REPORT TO THE TWENTY-NINTH LEGISLATURE

STATE OF HAWAII
2017

PURSUANT TO SECTION 321-63
HAWAII REVISED STATUTES

REQUIRING THE DEPARTMENT OF HEALTH
TO SUBMIT AN ANNUAL REPORT ON DENTAL HEALTH
ACTIVITIES, EXPENDITURES, AND RECOMMENDATIONS

PREPARED BY:

STATE OF HAWAII
DEPARTMENT OF HEALTH

December 2016
Executive Summary:

The Hospital & Community Dental Services Branch (HCDSB) is the only state dental public health agency in the state that provides direct dental treatment services. The HCDSB primarily provides dental treatment service for individuals with disabilities and other special needs persons who lack access to private sector services. The HCDSB is organizationally placed in the Developmental Disabilities Division.

Program Objective:

HCDSB’s objective is to provide access to basic dental care services for persons that are aged, blind and disabled which limit their access to dental treatment, including persons with severe chronic mental illness, frail elderly persons who are medically fragile, and individuals with intellectual/developmental disabilities (I/DD).

Program Activities:

Direct Dental Services

Dental care services are provided by the HCDSB personnel to patients that reside at Hawaii State institutions, including Hawaii State Hospital, Leahi Hospital, and Kalaupapa Settlement, as well as to patients who reside in the community. The HCDSB has five (5) dental clinics located at the Department’s Health Centers on Oahu: Diamond Head, Lanakila, Leeward, Windward, and the Hawaii State Hospital. Currently there are no dental clinics located on the Neighbor Islands.

Over the past year, the HCDSB provided clinical services for 1,392 individuals who otherwise do not have access to private sector dental services. Patients seen by the HCDSB clinics include:

- 38.8% Persons with a mental health disability
- 37.4% Persons with I/DD
- 16.9% Hawaii State Hospital patients

Community Collaboration

The HCDSB staff collaborates and works with State and private agency personnel in the coordination of programs designed to enhance the community dental infrastructure for access to dental treatment in the state. The collaborative focus is primarily on the Neighbor Islands where the geography of Hawaii exacerbates problems in accessing dental health services and there is an uneven distribution of oral health resources.

The HCDSB collaborates with the following programs including but not limited to:

- University of Hawaii School of Nursing & Dental Hygiene;
University of Pacific, Dental School, Pacific Center for Special Care;
Queens Medical Center General Practice Dental Residency Program;
Hawaii Dental Association;
Hawaii Dental Hygiene Association, Hawaii Special Olympics;
Department of Commerce and Consumer Affairs;
Department of Human Services;
Hawaii Primary Care Association; and
Community Health Centers.

Over the past year, the HCDSB staff collaborated with the oral health stakeholders to address the following dental areas:

1) State oral health disparities (especially the Neighbor Islands);
2) Tele-dentistry Pilot Project;
3) Oral health trainings related to persons with I/DD;
4) Statewide oral health access survey for individuals with I/DD;
5) Medicaid adult dental coverage; and
6) Contract with The Queens Medical Center Dental Residency Program for the provision of care for patients with disabilities or conditions that are medically fragile, or both.

**Tele-dentistry Pilot Project**

The HCDSB has identified significant disparities in access to oral health services which have been well-documented in Hawaii. While these disparities are common in many states they are magnified in Hawaii by the following areas of concern:

1) The geography of Hawaii exacerbates access problems and there is an uneven distribution of oral health resources;
2) General dentists, dental specialists, and resources for sedation and anesthesia for dental care are concentrated on Oahu;
3) The community water supply in Hawaii does not contain fluoride; and
4) There are a limited number of dentists who participate and accept patients eligible for the State Medicaid Dental Program.

As a consequence of these and other factors Hawaii has a history of ranking among the worst states for dental health in the country for many groups including children and adults with complex medical problems and disabilities.

Over the last several years, the Department has expressed interest in the Virtual Dental Home (VDH) system developed by the Pacific Center for Special Care at the University of the Pacific School of Dentistry in San Francisco (Pacific Center). The HCDSB concluded that this system can be an effective way to address Hawaii’s oral health disparities for the underserved and vulnerable populations.
In the past year, the Hawaii Dental Service awarded the Pacific Center and the HCDSB grants to establish a VDH pilot project on the Big Island (Kona), with the West Hawaii Community Health Center. The grants provide funding for the first two (2) years of a three (3) year pilot project.

The VDH pilot project focuses on providing dental education and dental care for children age zero to five years old at community sites such as Head Start and Women Infant Children (WIC) programs. Expansion of the pilot project to other geographic areas and programs will be dependent upon additional funds.

Since September 2016, early preventive dental services and oral health education was provided at the Kona Head Start and WIC programs. By the end of this year, approximately 160 children will have received dental services through the VDH.

The goals of the VDH pilot project are to:

- Demonstrate the effectiveness of the VDH given unique needs of Hawaii;
- Reach and provide diagnostic and preventive dental services to underserved populations that traditionally postpone dental care;
- Connect dentists virtually with dental hygienists in public health sites; and
- Provide services at a far lower cost than the traditional dental office.

**Oral Health Trainings**

The HCDSB is aware of the need for oral health training for families, caregivers and oral health professionals who provide care and treat persons with I/DD. Therefore, the HCDSB developed two training presentations addressing the following areas: 1) oral health awareness and oral hygiene practices for care providers and families of persons with I/DD; and 2) dental treatment considerations for oral health professionals when treating persons with I/DD.

The HCDSB conducted its first annual oral health training presentations statewide. In the past year, training presentations were conducted on the islands of the Big Island (Hilo and Kona), Maui, Kauai and Oahu. A second round of trainings starting on the Big Island (Hilo and Kona) began in November 2016. Statewide training for Maui, Kauai and Oahu will be completed by June 2017.

In addition, the HCDSB is also planning to post the oral health training presentations on the HCDSB website as a dental resource for the public.

**Oral Health Access Survey**

The HCDSB completed a statewide oral health access survey for persons served by the Developmental Disabilities Division. The purpose of the survey is to analyze the access to oral health care for persons with I/DD compared to other populations. Over 620 surveys were completed, and the data has been reviewed and analyzed. A report of the survey findings will be completed by early 2017.
Problems and Issues Encountered by the Program:

Access to dental services continues to be the primary issue for statewide oral health. Medicaid recipients and other low income residents, and medically compromised individuals have poor access to dental care from private sector dental care providers. Patients are referred to the HCDSB by other State public health and social service agencies and private sector health care providers for dental treatment. Presently, the HCDSB does not operate dental clinics on the neighbor islands where access to essential emergency dental care (to relieve pain and infection) is limited. The capacity of Hawaii's system of community health center dental clinics is limited and individuals with I/DD have limited access to care at these community health centers.

Program Recommendations:

The HCDSB will continue to work and collaborate with private sector providers, community health centers, and other oral health stakeholders by making them aware of the problems faced by the uninsured and under-insured population in accessing dental treatment services. The HCDSB will also further evaluate the various oral health care models implemented by other states to address Hawaii’s access of care challenges. We will continue to advocate support for those who need, but do not have access to dental care.

Total HCDSB Expenditures for FY2016:

- **Position Count:** 12.00 FTE
- **Personnel Services:** $950,603
- **Contract:** $200,000, The Queens Medical Center Dental Residency Program
- **Other Current Expenses:** $112,075
- **Total:** $1,262,678
FAMILY HEALTH SERVICES DIVISION

The Department of Health, through the Family Health Services Division, has been able to leverage a 5-Year Centers for Disease Control (CDC) Oral Health Disease Prevention grant to secure additional resources to achieve progress toward building the State Oral Health Program. Some key activities include:

Data Surveillance

- **Hawaii Smiles 2015** oral health screening report on children, available on DOH website (https://health.hawaii.gov/about/files/2013/06/Hawaii-Smiles-Report.pdf);
- **Oral Health: Key Findings** data report and companion databook, available on DOH website; the data report includes recommendations for consideration based on collection of existing oral health data sources (http://health.hawaii.gov/about/files/2013/06/Key_Findings_wC.pdf);
- Annual reporting of data to the National Oral Health Surveillance System;
- Establishment of an oral health data advisory group comprised of diverse stakeholders;
- Planning for basic screening survey of young children and pregnant women.

Assessment

- Oral health environmental scan report in progress, scope includes:
  - evaluation of current oral health system (the conditions and activities that are affecting the availability, accessibility, and quality of dental health care in Hawaii including population needs, access to services, resources, policies);
  - identify components of ideal system including evidence based, best and promising practices;
  - purpose to inform state planning efforts;
  - an advisory committee of key stakeholders are providing direction/input to the report (including Med-QUEST, Department of Education, Hawaii Dental Association, Hawaii Dental Hygiene Association, Board of Examiners, Hawaii Dental Service, University of Hawaii School of Nursing and Dental Hygiene).

Personnel

- Continued recruitment for Dental Director Position (half-time), Program Specialist position, and Office Assistant;
- Partnering with the New York University (NYU) - Lutheran Dental Public Health residency program for resident placement at the Department of Health.

Dental Sealants

- Conducted a pilot dental sealant project in partnership with West Hawaii Community Health Center (WHCHC) to identify challenges to building a sustainable school dental sealant program. Funding was provided by the HDS Foundation, Aspen Institute Excellence in State Public Health Law Program and the CDC Preventive Health & Health Services Block Grant.

Teledentistry

- See **Tele-dentistry Pilot Project** section on pages 2 and 3 above.
Other Activities

- Collaborated with the Kokua Kalihi Valley (FQHC) and the NYU-Lutheran Dental Public Health residency program to pilot an oral health survey of seniors at to identify oral health status and needs (results forthcoming);
- Partnered with the American Academy of Pediatrics to conduct fluoride varnish training with pediatric providers and development of website resources;
- Sponsored oral health data workshop with diverse stakeholders which had led to establishment of a DOH Oral Health Data Advisory group and completion of oral health data reports;
- Contracted with University of Hawaii School of Nursing and Dental Hygiene to integrate oral health promotion at WIC clinics and conduct analysis of fluoridation knowledge among WIC parents;
- Organized Oral Health Track for the Hawaii Health Workforce Summit to provide continuing education to physicians and dentists regarding integration of oral health into primary care, the status of the state’s oral health environmental scan, and new workforce models within the state;
- Partnership with Tobacco Prevention and Education within Hawaii State Department of Health to create press materials that inform dental providers of Hawaii Tobacco Quitline resources and encourage their referral of patients for tobacco cessation support;
- Conducting statewide oral health trainings for caregivers, families and oral health providers involved with the care of persons with intellectual and developmental disabilities.

Ongoing Assurance Activities

- Operate five dental clinics on Oahu that serve those individuals with chronic and severe developmental and intellectual disabilities, medically indigent, frail elderly, and clients under the Developmental Disabilities Division;
- Contract with The Queen’s Medical Center Dental Residency Program for the provision of care for patients with disabilities or conditions that are medically fragile, or both;
- Contract with 16 health service programs (including the Federally Qualified Health Centers) to provide primary care services for the uninsured and under-insured that includes dental treatment services;
- Monitor workforce shortages including dental services and establish federal designations for health professional shortage areas;
- Aligned Maternal Child Health five-year plan with oral health program activities to include oral health evidence based strategies targeting an improvement in access and utilization of preventive dental visits for children and pregnant women.

Expenditures

- $112,620 – Hawaii State Oral Disease Prevention Program Grant, from the Centers for Disease Control and Prevention (CDC) for the period 9/1/15 to 8/31/16, third year of a five year grant project period.
PART V. DENTAL HEALTH

§321-61 Dental health. The department of health shall constitute the sole agency of the State for the purposes of carrying out the activities and performing the functions provided in this part. [L 1949, c 208, §2; RL 1955, §46-50; am L Sp 1959 2d, c 1, §19; HRS §321-61]

§321-62 General duties of department. The department of health shall study and appraise the State's dental health needs and resources, and shall foster the development and expansion of dental health services to the people of the State. The department may:

(1) Conduct research, investigations, experiments, demonstrations, and studies relating to the incidence, causes, diagnosis, treatment, and prevention of dental diseases;

(2) Supervise, provide, and direct clinical dental health services for adults and children in the State;

(3) Develop and conduct a program of dental health education of the public;

(4) Provide information and education relating to dental health to public health nurses, teachers, social workers, and others who deal in a professional capacity with the public, through publications, seminars, institutes, and other appropriate means; and

(5) Provide training for professional personnel to staff state and local dental health programs. [L 1949, c 208, §5; RL 1955, §46-53; am L Sp 1959 2d, c 1, §19; HRS §321-62; am L 1992, c 70, §5]

§321-63 Director's specific duties and powers. To carry out the purposes of this part the director of health shall:

(1) Take such action as may be necessary, and authorized by law, to meet conditions prescribed for participation in all related federal dental health programs and the regulations adopted thereunder; determine qualifications of personnel requiring professional training and licenses and correlate the programs of the department with the profession and related agencies for the proper and efficient functioning of the department;

(2) Enter into cooperative arrangements with other departments, agencies, and institutions, public or private;

(3) Submit plans relating to dental health to the United States Public Health Service and make application for such federal funds as will assist in carrying out the purposes of this part;

(4) Accept on behalf of the State and deposit with the director of finance any grant, gift, or contribution from the federal government or other source made to assist in meeting the cost of carrying out the purposes of this part and expend the same for such purposes;

(5) Make an annual report on activities and expenditures pursuant to this part, including recommendations for additional plans, measures, or legislation relating to the purposes of this part. [L 1949, c 208, §6; RL 1955, §46-54; am L Sp 1959 2d, c 1, §§14, 19; am L 1963, c 114, §1; HRS §321-63]