AGENDA ITEM or FINAL CONTRACT REVIEW SUBMITTAL FORM

Agenda Item: Ratification of County Manager's Approval; Delta D

Action Requested: County Manager Signature

Parties to the Agreement: BOCC & Delta Dentral of CO Foundation

Term Begins: Jan 2019 **Term Ends:** 12/31/2019 **Grant Contract #:**

Summary:

This grant application is for 3 years to provide the "Dental Coordination Project". Funding supports staff time to coordinate existing program "Gunnison Dental Initiative" & expand Prenatal Program to include dental screenings, & to re-establish dental screenings at childcare & other sites.

Fiscal Impact: Yr 1 $32,514 Yr2 $47,472 Yr 3 $ 49,008

Submitted by: C Worrall **Submitter's Email Address:** cworrall@gunnisoncounty.org

Finance Review: (●) Required ( ) Not Required

Comments:
No concerns, will review for budget implications if approved. ln

Reviewed by: GUNCOUNTY1\lNienhueser Discharge Date: 8/30/2018

County Attorney Review: (●) Required ( ) Not Required

Comments:
ok db 8/29/18

Reveiwed by: GUNCOUNTY1\dBaumgarten Discharge Date: 8/29/2018 Certificate of Insurance Required Yes ( ) No (●)

County Manager Review:

Comments:

Reveiwed by: GUNCOUNTY1\mbirnie Discharge Date: 8/30/2018

(●) Consent Agenda ( ) Regular Agenda ( ) Worksession Time Allotted: 0

Agenda Date: 9/4/2018

Revised April 2015

Delta Dental, Dental Coordination Project
Gunnison County Public Health
Budget August 2018

	Year 1	Year 2	Year 3
Total Personnel, Health Educator .38 FTE	**$27,339.00**	**$28,706.00**	**$30,141.00**
Operating Expenses			
Dental Equipment maintenance		$ 40.00	$40.00
Dental Supplies		$3,290.00	$3,290.00
Office Expenses	$75.00	$625.00	$645.00
Educational Brochures	$100.00	$500.00	$500.00
Dental Providers	$5,000.00	$14,050.00	$14,131.00
Travel		$261.60	$261.60
Total Operating	**$175.00**	**$18,766.60**	**$18,867.60**
Total Budget	**$32,514.00**	**$47,472.60**	**$49,008.60**

Narrative:

Delta Dental, Dental Coordination Project Grant
Gunnison County Public Health
Budget Narrative
August 2018

Personnel:

Dental Coordination Project
The role of the Health Education will be part of the Gunnison County Public Health, Multicultural Resources Services. This position is for 15 hours a week and will provide administrative and outreach work required for the oral health program. Personnel costs (.38 FTE) are $**27,339** for the first year with a 5% increase for subsequent years. Total **$27,339** for year one and 5% increase for year two and 5% increase for year three.

Operating Expenses:

Based on services provided for 500 children	Y1	Y2	Y3
Dental Equipment			
As part of previous grants, we have purchased equipment to operate a preschool dental screening program. (In Kind: Dental Hygienist Chair $ 690; Portable Dental Exam Chair $1,690.00). Equipment is portable so there is no overhead for office space.			
Maintenance of equipment (special light bulb etc.)		$ 40.00	$40.00
Total Dental Equipment		**$ 40.00**	**$40.00**
Dental Supplies			
Materials such as hand mirrors, trays and pens	-	$40.00	$40.00
Disposable dental supplies (mirrors and explorers, bibs and disposable holder, gauze, gloves, masks, tray covers, disinfectant/cavity wipes, hand sanitizer, paper towels, tissue) @ $2.5/child		$1,250.00	$1,250.00
Prevention supplies (Goodie bags, toothbrush, fluoride varnish, and floss samples, toothpaste) @ $4/child		$2,000.00	$2,000.00
Total Dental Supplies		**$3,290.00**	**$3,290.00**
Office Expenses			
Postage, letterhead, envelopes, copying and printing etc. for oral health screening program		$300.00	$320.00
Printing supplies for permission slips, dental screening reports and health histories @ $.5/child		$250.00	$250.00

Coffee, tea, baked goods for Dental Breakfast	$75.00	$75.00	$75.00
Total Office Expenses	**$75.00**	**$625.00**	**$645.00**
Educational Brochures			
Brochures addressing Pregnancy and Oral Health. Sample titles include: Pregnancy and Oral Health, Your Child's Teeth, Early Childhood Caries and Happiness is a Healthy Smile. In English and Spanish	$100.00	$500.00	$500.00
Total Educational Brochures	**$100.00**	**$500.00**	**$500.00**
Dental Providers			
Services will be provided at a dentist office at a discounted rate for the pregnant uninsured women 5 pregnant women @ $1,000 in Y1 and 10 pregnant women in Y2 and Y3 [the cost is high because in most cases the pregnant women have not had any oral care]	$5,000.00	$10,000.00	$10,000.00
A contract position necessary to do the school and childcare centers oral health screenings, oral hygiene instruction and fluoride varnish treatments. Contract amount figured is for 90 hours @ $45 per hour and 2% increase for Y3		$4,050.00	$4,131.00
Total Dental Providers	**$5,000**	**$14,050.00**	**$14,131.00**
Local Travel			
8 trips to Crested Butte (approx. 60 miles RT @ 54.5 cents/mile) local" travel for the dental program coordinator and hygienist. This is necessary, as the program will serve two major population areas within Gunnison County	-	$261.60	$261.60
Total Travel		**$261.60**	**$261.60**

DRAFT narrative-Delta Dental grant application

Gunnison County "Dental Coordination Project"

Public drinking water is not fluorinated, affecting over 1,500 children under 18 years old.
Official designation of Dental Health Professional shortage area
Official designation of Frontier County
Zero pediatric dentists in entire county of 3,260 mi^2 with 160+ miles RT to specialists.
Two Medicaid dentists in a County of approximately 16,000 people.
No transportation system outside the county to needed pediatric dental specialists
Of the two Montrose Pediatric dental providers contacted, Treasured Teeth reported having 680 clients from Gunnison and Smiles 4 Kids reported that 20% of their clients are from Gunnison.
One staff to coordinate and interpret for all LEP pediatric clients (+240)
Of the children seen by the visiting dental van, approximately 86% needed more than one appointment and 18% needed four or more appointments due to severe decay.
According to Kids Count in Colorado, 2018:
12.6% children living in poverty in Gunnison County
24% children in Gunnison County qualify for free or reduced lunch program.
26% of children in Gunnison County receive WIC services, and
13% of children in Gunnison County are uninsured, compared to state rate of 4.4%.
As a frontier county with a federal designated dental health professional shortage area combined with lack of fluorinated drinking water, the ability to maintain good oral health is a significant challenge for all county residents regardless of income, race or age. Our existing and innovative programs are even more critical for those experiencing health inequities.

Note: * indicates required questions.

Organization Background

Are you applying using a fiscal sponsor?*

No

If yes, please provide documentation demonstrating your partnership.

Is your organization a 501c3 or 501c4 as designated by the IRS?*

No

If no please explain here. If yes, type N/A.*

County Organization

Mission statement*

The Department of Health and Human Services' (DHHS) mission is to provide culturally competent advocacy, prevention, protection, and support services to families of Gunnison County so they can prosper and thrive in a healthy and supportive community.

Summary of your organization (history & services provided)*

Established in 2001 the Multicultural Resource Services (MRS) is a Program within the Public Health Division of DHHS. Over the 17 years various projects (dependent on specific funding streams) have successfully impacted oral health for children. These included the Gunnison Dental Initiative (GDI) (ongoing), The Colorado Trust Dental Program (3 years), El Pomar Dental Program (1 year), and Colorado Office of Health Disparities (3 years).

The longstanding GDI, a partnership with local dentists and MRS provide dental services to uninsured children. Initially serving 30 uninsured children, now 12, demonstrates a successful impact. Families pay 10-30% of cost that is earmarked to a transportation fund for out of county specialists. The local dentists have donated $100,000 in services over the years.

Staff time to coordinate program, interpret, do dental education and follow up does not have a funding stream and has been covered historically by grants for broader health navigation.

Another dental program provided off-site oral screenings, Fluoride varnish, and education, at childcare centers and Preschools and Kindergartens while funding was available.

The Gunnison Prenatal Program (GPP) began in 2001 solely for prenatal medical care, through an agreement with local prenatal providers. The initial enrollment of 3-4 uninsured LEP women received minimal prenatal visits before delivery, resulting in up to 7 babies per year flown out for lack of prenatal care. The design and funding of the program was created but the concept of prenatal care was a foreign concept to the target population.

Through culturally competent service delivery the program now serves up to 20 women yearly, reducing helicopter transports and per Kids Count, Gunnison Co. has one of the highest rates of prenatal care in the State (86-90%).

There is no funding for staff time, similar to the GDI. The program does not have a dental component.

Have you received past funding from Delta Dental of Colorado Foundation?*

No

Proposal Details

What type of grant is being requested?*

Program

Focus area*

Access to Care Prevention

Is this a single or multi-year request?*

Three years

Total amount requested**Please indicate the total grant amount requested.*

Year one: $32,514.00
Year two: $47,472.60
Year three: $49,008.60

Multi-year request* *If this is a multi-year request (operating or program) please describe why you are seeking multiyear support.*

Focus in Y1: Strengthen existing GDI for oral health education, prevention, and access to care for low income, uninsured and underinsured children through work with local dentists. With available staff time, we will develop a comprehensive data collection system, analyze data, and begin implementation.

Expand GPP to include dental component to uninsured pregnant women through negotiations with local dentists.

Serve as convener to bring local dentists together to foster coordinated efforts.

Focus in Yr. 2 & 3 Build on Yr. 1 activities, collect and analyze data.

Expand preventive oral health services (education, screening, and Fluoride varnish) to childcare centers, schools, and DHHS site at 6-month intervals.

Children in historically overlooked populations (poverty, LEP, minorities) do not attend childcare thus not be reached at center-based services. To reduce health disparities, through collaboration with Eligibility Team, children not enrolled in centers would receive services at an alternate site.

Program name*

Dental Coordination Project

Community needs* *What is your community need, related to oral health? When possible, use data to help us better understand your community.*

Public drinking water is not fluorinated, affecting over 1,500 children under 18 years old.
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Official designation of Frontier County
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24% children in Gunnison County qualify for free or reduced lunch program.
26% of children in Gunnison County receive WIC services, and
13% of children in Gunnison County are uninsured, compared to state rate of 4.4%.
As a frontier county with a federal designated dental health professional shortage area combined with lack of fluorinated drinking water, the ability to maintain good oral health is a significant challenge for all county residents regardless of income, race or age. Our existing and innovative programs are even more critical for those experiencing health inequities.

Proposed activities* *Share with us how additional resources will result in greater impact and/or innovation in your community. If this is a specific program or project request, please describe how it addresses community needs.*

The Gunnison Dental Initiative (GDI)

GDI offers affordable, accessible and comprehensive oral health care through the arrangement with local dentists to create a successful ongoing program. Additional resources to cover staff time will allow the administration of this program to continue. Improvements over the years to support the dentists' efforts such as reducing No Show rates, scheduling appointments at the end of the day, making reminder phone calls, tracking patient progress and robust follow up instructions, serve to increase provider participation in such programs. This is the only program to provide dental care for low income, uninsured children within the County.

Gunnison Prenatal Program (GPP)

This highly successful program has provided comprehensive medical prenatal care to approximately 20 uninsured pregnant women for nearly 20 years. However there is no dental component. Through additional resources, staff will work to include dental services by negotiating with local dental providers, similar to the children's GDI program. With the expansion of the GPP to include dental care, this innovative program will be the first to address this issue.

In Year 1 through this grant, staff will serve as a convener and initiate conversations with dental providers at a Dental Breakfast to address oral heal needs in the community. We will use the Dental breakfast to inform a strategic plan for dental services. Previous gatherings resulted in local dentists' participation in community efforts. In Y2-3 on-site screenings and Fluoride varnish application by a dental hygienist in Preschools, Kindergartens, and 5 childcare providers will be organized with comprehensive data collection to be done by staff through this grant funding. Previous offerings to provide dental services during the school day were declined, so additional offerings will take place at DHHS site for 1-4th grades and for children who do not attend a childcare center.

We will create a database that includes children's demographic data, name of oral health provider, school attended, dates they received oral health services, cavity status (Minimal, Moderate, and Severe). Children served in this program will receive a postcard reminding them of upcoming appointments.

The data collected will provide a needs assessment to inform future programming and to systematically enhance regular dental checkups.

This funding will contribute in part to a staff position that includes other work within DHHS including the Family Health Coordinator position for Healthy Communities (EPSDT). At each contact required by the Healthy Communities program, staff will emphasize oral health education to parents of Medicaid and CHP+ members and pregnant women. This will raise dental health awareness from various coordinated programs.

The proposed programs will improve the oral health for historically underserved children and pregnant women in a frontier community without fluoridated drinking water with scarce oral health services by providing education and direct services.

Strategic alignment* *How does addressing the community needs you described earlier directly align with DDCOF's long-term goals of access to care and/or prevention? When possible, use data to help us better understand the alignment from your perspective.*

Funding from this grant will provide designated funding for staff time to manage the existing Gunnison Dental Initiative (GDI) program and expand the Gunnison Prenatal Program (GPP) to include a dental component that will provide prevention and early intervention of tooth decay to groups that face oral and overall health disparities.

Both the GDI and the expanded GPP will assure affordable, accessible and comprehensive oral health care services of historically overlooked children ages 0-9 and pregnant women who are below the federal poverty level or are from cultures that are either unaware of or do not practice oral health prevention.

As a Dental Health Provider Shortage area, increased use of dental hygienists through off-site screenings, will help reduce this gap. As a county without fluoridated public drinking water, increasing the application of fluoride varnish will help to provide some protection against decay. By including dental care into the GPP, the vital connection of oral health to systemic health is emphasized.

The 2016 Census Bureau's Population Estimates 931 children are 9 or younger in Gunnison County and 19.1% of the entire population is below poverty level.

Population served* *What is the total number of people you anticipate directly impacting with this grant proposal?*
520

Age* *(Select all that apply)*
0-18
19-34
35-50

Race and ethnicity* *(Select all that apply)*
Hispanic or Latino
White

Income level*
(Select all that apply)—
133 percent FPL and below
134 - 250 percent FPL

Please describe any special health care needs of the population(s) served*

Our community faces obstacles such as lack of transportation, non-fluoridated water, inadequate access to nutritious food, language and cultural barriers, scarcity of dental providers, and insufficient or non-existent health insurance. According to the CDC, "oral health disparities are profound in the US. Despite major improvements in oral health for the population as a whole, oral health disparities exist for many racial and ethnic groups, by socioeconomic status, gender, age and geographic location. The greatest racial and ethnic disparity among children aged 2–4 years and aged 6–8 years is seen in Mexican American and black, non-Hispanic children."(www.cdc.gov/oralhealth/oral_health_disparities/index.htm)

Geographic location* *(Select all that apply)*
Rural

Geographic area served* *Please select all the counties your proposal will impact.*
Gunnison County

Equity* *If your organization specifically addresses equity or incorporates an equity lens within your strategic plan, programming, or policies please describe.*

We are the only organization in Gunnison that focuses on how language access issues affect health equity cultivating a strong network of health providers and programs ensuring quality, coordinated health care specific to LEP groups. By increasing the number of underserved who receive regular health care, local health care systems and programs will improve efficiency and reduce health care costs for the diverse needs of our community. Reducing language barriers allows for better referral and understanding of health care; it also improves practitioners' quality care.

We have a trusted reputation as a safe place in the community. An interesting aspect our community is the presence of a Nayari (Cora) ethnic group from Mexico whose first language is not a written one. Nayari represent 46% of the LEP 643 clients and require the most assistance due to illiteracy. Spanish language brochures and posters are of little value to individuals unfamiliar with the written language.

Partnering* *--Please describe efforts to collaborate or partner with other organizations related to this request.*
Collaboration with our current oral health partners to provide services for low income, uninsured children has occurred for nearly 20 years and will continue. It is exciting to expand dental services to uninsured, low-income pregnant women in the GPP for cleaning and oral education. We will also continue working with local and out of town dental offices that accept Medicaid and CHP+, facilitating appointments and prevention education.

In Y2-3 of the grant we will expand and work with more dental providers and schools and childcare centers to offer screenings and Fluoride varnish. As members of the Early Childhood Council, housed within Public Health, we work closely with childcare centers and others focused on early childhood. The childcare health consultant nurse is within Public Health.

Tell us how your organization is thriving.*

Multicultural Resource Services (MRS) is part of the Department of Health and Human Services and has been part of the Public Health division since 2001. MRS goal is to provide vulnerable populations culturally and linguistically appropriate access to public services to promote health, safety and well-being.

The MRS currently is funded by grants from the Colorado Health Foundation, City of Gunnison, State Innovation Models (SIM) Program, as well as CDHHS programs such as Healthy Communities.

Throughout DHHS efforts are underway to assess and educate staff about health equity. A work group has been formed to address this. Programs within the PH Division have received funding and training on social determinants of health. The MRS has bilingual and bicultural staff and has served 750 unduplicated LEP families over the years with an average of 187 families/year.

Does your organization anticipate any of the following changes in the coming year?*

(Select all that apply)

Funding change

If you anticipate any of the organizational changes listed above, describe here.

Some grants that support staff are ending:
CHF ($34,258) ends December, 2018
City of Gunnison ($5,759) ends December 2018
SIM grant ($7,331) ends July 2019
Healthy Communities ($20,000- ongoing but subject to change).

Evaluation Plan **Outcomes*** *--Describe your proposal's intended outcome(s) and how you plan to measure and document results.*

Using the newly created database we will track dates children receive oral health services, cavity status (Minimal, Moderate, and Severe), oral health provider, school attended
Y1, 2, 3
children participating in the DI Program
Pregnant (uninsured) women receiving dental care services
new mothers receiving information on early childhood caries.
Meeting notes form Dental Breakfast

Y2-3:
children screened in different locations (schools, Childcare centers, and DHHS)
children with Minimal, Moderate, and Severe decay
postcards mailed to children reminding them of upcoming appointments
reminder calls
appointments facilitated
of severe untreated decay and outcome.

This grant will impact:
30 low income uninsured children (under 9 year olds) will receive comprehensive oral health care through the GDI
20 low income uninsured pregnant women will receive dental cleaning and oral health education
500 children (0-9 y.o or 50% of the population) receiving oral health education, screening and Fluoride varnish application (if appropriate) by dental hygienist at childcare off site locations

How will this proposal advance oral health equity by reducing oral health disparities*?**
Education and Oral Health services (cleaning and dental services) will be provided to low income babies and children (with or without public insurance), and uninsured pregnant women.

When the GPP began in 2001 only 2-3 women enrolled and typically had 1-3 prenatal visits prior to delivery. Overtime, the participant numbers up to 20 at times with most receiving monthly prenatal visits. Prenatal care was non-existent in this group's culture. Over time, with positive culturally competent staff interactions, prenatal care now is fully embrace. Preventative dental care is seen similarly from a cultural perspective. By creating access that is culturally appropriate, a shift in healthier behaviors is possible as has been demonstrated in our GPP. Oral health equity can only be achieved by improving access using culturally appropriate methods as we have proven though the success of the GPP. Gunnison County has one of the highest rates for prenatal care at 86-90% (Kids Count).

Additional Information--**Beyond a grant investment, how can DDCOF partner with your organization?***

We would benefit from having technical assistance by DDCOF staff to better communicate with our dental providers. In particular, we request assistance in organizing and attending the Dental Breakfasts.

These events serve to discuss local options, for example, establishing a federally qualified health clinic to offer dental services for Medicaid recipients. The timing of this discussion is adequate as our local hospital is expanding to create a Medical Arts Building.

Additional comments *Feel free to provide any additional feedback below.*

This funding supports a portion of one FTE. Additional funding comes from grants and State and local funding.

Local dentists participating in the GDI and GPP provide services at substantial reduced rates contribute to this project and are recognized in the annual Multicultural Resource newsletter.

A portable dental chair were acquired from past grants are ready for services now.