STEP 9

EVALUATE THE PROCESS AND OUTCOMES

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SEALANT RETENTION

The quality of the sealants being applied can be measured in two ways. First, a sample of children who receive sealants can be re-evaluated within a few days of sealant application to ensure that the sealants are still intact and adequately cover surfaces. This form of evaluation is particularly effective for new providers so feedback concerning the quality of the sealants is immediate and any problem detected can be quickly corrected. The number of children checked and the regularity of the checks will vary among programs depending upon the results of previous long-term and short-term retention checks, staff turnover, and program protocols. Secondly, retention of sealants must occur in the next school year.

One Year Retention Rates

Long-term retention checks must occur in the second year of the program and beyond, and should be measured on as many children as possible. Lost sealants and partially lost sealants reflect errors in tooth selection, equipment failure or operator technique. According to the literature, one year retention rates of properly applied sealants should exceed 85 percent. Children in each school who had sealants placed the previous year should be reexamined. The retention checks involve third graders who were sealed the previous year.

Advance preparation is necessary for retention checks. Using the third grade class lists, determine which of the children sealed in second grade are still enrolled in the school. Mark their current room number on the student record before returning to the school for the checks. Sealant programs should differentiate between totally lost sealants and partially lost sealants by indicating retention rates at the surface level Any surface sealant lost counts as a total tooth sealant lost. Have evaluation criteria which clearly defines lost sealants and partially lost sealants so they are recorded properly.

Consider the time it will take to apply lost sealants in your planning. Each program has the responsibility to set the policy regarding parental consent for reexamining and or resealing students. Some programs allow for reapplication of lost sealants using the original parental consent. Other programs may require new consent forms for lost sealant application. Programs **MUST** reseal teeth if sealants have been lost. Decide if sealants will be placed for children who were absent for screenings, placement in second grade or whose teeth were not erupted. Keep new and replaced sealants separate in your data so you have accurate retention rates..

PROGRAM EFFECTIVENESS

Keep accurate records. Collect necessary data carefully for reporting. Look at your original program plan and evaluate whether you have reached your objectives. Evaluate your program in the following areas.

- population served is at high risk for dental occlusal caries
- community participation and support of program is present for continuation
- staff is adequately trained and following guidelines
- appropriate equipment and necessary supplies are available
- policy, and procedure protocols are updated
- adequate data collection is performed
- referral rates are monitored and community referral resources are developed
- records are properly documented
- retention rates are within acceptable limits
- participation rates are high
- program is cost effective

By continually evaluating the program, changes can be made which will strengthen future years activities.

References

Waggoner, W., and Siegal, M. Pit and fissure sealant application: Updating the technique. J Am Dent Assoc 1996; 127:351-361.

Harris N. and Christen, A. Primary Preventive Dentistry. 4th edition, Connecticut, Appleton and Lange Co, 1995, pp. 235-258.

Please note: This document does not contain any appendices.
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