

## **Strengthening Oral Health Screenings Law (HB 3181)**

**House Health Care Committee**

**Monday, March 20, 2017**

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**The Oregon Dental Association**

### **Alarming Facts:**

The Oregon Health Authority's *2012 Oregon Smile Survey* found\*:

- 52% of children between 6 – 9 years of age had a cavity (approximately 66,000 Oregon school children)
- 20% of children 6 – 9 years of age had untreated decay in their primary or permanent teeth
- More than 17,000 children had rampant decay – seven or more teeth with treated or untreated decay
- 19% of children 6 – 9 years of age needed early or urgent dental care
- As many as 3,800 children in grades 1 – 3 suffered from dental pain or infection on any given day
- Children from lower-income households had substantially higher cavity rates compared to children from higher-income households (63% vs. 38%), almost twice the rate of untreated decay (25% vs. 13%), and more than twice the rate of rampant decay (19% vs 8%)
- “Despite being preventable, tooth decay remains a significant public health concern and causes needless pain and suffering for many of our children in Oregon.”

### **Objective:**

The Oregon Dental Association (ODA) is seeking amendments to HB 3181 to include the comprehensive collection, aggregation, and reporting of data to lawmakers and the Oregon Health Authority regarding the types and prevalence of oral diseases found in children under age seven entering school for first time. Individual screening findings shall continue to be completely confidential. The comprehensive data will be invaluable to lawmakers and OHA in making policy and funding decisions for improving children's oral health.

### **Background & Current Law**

In 2015, the ODA and other stakeholders successfully advocated for the enactment of HB 2972, requiring school districts to collect dental screening information for school children under age seven entering school for the first time. Schools may perform dental screenings, *but are not required to*, but must provide preventative dental care information to new students.

If schools opt to provide screenings, they must be provided by either:

- A licensed dentist; licensed dental hygienist; or health care practitioner acting in accordance with State Board of Education rules; **OR**
- A person who is an employee of an education provider **AND** is trained in accordance with guidelines established by the Oregon Health Authority **AND** is acting in accordance with rules adopted by the State Board of Education in collaboration with the OHA's Dental Director

School districts shall report the percentage of students who fail to submit a screening certificate to the Oregon Department of Education every year. (Certificates can be from a child's dentist or school screening.) Parents may opt-out of dental screening requirements. There are no sanctions on students failing to submit a certification.

Education providers shall:

- File in the student's dental health record any certifications and results from dental screenings known by the school
- Provide the parent or guardian of each new student with information about the dental screenings; further examinations or necessary treatments; and preventative care, including fluoride varnish, sealants, and daily care

### **HB 3181 as Introduced:**

HB 3181 as introduced provides for a statement that may include an explanation of the reason a dental screening is contrary to the religious beliefs of the student, parent or guardian **OR** is a burden for the student, parent, or guardian.

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\*OHA *Oregon Smile Survey: 2012 Report* was conducted during the 2011-2012 and 2012-2013 school years. Specially trained dental hygienists screened 5,258 children in the 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> grades from a statewide representative sample of 82 elementary schools in Oregon.