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7.2 Best Practices

7.2.1 Describe two Institutional Best Practices as per the NAAC format provided in the Manual Response:

Best practice 1:

Title of the practice: <u>DENTAL HEALTH AWARENESS PROGRAMMES</u>

The objective of the Practice:

- Evidence suggests that oral health needs of a population are considerably high in a developing country like India.
- The subgroups of the population like school children, pregnant women, lactating mothers, geriatric group, physically and mentally challenged have the maximum need for the dental care.
- The unusually high settlement of dental practitioners in the urban areas has led to the creation of wide gap in the accessibility of dental services by the rural people which constitute about 70% of population.
- The lack of awareness, affordability, inherent cultural practices, myths, beliefs of the community and the compounding role of dearth of dental public health.

Practice:

- Conducting camps in nearby areas such as schools, colleges, old age homes, orphanages, disable centres, Government bodies and local community centres including special needs.
- Satellite centres at village for rural oral health care service which caters to the clustered villages around.
- Patients in need of advanced treatment are referred to this institution.
- The Urban Satellite Centre of the department caters to the oral health needs of population among other areas.
- Oral health awareness and care for the specially abled (mentally and physically) groups and their care givers through regular campaigns of reaching them.
- The geriatric population has one of the highest dental treatment needs initiates to reach them.

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Outreach activities are carried out on special days such as World Oral Health Day,
 World Anti-Cancer Awareness Month, and World No Tobacco Day.

Evidence of Success:

- Through this program the college has made efforts to make a model village transformed into ahealthy place through awareness and practices of dental care.
- Preventive Dental Health and general health awareness
- Awareness creation on Dental Hygiene

Problems Encountered and Resources Required:

- The major obstacle faced by the institution is in obtaining the approval conduct oralscreening cum treatment camps due to government restrictions.
- The transport of oral healthcare personnel to distance areas along with the equipment and necessaryinfrastructure becomes an issue of logistics

Best Practice 2

Title: TOBACCO CESSATION CLINIC AND PROGRAMMES

The objective of the Practice:

- To recognise the various patterns, biology and epidemiology in our area. To increase awareness and intention to quit among tobacco users. Emphasize Consequences of tobacco use and health benefits of tobacco Cessation
- Protection from passive smoking
- As per the global adult tobacco survey (GATS), India has over 275 million current tobacco users. An estimated one million people die every year due to tobacco-related diseases every year.
- We need a combination of strategies aimed at avoiding initiation of tobacco by the nonusers and cessation of tobacco among the current users.
- Tobacco cessation is the only way to save the current tobacco users from tobacco-related mortality. The consultation time can be effectively used by doctors as an opportunity to promote patients to quit tobacco when they are motivated to listen.
- Our college is located in the Mahabubnagar district and we have established the Tobacco Cessation clinic in the SVSIDS which can be useful for natives.

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The Practice:

- With our observation, in our outpatients 20-30% were using tobacco in some form or other The major group who were using tobacco were in the group of 20-40 years.
- With this in mind, two separate programs were started to identify the real need among the surrounding villages. Department of Public health Dentistry organizes school camps to create awareness among students who will be in a better position to inculcate the message and transform their family members.

Evidence of success:

- As our college is in a rural setup, first awareness had to be created among the public regarding the menace of tobacco.
- Awareness was created by conducting camps. Regular counselling and collaborative camps being done to address the issue. Nearly fifty percent of patients have acknowledged their habits and want to lead a happy life.

Problems encountered and resources required:

- Tobacco as a menace cannot be handled by a single institution alone it should be an unified collaborative effort.
- More personnel should be trained in this sphere of work. Other than technical staff, doctors should be trained for tobacco Cessation on a larger scale.

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