

Basic Screening Survey for Older Adults



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BSS for Older Adults



- October 2010
- Manual
- Examiner training video
- Archived webinar about Older Adult BSS
- www.astdd.org

Basic Screening Survey Model

- Just one component of a comprehensive oral health **surveillance system**



Public Health Surveillance

- The ongoing, systematic collection, analysis, interpretation, and dissemination of data regarding a health-related event for use in public health action to reduce morbidity and mortality and to improve health
- Data is used for ..
 - Immediate public health action
 - Program planning and evaluation
 - Program advocacy
 - Formulating research hypotheses

Public Health Surveillance

- **Fundamental principle ...**
 - **Surveillance should be designed and implemented to provide accurate information to decision makers in a timely manner at the lowest possible cost**
- Sacrifice precision in order to...
 - Improve timeliness
 - Save resources

Example

- | Traditional DMFS Survey | Basic Screening Survey |
|------------------------------|------------------------------|
| • Over 120 fields per person | • About 10 fields per person |
| • 5-10 minutes per person | • 1-5 minutes per person |
| • Complex data analysis | • Easier data analysis |
| • Costly | • Not as expensive |

Public Health Surveillance

- The BSS is a tool for obtaining data for an oral health surveillance system
- It may not be appropriate for use in an oral health research setting where greater precision is more important than timeliness and resources

Surveillance vs. Research

Surveillance

- IRB review NOT required

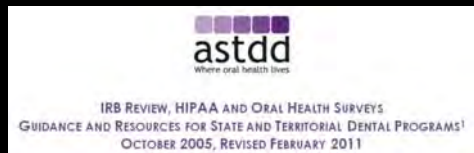
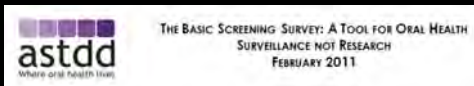
Human Subjects Research

- IRB review required

If an activity is deemed non-research, IRB review and other human subject protections are not required.

For the most part, public health practice is not research; so if an activity is deemed to be public health practice, it does not require IRB review.

Two Reference Documents



Recommended Groups for BSS Higher Risk Older Adults



Congregate Meal Sites



Long Term Care Facilities

Why These Two Groups?

- Congregate meal sites
 - Designed for higher risk community dwelling older adults
 - Have set locations, days and times where multiple adults can be surveyed
 - Can select a probability sample of sites
- Long-term care facilities
 - Residents are at very high risk
 - Can select a probability sample of facilities



Results are not generalizable
to all older adults!

Data Collection Methods

Congregate Meal Sites

- Good cognitive function
- Questionnaire
 - AND/OR
- Clinical screening

Long Term Care Facilities

- Limited cognitive function
- Clinical screening

NOTE: The Older Adult BSS is non-invasive.

Clinical Indicators

7 Recommended

- Dentures and denture use
- Number of natural teeth
- Untreated decay
- Root fragments
- Need for periodontal care
- Suspicious soft tissue lesions
- Urgency of need for dental care

5 Optional

- Functional posterior occlusal contacts
- Substantial oral debris
- Severe gingival inflammation
- Obvious tooth mobility
- Severe dry mouth

Clinical indicators range from simple to more complex .

Clinical Indicators



- For detailed information
 - BSS manual
 - Examiner video
 - Archived webinar
- www.astdd.org
 - Basic Screening Survey Tool

Optional Questionnaire

- General Domains
 - Tooth Loss
 - When not doing an in-mouth screening
 - Self-Reported Oral Health
 - Dental Insurance
 - Time Since Last Dental Visit / Frequency of Dental Visits
 - Access to Dental Care
 - Dry Mouth
 - Oral Cancer Screening

Older Americans Act

Older Americans Act

- Congress passed the Older Americans Act in 1965
- Established grants to States for ...
 - Community planning
 - Social & nutrition services
 - Research and development
 - Personnel training in the field of aging
- National network of agencies on aging
 - 56 State agencies on aging
 - 629 area agencies on aging
 - 246 tribal and Native Hawaiian organizations

Area Agencies on Aging

- Nationwide network of State and local programs that help older people to plan and care for their life long needs
- Primary goal is to keep seniors living independently in their own homes
- They provide social services and nutrition services for elders, and support for caregivers

Why are AAAs Important?

- In probably all states
 - Fund or operate congregate meal programs
 - Fund or operate home delivered meal programs
- In some states
 - Determine Medicaid eligibility and case manage Medicaid clients in long-term care facilities



Recommended Groups for BSS



Congregate Meal Sites

Congregate Meal Site BSS

- Sampling
 - Work with AAAs & state agency to obtain list of meal sites
 - Include average number of individuals served
 - Include days per week site operates
- What information do you want to obtain?
 - Questionnaire
 - Open mouth screening

Congregate Meal Site BSS

Questionnaire

- Higher response rate
- Less expensive
- May provide enough info for advocacy & disease monitoring
- Will probably underestimate disease prevalence

Open Mouth Screening

- Lower response rate
- More expensive

Congregate Meal Site BSS

- Potential problems and issues
 - Attendees do not like to alter routine & will refuse unless they understand the reasons and benefits
 - Limited amount of time to obtain info especially if attendees are used to the site
 - Avoid "celebration/activity days"
 - Attendance may vary by season



Recommended Groups for BSS Higher Risk Older Adults

Long Term Care Facilities



Long Term Care BSS

- General types of long term care facilities*
 - Assisted living
 - Each person has a private apartment with kitchen & bathroom
 - Adult foster care
 - Serves 5 or fewer residents in a home setting, residents may share bedrooms/bathrooms
 - Residential care
 - Serves 6 or more residents who may share bedrooms/bathrooms
 - Nursing facilities
 - Provide 24-hour nursing care by licensed staff

* Definitions may vary by state

Type of Facility for BSS

- Assisted living
 - Low response rate – may be good option for questionnaire
- Adult foster care
 - Too few residents
- Residential care
 - Good option for open mouth survey
- Nursing facilities
 - Good option for open mouth survey

Long Term Care BSS

- Long-term care facilities are licensed
 - Most are licensed by state (all nursing facilities)
 - In some states, some facilities may be licensed by AAA
- Sampling
 - Obtain electronic list of facilities from state
 - Include number of beds
 - Include number of Medicaid beds
 - NOTE: Medicaid does not cover assisted living or residential care

Long Term Care BSS

- Potential problems and issues
 - Facility may be afraid that you are “inspecting” them
 - Facility may be fearful of what oral health conditions will be found, “repercussions”
 - Some residents cannot legally provide consent
 - Some residents may be combative



What About Consent?

- Competent adults can give verbal or implied consent
 - Signed consent is NOT necessary
- Adults are presumed to be competent, unless a **Court** rules that they cannot understand the nature and consequences of their actions or care for themselves
 - Conservator – financial affairs
 - Guardian – all personal/medical affairs

Tips for a Successful Older Adult BSS

Tips for Success

- Engage your state's aging services staff & AAAs
 - Make sure they understand the impact of poor oral health
 - Take their advice – they can help you
- Clearly define what information that you really need
 - Don't go overboard
 - Questionnaires may be the best option in some populations
- Train your examiners
 - Prepare them for the worst



Tips for Success

- Develop a referral list for those in need of dental care
- Be patient, be a good listener, provide hugs when needed
 - The exam takes 1 minute, visiting takes at least 5
- Be formal – use Mr. or Mrs.
- Provide incentives: toothbrushes, toothpaste, denture brushes, etc....

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