



Washington Dental Service Foundation  
HAP Partner Presentation  
May 25, 2010

# Washington Dental Service Foundation

- Funded by Washington Dental Service
- Mission: Eliminating oral disease to improve overall health for all
- Focus on young children and seniors



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*Community Advocates for Oral Health*

# Oral Health and Overall Health

- Links between oral disease and
  - Diabetes
  - Heart Disease/Stroke
  - Pneumonia
- Ability to chew important to proper nutrition
- Quality of life is tied to oral health
  - Willingness to talk, smile, socialize, eat communally
- Healthy aging cannot be achieved without oral health

# Seniors' Oral Health Status

- Nearly 1/5<sup>th</sup> of older adults have untreated cavities—150,000 people in Washington
- 25% of adults 65-74 nationwide have severe gum disease
- 25% of 65+ have dry mouth, 7 of 10 of the most commonly prescribed medications cause dry mouth

# Barriers

- Lack of dental insurance, inability to pay for care
  - 62% ages 51-64, 37% ages 65-74, 26% 75+
- Lack of preventive care = extensive treatment needs
- Perception that seniors lose their teeth
- Complicating conditions and disabilities
- Competing priorities/needs

# WDSF Strategies

Our Strategic Focus – **Preventing oral disease** among children and seniors by **driving systems change** in the environment to create the following conditions for success:

Policy and decision makers buy in to the importance of oral health

The public values and understands oral health

Best practices to reduce oral disease are implemented by providers

Enough providers offer services efficiently in easily accessible locations

To create these conditions for success, our core strategies are:

Building public awareness and support for policy change  
Ensuring early intervention  
Increasing coverage and improving access to care  
Fluoridating community water supplies

Which will lead to our vision



**Healthy Communities  
Free From Oral Disease**

# Area Agency on Aging Pilot

- Southeast Aging and Long Term Care
- Integrating oral health into AAA services wherever possible
- Emphasis on cost neutral
  - Additional questions on I&A intake and follow up
  - Training for case managers, nurses, I&A staff, meal providers
  - Referral relationships with CHCs
- Modules and tools available in late 2010 to other interested AAAs

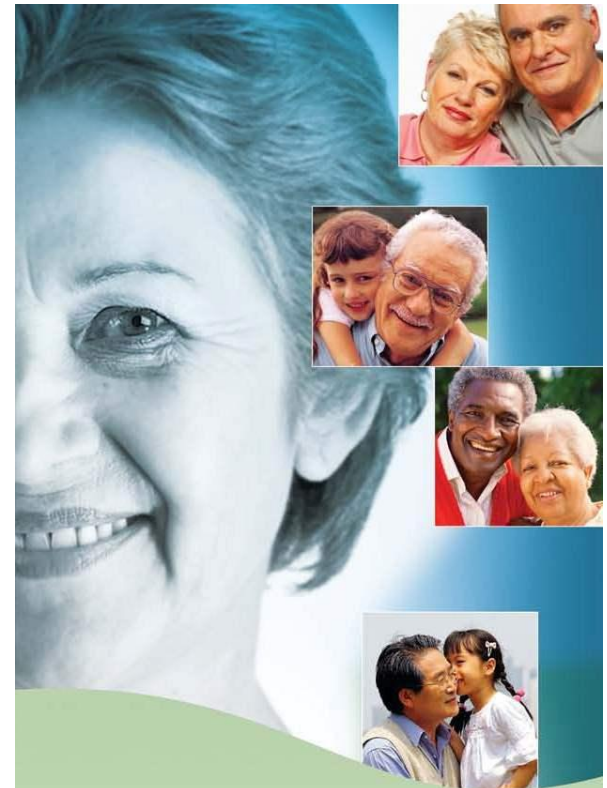
# Oral Health Connections-Pilot

- Clark County
- Improve oral health of adults 55+ and prevent costly complications to chronic conditions like diabetes
- Outreach/case management to connect to care
- Training and care coordination between dental and medical providers



# Preventing Dry Mouth Consequences

- Awareness campaign
- Patient education materials, distribution through senior service providers
- Outreach to providers- medical, pharmacy, dental



## DRY MOUTH

Tooth decay in adult years is often caused by **dry mouth**.

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# Oral Health for Caregivers Curriculum

- Developed in 2005
- Teaches caregivers to add oral health activities into their daily routines with clients
- Evaluated in 2007
- Currently delivered by 5 agencies throughout Washington



# Expanding Access to Dental Care

## Funding/Partnerships with:

- Geriatric Dental Group
- Washington State Dental Hygienists Association-hygienists practicing in senior centers
- UW Mobile Dental Clinic
- Community Health Centers, new clinics and expansions
- Private practice dentists-financial models supportive to seniors

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How does/can/should oral health fit with Asset Based Community Design and other emerging healthy aging in healthy communities models?

How would you recommend that we engage with this work?

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