

## Home By One Program

Location: Connecticut  
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 Category: **Emerging Practice**

### BACKGROUND

Tooth decay is the most common chronic disease among children in the United States and the implications of dental decay are significant. Oral health problems are responsible for more missed school days than any other type of health problem. In a 2006-2007 screening of more than 600 Connecticut Head Start students, 31% had evidence of dental decay, and 20% of those students with decay had untreated decay at the time of screening. Nationally, 25 percent of children living in poverty have not seen a dentist before entering kindergarten. In Connecticut, in 2004, more than half of children enrolled in the SCHIP program (HUSKY) received no dental care at all.

The Connecticut Department of Public Health's Home By One Program is funded by a four-year Targeted Oral Health Services Systems (TOHSS) grant. The program seeks to establish a dental home for Connecticut's children by age one by targeting those at high risk, through an integrated partnership connecting parents, WIC nutritionists, pediatricians, dentists, and state and local agencies. The Home By One program is a model of systemic integration of services which could be applied to a variety of other services targeting young, at-risk children.

### PROGRAM OBJECTIVES

The overall goals of the program include:

- Increasing the coordination and exchange of oral health information as it relates to overall health among state agencies and community organizations that address early childhood services
- Increasing the number of parents trained as advocates for oral health for children and families
- Expanding the non-dental workforce to increase access to preventive dental services for at risk children
- Expanding the number of dental practices and clinics providing dental homes for children including those with special health care needs

### TITLE VMCH BLOCK GRANT MEASURES ADDRESSED

**#13:** Percent of infants and children, ages 1 through 17 years, who had a preventive dental visit in the last year.

### TARGET POPULATION SERVED

This program operates statewide and targets children at high risk for dental caries as well as health care providers who treat these children.

### PROGRAM ACTIVITIES

Home By One has successfully implemented oral health train-the-trainer programs for WIC staff, who then educate WIC parents. WIC parents receive oral health advocacy training from Connecticut's Oral Health Initiative, enabling them to advocate within their communities. Children's medical providers, pediatric and general dentists are trained in the appropriate technique for age one dental visits including caries risk assessment, fluoride varnish application and guidelines for dental referral. Home By One established partnerships between pediatric medical practices, dental homes, WIC offices and case managers providing a safety net referral system to ensure that consistent messages are delivered to parents across a variety of existing contact opportunities. In addition, broader media campaigns have sought to increase knowledge of the importance of the age-one dental visit in lower-risk populations.

### PROGRAM OUTCOMES/EVALUATION DATA

The program collected data to measure outcomes including pre and post surveys for trainings of WIC professionals, parents and caregivers, dental professionals and medical professionals. Data are also collected on the number of children receiving age one dental visits by survey of 41 dental homes providing the service.

This data collection analysis is in progress and the results are expected to be released in December 2011. Short-term results include: the creation of 41 dental homes which provide care with 24 WIC sites in the state of Connecticut starting at age one. Additionally, 262 child health providers have credentialed to bill for fluoride varnish and oral exam dental codes through Medicaid.

## PROGRAM COST

The Home by One Program receives \$160,000 per year of funding. The program has recently received the fourth year of funding and has met grant expectations for the program initiative. The MCH block grant for the state gave \$10,000 to the program for supplies and incentives to be used in educating parents. CT MCH block grant committee has included oral health in next state performance measures.

## ASSETS & CHALLENGES

### Assets

- One factor in Connecticut that was an asset to the implementation of this program was that the medicaid reimbursement rates for children under age 21 were raised and the dental medicaid structure was changed to better coordinate dental services, including adding care coordinators through the Connecticut Dental Health Partnership who administer the dental Medicaid program in CT.

### Challenges

- There is a high number of children that do not return after the initial preventative dental visit causing frustration among dental providers coordinating restorative appointments.
- Pediatric practices are hesitant to implement the oral risk assessments and fluoride varnish applications into their well child visits because it is only reimbursed for patients on medicaid plans and not private insurance plans.

### Overcoming Challenges

- Although the program is still in the evaluation phase and not all challenges have been overcome, utilizing partnerships established through the Home By One advisory group to discuss specific challenges has helped to overcome some of the barriers and an infrastructure for supporting age one dental visits in CT is sustainable.

## LESSONS LEARNED

It is important to have parental support for the program from the beginning to increase buy-in.

## FUTURE STEPS

Home By One is an ongoing program. Two courses of the trainings have been posted online at CT Train:

<https://ct.train.org/DesktopShell.aspx>.

## COLLABORATIONS

Home By One collaborates with: Women, Infant and Child Nutritional Supplementation Program, Early Childhood

Partners, Family Health Section of Department of Public Health, Connecticut Oral Health Initiative, Child Health and Development Institute of Connecticut, University of Connecticut School of Dental Medicine, Department of Social Services and Department of Developmental Services.

## PEER REVIEW & REPLICATION

This program has been presented at AMCHP's annual conference (2010), and the National Oral Health Conference (2010 & 2011).

This program had not been replicated at the time of submission and is currently in process of evaluation.

## RESOURCES PROVIDED

To find more about this program and access resources, please visit the Home By One website:

[www.ct.gov/dph/HomebyOne](http://www.ct.gov/dph/HomebyOne)

**Key words:** Oral Health, Dental Home, CHIP, TOHSS, WIC, Service/Program Integration

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