

Preventive Oral Health Services Protocol

Preamble

The Ontario Public Health Standards (OPHS) are published by the Minister of Health and Long-Term Care under the authority of the Health Protection and Promotion Act (HPPA)¹ to specify the mandatory health programs and services provided by boards of health. Protocols are program and topic specific documents which provide direction on how boards of health must operationalize specific requirement(s) identified within the OPHS. They are an important mechanism by which greater standardization is achieved in the province-wide implementation of public health programs.

Protocols identify the minimum expectations for public health programs and services. Boards of health have the authority to develop programs and services in excess of minimum requirements where required to address local needs. Boards of health are accountable for implementing the standards including those protocols that are incorporated into the standards.

Purpose

This protocol has been developed to provide direction to boards of health on services to be offered to children identified through oral health assessment and surveillance.

This protocol replaces the *Determining Eligibility for Preventive Oral Health Services Provided Through Ontario's Boards of Health Protocol (August 29, 1997)* (updated January 28, 2002).

Statutory Basis

The statutory basis for this protocol is the HPPA, Section 7.¹ Other relevant legislation includes the Personal Health Information Protection Act²; the Dental Hygiene Act, 1991, S.O. 1991³; and the Dentistry Act, 1991, S.O. 1991⁴

Reference to the Standards

The table below identifies the OPHS standard and requirement to which this protocol relates.

Standard	Requirement
Child Health	Requirement #13: The board of health shall provide or ensure the provision of the essential clinical preventive oral health services at least annually in accordance with the <i>Preventive Oral Health Services Protocol, 2008</i> (or as current).

Operational Roles and Responsibilities

1) Detection/investigation/identification

The board of health shall:

- Identify children who are in need of preventive oral health services through the implementation of the *Oral Health Assessment and Surveillance Protocol, 2008* (or as current).
- Use the Ministry of Health Promotion's (the "ministry") Oral Health Information Support System (OHISS) or any other method specified by the ministry to track children identified as eligible for preventive oral health services, those offered services through a board of health clinic, those who consent to services, those who receive services through a board of health clinic, and those for whom the board of health pays to receive services in a private office.

- c) Provide or refer to a local oral health provider and pay for the provision of eligible services for children who meet the dental and financial eligibility criteria.
- d) Ensure that appropriate consents are in place for the collection, use, and disclosure of personal information, including personal health information.

2) Professionally applied topical fluoride (PATF)

The board of health shall:

- a) Offer PATF to children where two or more of the following criteria apply:
 - i) Water fluoride concentration is less than 0.3 ppm
 - ii) Past history of smooth surface decay
 - iii) Presence of smooth surface decay

3) Pit and Fissure Sealants (PFS)

The board of health shall:

- a) Offer PFS to children based on an individual caries risk assessment.
- b) Offer sealants for first and second permanent molars.

4) Scaling

The board of health shall:

- a) Offer scaling to children based on a periodontal assessment of the following:
 - i) Presence of calculus; and
 - ii) Evidence of gingival inflammation.

5) Financial Eligibility for PATF, PFS and Scaling

The board of health shall:

- a) Assess the family for financial eligibility based on evidence provided by the parent/guardian of **one** of the following:
 - i) The child is a dependent of a recipient of the Ontario Child Benefit;
 - ii) The family's income is below the financial eligibility cut-off (the cut-off is set at 20 per cent above Statistics Canada's Low Income Cut Offs [LICOs]); or
 - iii) The child is currently on the Children in Need of Treatment (CINOT) Program.

6) Notification

The board of health shall:

- a) Notify in writing the parent/guardian of children who are screened and identified as meeting the dental eligibility criteria for one or more of the mandated clinical preventive services; advise the parents/guardians of the service(s) for which the child is potentially eligible and how to apply for the service(s).
- b) Notify parent/guardian of the financial eligibility criteria, and that proof of financial eligibility is required for service provision. Notification shall be undertaken in a manner that will permit families to determine whether they qualify financially for preventive services.
- c) Where the board of health provides the service(s) directly, send parent/guardian consent and health history forms to complete and sign prior to service provision. This notification shall occur within five business days of the date of screening.
- d) Where the board of health is referring the child to a private office for the provision of service(s), provide the parent/guardian with notification of the service(s) that will be covered, the reimbursement rate for the service(s), and confirmation that the family can attend a practitioner of their choice.

7) Data collection, reporting, and information transfer

The board of health shall:

- a) Input into the OHISS or any other method specified by the ministry the following information for all children identified as eligible for one, or more, clinical preventive services, concurrent with the activities being provided:
 - i) Date of screening;
 - ii) Child's demographic information;
 - iii) Parent/guardian contact information;
 - iv) Screening findings, including personal health information;
 - v) Treatment information, including personal health information;
 - vi) Provider information;
 - vii) Payment information (if applicable); and
 - viii) All interactions with the family and/or dental office (if applicable).

References

1. *Health Protection and Promotion Act*, R.S.O. 1990, c. H.7.
Available from http://www.e-laws.gov.on.ca/html/statutes/english/elaws_statutes_90h07_e.htm.
2. *Personal Health Information Protection Act, 2004*, S.O. 2004, c. 3, Sched. A.
Available from http://www.e-laws.gov.on.ca/html/statutes/english/elaws_statutes_04p03_e.htm.
3. *Dental Hygiene Act, 1991*, S.O. 1991, c. 22.
Available from http://www.e-laws.gov.on.ca/html/statutes/english/elaws_statutes_91d22_e.htm.
4. *Dentistry Act, 1991*, S.O. 1991, c. 24.
Available from http://www.e-laws.gov.on.ca/html/statutes/english/elaws_statutes_91d24_e.htm.