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Quarterly Report January – March 2010

The Manitoba Collaborative Project for the Prevention of Early Childhood Tooth Decay

Submitted by: Sarah Prowse, Healthy Smile Happy Child (HSHC) coordinator

Date submitted: April 9, 2010

Note: The HSHC coordinator position was 0.3 FTE through this reporting period. This will increase to 0.6 FTE from April 1, 2010 to June 2010.

Regional Updates

The HSHC project coordinator is continuing to work with key contacts in each region of Manitoba; following up with the letter sent by the HSHC partnership and work plan, which was sent to all Regional Health Authorities (RHAs) requesting their input into the type and level of support that they would like to receive from the project and project coordinator. The coordinator is working to ensure the sustainability of oral health promotion activities in Manitoba beyond the present mandate of Healthy Smile Happy Child project as current funding will end March 31, 2011. Key contacts in each RHA/region have been invited to attend the intersectoral partnership group meetings to continue to connect the regions with Healthy Smile and to provide direct feedback and information about their respective areas.

A request has been made by an RHA contact to share ideas and those initiatives and activities that are happening across Manitoba regarding early childhood oral health. This will take place via telehealth in early April. The HSHC coordinator has invited people from every region to take part. The coordinator will present on some research findings on the Healthy Smile Happy Child follow-up study as well as Dr. Schroth's and Jordan Pang's (Dental student) review of pediatric dental surgery for early childhood dental caries in Manitoba. The coordinator will also be sharing examples of prevention of early childhood tooth decay in action.

The HSHC coordinator met with Public Health Agency of Canada programs - Aboriginal Head Start (AHS), Canada Prenatal Nutrition Program (CPNP) and Community Action Program for Children (CAPC). There are 52 sites across the province (main and satellite). The programs have incorporated oral health promotion messages into their programming to some degree, but requested resource tubs for each site to help them promote the HSHC messages. Resource tubs were created which included examples of handouts, posters, DVDs, sugary drink displays, games and tools for interacting with parents and caregivers and examples of anticipatory guideline bags. The HSHC coordinator will be following up with these programs to offer further support and training.

Burntwood/Churchill Regional Health Authorities:

Funding for Healthy Smile Happy Child Community Facilitator position ended on July 10, 2009.

• HSHC resources and self learning orientation modules are readily available throughout Burntwood region and are used regularly by public health nurses, home visitors, healthy baby outreach workers and OBS staff at the hospital.

- The health promoter position is currently vacant. The HSHC coordinator is working with the Public Health and Clinical Nutrition Services manager to work the Healthy Smile messages into the position as this position is filled.
- The HSHC coordinator has been following up with a request for a Northern Oral Health conference which was one of the needs that was highlighted out of the follow up study. However, many of the staff who were interviewed as part of the first qualitative study are no longer in the same position. All the nursing stations in Burntwood have been contacted to see if there is still a need for a conference and what format this might take to meet their needs.
- The HSHC coordinator has been in contact with the Medical Education Coordinator in Burntwood to organize an education session for physicians. The education coordinator is working with the university to set up continuing medical credits; at which point we will be able to provide an education session.
- Minimal work has taken place in Churchill in the last year partly due to key contact leaving the position with no replacement. However through discussions with the director of clinical services, a public health nurse has been identified as a contact person. The HSHC coordinator will be in contact with this person to orientate her to the project and messages.
- Contact has been made with a public health nurse and dental hygienist who will be attending a Healthy Smile telehealth session in early April. The PHN has been using the HSHC resources from the WRHA website at well baby clinics.

NOR-MAN/Parkland Regional Health Authorities

Funding for Healthy Smile Happy Child Community Facilitator position ended on July 1, 2009.

- Infant/Child community developer has been identified for contact person for NOR-MAN region. This community developer was to be meeting with managers in January to discuss Healthy Smile Happy Child and what role they would take in the region. The HSHC coordinator is following up with the community developer to help determine where HSHC can give support. The community developer will be attending the telehealth sharing session in early April. This will be an opportunity for the project coordinator to discuss further.
- Parkland community health nutritionist has been identified as the contact person. The HSHC coordinator is working with this person to develop strategies to continue the Healthy Smile messages in Parkland. An initial concern of Parkland RHA is their capacity to take on extra work i.e. having someone be a contact person for HSHC. Their concern is the ability to have someone field requests for presentations. As many staff outside the PRHA have been trained in the resources and tools, hopefully the requests will be kept to a reasonable level. The HSHC coordinator is working with the Centre for Community Oral Health (CCOH) to formalize a process of having dental hygienists respond to community requests for presentations as part of their continuing education credits. This process would help reduce the work for the contact person.
- Parkland has indentified that oral health would fit well within the Public Health program in their area. They have requested the Oral Health and Chronic Disease presentation by Mary Bertone from CCOH. The HSHC coordinator is working with Mary and the Parkland contact person to provide this for the public health team.

North Eastman/South Eastman Regional Health Authorities (NEHA and SEHA): Funding for Healthy Smile Happy Child Community Facilitator position ended on November 6, 2009.

• The primary health care manager for NEHA reviewed the work plan with positive feedback although no specific needs for the region were identified. The manager suggested connecting with the provincial health promotion network as a strategy for keeping oral health promotion on the radar.

- NEHA wellness facilitator has been identified as HSHC contact. This position was created with community activator funding. HSHC coordinator is to continue to work with this person to follow up on ideas that were generated last year including oral health displays at early year's clinics and training for nurse practitioners.
- The health promotion position in South Eastman has been filled and this person is the HSHC contact person. The HSHC coordinator met with this person to go through the HSHC resources and tools. A resource tub was created by the previous community facilitator for this region which has been passed along. The health promoter has attended the intersectoral meetings and has demonstrated a keen interest in early childhood oral health.
- The SEHA public health manager reviewed the work plan and identified a few areas where SEHA needs support from the HSHC coordinator. Although the public health staff had training on HSHC when the project began, due to staff turnover another education session was requested for families first home visitors, healthy baby program staff, public health nurses and health promotion staff. The health promoter and HSHC coordinator have been working on this and the session is planned for late April.
- The public health manager feels that the continuing to connect with the public health team (through the health promoter) will sustain the previous work done with Hutterite communities in this region. The parent/child coalition was identified as another area for ongoing oral health promotion. The coalition coordinator position is vacant but the HSHC coordinator will contact the new person when it is filled.

Central/Assiniboine/Brandon Regional Health Authorities:

Funding for Healthy Smile Happy Child Community Facilitator position ended on May 31, 2009.

- A Healthy Living Facilitator with Central Regional Health Authority (CRHA) has been designated as the oral health liaison for the region. This person was previously a HSHC community facilitator so is very comfortable with the message and tools.
- HSHC coordinator has recently made contact with the health promotion coordinator for Assiniboine. She has reported that the health promotion team has done no work in oral health over the past fiscal year but she is interested in meeting with the HSHC coordinator to discuss how they could incorporate the HSHC messages into their work. Unfortunately she is unable to attend the telehealth session in April so the project coordinator will follow up with her after the session to pass on information that comes out of this session.
- A public health nurse from Brandon Regional Health Authority was identified by the public health team manager as the contact person for HSHC. The HSHC project coordinator has been unable to connect with this person.
- However one of the healthy living facilitators has been in continued contact since a training session was held in late 2009. She sees the need for oral health to be incorporated into her work but has yet to identify strategies for how this will look and work in practice. Brandon has an 'Eating Well' community group – this may be a venue for incorporating oral health messages. The healthy living facilitators are also looking at incorporating oral health questions into their wellness screens. The HSHC coordinator has passed on some information and sample questions which they may be able to use.

Winnipeg/Interlake Regions (WRHA and IRHA):

(0.5 FTE position – Healthy Smile Happy Child position ended March 31, 2010) Please note: Healthy Smile Happy Child community facilitator was on sick leave for two weeks during this reporting period

- Groups trained St. Vital daycare directors group.
- Presented to WRHA Community Development Working Group. Provided an overview of what activities had been occurring in different communities in the Winnipeg region. Reminded the group that the community facilitator position would be ending in March so would like to work closely with the WRHA community developers to discuss strategies to

sustain the messages. Feedback from the community developers included the need for a training session for new staff and to update staff that had previous training.

- Attended steering group meeting. Presented update on regions and work plan.
- Provided information and training session for student nurses working with young mothers.
- Presented to two mother and baby groups in Inkster area as a response to community requests. Resources were left with coordinator to continue to promote the messages.
- Presented to English as an additional language class in downtown Winnipeg area. The participants were all mothers and had questions about accessing dental care.
- Presented at Wolseley Family Place as a response to a request from the education coordinator. The participants were mothers of young children. A further session for Arabic participants with the use of an interpreter is being planned.
- Attended Manitoba Dental Association conference. A poster display with resources was set up for dental professionals to view and access resources. Connected with a dentist who would be interested in working with HSHC to provide education sessions for physicians.
- Continuing to work with the Interlake Community Wellness team to provide oral health promotion and prevention activities.

Community Feedback

Follow-up by HSHC coordinator with regional contacts has noted the following ways the spreading of Healthy Smile Happy Child (HSHC) message is being sustained:

Public Health

- Public Health Agency of Canada programs use HSHC with pre natal groups and Aboriginal Head Start groups. Resource kits have been developed and distributed to 52 program sites to ensure sustainability of the messages.
- SEHA public health staff are using resources in their programming but recognize the need for training for new staff. A training session is being organized by the SEHA health promoter.
- Healthy Baby group in Dauphin has replaced all juice with milk and water. The water has been a big hit as they have been putting slices of orange or lemon into it. Children have been heard to ask their parents if they can have it at home. They also provide parents of newborns with anticipatory guidance bags.

Schools and Community Organizations

- Parent resource networking group in one school division has invited the HSHC coordinator to a networking meeting to discuss resources and tools to promote HSHC.
- Community health facilitators in Dauphin have been borrowing HSHC resource kit to present to parent groups.

Dental/Medical Offices

 HSHC coordinator is working with Centre for Community Oral Health to access dental hygienists to provide education sessions for communities. The dental hygienists need continuing education credits and one option to gain credits is through community work. The HSHC coordinator is working to formalize a procedure to have dental hygienists respond to community requests for presentations.

Challenges

At the end of this reporting period, all of the HSHC community facilitator positions have ended. In most areas, the HSHC coordinator has been able to work with the RHAs to identify a contact person to continue to promote the HSHC messages. This has not been successful in all areas however contact is continuing to be made at both facilitator and management level. There was limited response to the work plan and letter sent out to the regions as many RHA staff reported being very busy with H1N1, however near the end of this reporting period, the HSHC coordinator was able to connect with more staff throughout the regions.

• Continuing to field requests for resources (tooth brushes, brochures, DVDs, resource kits) from various groups with limited funding available to fill the requests.

Community Involvement/Partnerships

Project Activity:

- 1) Phase II (Follow-up Study) Evaluation
- Writing of manuscript of findings for journal publication in progress.

2) Presentations January 2010

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	RHA	Train the Trainer		Parent/Caregiver		Contacts made			
		Workshop		Presentations					
		#	#	#	# Participants	Direct	Indirect		
		Workshops	Participants	Presentations					
	Winnipeg	1	14	2	14	21	100		
	Interlake	0	0	0	0	2	0		
	Total	1	14	2	14	23	100		

February 2010

RHĂ	Train the Trainer		Parent/Caregiver		Contacts made	
	Workshop		Presentations			
	#	#	#	# Participants	Direct	Indirect
	Workshops	Participants	Presentations			
Winnipeg	2	11	1	8	12	0
Interlake	0	0	0	0	2	0
Total	2	11	1	8	14	0

March 2010

RHA	Train the Trainer		Parent/Caregiver		Contacts made	
	Workshop		Presentations			
	#	#	#	# Participants	Direct	Indirect
	Workshops	Participants	Presentations			
Winnipeg	0	0	0	0	15	48
Interlake	0	0	0	0	1	0
Total	0	0	0	0	16	48

Schroth RJ. Early Childhood Caries: prenatal influences and systemic connections. Manitoba Dental Hygienists Association. March 1, 2010. Winnipeg, MB.

Schroth RJ. Early Childhood Caries: prenatal influences and systemic connections. First Nations and Inuit Health (Manitoba Region), Health Canada. February 25, 2010. Winnipeg, MB.

Collaborative Activity

- 1) HSHC project coordinator is continuing to connect with health/wellness positions in the regions to share ideas and offer support for oral health promotion. Following up with contacts at management level for input on work plan and region specific needs.
- 2) Members of the project have been working with the Manitoba Dental Association on two of their key initiatives: introducing a first dental visit program for young children and an oral health curriculum for school children. Project resources have been shared with the MDA as they develop these initiatives. This Free First Visit program will begin April 1, 2010 and will continue for 3 years.
- 3) Dr. Schroth has been working with a BSc (Dent) student to review administrative data relating to pediatric dental surgery over 10 years. This information was presented to intersectoral group and will be shared to HSHC contacts at the regional health authorities at a HSHC telehealth session in early April.

Next Steps

- The partnership is continuing to explore ways to provide ongoing central support to the enhancement and sustainability of early childhood tooth decay prevention activities. The work plan that was developed late last year is being reviews by regional health authorities. The HSHC coordinator will be working with each RHA to tailor this work plan to reflect their region's specific needs.
- Working with Centre for Community Oral Health to formalize a procedure to have dental hygienists available to provide education sessions to the community.
- Working with WRHA WAVE magazine to produce an article about the importance of early childhood oral health for publication in May.

Feedback/Evaluation/Research

- Qualitative Evaluation study
 - Currently in the early stages of preparing a manuscript of findings for journal publication.
 - Final report is available online.
- Qualitative Cultural study
 - HSHC received grant funding from the Manitoba Institute of Child Health to complete a series of focus groups to explore different cultural perceptions about early childhood oral health.
 - Final report recently completed and is available online.
 - Will work on preparing a manuscript for journal publication later in 2010.
- Pre/Post Test Workshop Questionnaire
 - A manuscript for publication was submitted to Pediatric Dentistry in September 2008. The article was approved for publication in early 2009. Publication date is expected to be in April/May 2010. The article is titled "The impact of community"

workshops on improving early childhood oral health knowledge." Authors are MacIntosh AC, Schroth RJ, Edwards J, Harms L, Mellon B, and Moffatt ME.

Staff Development

- Manitoba Health will again support 2 STEP students working full time during the summer. The process is under way to recruit.
- Support and management of STEP student activities includes: resource mailings, database entry, development of displays, and other projects and administrative tasks.

Administrative/Research Activity

• All database entry is up to date.

Planning for next Quarter

- Continued communication with dental services and the dental profession throughout Manitoba.
- Continued work with the RHAs to ensure that the knowledge and materials that will assist in promoting overall good health and disease prevention are shared in preparation of the newly funded Community Activator positions.
- Provide chronic disease and oral health presentation for public health staff in Dauphin.
- HSHC training for public health staff in South Eastman.
- Follow up with Public Health Agencies of Canada programs to determine use of resource kits that were distributed.
- Presence at Teddy Bear's picnic in Winnipeg in May.