## Access for All Smiles Pre-training Assessment

1. Tell us about yourself:

Name: Where do you work?	 	
County:		
State:	 	
Email address:		
How long have you been working with		

- 2. Have you had previous training on oral health topics?
  - O YES, and the training was adequate
  - O YES, and the training was NOT adequate
  - <mark>0</mark> NO
  - O If yes, please describe the training
- 3. How comfortable are you discussing oral health issues with the adult(s) with disabilities whom you support?
  - O Very uncomfortable
  - O Somewhat uncomfortable
  - O Neutral
  - O Somewhat comfortable
  - O Very comfortable
- 4. Do you typically/routinely refer the adult(s) with disabilities whom you support to oral health services?
  - O YES
  - O NO

- 5. If you do NOT typically refer to oral health services, why not? Check all that apply.
  - O They do not have an oral health risk.
  - O They have too many other risks.
  - O They are not interested.
  - O I don't know of any oral health clinic to refer to.
  - O I don't have time during my visit with them.
  - O Other \_\_\_\_\_
- 6. If you DO typically refer to oral health services, do you follow up on those referrals?
  - O YES
  - O NO
- If you DO follow up on oral health referrals, what feedback do you get? Check all that apply.
  - O They made an appointment.
  - O Not a priority for them.
  - O They don't have time.
  - O Dentist won't take Medicaid.
  - O Other \_\_\_\_\_
- If you do NOT follow up on oral health referrals, why not? Check all that apply.
  - O I forget.
  - O No documentation of referrals.
  - O No time.
  - O Other \_\_\_\_\_

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## Please answer the following questions the best you can. You will answer them again after the training.

- 9. What is the minimum number of times, per day, a person should brush their teeth?
  - a. 1 time per day
  - b. 2 times per day
  - c. 3 times per day
  - d. Every time they eat
- 10. Sugar from foods and drinks mix with saliva and \_\_\_\_\_\_ in our mouth to form acid.
  - a. Saliva
  - b. Soda pop
  - c. Bacteria
  - d. Fluoride
- 11. Fluoride is a mineral that \_\_\_\_\_\_ teeth.
  - a. Weakens
  - b. Strengthens
  - c. Whitens
  - d. Loosens
- **12.** Dental disease is a term that includes gum disease, oral cancer abscesses, and
  - a. Cavities
  - b. Dry mouth
  - c. Dentures
  - d. Disabilities

- **13.** Adults with disabilities are at risk of poor oral health because:
  - a. They have been historically underserved.
  - b. They have less access to oral health care.
  - **c.** They often take medications that affect oral health.
  - d. All of the above
- 14. The ABC Model stands for:
  - a. Always Be Cleaning
  - b. Awareness, Behavior, Consequence
  - c. Abscess, Behavior, Cavities
  - d. Awareness, Barriers, Cavities
- **15.** Breaking a task into small parts and allowing a person to get used to each step is called \_\_\_\_\_.
  - a. Incentives
  - b. Desensitization
  - c. Overcoming barriers
  - d. Adaptations



## Access for All Smiles Post-training Assessment

1. Tell us about yourself:

Name:	_
Where do you work?	
County:	_
State:	_
Email address:	

- 2. Now that you've completed the Access for All Smiles training, how comfortable do you think you will be discussing oral health issues with the adult(s) with disabilities whom you support?
  - O Very uncomfortable
  - O Somewhat uncomfortable
  - O Neutral
  - O Somewhat comfortable
  - O Very comfortable
- **3.** How would you rank your overall experience with this training?
  - O Not good at all
  - O Not good but not the worst
  - O It was okay
  - O Pretty good
  - O Excellent
- 4. How likely would you be to recommend this training to co-workers or colleagues?
  - O Not at all likely
  - O Not very likely
  - O Maybe
  - O Pretty likely
  - O Absolutely

- 5. What was your favorite part of the training?
- 6. What was your least favorite part of the training?
- 7. How do you see yourself incorporating the Access for All Smiles resources into your interactions with the adult(s) with disabilities whom you support?
- 8. Do you feel you will face barriers implementing the resources?
  - O YES
  - O NO

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- If yes, please describe
- 9. What was one thing you learned about oral health for adults with disabilities?
- **10.** Please give any comments you may have about this training or any suggestions for improvement.

## Please answer the following questions the best you can. You will answer them again after the training.

- 11. What is the minimum number of times, per day, a person should brush their teeth?
  - a. 1 time per day
  - b. 2 times per day
  - c. 3 times per day
  - d. Every time they eat
- **12.** Sugar from foods and drinks mix with saliva and \_\_\_\_\_\_ in our mouth to form acid.
  - a. Saliva
  - b. Soda pop
  - c. Bacteria
  - d. Fluoride
- 13. Fluoride is a mineral that \_\_\_\_\_\_ teeth.
  - a. Weakens
  - b. Strengthens
  - c. Whitens
  - d. Loosens
- 14. Dental disease is a term that includes gum disease, oral cancer abscesses, and
  - a. Cavities
  - b. Dry mouth
  - c. Dentures
  - d. Disabilities

- **15.** Adults with disabilities are at risk of poor oral health because:
  - a. They have been historically underserved.
  - b. They have less access to oral health care.
  - **c.** They often take medications that affect oral health.
  - d. All of the above
- 16. The ABC Model stands for:
  - a. Always Be Cleaning
  - b. Awareness, Behavior, Consequence
  - c. Abscess, Behavior, Cavities
  - d. Awareness, Barriers, Cavities
- Breaking a task into small parts and allowing a person to get used to each step is called \_\_\_\_\_.
  - a. Incentives
  - b. Desensitization
  - c. Overcoming barriers
  - d. Adaptations

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