Long Beach Oral Health
Key Informant Questionnaire

Thank you for taking time to complete this survey. The questions below are used to better understand your organization, services offered, and experience, regarding oral health issues in Long Beach. Your input is very valuable, and we appreciate your responses!

1. What is your current position/title?

2. What is the name of your agency or organization?

3. How long have you been with this organization in the current capacity?

   - ❑ 1-3 years
   - ❑ 4-7 years
   - ❑ 7-9 years
   - ❑ 10+ years

4. Which best describe your agency or organization?

   - ❑ Health care provider
   - ❑ Community based organization (CBO)
   - ❑ Government agency/LBDHHS
   - ❑ Oral health care provider
   - ❑ Private organization
   - ❑ Health managed organization (HMO)
   - ❑ School or School District (LBUSD)
   - ❑ Faith Based Organization

5. My organization/agency services the following age population(s). (Check all that apply)

   - ❑ children 0-5 years
   - ❑ children 6-18 years
   - ❑ Adults 18-64 years
   - ❑ Seniors 65 years and older

6. My organization/agency primarily services the following population(s). (Check all that apply)

   - ❑ Pregnant women
   - ❑ Homeless
   - ❑ Uninsured
   - ❑ Disabled
   - ❑ Foster youth
   - ❑ Undocumented, immigrant or refugee population
   - ❑ Those with chronic health conditions
   - ❑ Economically disadvantaged
   - ❑ Those with mental illnesses

7. Describe your personal or professional interest in oral health in Long Beach.

8. How often do you see a need for oral health intervention or treatment? (check one)
   ❑ very rarely ❑ rarely ❑ occasionally ❑ frequently ❑ very frequently

9. How often do you see a need for referrals to free or low-cost dental services among those you serve? (check one)
   ❑ very rarely ❑ rarely ❑ occasionally ❑ frequently ❑ very frequently

10. In your organization, how often do you see a need for urgent or emergency dental services among those you serve? (Check one)
    ❑ very rarely ❑ rarely ❑ occasionally ❑ frequently ❑ very frequently

11. In your organization, how often do you see a need to provide information on how to utilize dental benefits? (check one)
    ❑ very rarely ❑ rarely ❑ occasionally ❑ frequently ❑ very frequently

12. Overall, how does dental care rank in importance compared to regular/routine primary health care for the individuals and/or families you work with?

13. How well do existing dental providers in Long Beach meet the oral health needs of the community?

14. What do you perceive to be the major barriers to accessing oral health care in Long Beach?

15. Do you have concerns about lack of access to oral health care for certain populations within Long Beach? Who is at risk for not receiving dental care? What geographic areas in Long Beach experience limited access to dental health? (List by zip Code or Region)

16. How do these needs/barriers/gaps vary for the young (children) versus adults and seniors?

17. What problems do low-income families/individuals encounter in getting adequate dental care? What are the biggest needs?

18. What are the leading factors, including policies or system issues, which prevent low-income children from getting adequate dental care? What is the number one factor?

19. What actions should occur locally to improve oral health among children in Long Beach?

20. What are the most important messages that should be communicated about children's dental health…. age of first dental visit, regular visits to dentist, good dental hygiene, role of diet in oral health status?

21. What are the best ways to reach families with young children 0-5 who need better dental care?

22. Are there any issues or concerns that were not addressed in this questionnaire?