The Role of Nurses in Preventive Oral Health Care for Children

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Talking Points

• Research project conducted in May-June 2016

• Assessed Advanced Practice Registered Nurses (APRNs), Registered Nurses (RNs), and Licensed Practical Nurses (LPNs) frequency in performing oral health assessments (OHAs) on children 0-3 years during well-child visits

• Also, assessed knowledge, confidence in performing OHAs and advising parents
Talking Points

• Today’s discussion will consist of reported:
  – Observed problems during exams
  – Perceived barriers associated with dental referral
  – Overall qualitative input from participants
Observed Problems

• Observed problems during OHAs
  – 30% observed a few decayed teeth in a single child at least once a week
  – 48% observed pain related to untreated dental caries at least once in a 6 month period
  – 47% observed a tooth abscess among children at least once in a 6 month period
<table>
<thead>
<tr>
<th>Question</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>I Never refer children to the dentist</td>
<td>6</td>
<td>18.2</td>
</tr>
<tr>
<td>I RARELY Refer children to the dentist</td>
<td>4</td>
<td>12.1</td>
</tr>
<tr>
<td>I refer if we consider the child AT HIGH RISK for cavities (e.g. being on Medicaid)</td>
<td>2</td>
<td>6.1</td>
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<tr>
<td>I refer ONLY if I see a problem (e.g. tooth decay, chipped tooth, draining fistula)</td>
<td>5</td>
<td>15.2</td>
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<tr>
<td>I refer ALL children (12 months and older) I see to the dentist</td>
<td>16</td>
<td>48.5</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>33</strong></td>
<td><strong>100.0</strong></td>
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</tbody>
</table>
Top 3 Barriers Associated with Referrals

– Finding a dentist willing to accept children with public insurance and/or uninsured
– Finding a dentist willing to accept children with developmental disabilities
– Oral health is a low priority for families of children seen
Qualitative (Feedback)

• Busy practice
• Dental should be the responsibility of dental providers
• Oral care should be the responsibility of parents
• Difficulty assessing Medicaid providers
• I do not believe children <3 should see a dentist regularly
• My office has begun applying fluoride varnish during well-child visits
Future Directions

– Continued support of medical/dental collaboration
– Increase education related to children’s oral health for non-dental providers
– Establish seamless referral systems within local communities