

Specific Caregiver Concerns in a Dental Home for SHCN.

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Background

- The American Community Survey (ACS) estimates the overall rate of people with disabilities in the United States population in 2016 was 12.8%.
- The percent of people with disabilities varies greatly by state, as do levels of people with disabilities in employment, poverty, earnings, and health behaviors.²
- Patients with physical and/or intellectual disabilities present with greater oral pathology often due to their condition and to other external factors.¹
- Establishing a dental home is critical to providing comprehensive care for SHCNs patients, but it is equally important to maintain that relationship as the patient ages.



Objective

The purpose was to construct a caregiver survey that identifies specific components of the **Dental Home** that are most important to families and what hurdles there are for adults with special healthcare needs in accessing dental care. A secondary aim was to determine what the long-term transition of care plan is or if there is one.

Methods

Data were collected in collaboration with the Division of Child Life via an anonymous caregiver survey.

The survey will be derived from the AAPD's elements of a dental home with additional elements of care transition scoring 1 (least important) to 4 (most important).

Results

- Pilot Data were collected from 15 caregivers.
- The mean age of parents was 52 ± 4 years with dependents being 16 ± 4 years.
- Parents traveled an average of 51 ± 83 miles to access dental care compared to 27 ± 18 miles to access medical care.
- Examining dental home components, all respondents unanimously noted a 'place to go for dental health advice, routine preventive care and dental treatment' as well as 'parents are consulted about behavior management techniques' as the most critical elements of the dental home (mean score=4).
- Respondents noted Office assists in arranging transportation (1.4 ± 0.5) and Dietary counseling and anticipatory guidance is provided (2 ± 1).
- Eighty-seven (87%) percent of caregivers felt their child would require supported living arrangements in the future and need continued support to acquire health care.

Discussions and Conclusions

Caregivers traveled further for dental than medical care.

Caregivers value having a place to seek dental care for older patients with SHCNs and being consulted on behavior guidance techniques.

Caregivers sought a dental team for sensitivity, caring and compassion for their situation, and that the office strives to understand the patients' emotional needs.

Caregivers were aware their children required a transition of care plan for the future.

References

- ¹ Oral health in children with physical (Cerebral Palsy) and intellectual (Down Syndrome) disabilities: Systematic review I - Montserrat Diéguez-Pérez, corresponding author¹ Manuel-Joaquín de Nova-García,² M^a Rosa Mourelle-Martínez,³ and Begona Bartolomé-Villar⁴
- ² 2017 Disability Statistics Annual Report – University of New Hampshire
- ³ AAPD Reference Manual – Dental Home Definition
- ⁴ Oral health status and dental service use of adults with learning disabilities living in residential institutions and in the community - S Tiller , K I Wilson, J E Gallagher