

Win-Win-Win

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The implementation of AB 1433 (oral health assessments) has stirred up a flurry of activity at many levels in the state. This is a bill that requires children to have their oral health evaluated during their first year in public school in either kindergarten or first grade. The California Dental Association, at the request of its members and in association with the California Society of Pediatric Dentistry, used the legislative process to get the bill enacted. It is designed to minimize or eliminate the significant number of days of education lost secondary to dental disease producing toothaches or abscesses. According to the 2003 California Health Interview Survey, a half-million children missed school due to dental disease.¹

The passage of the bill was not without controversy both within and outside of CDA. Some individuals were concerned with who would do the assessments and whether or not they would be qualified. It was suggested that primary care pediatricians or school nurses could be responsible for this activity. General dentists and dental hygienists are certainly able, but there was question about the numbers available and desiring to participate. Costs associated with the implementation and promotion of the program were discussed. The benefit of requiring a comprehensive examination with radiographs versus allowing a screening as a “quick glance” to satisfy the requirement was argued. Liability for doing screenings without treatment was considered. What to do with children desperately in need of care was



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troublesome. Despite all the questions and skeptics, the resolution passed the CDA House of Delegates unanimously. The trip through the Legislature was familiar, with similar concerns expressed. Ultimately, both the Legislature and the governor agreed the need to improve children’s oral health was clear and AB 1433 presented an opportunity to make a difference.

In recent months, CDA has been ramping up activity toward the execution of this key piece of legislation. We have developed template forms for use at the local level, included information on the process on our Web site, coordinated dissemination of forms and information with the components, synchronized efforts with the Department of Education, written FAQs for schools, parents, dentists and dental clinics, translated materials into five languages, and worked diligently to make this a viable process for our children.

But AB 1433 is more than a school entry oral health requirement. It represents an opportunity for change in the delivery of dental health care. It raises public consciousness of the importance of oral health; it provides essential, though basic, education to parents – sending a consistent oral health message to all of

California’s kindergarten parents; it is a tool to encourage families to enter into existing systems of care and the establishment of a regular source of care; and it focuses awareness on the barriers children face to getting oral health care.

Successful implementation of this law will allow us to identify and quantify those elements that impede the delivery of dental care in our populations. Such factors will likely include a lack of means to pay for care, minimal awareness that early, preventive care is essential to overall health and well-being, absence of sufficient dental professionals to deliver health care in selected areas of the state, and other factors that impede successful delivery of care such as transportation, language issues, etc.

An important undercurrent of success in this legislation might be in the newly formed interrelationships of agencies as they focus on dental health care for children. School boards talking with local dental societies, public health departments focusing on dental disease with a renewed level of interest, and service clubs pursuing programs to assist in the provision of care to the uninsured are examples of how the burgeoning interest

is manifest. The bill with all that it can do has many positive attributes and provides a win at many levels.

The Legislature wins. Legislators can go to their home districts and show they place a priority on caring for children who are at risk for dental disease. This can be a positive factor in their election campaigns.

The schools win. It is understood the teachers and administrators of our schools want to ensure that children are healthy and ready to learn. They do not want absenteeism, which is not only bad for the education of our children who miss many days for dental problems, but has negative budgetary implications for the local schools as well.

CDA wins. We can be proud of the good work and provision of a dental

benefit to the children of California. Part of our mission, vision, and core values include service to our members in advocacy for oral health and the impact of oral health on overall health. This program is a significant realization of those principles. The process works.

The dental profession wins. Private practice offices are beginning to see a stream of young children being appointed for dental evaluations. Certainly some of the underserved populations will not have the financial resources to continue with comprehensive treatment, but dentists can use this opportunity to communicate with parents regarding the importance of preventive and ongoing care, the consequences if disease is left untreated, and, at a minimum, provide limited interceptive procedures to pre-

vent serious dental problems. Additionally, referral to government programs or local safety net clinics is an opportunity and often the result of that initial visit.

Best of all, the children win. Undoubtedly, this is the most telling of the values for this program. If our profession can prevent debilitating dental disease and save pain and suffering in a child, we can hold our heads high as this is a noble reason for this legislation. After all, isn't prevention of disease our reason for being? ■■■■

REFERENCE

1. Holtby S, Zahnd E, et al, Health of California's Adults, Adolescents and Children: Findings from the CHIS 2003 and CHIS 2001. University of California, Los Angeles, 2006.

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