



ASTDD Roundup for March and April, 2020

Selected Consultant, Committee, Project and Meeting Summaries

By *Bev Isman, RDH, MPH, ELS*



Wow, March and April were not at all what we had expected as our world turned upside down! We did submit our CDC year 02 progress report and year 03 continuing application, although most of the CDC DOH program services project officers are out on COVID details. Our dental directors listserv has never been this busy with 155 postings in March and April by 59 participants compared to its usual less than 10 posts. The dental directors had group ZOOM calls on March 16, April 16 and April 23 to exchange information about how states are handling the COVID outbreak; these are continuing into May. Here are some of their experiences.

Quotes from ASTDD members during April about how they or their states/territories were dealing with the pandemic; because conditions change rapidly, these situations may have changed

“The Kentucky Board of Dentistry just passed a binding memo that put a couple of things in place: 1) Dental Students and Hygiene Students may apply for a ‘provisional’ license that is good for only 90 days after the “essential services only” directive is lifted for dentists. They have to complete boards after the 90 days begin and can work only under a dentist that has been licensed for 5 years. 2) Due to the “state of emergency,” dental specialists may provide dental services usually considered ‘general dentistry’ in order to maximize a workforce seeing emergency patients. This opportunity will close by a future action/memo rescinding by the Board. We are working on a plan to reopen dentistry as soon as is appropriate in Kentucky, but it won’t be any time in the near future. It is a multi-faceted group that is the Oral Health Program, the state dental association, the state dental hygienists’ association, the regulatory board and the ADA. I’m working full time in my office plus two-three evenings a week and some weekends in the healthcare workers call center for patient testing.” *Julie McKee, KY state dental director*

“As of today, the Commonwealth of the Northern Mariana Islands (CNMI) has 14 COVID cases, 9 of which have recovered, 2 have died and 3 are in isolation. These cases are all on the main island of Saipan. Commonwealth Healthcare Corporation’s public health dental clinic is open to treat true dental emergencies, following guidelines from CDC, ADA and CMS. I have 2 staff who are helping with AOC (Area of Command) in Emergency Preparedness. Dr. Bellama is helping with contact tracing with AOC while I am at the dental facility open to see and treat patients with true dental emergencies. Of the 6 private clinics on island, only 2 are open for dental emergencies.” *Dr. Angelica Sabino, CNMI Dental Director*

"Teledentistry.com is leading dentistry's response to the COVID-19 crisis. By partnering with multiple Medicaid agencies across the nation, we have provided dental emergency diversion services to over 17 million people during the quarantine using state of the art proprietary smart-phone technology." *Dr. Vilas Sastry, CEO*

“As oral health programs are paused, we are happy to find an appropriate way to support families and meet their oral health care needs. To support the vulnerable children and families in Michigan, **SEAL! Michigan Program** grantees created oral health packages and are distributing them through the continued school Free & Reduced Lunch Programs. The oral health packages are assembled in a virus-free home environment by school sealant program staff who wear facemasks and have also properly sanitized hands. The packages include several toothbrushes of various sizes and fluoridated toothpaste, all secured in zip-tight bags. Instructions are provided to the school staff to leave the bags secured and to distribute to families appropriately according to toothbrush size. The outside of the bag is marked with a sticky label that reminds families of proper daily oral hygiene habits, to throw away



toothbrushes after an illness, and to not share toothbrushes. The bags will be distributed on a monthly basis and while the schools continue meal service.” *Direct questions to: Jill Moore, MDHHS School Oral Health Consultant, MooreJ14@Michigan.gov*

“Missouri doesn’t have a mandate at this time. I have arranged a task force of the Missouri Dental Assoc., Missouri Primary Care Assoc., and Dept. of Health and Senior Services to make recommendations for re-opening dental practices. Our Medicaid program is refusing to consider paying for additional Personal Protective Equipment (PPE) expenses at this time and says that the Legislature must approve additional funding.” *John Dane, MO dental director*

“I serve as one of the quality control experts for PPE coming in to the state from the government stockpiles. Some of the materials with expiration dates have expired and others have been counterfeit and unusable.” *Russ Dunkel, WI dental director*

“Ohio’s state oral health program has been focused on:

- Compiling lists of dentists and clinics that can provide emergency dental care and sharing this information with the public;
- Communicating regularly with our school-based sealant program and Safety Net Dental Program grantees to keep them engaged and informed on administrative and programmatic changes and expectations;
- Communicating with our partners (e.g., FQHCs, Oral Health Ohio (Ohio’s statewide oral health coalition) on a regular basis to share information and discuss the impact of COVID-19 on the dental public health system;
- Staffing the Ohio Department of Health call centers, which provide critical information to the public and hospitals/healthcare facilities;
- Providing input within our agency about the impact of COVID-19 on the delivery of dental care in our state and considerations for expanding the availability of services; and
- Continuing to move our other work forward in spite of the challenges that the COVID-19 pandemic has presented. Our team continues to be focused, resilient and creative!” *Barbara Carnahan, OH Oral Health Program Manager*

“There have been a number of silver linings to this pandemic. My team in VT is working in lock step with our state dental society to provide guidance to dental health care providers where we are talking or emailing each other almost every day; it’s been great to have a close working relationship with them. We sometimes have differing perspectives on things but this pandemic has given us an opportunity to join forces for a common good. My whole team has been deployed to the Health Operations Center, some of us working with the Epi team, and some with contact tracing. I feel so blessed to be able to continue working and to be able to do such meaningful work. We’re all working full time from home at this point, something I struggled with in the past, but I’ve quickly become accustomed to staying in touch through Zoom and Skype and I do enjoy my new “commute.” Another plus has been the frequent interaction between dental directors made possible through our ASTDD listserv and Zoom meetings. I’ve always appreciated the important role ASTDD plays in my career, but this pandemic has made it even more obvious. I’ve learned so much from my fellow dental directors; they’ve provided much needed information and support to me especially in the early days of the pandemic (mid-March and early April). The cancellation of the NOHC was unfortunate, but that too made me realize how much I value my ASTDD colleagues. I was so disappointed that I wouldn’t be able to see my friends again this year.” *Robin Miller, VT Oral Health Director*

Recent Surveys

The National Association of Chronic Disease Directors (NACDD) was gracious enough to allow ASTDD to use their **Public Health Practice During COVID 19 Response questionnaire** to gain the same information from state dental directors in April. Thirty-three state oral health programs responded. In addition, dental directors have completed polling questions as part of the dental director COVID 19 calls and discussed their challenges. Some highlights and challenges include:

- Most staff are working at home and most oral health activities have been postponed or cancelled

- Program directors and staff are spending a majority of their time, including some nights and weekends, responding to the epidemic by doing contact tracing, serving on the nursing home team, maintaining the public health hotline and COVID call centers
- A challenge is being able to balance time with emergency response and ensuring administrative tasks are done related to the oral health program and grants
- A major challenge is providing guidance to the dental community on return of dental services to support disease prevention yet ensure safety given the aerosols that dental procedures produce
- Dealing with hiring freezes, furloughs or unprocessed contracts
- School oral health programs have stopped and many Head Start and child care programs have closed
- Difficulty accessing the public that does not have the means to connect via computer
- Engaging internal health agency partners and external partners such as other public agencies, private sector organizations, non-profits
- Gathering, analyzing, and disseminating epidemiology and surveillance data; some states were in the process of collecting BSS data when the schools, Head Starts or senior centers closed
- A water operator conference and trainings were cancelled and opioid RX trainings postponed
- Collaborations with dental and dental hygiene schools were cancelled or postponed
- Some legislatures have shut down, and programs only have appropriations for a few more weeks
- Unspent monies are being redirected to COVID 19 response efforts.

ASTDD surveyed oral health programs to determine the **best ways to communicate via online meeting platforms and survey platforms** as some states prohibit use of some platforms on work computers.

Meeting platforms: Some states are allowed to use all platforms but most use Zoom, followed by WebEx, Adobe, and GoTo Meeting; Zoom is the most preferred platform, although some states are revising their policies based on recent security issues.

Survey platforms: Some states use all platforms, while most use Survey Monkey, followed by Qualtrics, RedCap, and Google Forms; Survey Monkey is the preferred format.

General Barriers to using these platforms: not familiar with the platform, difficulty accessing or using Google platforms due to agency policies, cost, some don't have microphones or cameras on their computers.

We are in the process of developing or linking dental directors as well as ASTDD consultants to online tutorials or webinars for some of these platforms, including tips for facilitating and evaluating online meetings and creating surveys.

In February and March our evaluation consultants **surveyed dental directors to inform our Year 03 workplan for our CDC continuation grant**. Thirty-nine states/territories responded. Some findings:

- States noted how they are sharing ASTDD resources with partners and using them in oral health program activities; we will need to better market some underused resources and provide a webinar highlighting key resources and new resources. We also asked how states are using Maternal and Child Oral Health Resource Center (OHRC) documents as we partner with them through the COHSII and Head Start projects.
- Most states used technical assistance provided by our data consultants this year and also TA related to school sealant programs, community water fluoridation, and evaluation. Most respondents used the TA to build staff and program capacity and improve their programs. States provided examples of resources related to sealants and fluoridation they would like to see created or updated.
- We asked two questions to collect preliminary information to inform our Healthy Aging project: 19 of 36 respondents noted their SOHP engages in collaboration for the older adult population; more than 60% of 19 respondents were interested in participating in a workgroup to identify gaps in resources or developing a toolkit.

During the past two months, Kathy Phipps and Mike Manz provided Basic Screening Survey (BSS) TA and oral health surveillance TA to the following states – Florida, Georgia, Illinois, Kansas and Arkansas. Forty-nine states/DC completed the 2020 Synopses questionnaire. In May the Synopses complete report will be posted in the Members Only section of the ASTDD website; the State Synopses Summary is available by clicking the Synopses tab on the left navigation bar. Mike has been updating the Emergency Department surveillance reference document and ICD-10 code materials, while Kathy updated the [State Surveillance Data Reference Guide](#). Both have been assisting John O’Malley with the new National Oral Health Data Portal development. On March 3, Kathy presented *Basic Screening Surveys: Monitoring Oral Health* during an online UCSF Dental Public Health seminar series.

Best Practices Committee (BPC), Dental Public Health Policy Committee (DPHPC), and Communications Committee

With a slow down in some activities and cancellation of the NOHC, this has been a good time to update some documents and webpages. As Chris noted in the *Weekly Digest*, we updated the following:

- [ASTDD Guidelines Part II matrix](#) ; much of Part I is out of date so we will substitute the upcoming Surgeon General's Report when it is released
- [Dental Clinics webpage](#)
- [Injury Prevention webpage](#)
- [Oral Cancer webpage](#)
- [Periodontal Disease webpage](#)
- [State Oral Health Planning and Coalition Development webpage](#)
- [Smoking, Vaping and Tobacco Use webpage](#)
- [Dental Public Health Workforce webpage](#)
- [Children and Adolescents with Special Health Care Needs webpage](#)
- [Maternal and Child Health webpage](#)

In addition, make sure you read the [ASTDD 2019 Annual Report](#) that highlights ASTDD accomplishments.

Also posted were the [Best Practice Approach Report on State and Territorial Oral Health Programs and Collaborative Partnerships](#) with its associated descriptive reports, and [Promoting Antibiotic Stewardship In Dentistry](#) White Paper.

On April 14, the ASTDD Communications Committee and AAPHD held a virtual **Five-Minute Masterpiece** session for DPH residents where they gave five-minute presentations using plain language and one visual slide. Presentations included:

Presentation 1: *Use of Opioids in Dentistry: Dentists' Awareness and Knowledge on Clinical Guidelines and Recommendations among Pennsylvania Dentists* Arjun Singh, Temple Univ

Presentation 2: *Oropharyngeal Cancer Prevention: Influence of Social Determinants of Health on Texas HPV Vaccination* Salma Elwazeer, UTHSCSA

Presentation 3: *Understanding the Barriers to Special Needs Dental Care for 0-21 Year Old's in San Francisco: A Mixed-Method Approach* Karen Raju, UCSF

Presentation 4: *Application of Geographic Information Systems (GIS) to examine the location of School-Based/Linked Sealant Programs in Georgia* Jorge Bernal, CDC

Presentation 5: *Evaluation of School-based Preventive Dental Services Programs in Children Age 0-5 Years in Tuolumne County, CA* Navita Kalair, UCSF

Presentation 6: *Knowledge and Current Practices of Applied Behavior Analysis Therapists Regarding Oral Hygiene and Dental Care for Children with Autism Spectrum Disorder* Ankita Bhalla, UCSF

Presentation 7: Are Social Determinants of Health Predictors of Oral Health?

Elizabeth Powell, Boston University

Presentation 8: Type and Frequency of Behavior Change Techniques in Popular Patient Oral Health Apps

Alaa Qari, Boston University

Bev Isman from ASTDD and Frances Kim from the American Association of Public Health Dentistry facilitated the session, and Matt Jacob of Jacob Strategies and John Welby, Director of Oral Health Literacy and Social Marketing with the Maryland Dept of Health and also Chair of the ASTDD Communications Committee, provided feedback and presentation tips to each of the residents. John and Matt have partnered during the past two years on a Message Matrix project that helps people use key messages that are impactful in a short time period. Seventy six people participated in the session. Some of the residents contacted John and Matt after the session to get additional feedback.

The next ASTDD Spotlight webinar will be on May 27 at 2:00pm ET and will feature John Welby presenting *Maryland's Hypertension Screening in the Dental Setting*. Look for an announcement in the *Weekly Digest* about how to attend.

ASTDD Peer and Member Support Program

We currently have ten dental directors/program managers in the mentoring program: Tommy Johnson (AL), Dayna Brinckman (KS), Maryanne Goss (CT), Darwin Hayes (NJ), Misty Robertson (ID), Katie Glueckert (MT), Frances Wise (AK), Mana Mozaffarian (PA), Angelica Sabino (CNMI) and Remy Barcinas (CNMI). Angelica and Remy are the first to participate in the mentoring program from a U.S. Territory. Lori Cofano also oriented Barbara Carnahan (OH) and Amy Umphlett (OR). *Keeping the Ship Upright for Smooth Sailing: Using Mentoring to Help Steer Your Program* will now be two Zoom sessions: September 9th & 16th from 12-1:30pm ET. Kimberlie Payne contacted 12 new associate members in March and six in April for orientation. As of March 4, we had 224 new associate members join since the last ASTDD business meeting.

School and Adolescent Oral Health Committee (SAOHC) and Dental Sealant Subject Matter Expert

At the request of Katrina Holt, SAOHC members provided input on *Nutrition and Oral Health: A Resource Guide* that is being produced by the OHRC. Lori Cofano reviewed the draft and provided feedback on the SBHA *School Oral Health Playbook* at the request of Tammy Alexander. She also participated on a School-Based Health Alliance (SBHA) webinar on school-based health centers. Many programs are reassigning staff to help with COVID and we are unsure of what will happen with programs that are not able to provide services via telehealth. SBHA sent a letter to school superintendents hoping to get some guidance. The National Network for Oral Health Access (NNOHA) has been getting numerous enquiries regarding school-based health programs. They are routing inquiries to the SBHA and ASTDD.

Sandy Tesch conducted a dental sealant Community of Practice (CoP) call on April 29 with sealant coordinators from CDC-funded states to replace a webcast canceled by CDC for SEALS training. She formulated a summary of questions from grantees to send to CDC for guidance as they will be hosting a future call to address the COVID19 impact and/or new guidance for school-based sealant programs. Sandy developed a sealant standardization pretest/post-test quiz and answer key for state sealant coordinators that is posted on the ASTDD dental sealants webpage in conjunction with a sealant standardization training presentation. In addition to monitoring the CDC-funded states dental sealant group listserv, she has provided TA regarding resources for sealant fact sheets, teledentistry resources, list of eligible schools (>50% FPL) for sealant programs for CO, and types of software programs for data collection in school-based sealant programs.

ASTDD Fluorides Committee

Judy Feinstein conducted a Community Water Fluoridation (CWF) Community of Practice webinar on March 10 for CDC funded-states with a focus on CDC Cooperative Agreement requirements. She also facilitated a follow-up call in April with interested states to discuss termination of their school-based fluoride mouthrinse programs, alternatives, and messaging. The Fluorides Committee confirmed with state dental directors the communities and water systems to be recognized with annual fluoridation awards. There will be a "virtual brochure" for the annual ADA/ASTDD/CDC

fluoridation awards and a PowerPoint presentation for the awards ceremony as part of ASTDD's virtual business meeting on May 13. The brochures and ppt will be available on the website after the awards ceremony.

Evaluation Activities

JoAnna Hillman and Mary Davis continue to provide general assistance and TA to CDC-funded evaluators through their listserv and emails. They also assisted ASTDD with creation of multiple surveys and summaries, as well as evaluation strategies for the dental sealant and CWF communities of practice calls. Mary and Joanna now are trying to adapt their NOHC workshop for an online session. Carissa Beatty and Mackenzie Leonard from Emory University presented a *Virtual Facilitation* webinar for the ASTDD consultants on March 17; consultants completed a survey about their professional development needs via meeting and survey platforms to inform future sessions.

US Affiliated Pacific Islands and Caribbean Needs Assessment

The *Oral Health Program Infrastructure and Capacity Needs Assessment in the U.S. Territories: So What and Now What?* panel scheduled for the 2020 NOHC has been postponed to the 2021 NOHC. Magda de la Torre has continued to work on the Caribbean needs assessment report as additional information is obtained. Earthquakes continue to devastate portions of Puerto Rico. We have been communicating with the dental directors in the Pacific around their COVID cases, particularly on Guam where the USS Theodore Roosevelt docked with many COVID cases on board. American Samoa seems to have successfully avoided COVID cases. Dr. Tut has been discussing potential TA in the Republic of the Marshall Islands and the Federated States of Micronesia and rescheduling BSS training in CNMI. ASTDD is presenting the 2020 ASTDD Distinguished Services Award to Dr. Ohnmar Tut during the virtual ASTDD Annual Business Meeting. Reg Louie will deliver introductory remarks and Dr. Tut will deliver pre-recorded comments. Congratulations to her!

National Center on Early Childhood Health and Wellness (NCECHW)

NCECHW's oral health activities are led by the OHRC in partnership with ASTDD. Each month, an issue of *Brush Up on Oral Health*, which provides information on current practice, practical tips for Head Start staff and parents for promoting good oral health, and recipes for a healthy snack, is distributed to more than 10,000 Head Start staff and health and social services professionals. The tip sheet series covers a variety of oral health topics such as oral health and school readiness, tooth decay, fluorides, primary teeth, oral injuries, age 1 dental visits, oral health literacy, and pregnancy and oral health. Responses to a 2019–2020 feedback request sent to *Brush Up on Oral Health* readership show that the tip sheets helped ensure that Head Start program policies and procedures related to oral health reflect current science and practice. Respondents reported that information from the tip sheets resulted in new policies and procedures in the classroom for preventing and responding to dental trauma, eliminating the use of over-the-counter teething medications, refining oral hygiene practices for infants, and implementing toothbrushing at the table instead of at the sink. To access current and past copies of *Brush Up on Oral Health* visit www.mchoralhealth.org/headstart/brush-up.php.

Center on Oral Health Systems Integration Initiative (COHSII)

ASTDD subject matter experts Reg Louie, Kathy Geurink and Harry Goodman continue to provide TA and training to state/territorial Maternal and Child Health (MCH) agencies to make improvements in oral health systems integration and workforce development. They also continue to participate in conference calls and webinars for the three regions participating in the National Oral Health Initiative (NOHI). One aspect of the NOHI project focuses on quality indicators. Kathy Phipps attended a quality indicator project meeting in DC the first week in March.

On April 16 the OHRC and ASTDD hosted a one-day virtual meeting for the three NOHI projects. The meeting focused on identifying activities that projects can do during the start-up phase, harnessing project members' expertise, and reflecting on lessons learned to improve work plans. The meeting also addressed solving problems within projects, identifying work common across projects to leverage efforts, sharing resources, and building and cultivating relationships with staff in similar roles in the NOHI projects. Also in April, OHRC, in partnership with the Association of Maternal and Child Health Programs (AMCHP), produced an implementation toolkit to help Title V agencies address national performance measure (NPM) 13 focusing on preventive dental visits. The toolkit, presented in an infographic

format, provides evidence-based and -informed practices and resources, including AMCHP’s Innovation Station, contributions from Title V agencies and others, and links to resources from ASTDD and OHRC.

NOHC Updates

Everyone was so disappointed that we had to cancel the NOHC as it is really the only time to see friends and colleagues. ASTDD is in the process of creating a schedule of virtual sessions that will require a separate registration. All sessions will be recorded for later viewing if you can’t attend at the designated times.

The virtual business meeting, elections and awards ceremony will be done via ZOOM on May 13 and will only be available to ASTDD state members and associate members for registration. Look for upcoming information on our virtual NOHC where concurrent sessions will be scheduled as sequential sessions and recorded for future viewing. A new registration fee will be charged to access the series. Some “weekend workshops” also will be rescheduled as interactive webinars and available to ASTDD members for separate registration fees later this summer or early fall.

On a humorous note, Chris Farrell’s staff, friends and family were disappointed that she was not installed as ASTDD president during the business meeting originally scheduled on April 5, so they held their own virtual “coronation” for her that day. Chris has the 20 minute half joking/half serious YouTube video of the session if you want to ask her to share the link with you.



Send any questions or comments to Bev Isman at bev.isman@comcast.net