



Healthy Smile Happy Child

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Quarterly Report October – December 2009

The Manitoba Collaborative Project for the
Prevention of Early Childhood Tooth Decay

Submitted by: Sarah Prowse, Healthy Smile Happy Child coordinator

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Community Feedback

Follow-up by provincial Healthy Smile Happy Child coordinator with regional contacts has noted the following ways the spreading of Healthy Smile Happy Child (HSHC) message is being sustained:

Public Health

- Burntwood Regional Health Authority public health staff continues to use the HSHC resources on a regular basis with families and pre and post natal groups.
- Public Health Agency of Canada programs use HSHC with pre natal groups and Aboriginal Head Start groups. These programs would like access to resource kits to ensure sustainability of the messages. HSHC project coordinator will work with these groups to determine specifics on which resources are required and how these can be provided.

Schools and Community Organizations

- EAL (English as second language) organizations have recognized the need for oral health education for their students and requested training on HSHC resources.
- Five Hutterite colony schools in the Interlake have started a tooth brushing program and incorporating oral health messages into their curriculum.

Dental/Medical Offices

- A dental office in Winnipeg has requested numerous Healthy Smile Happy Child resources to be used as education with patients.
- Presentation on early childhood caries provided as part of Dental Hygienist lecture series. Hygienists have requested materials for their offices and one volunteered to do community presentations.

Community Involvement/Partnerships

Project Activity:

- 1) Phase II (Follow-up Study) Evaluation

Writing of manuscript of findings for journal publication is in progress.

- 2) Community and Professional Contacts/Updates on Regions

The project coordinator has sent a letter to all regional health authorities requesting their input into the type and level of support that they would like to receive from the project coordinator to ensure the sustainability of oral health promotion past the end of Healthy Smile Happy Child project. A copy of the work plan that was developed was included for review and feedback. This was sent to the regional healthy living team leads as well as the designated contact person for Healthy Smile Happy Child (where identified). All contacts have been invited to the next HSHC steering group meeting. So far contacts from five regional health authorities will be attending.

Burntwood/Churchill Regional Health Authorities:

Funding for Community Facilitator position ended on July 10, 2009.

- HSHC resources and self learning orientation modules are readily available throughout Burntwood region.
- Nutritionist has continued to provide Healthy Smile presentations to post natal groups.
- Public health nurses, Families First home visitors, Health Baby workers continue to use the HSHC resources regularly.
- Still working to identify key contact person for these regions.
- Minimal work has taken place in Churchill in the last year partly due to key contact leaving the position with no replacement.
- Further work is required to ensure the sustainability in these regions.

NOR-MAN/Parkland Regional Health Authorities

Funding for Community Facilitator position ended on July 1, 2009.

- Infant/Child community developer has been identified for contact person for NOR-MAN region. HSHC project coordinator has been in touch with this person and ideas have been generated for further work in promoting the prevention of early childhood tooth decay. There has been some delay as the community developer is located in Flin Flon and the Healthy Smile resources were housed in The Pas. The coordinator has contacted the community developer to see if they would like another set of resources so that both locations have easy access.
- Parkland community health nutritionist regularly uses resources in Healthy Baby groups. She would like to see sharing of ideas/initiatives between regions and also new research/resources from HSHC central office. She is unsure as to how the resources are being used in public health but will follow up in January.

North Eastman/South Eastman Regional Health Authorities (NEHA and SEHA):

Funding for Community Facilitator position ended on November 6, 2009.

- NEHA wellness facilitator has been identified as HSHC contact. This position was created with community activator funding.
- Wellness Facilitator will attend wellness fairs and provide workshops and access to resources. She has been discussing ideas for training for nurse practitioners with HSHC coordinator; will work together to provide this.
- Wellness Facilitator to attend inter sectoral steering group meetings via telehealth to stay connected to group.
- Community activator (Health Promotion Coordinator) position has yet to be filled.
- HSHC coordinator has contacted current Healthy Living Facilitator as contact in the interim.

Central/Assiniboine/Brandon Regional Health Authorities:

Funding for Community Facilitator position ended on May 31, 2009.

- A Healthy Living Facilitator with Central Regional Health Authority (CRHA) has been designated as the oral health liaison for the region. She will take requests from the community for presentations and resources. She has requested any new oral health information to be sent to her and requested a brainstorming session with project coordinator on ideas for oral health month.

- HSHC project coordinator has been unable to make contact with Assiniboine region. There has been contact previously so the coordinator will follow up with this.
- Brandon Regional Health Authority has hired three Healthy Living Facilitators whose mandate is chronic disease prevention.
- Training was held by HSHC project coordinator for healthy living facilitators and new public health staff. Healthy living facilitators are working to identify areas where HSHC messages can be incorporated into their work.
- A public health nurse will be liaison between region and central office.
- Resource binders are available at all public health units.

Winnipeg/Interlake Regions (WRHA and IRHA):

(0.5 FTE position)

- Groups trained – Mosaic EAL coordinators, Tuxedo Family Resource Centre staff, Neighbourhood Immigrant Settlement workers, post natal workers Ma Mawi, and Hutterite Colony school teachers.
- Continuing to work with WRHA community facilitators to discuss how HSHC messages are being incorporated into health and well being promotion in their respective area.
- Attended steering group meeting. Presented update on regions and work plan.
- Training provided to post natal workers at Ma Mawi who are based in a Manitoba Housing complex. They identified that this is a very important topic for these girls (14-17 year old mothers). One of the mothers had just received a prescription from a doctor for corn syrup to be put in the child's bottle to reduce constipation.
- Presented to mother and baby group in Transcona area as a request from the preschool community programming coordinator. Resources were left with coordinator to continue to promote the messages. The group was surprised at the recommendation for a dentist visit by the first birthday.
- Attended Louis Riel School Division preschool wellness fair. This was well attended by parents and children. Many parents were aware of the issue but a few had questions and concerns or were unaware of the recommendation for early dental visits.
- Poster presentation at Early Childhood Imperative Conference.
- Presented to new immigrants group. The participants were either mothers or grandmothers. Many had concerns about the amount of sugar that their children consumed. They were interested in the information about community dental clinics.
- Provided training to two settlement immigrant workers. Discussed the possibility of adjusting resources to suit those with low English literacy skills.
- Training session held with Mosaic EAL (English as a second language) coordinators. Followed up with sessions for the EAL classes.
- Attended a family fun night at Tuxedo Family Resource Centre. Worked with centre staff to play dental bingo with parents and children. 45 people from Manitoba Housing complex attended. Participants each provided feedback on something they learned about oral health. The use of bingo as a learning tool allowed those with low literacy levels to participate. Feedback from the staff identified that many of the mothers involved wouldn't normally participate in activities.
- Met with Public Health Agency staff including Canada Prenatal Nutrition Program and Aboriginal Head Start. Updated them with contact list for the regions to be passed onto their programs. Public Health agency programs would like access to HSHC resource kits so HSHC coordinator to follow up with possible budget for this.
- Worked with two nursing students to develop presentation for Hutterite colony schools. Nursing students provided presentations to three colony schools and HSHC coordinator presented to one. In all schools, parents were invited to attend and 19 parents did so. All of these schools have started a tooth brushing program and three requested information on how to start a fluoride rinse program. In some schools, every child identified themselves as having at least one cavity. The parents HSHC coordinator

spoke to said that oral health has been a big problem for them but since the schools have started incorporating oral health education and a tooth brushing program the children are more cooperative in oral health hygiene practices.

3) Presentations:

October 2009

RHA	Train the Trainer Workshop		Parent/Caregiver Presentations		Contacts made	
	# Workshops	# Participants	# Presentations	# Participants	Direct	Indirect
Winnipeg	3	5	2	24	14	100
Interlake	0	0	1	44	15	0
Total	3	5	3	68	29	100

November 2009

RHA	Train the Trainer Workshop		Parent/Caregiver Presentations		Contacts made	
	# Workshops	# Participants	# Presentations	# Participants	Direct	Indirect
Winnipeg	2	9	5	107	16	0
Interlake	4	7	4	102	19	400
Total	1	5	1	48	35	400

December 2009

RHA	Train the Trainer Workshop		Parent/Caregiver Presentations		Contacts made	
	# Workshops	# Participants	# Presentations	# Participants	Direct	Indirect
Winnipeg	0	0	3	30	15	0
Interlake	0	0	0	0	1	0
Total	0	0	3	30	16	0

4) Community events:

October: Louis Riel School Division Preschool Wellness Fair (Winnipeg)

November: Early Childhood Imperative Conference – poster presentation (Winnipeg)

Challenges:

- In some regions we have still been unable to identify a contact person for Healthy Smile Happy Child. However, contact has been made with all the healthy living team leads with the idea that they will be able to help us identify an appropriate contact.
- In some northern communities, the main HSHC resources have been located in one community, which is hard to access for other communities. We have offered more sets of resources to improve access.
- Turn over of staff in regional health authorities can mean that the messages are lost if the information sits with one contact person. By engaging those at management level we hope to reduce this when people leave positions.
- As the project finishing date has changed throughout the course of the project, it is hard to convince some regions that there will be a time when there will not be a project coordinator to provide support and resources so they will need to take on this role.

Collaborative Activity

- 1) As described above, the coordinator has been contacting each region to ask for their input into the work plan for closing the project and their thoughts on what they feel their needs are for support from the project coordinator. Contacts from each region have been invited to attend the next steering group meeting as a way to continue to engage the regions and involve them as the community facilitators are no longer in this role.
- 2) Members of the project have been working with the Manitoba Dental Association on two of their key initiatives: introducing a first dental visit program for young children and an oral health curriculum for school children. Project resources have been shared with the MDA as they develop these initiatives.
- 3) Dr. Schroth has been working with a BSc (Dent) student to review administrative data relating to pediatric dental surgery over 10 years. An overview will be shared at the steering group meeting in January and will also be shared with Manitoba Health and Healthy Living and the regional health authorities.

Next Steps

- With feedback from each region, the work plan will be modified to reflect the specific needs for each region. The coordinator will work with the contacts in each region to achieve the goals outlined.
- Continue to engage other health providers who can play a role in improving oral health. A group that has been identified is pediatricians. Some members of the steering group will meet in early 2010 to discuss this.
- As the coordinator position has been reduced to part time and the partnership has managed its resources well, the group is able to extend the provincial coordinator position on a part time basis for the fiscal period 2010/11. This extension will be directed at sustaining the accomplishments that have been made. Ongoing evidence will be collected and shared with Manitoba Health.

Feedback/Evaluation/Research

- Qualitative Evaluation study
 - Currently in the early stages of preparing a manuscript of findings for journal publication.
 - Final report is available online.
- Qualitative Cultural study

- HSHC received grant funding from the Manitoba Institute of Child Health to complete a series of focus groups to explore different cultural perceptions about early childhood oral health.
- Final report recently completed and is available online.
- Will work on preparing a manuscript for journal publication in 2010.
- Pre/Post Test Workshop Questionnaire
 - A manuscript for publication was submitted to Pediatric Dentistry in September 2008. The article was approved for publication in early 2009. Publication date is expected to be early 2010. The article is titled “The impact of community workshops on improving early childhood oral health knowledge.” Authors are MacIntosh AC, Schroth RJ, Edwards J, Harms L, Mellon B, and Moffatt ME.

Staff Development

- Manitoba Health will again support 2 STEP students working part-time during the year.
- Support and management of STEP student activities includes: resource mailings, database entry, development of displays, and other projects and administrative tasks.

Administrative/Research Activity

- All database entry is up to date.

Planning for next Quarter

- Working with regions to adapt work plan and make specific goals depending on different needs.
- Display at Manitoba Dental Association conference in January.
- Continuing to work on an opportunity to provide an education session on early childhood oral health for physicians in Burntwood Regional Health Authority.
- Identifying ways to engage pediatricians in improving oral health.
- Follow up with capacity evaluation forms for different groups HSHC has worked with to determine what capacity building has occurred as a result of HSHC activities.