HEALTHIER WISCONSIN PARTNERSHIP PROGRAM

ATTACHMENT B – PROJECT OVERVIEW

PROJECT NAME: Open Wide: Expanding Oral Health Primary Prevention Opportunities through Partnership
HWPP PROJECT NUMBER: 2009D-31

Without exceeding this one (1) page, briefly describe the project’s:

Purpose - Highlight the need for the project.

Approximately 20% to 25% of US children-mostly the poor, racial/ethnic minority, and children with special health care needs (about 22 million children) experience 80% of decayed teeth and experience untreated caries. Nurse case managers and social workers working with low income, disabled women and their children have a unique opportunity to promote oral health and link clients to needed services. This project demonstrates an effective strategy to expand access, promote oral health and prevention of common oral health disease, such as dental caries and minimize unnecessary suffering.

Plan - Describe the project’s implementation plan, methods to be utilized, and involvement of affected communities.

The main components of the project are:
1) Review and adapt a training curriculum for nurse case managers and social workers to increase their knowledge, skills, and confidence in performing oral health risk assessments for low income, disabled women and their children.
2) Piloting the oral health risk assessment protocol with clients. There are existing training curricula available for primary care providers and specific populations in traditional health care settings that focus on improving oral health care. These will be reviewed and adapted for nurse case managers and social workers in this project.

Partnership - Describe how the project will capitalize on the strengths and skills of community and academic partners.

The project capitalizes on the unique asset that each partner provides: MUSOD, SET Ministry, and MCW, has and will contribute to the success of the project. SET provides a wide range of community-based services and has established relationships with governmental agencies. MUSOD has a longstanding commitment to education and community service. MCW has expertise in the development and evaluation of community-based health improvement projects. The project will engage consumers throughout the planning process to assure that their perspectives, needs, and advice are incorporated.

Evaluation - Describe the evaluation method that will be used to measure quantifiable and significant outcomes.

The project incorporates both process and outcome evaluation measures. Process measures will be used to measure the type and quality of collaboration demonstrated in creation and review of the curriculum. These measures will focus on core elements of the collaborative process including effectiveness of communication, satisfaction of engagement, perception of benefit, accountability, and trust between partners. These process measures will serve as guideposts for self-correction during the planning process. Outcome measures will focus on measurement of knowledge, skills, and confidence of nurse case managers and social workers using a pre- and post-test design, and measurement of client satisfaction.

Sustainability - Explain how the partnership will be financially and programmatically sustained.

We anticipate that the training curriculum will be used by SET to train new nursing staff and social workers to assure that these competencies are embedded in the organization. We plan on using the findings from this planning grant to seek an implementation grant to further expand the curriculum to include training on fluoride varnish application, develop a refresher curriculum, and health outcomes for the population served. Government payers already reimburse nurses and family physicians for fluoride varnish treatment. We expect that the project can be sustained and expanded in part through this revenue generation strategy and funding from other foundations.

Dissemination - Describe how the project results will be shared.

Project results would be widely disseminated through the following methods: 1. Provide individual consultations; group meetings; professional meetings; community forums and schools. This is to ensure that our findings are used by policymakers and community-based organizations to achieve optimal oral health. 2. Report the findings at professional meetings such as the American Public Health Association. 3. Present project findings to the administration and clients of SET Ministry, the local health department, Wisconsin Department of Health and other community-based organizations interested in developing this set of competencies.