The Haldimand-Norfolk Oral Health Program Staff

Rose Huyge
Program Coordinator School Health.
Following a Service Review the Oral Health Program is now part of the School Health division of the Health Unit. Rose oversees the dental staff and the dental program budget. Rose has a nursing background and has worked at the Health Unit since 2006. She has been the temporary Program Coordinator of Clinical Services for the past year. Contact Rose for concerns with Haldimand-Norfolk Oral Health Programs at extension 3259.

Tricia Atkinson
Tricia is one of the Dental Hygienists with the Haldimand-Norfolk Health Unit. She graduated from Brock with a Bachelor of Arts in Sociology in 1997 and subsequently completed her Preventive Dental Assistant schooling in 1998. Tricia worked as a Preventive Dental Assistant for 5 years before attending Niagara College and receiving her Dental Hygiene Diploma in 2005. For seven years, Tricia was a part of the Brant County Health Unit before moving to the Haldimand-Norfolk Health Unit in February of 2013. She is married and has 2 children. Please refer clients who are interested in applying for CINOT, HSO, or the preventive dental clinic to Tricia at extension 3221.

Shana Wingrove
Shana is the Preventive Dental Assistant for the Haldimand-Norfolk Health Unit. She has worked for the Health Unit for eight years. She graduated in 1988 from Career Canada as a certified dental assistant. In 1993, she attended the University of Western Ontario to receive her preventive dental assistant diploma. She has worked in private practices as a chair-side assistant, dental receptionist and as a preventive dental assistant. She currently lives in Tillsonburg with her husband Scott and their four children. She enjoys working in public health and finds it very rewarding. Contact Shana if you have questions about Healthy Smiles Ontario program application or need to refer a client at extension 3263.

Wayne McKay
Dr. McKay is the Dental Consultant at the Haldimand-Norfolk Health Unit. He graduated from the University of Toronto in 1966 with a DDS degree and received his Master of Dental Public Health degree from the University of Alabama in 1992. He is married with two grown children and one grandson. Dr. McKay has worked at the Haldimand-Norfolk Health Unit for the past 17 years as well as working at three other Health Units. Send your treatment plans to the Oral Health Program for Dr McKay to review.

Pat Anderson
Pat is the Oral Health Program Assistant for the Haldimand-Norfolk Health Unit. Pat started with the Oral Health Program in April of 2013. She has been a part of the Health Unit since 1997. Pat completes data entry for CINOT and HSO. She also pays dental claims for CINOT, HSO, and OW. Pat has 7 grandchildren and has been enjoying weekend fishing adventures with them. Contact Pat with questions regarding dental claims. Extension 3229.

Danielle Smale
Danielle is one of the Dental Hygienists with the Haldimand-Norfolk Health Unit. Danielle graduated from the University of Western Ontario in 2004 with a Bachelor of Science and received her diploma in Dental Hygiene in 2006 from Georgian College in Orillia. She has worked in orthodontic and general practices and has thoroughly enjoyed the past 2 years with the Haldimand-Norfolk Health Unit. She is married and has 4 cats, much to the annoyance of her husband. Please refer clients who are interested in applying for CINOT, HSO, or the preventive dental clinic to Danielle at extension 3249.
Professional fluoride treatments are a mainstay in the prevention of dental caries. For years, the standard practice was gel or foam applied via trays for up to four minutes. This type of delivery method was fairly effective, but it was not easy. At best, it could be messy and at worst it had the potential for ingestion.

The majority of dental offices do not correctly apply fluoride gels and foams for the prescribed 4 minutes and they are thus ineffective (even “minute foam” brands require four minutes of application if you read the instructions). Today, a new standard of care is emerging for fluoride treatments: the application of varnish.

**Fluoride varnish is easier, faster, and safer to use**

The American Dental Association notes that varnish applications “take less time, create less patient discomfort, and achieve greater patient acceptability than fluoride gel, especially in preschool-age children.” One advantage of using varnish is that the patient can eat or drink almost anything immediately afterwards. Exceptions are hot beverages or crunchy food. Instead of being the foe, saliva is a friend — setting the varnish. The only contraindication is no brushing or flossing for six to eight hours. The application may make teeth feel a bit fuzzy initially, but most patients find it tolerable. Application time can take from one to four minutes depending upon the number of teeth present. Most brands come in a single unit dose package with a brush applicator, which also helps with cross contamination. The purchasing cost of varnish vs. trays and gel is relatively similar. In terms of time, varnish is more economical. It requires less preparation to apply and is less messy, reducing cleanup time. Most single use varnishes are clear or “tooth coloured” unlike the Duraflor varnish that was generally available in the past.

**Fluoride varnish is safe**

While relatively new to the US and Canada, fluoride varnish is considered safe and well-accepted in Europe, where it has been used extensively for more than 20 years. Ingestion of fluoride via varnish application appears to be minimal. Plasma levels have been shown to be similar to brushing with fluoridated toothpaste and significantly less than with APF gel. Varnish has been applied without incident to infants as young as six months of age.

**Fluoride varnish is effective**

Clinical recommendations from the American Dental Association note that fluoride varnish applied “every six
months is effective in preventing caries in the primary and permanent dentition of children and adolescents.’ In high-risk populations, twice yearly applications are recommended; some clinical trials have had up to four applications per year. Varnish has reduced early enamel lesions in primary dentition. It has also been found to reduce the number of white spot lesions in orthodontic patients. Fluoride varnish has been shown to release fluoride over a 24-hour time frame as well as increase the calcium fluoride reservoirs that aid in long-term fluoride release.

**Fluoride varnish is for everyone**

Varnish can be applied to a baby’s first tooth, adolescents in orthodontic treatment, and adults. While studies on adults are limited, varnish has been shown to be effective on both primary and permanent teeth. In addition to the prevention of caries, fluoride varnish has been shown to decrease cervical dentin hypersensitivity.

**Fluoride varnish is quickly becoming the preferred method for delivery of professional fluoride treatments**

It is proven safe and effective, and is easy to use. Patients are more comfortable and accepting of fluoride varnish than with standard trays and gels, making it perfect for patients of any age. Ask your dental rep for varnish samples if your office is unfamiliar with single application varnish treatments. For advice on which varnish to purchase, application tips, or determining your client’s dental caries risk level contact one of your Health Unit Dental Hygienists.

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**Ontario Works coverage in Haldimand-Norfolk**

Unfortunately our county does not provide a dental card to its Ontario Works recipients. This can cause confusion and concern for dental offices as it is unclear whether a dependant (child) of an Ontario Works client (adult/applicant) is covered at the time when dental treatment is completed. The only person who can confirm Ontario Works coverage is the Ontario Works applicant’s case aid or case manager.

So how can a dental office be sure that the client is indeed covered? Place the responsibility on the Ontario Works adult/applicant. Tell them to bring their pay stub to each appointment as proof of coverage AND call their case aid to confirm that the child is covered on the date of the scheduled appointment. Explain that they will be paying out of pocket if treatment is completed while the child is not covered. No one from the Oral Health Program, including our program assistant has permission to divulge this information should a dental office request that we confirm OW dependant coverage.

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**Exciting News!**

In order to make our CINOT process more efficient we are now faxing CINOT Claim Forms to dental offices. When a client is screened and found to be CINOT eligible we will fax your dental office the claim form. We tell the family to wait about 3 days then call the dental office to book the dental appointment (unless the child is in discomfort/pain; we tell that parent to call immediately) to ensure the dental office has the claim form and can confirm the child is covered under the CINOT program at the time of booking. Please return the filled out claim form to Health Unit via mail as we need the original copy for billing purposes.
Dental Office Questionnaire
Dental Office returning survey: _______________________________________

Please take a moment to fill out this questionnaire and fax it back to the Haldimand-Norfolk Health Unit at 519-426-9974.

1. Does your office allow for assignment of benefits or do all clients pay up front and then get reimbursed by their insurance?
   - Yes, our office does assignment
   - Yes, in rare cases
   - No, all clients pay up front

2. Does your office allow for payment plans?
   - Yes, we allow payment plans
   - No, no exceptions, pay up front
   - For certain cases

3. Does your office provide any type of sedation for young or anxious clients?
   - No, there are no sedation options
   - Yes, we provide:
     - Oral sedation
     - General anaesthetic sedation
     - Nitrous
     - Other

4. Would your office prefer we refer young clients directly to a sedation dentist?
   - Yes, under the age of ________________
   - No, this should be determined by our dental office.
   - Yes, if the child is young and at all uncooperative

5. Does your office have a dentist/associate who is particularly good with or prefers to treat children?
   - No, we generally refer out pediatric cases
   - Yes, Dr. __________________________

6. Does your dental office offer evening or weekend appointments?
   - No, we are generally weekdays 9-5
   - Yes:
     - Evenings
     - Weekends

7. Does your office use fluoride varnish for most pediatric topical fluoride treatments?
   - Yes
   - No, but we would like samples
   - No, and we have no interest in starting

8. Is your office aware of the preventive dental clinics run the by Haldimand-Norfolk Health Unit at the Simcoe and Dunnville office locations? Please consider recommending/referring low income families to our clinics for free cleanings or a 3-month varnish program. Families will often not value or attend the program until a dental office recommends it.
   - Yes, and we recommend CINOT clients attend the clinics for a varnish program or future cleaning once they have completed their restorative needs
   - No, we didn’t know that kids can get free yearly cleanings and receive fluoride varnish at no cost every 3 months if they are at high risk for caries.

9. Does your dental office have any feedback, questions, or concerns? Your comment can be related to the Pearly Writes Newsletter, this survey or anything related to the Health Unit Dental Program.

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