Improving Health and Dental Services to Farmworker Children and Families

By: Renold JeanLouis, Health Coordinator
and Kim Corliss, Clinical Services Manager
The 2015-2016 Telamon Michigan ChildPlus Program Information Report (PIR) indicated that not all Migrant Head Start children and pregnant women received all required dental and health services and not all had active MI Medicaid.
NMHSI Clinic reports indicate that there were numerous missed or canceled appointments due to patient barriers in accessing care.
Needs

- Improved dental access for farmworker children and families
- Provide timely medical and dental services to pregnant women
- Complete all areas of the required EPSDT physical for all children, including up to date immunizations
Improve delivery of services to Migrant and Seasonal Farmworkers and their families and create better access to health services.

- **Migrant Case Workers**: Assist families with Medicaid application and transportation to appointment.
- **Health Specialist**: Keep track and ensure (by assisting parents with scheduling appointments, reminding parents of appointments and busing children to appointments) all participants receive health and dental services.
- **Provide initial health and dental services to Telamon participants**.
Health Services September 2016

Chart Title

<table>
<thead>
<tr>
<th>Service</th>
<th>Total 9/12/16</th>
<th>Completed 9/12/16</th>
<th>Percentage</th>
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<td>Medicaid</td>
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<tr>
<td>EPSDT</td>
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<tr>
<td>Treatment</td>
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<tr>
<td>Screening</td>
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<td>515</td>
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</tbody>
</table>
Overall 2016 completion compared to completion through September 2016

- MEDICAID: 86.94%
- EPSDT: 87.52%
- IMMS: 86.94%
- PREVENTIVE: 93.64%
- DENTAL TREATMENT: 84.57%
- TREATMENT: 78.75%
- SCREENING: 83.57%

Completed 2016, up to 9/12/16, Percentage
Organizing Outreach Event for initial appointment

- Meeting with Partners
  - Initial meeting with Telamon Staff to discuss services required for children to enter the program
  - Determine necessary staff to provide outreach
- Supplies
- Number of Children, names, DOB if available
Identified Resources

• Mobile Dentist Equipment.
  • NMHSI has acquired mobile dentistry equipment.
  • Contact: Kim Corliss, NMHSI Clinical Services Manager, kcorliss@nmhsi.org

• Mobile Hygienist
  • NMHSI hired a hygienist to go to the migrant Head Start sites to bring dental services to the migrant children and pregnant moms.
  • Contact: Jennifer Kerns, RDH, NMHSI, jkerns@nmhsi.org
Evaluation of Outreach

• What worked
• What didn’t work
• Improving outreach events
Challenges

• Equipment
• Staffing
• Children - how many? Who?
• Immunizations / Records from out of state
• Follow up - TBs read
• Medicaid coverage from another State
• Dental treatment wait period
• New Staff
• Parents
Scheduling follow up

- Children with dental issues or health issues require follow up with a dental or medical provider.
- Dental providers’ schedules are booked out two to three months.
- Some children require a specialist due to the amount of decay or the child being uncooperative.
Follow up care

• Appointment blocks for restorative dental procedures and medical visits.
  • NMHSI has scheduled appointment blocks in the dental and medical calendars for migrant children and pregnant moms for restorative dental services and medical exams.
  • Contact: Kim Corliss, NMHSI Clinical Services Manager, kcorliss@nmhsi.org

• Migrant Program Specialist.
  • MDHHS will provide a Migrant Program Specialist to check eligibility status and assist families in applying for Medicaid if needed.
  • Contact: Julian Castillo, Oceana DHHS Supervisor, CastilloJ2@Michigan.gov
Health Specialists

- Health Specialists with Telamon will work with the families and the clinic to make sure the children get to their scheduled follow-up appointments.
- Heath Center coordinates with the Health Specialist to let them know when appointments are.
- The Health Specialist can assist families that have language barriers if they need to make or change an appointment with a specialist.
- Health Specialists can help arrange transportation if needed
Barriers

• Transportation
• Work Schedules
• Cultural Differences
• Solutions
• Volunteers
• Language
• Requirement differences
• Hearing and Vision Screenings
Transportation

• Telamon Corporation has school buses and can provide transportation for a small group of children to the clinic setting

• DHHS can provide transportation to appointments for the family or to bring the Health Specialist and child to follow up appointments

• Working with the family in advance helps to determine whether or not transportation assistance is necessary

• Providing gas cards
Work Schedules

• Farm workers can’t take 1-hour off of work to bring a child to the dentist or doctor. If they miss an hour, they need to take the whole day off.

• Health Center works with parents to ensure child is treated.
  • Extended hours
  • Seeing walk-ins
  • Accommodating families that arrive late for appointments
Cultural Differences

- Bilingual Staff
- Providing education for dental and health
Solutions

- Telamon, NMHSI and DHHS working collaboratively
- Block scheduling for Telamon families
- SDF (Silver Diamine Fluoride)
- Community Health Workers to assist with enabling services
- Providing medical and dental services at the Telamon Centers
Volunteers

- Health Center staff becoming volunteers for Telamon to assist with transporting children to clinics
Language

• Bilingual staff
• Interpreting services
• Language assistance to help families navigate through the system
Requirement Differences

• Telamon has requirements in addition to what the State requires. If the health center isn’t notified or providers are not educated about additional requirements, Telamon ends up with deficiencies in end of year reports.
Hearing and Vision Screenings

• Telamon now requires formal hearing and vision screenings for all children. NMHSI does not have the equipment for hearing and vision screening. DHHS does have the equipment and staff and they are working with NMHSI and Telamon to provide these screenings.
Goal

• To improve medical and dental services to farmworker children and families
Objectives/Outcomes

• Dental evaluation within 30-days of enrollment for 100% of all migrant children in the Migrant Head Start program.
• Complete 90% of follow up dental care for all migrant children in the Migrant Head Start program before the end of the season.
• 100% of all physicals completed per EPSDT requirements.
• Assist 75% of enrolled pregnant moms to access dental services.
### 2016 season compared to 2017 season

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2017 overall data Compared to 2017 NMHSI data
Questions