



Dental Public Health Activities & Practices

Practice Number: 04002
Submitted By: Office of Oral Health, Arizona Department of Health Services
Submission Date: September 2001
Last Updated: September 2009

SECTION I: PRACTICE OVERVIEW		
Name of the Practice:		
Statutory Authority for the Arizona Department of Health Services/Office of Oral Health		
Collection Sections & Categories:		
Policy Development – Oral Health Program Policies		
Healthy People 2010 Objectives:		
21-17 Increase the number of State & local dental programs with public health trained director.		
State:	Region:	Key Words:
Arizona	Southwest Region IX	Statutory authority, statutory mandate, program authority, legal mandate, legislation, state oral health program
Abstract:		
<p>The statutory authority for the Arizona Department of Health Services, Office of Oral Health was established in 1974. In the Arizona Revised Statutes for the Department of Health Services, Powers and Duties authorize the Director of the Arizona Department of Health Services to administer community health services, which shall include "dental care prevention." This statute defines the purpose of the Office of Oral Health. During a 1997 program authorization review mandated by legislation, which typically results in decisions to retain, eliminate or modify state government programs, the statutory authority was significant in ensuring the integrity of the state oral health program and maintaining its services. In 2007, the Arizona Department of Health Services underwent a collective planning process of reorganization and consolidation of various Offices and Bureaus. The statute authority again helped to maintain the Office of Oral Health's integrity and continue its role to serve the state. Following the planning and reorganization process, the Office of Oral Health is now linked to the Bureau of Health Systems Development.</p>		
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SECTION II: PRACTICE DESCRIPTION

History of the Practice:

The statutory authority for the Office of Oral Health was established in 1974, and it has not been revised since that time. The Office of Oral Health began in the 1970's by supporting fluoridation efforts and delivering basic dental care to indigent children in rural areas through the use of mobile dental trailers. The program services have evolved to address the public health core functions of assessment, policy development, and assurance. Currently, the Office of Oral Health's services maintain the original legislative intent of promoting oral health and preventing oral diseases through preventive dental care.

Justification of the Practice:

ASTDD Guidelines for State and Territorial Oral Health Programs promotes an appropriate legislative base for governance of agencies associated with oral health related functions such as passing legislation to establish a state oral health program. When the state oral health program is challenged in its existence due to budgetary constraints or new directives, the statutory authority provides key justification for the program to maintain infrastructure.

Administration, Operations, Services, Personnel, Expertise and Resources:

The Arizona Revised Statutes provide the enabling authority/legal mandate for the state oral health program administered by the state health agency (Office of Oral Health). Statutory authority for the Arizona Department of Health Services was established in 1974. This statute, mandated by the legislature, defines the purpose of the Office of Oral Health and ensures the integrity of the state oral health program and its existing preventive services. The statutory authority provides key justification for the program to maintain its identity and infrastructure. The Office of Oral Health is considered one of the most effective and respected State Dental Public Health Offices with acknowledgment coming from public and private sectors in the State of Arizona and the U.S.

The Arizona Revised Statutes grant powers and duties by stating that the Director of the state health agency shall provide community health services that shall include dental care prevention:

Arizona Revised Statutes

Chapter I. State and Local Boards and Department of Health, Articles I. Department of Health Services, § 36-104 Powers and duties.

This section is not to be construed as a statement of the department's organization. This section is intended to be a statement of powers and duties in addition to the powers and duties granted by section 36-103. The director shall:

1. *Administer the following services:*
 - (b) *Public health support services, which shall include, but not be limited to:*
 - (i) *Consumer health protection programs, to include, but not be limited to, the functions of community water supplies, general sanitation, vector control and food and drugs.*
 - (ii) *Epidemiology and disease control programs, to include, but not be limited to, the functions of chronic disease, accident and injury control, communicable diseases, tuberculosis, venereal disease and others.*
 - (iii) *Laboratory services programs.*
 - (iv) *Health education and training programs.*
 - (c) *Community health services, which shall include, but not be limited to:*

- (i) *Medical services programs, to include, but not be limited to, the functions of maternal and child health, preschool health screening, family planning, public health nursing, premature and newborn program, immunizations, nutrition, **dental care prevention** and migrant health.*
- (ii) *Dependency health care services programs, to include, but not be limited to, the functions of need determination, availability of health resources to medically dependent, quality control, utilization control and industry monitoring.*
- (iii) *Crippled children's services programs.*
- (iv) *Programs for the prevention and early detection of mental retardation.*
- (d) *Program planning, which shall include, but not be limited to:*
 - (i) *An organizational unit for comprehensive health planning programs.*
 - (ii) *Program coordination, evaluation and development.*
 - (iii) *Need determination programs.*
 - (iv) *Health information programs.*

In addition, the Arizona Administrative Code includes rules that further define functions of the state oral health program, including scope of services, eligibility and standards of service programs.

In 1997, the statutory authority was critical for the Office of Oral Health during a mandated Program Authorization Review. The Arizona Budget Reform legislation established Program Authorization Reviews for the Governor and the Legislature to evaluate the effectiveness and efficiency of state government programs. These program reviews are part of the budget process and result in decisions to retain, eliminate, or modify particular programs. The program's enabling authority was extensively assessed during the Review. The statutory authority was a major factor in maintaining the integrity of the state oral health program and its services.

In 2007, the Arizona Department of Health Services underwent a collective planning process of reorganization and consolidation of various Offices and Bureaus. One of the goals of this process was to identify areas of collaboration between Offices and develop a plan that will maximize the Department's ability to increase services that would impact at risk populations. It was determined that the reorganization of Offices within the Bureaus would allow the Department to work collectively to reduce the existing disparities. In the reorganization process, the Office of Oral Health was one Office that potentially could be structurally dismantled or incorporated into another existing Department. Since Oral Health has historically maintained its own identity and been recognized as a viable Office in the Arizona Department Health Services, the integration of Oral Health into another Bureau within the Department would likely impact current objectives and the functions of various programs that the Office of Oral Health has established. In the reorganization process the statutory authority was significant in determining Oral Health's position and designated title in the Department's organizational structure. The statute provided additional strength in efforts to maintain Oral Health's integrity and continue its role to serve the State and to provide a dental public health voice. Following the planning and reorganization process, the Office of Oral Health is currently linked with the Bureau of Health Systems Development.

Budget Estimates and Formulas:

Not applicable.

Lessons Learned and/or Plans for Improvement:

Through the years, the Office of Oral Health has experienced opportunities and risks that impact the infrastructure and capacity of the state oral health program. The State Legislature approved a new staff position for administering a state dental sealant program in 1994. Yet recent legislation also has transferred two FTE's to the Department of Insurance to oversee dental prepaid plans in 2001. The statutory authority is needed to provide a certain level of stability during times of budgetary constraints and reorganization.

Available Resources - Models, Tools and Guidelines Relevant to the Practice:

- Arizona Revised Statutes, Chapter I. State and Local Boards and Department of Health, Articles I. Department of Health Services, § 36-104 Powers and Duties (statutory authority).
<http://www.azleg.state.az.us/ArizonaRevisedStatutes.asp?Title=36>
<http://www.azleg.state.az.us/FormatDocument.asp?inDoc=/ars/36/00104.htm&Title=36&DocType=ARS>

SECTION III: PRACTICE EVALUATION DESCRIPTION

Impact/Effectiveness

Does the practice demonstrate impact, applicability, and benefits to the oral health care and well-being of certain populations or communities (i.e., reference scientific evidence and outcomes of the practice)?

The statutory authority for the Office of Oral Health was essential in maintaining the program integrity and services during the legislation mandated Program Authorization Review in 1997 and the Arizona Department of Health Services reorganization and consolidation of various Offices and Bureaus in 2007. The 1997 Review is part of the Office of Strategic Planning and Budget and Joint Legislative Budget Committee processes and result in decisions to retain, eliminate or modify state government programs. Following the 2007 planning and reorganization process, the Office of Oral Health has a new linkage to the Bureau of Health Systems Development.

Efficiency

Does the practice demonstrate cost and resource efficiency where expenses are appropriate to benefits? Are staffing and time requirements realistic and reasonable?

Not applicable.

Demonstrated Sustainability

Does the practice show sustainable benefits and/or is the practice sustainable within populations/communities and between states/territories?

The statutory authority has been in effect since 1974. There have not been any statutory changes related to the original legislative intent. However, changes to expand the authority of the state oral health program have been proposed over the years. Changes to the rules that define current functions of the state oral health program have also been made.

Collaboration / Integration

Does the practice build effective partnerships/coalitions among various organizations and integrate oral health with other health projects and issues?

Not applicable.

Objectives / Rationale

Does the practice address Healthy People 2010 objectives, the Surgeon General's Report on Oral Health, and/or building basic infrastructure and capacity?

Statutory authority helps maintain the infrastructure and capacity of the Office of Oral Health. Further, the statutory authority supports the Healthy People 2010 objective of increasing the number of state & local dental programs with a public health trained director.

Extent of Use Among States

Is the practice or aspects of the practice used or observed in other states?

States reporting having statutory authority for their state oral health programs include AR, AZ, CA, HI, ID, IL, IN, MD, MO, MS, NC, NV, NY, OK, PA, and RI.