Fairs for secondary students where a dental booth is set-up. They give out free toothbrushes and other information. Ms. Osborne believes having a dentist set-up a dental booth during parent/teacher conferences would be the perfect opportunity to get through to the parents. These conferences occur twice per school year.

Tim Rich, Heart of Missouri United Way, was the next speaker. He explained how Heart of Missouri United Way has a new approach that they call, "Community Impact". Mr. Rich explained how they have a partnership with the Columbia/Boone County Department of Public Health & Human Services, to fund a community needs assessment to generate a third party view of what the community needs really are. They are now making themselves responsible for helping to meet those needs. The focus will be on education, income, health & safety net issues. He explained that they will focus on at-risk youth since that is the area where it will make a bigger difference in the

community and be a long term change. Heart of Missouri United Way has also partnered with Family Health Center to provide some funding that will leverage some of the federal funding. Mr. Rich shared some data about Columbia; four percent of seniors live in poverty, 27% of 0-18 years old live in poverty, and 40-43% of Public School children gualify for free or reduced-priced lunches. He touched on the idea of handing out information on oral health at parent/teacher conferences and explained that a lot of parents don't have a history/practice in their family of good oral health which is passed down from generation to generation. People that are living in poverty cannot afford to purchase a toothbrush or toothpaste. Transportation is a huge issue when dealing with low income populations. Public transit is not robust enough to meet the needs. He believes there is a cultural change and education that needs to happen. There is also a culture of poverty; these families are in survival mode. When they are trying to get services for their family, they focus on food, clothing, shelter and medication. When these families are going from service agency to service agency, they will go to about the first three before they are exhausted or their transportation money has run out. Mr. Rich explained everyone needs to be thinking about where these services are located and how easily accessible they are by transportation. An idea he had was to somehow partner with churches that have vans sitting idle all day Monday-Friday to help with transportation. He also wondered how the equipment and tools would be provided to do oral health at home for the families that are most in need. He touched on "fragile families", who are the families at half the poverty rate, and how they are hard to reach. These families are afraid to get the services they need because they don't want their kids to be taken away or them seen as inadequate parents.

Kathy Brown, dental hygienist for Family Dental Center, does a lot of the grant-funded paperwork. She explained that part of the grant is reserved for transportation, to help get people to their dental appointment. She explained a little about the dental screenings at Columbia Public Schools and how they have an assigned phone number for the parents to call. It states on the paperwork that parents could get the services free for their children, but the parents don't call. She explained that the parents either don't get the paperwork or are afraid to call (which she believes more likely is the case). She explained how there are three options on the paperwork; no urgent problems, early needs and then urgent. These papers then go home with the students for the parents to look at. As of this year, she has encouraged the nurses to keep a list of kids they should follow-up with throughout the year. These nurses are sending letters home and are calling the parents, but are not getting any responses. Ms. Brown believes educating the parents not to be afraid would be beneficial.

Tonya Hann & Candace Day, Centralia school nurses, are seeing the same concerns as the Columbia Schools. They are unaware of the services that are offered, and there is a bubble of families that don't qualify for Medicaid, but cannot afford care. They explained that second grade students receive oral health education. They would love to have supplies to send home with students, and they also agree that parents need to be educated. They explained that getting to Columbia for care is a big hardship and even though they can get reimbursed for the mileage, if they are on Medicaid, it's having the initial money to travel to Columbia that is the problem.

Linda Romine, with the Parents-As Teachers Columbia Public Schools Program, is a "parent educator" and visits families at least monthly. They serve families with children from birth to age five. They help educate parents on oral health. She explained how a lot of these parents don't go to the dentist and are dealing with dental problems themselves. The program serves about 1,500 families and there are about 21 staff members. She would love to have toothbrushes to bring to these families and know about extra resources that may be able to help them. She believes educating the staff to be aware of the resources available and know what to look for with oral health problems would be very beneficial. She clarified that county school districts also have Parents-As-Teachers Programs.

Karen Bassford, with the Department of Health and Senior Services Oral Health Preventative Services Program (PSP) also known as the "Healthy Smiles Program", was next to speak. She explained that this program is funded by the State, and the first year they saw 8,000 kinds and now they are up to 78,000. She mentioned that she is only part-time and has 23 counties, roughly 130-140 school districts, that she deals with. This program only works if they have volunteers like Kathy Brown. Dental Hygienists and dentists have to volunteer their time to go out and do the screenings. The children cannot receive a varnish unless they get a screening. This program has four components; education, screening, varnish application and then referral. The nurses are the ones that give the referrals. She explained that if anyone wants to be added to the referral list, they should contact their local schools and get put on the list. She also mentioned that if anyone needs resources, they should go to the state website at health.mo.gov, click on "Oral Health" and you will find a lot of free educational supplies. She explained that you just need to request them.

Ms. Bassford mentioned that the State was awarded a grant for a sealant program, and she recommended calling the State if you want to be a part of it. She offered to help educate Parents-As-Teachers since they are one-on-one with the parents. It was clarified that the program used to be "Opt-Out", but after having some issues in Missouri, it was changed to being "Opt-in". She explained that there are three options; will not participate, screening only, and screening and application of varnish. She does believe that the "Opt-in" can be a barrier since some parents will not return the permission slips. There are some school districts in the state that have a policy to screen everyone; however, it is the program's policy to "Opt-in". She explained that the school districts are the ones that have the consent forms which the State never sees. She mentioned that with this program, they hand out free toothbrushes and toothpaste.

Robin Bullard, a nurse from Ashland's school district, explained she did not have much information different from Centralia and Columbia public schools. Ashland does participate in the PSP program which they do through eighth grade. She did say that middle school participants drop off dramatically. They do oral health education through fifth grade. The school also has fundraisers in order to get a hygiene packet to hand out. Ms. Bullard mentioned that she wasn't aware of private dentists that provide care to Medicaid patients.

Jackie Wardrip, a Harrisburg school nurse, explained that they started utilizing Family Dental last year. She is amazed at how many parents don't allow their child to go through the screening. Harrisburg teaches oral health from grades K-1. Ms. Wardrip is also a parent educator part-time and she sees that trust is a big issue with families.

Dr. Michael Todd, owner of Mid-Missouri Dental Center, was the last to speak. He started his business twenty years ago, and feels that in that amount of time, things have cleaned up considerably in Columbia. He explained that he has an anesthesiologist who puts kids asleep in his practice. He does this so he can get everything done in one trip because of transportation issues and this also helps to keep his books open for other appointments. He mentioned that his business has always handed out free toothbrushes and floss. Dr. Todd offered to go to schools to help if he was needed. He explained that he was on staff at the University of Missouri and tried to work with MU Emergency Care. He said if an adult came in with an emergency oral problem, he told MU Emergency Care to give him a call and he would look at the patient for free. He didn't have any takers. He believes that adults have an access to care issue, and the kids are taken care of more so than the adults. Ms. Skala contributed information about the emergency room issue; in Springfield, the emergency rooms and the FQHC work together. The FQHC keeps open a certain number of slots so people can be referred from the ER to a next-day appointment for adults for a flat fee.

Ms. Crull shared data from her annual report. Family Health Center proposed they would provide oral health practice instruction to 3,349 kids. Through partnerships with the schools, they were able to provide this for 7,232 kids. They proposed they would screen and varnish 1,675 kids. They

actually screened 3,745 kids and varnished 3,480. They proposed they would have 289 kids that screened positive for urgent needs, when actually 541 screened positive. Tim Rich asked if anyone has seen dental care provided in the poverty neighborhoods using a mobile dentistry clinic. Mr. Harbison mentioned there is a program in Missouri called the Elk's Mobile Dental Program. Mr. Rich said there are funders that may be interested in funding that if it was a collaborative approach. He also mentioned that if we could somehow get dental care into the school facility, it could be beneficial since parents are not as afraid of public schools as they are other health officials.

ADJOURN

There being no additional business there was a motion to adjourn the meeting at 7:15 p.m.

NEXT SCHEDULED MEETING DATE

March 13, 2014