Oral Health Program Long Beach – Launch Meeting Minutes
August 27, 2018 (12 -1:30 pm)
Long Beach Gas & Oil
2400 E. Spring Street, Long Beach, CA 90806

Attendees:

Aceves, Susana, -LBDHHS SIDS
Adeva, Vicky -WIC
Bowerman, Adriana - LBDHHS BIH
Campbell, Stephanie - Denti – Cal
Cardenas, Veronica – LBDHHS Nursing
Campos, Damaris - LBDHHS MCO
Cantrell – Warren, Tiffany - LBDHHS
Chandler, Maria -TCC
Cortez, Santos – Harbor Dental Society
Evangelista, Evangeline – LBDHHS Nursing
Gama, Leslie - LBDHHS
Garcia Edith - Denti-Cal
Gervacio, Lindsay - FIGH
Gonzalez, Maribel Z. -Children's Home Society of CA
Ha, Troy – Troy HA DDS
He, Phoebe – LBDHHS MCO
Hernandez, Jackie – Fairfield Family YMCA
Hernandez, Magally – Memorial Care
Leung, Julie – LBDHHS
Lewis, Nancy – Assistance League
Ly, Anthony – LBDHHS MCO
Margolis, Eileen – LBDHHS PHN
Nim, Chork - FIGH
Orozco, Elsa – LBDHHS
Perezchica, Mercedes - LBDHHS
Petrillo, Jean – CDHC
Pham, Pauline – LBDHHS Nursing
Quinteros, Jorge – Western Dental
Riano, Nancy – LBDHHS Nursing
Rice, Zelda – Assistance League LB
Sanchez, Joann – LBDHHS
Sanchez, Maria – LBDHHS OHP
Shah, Pija – Denti-Cal
Smolen, Michael – Harbor Dental Society
Tello, Eipryl – LBHDDS Nursing
Tong, Denise – LBDHHS Nursing
Trevino, Tania - LBDHHS
VanderLaan, Marie – LBDHHS CHDP
Wells, Belinda – Children's Dental Health Clinic
Yamamoto, Marianna – Asian American Advantage Justice – LA

	Discussion	Action items
Call to Order	Welcome and introductions by Maria Sanchez OHLB Program Coordinator	

Presentation of Program	**Presented by: Maria Sanchez -** Program Coordinator **and Nancy Riano –** Program Director **Goal:** To Create and expand capacity at the local level to educate and prevent dental disease, including dental causes by the use of cigarettes and other tobacco products. This includes providing linkage to dental treatment programs and tobacco cessation. Long Beach – To improve the overall oral health in the City of Long Beach by building partnership and an environment that supports good oral health and prioritizing underserved areas and populations. **Proposition 56** - Proposition 56, passed by the voters in November 2016, increases the excise tax rate on cigarettes and electronic cigarettes, effective April 1, 2017, and other tobacco products effective July 1, 2017. The excise tax increased by $2 from 87 cents to $2.87 per pack of 20 cigarettes on distributors selling cigarettes in California with an equivalent excise tax rate increase on other tobacco products. Preventing teens from smoking and encourage smokers to quit smoking. **Priority Population** Most Vulnerable populations: • Children • Pregnant women • Lo income individuals • Individuals with chronic diseases (diabetes, HIV) • Homeless • Tobacco users • Seniors **Prop 56 & State Oral Health Program** • Prop 56 tax will provide $30 million annually to the state (CDPH) Oral Health Program – This will be a dedicated annual revenue source.	**Maria Sanchez** Program Coordinator **Nancy Riano** Program Director

- Program funds will be used for the purpose and goal of educating, preventing and treating dental disease. Including dental disease cause by cigarette and other tobacco products.
- Provides 40% increase in reimbursement rates for Denti-Cal providers retroactive to July 2017.
- Full restoration of adult dental services.

Long Beach Oral Health Program

Grant term in a 5-year term – January 1, 2018 through June 30, 2022

- The 5-year term has 2 phases:
  - ✓ Phase 1 (planning) January 1, 2018 through December 31, 2018
  - ✓ Phase 2 (implementation) January 1, 2019 through June 30, 2022

Scope of Work

- Engage the community
- Conduct needs assessment
- Identify assets and resources
- Develop a local oral health improvement plan/Strategic Plan
  - Develop a Plan
  - Implement Interventions
  - Evaluate Outcome
    - Inform, educate and mobilize
    - Convene, coordinate, collaborate
    - Implement policies and programs
    - Conduct surveillance and evaluation

Status of Oral Health in California

- Oral diseases are highly prevalent in all stages of life.
- Disparities are persistent
- Effective preventive measures are available, but both clinical dental services and community level interventions are underutilized.

California Facts

	• It is estimated that children miss 874,000 days of school each year due to dental problems • 54% of kindergarteners and 70 % of third graders have experienced dental caries (tooth decay), and nearly one third of children have untreated tooth decay (2004 data – most recent available) • Tooth decay is the most common chronic condition experienced by children. • Latino children and poor children experience more tooth decay and untreated tooth decay than other children. • Less than half of pregnant women are receiving dental care during their pregnancies. • Despite oral cancers, only 1 in 10 smokers' reports being advised to quit smoking by their dental provider. • Cigarette smoking kills more than 40, 000 Californians annually • African -American adults have higher prevalence of tooth extraction due to decay or gum disease as well as higher mortality rates from oral cancer than adults of other racial/ethnic groups • Employed adults miss 64 million hours at work due to oral health problems • Adults with missing teeth are more likely to report trouble finding employment • Oral diseases can exacerbate conditions such as diabetes and heart disease. **Oral Health Opportunities** Starting with pregnancy up to the 3rd grade. • Brushing – Reducing Sugar • Inter professional Collaboration – Community Clinical Linkage – Dental Care Delivery System • Health Literacy – Insurance Coverage – Water Fluoridation **WHY ARE WE HERE?** **Prevention** • Promoting oral health through education (for schools, students, parents, caregivers and service providers). • Regular visits to the dentist – linkage to insurance and FQHC's	

	• Outreach activities at community events • Health food -tooth loss is linked to lower consumption of dietary fiber, fruits, and vegetables. • Reduction in sugary beverages – "Rethink Your Drink" campaign • Fluoridated Water **Questions and Comment:** • Long Beach has a good dental structure. • Many parents with active tooth decay, anesthesia. • We may have fluoridated water but many Latino residents are no drinking the water from Long Beach, they drink bottled water. • We may be sing more kids with black teeth, certain medication will turn teeth dark	
AANHIPI Oral Health Needs Assessment	**Chork Nim** Outreach Specialist FIGH **Lindsay Gervacio** Manager FIGH **Marianna Yamamoto** Asian Americans Advancing Justice Program Coordinator Families in Good Health Long Beach are partnering with Asian American Advancing Justice LA to support, educate, outreach, and advocate to increase access to quality health care for Asian American, Native Hawaiian, Pacific Islander (AANHPI), Latino, and vulnerable communities throughout California. Oral Health for all of 20/20 is a collaborative project that began since the fall of 2015 Program is better known for the AANHPI. Families in good Health are targeting the Cambodian community in Long Beach 2015-2016 was dedicated to find out community needs 2016-2017 – Focus groups were created 2017-2018 Community Education	

	2018-2019 Education and Advocacy Reaching various Asian families in various languages. 65% Responded to Medi-Cal as dental Insurance 72% Preferred speaking their own language 64% Limited English speaking or non / not satisfied with dental insurance There are language barrios in the elderly population Providing a handout with Health care rights, dental services through Medi-Cal. How to use your Denti-Cal benefits. Information on more benefits that began January 1, 2018 for adults.	
Denti-Cal	**Stephanie Campbell -** Denti-Cal Professional Relations Rep. Ms. Campbell presented Denti-Cal's new outreach efforts to promote benefits and enroll providers to open panels for new clients. Heavy duty efforts in recruiting providers, educating members on their benefits, especially adult members since January of this year benefits for adults were restored. Some providers were not sure and members were not informed of the change. The outreach group has been attending community events and health fairs to educate and answer questions on benefits, also providing information on providers nearest the members, we have list of providers on hand. Providing education and information on transportation access provided by Medi-Cal to members, as well as language access, translation to the preferred language. Educating providers and members on benefits available to pregnant women and the impact of having dental care during and after pregnancy. Those women that have Medi-Cal benefits only during pregnancy, have dental benefits up to 60 days postpartum regardless of her aid code, she will have full scope benefits. Denti-Cal is going through a re-branding, new campaign is going to be called "Smile California" will rolling out as of September 2018. The campaign will roll out focused on children, encouraging	

	parents to take baby to dentist, either at first birthday or at sign of first tooth. Making members aware of the benefits for their child.	
Questions	Regarding funding. Allocation – Every health dept. received and allocation based on the rate of Medi-Cal members within their jurisdiction. City of Long Beach is considered a health jurisdiction, we along with the other cities that have a health dept. and the county health departments we allocated an amount based on the Medi-Cal rate in the community. Long Beach did apply, signed a contract, submitted a Scope of Work, but it was not a competitive grant. The money is strictly for the city of Long Beach. It pays for the staff, media, behavioral modification tools (toothbrushes) and what we need to fulfill the Scope of Work. We will also need to bring together a work group that will work with the former task force.	.
Closing	Nancy R. thanked everyone for attending the Oral Health Launch. Group adjourned at 1:30pm	