

# Facilitating Partnerships and Collaborations between State Oral Health Programs and Primary Care Associations

## Final Project Report

## Appendices

June 2014



With funding support from



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## Appendix 1 – Evaluation Responses

**Table 1**

	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neither Agree nor Disagree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>
The initial information I received about the Project (e.g., the project announcement, the application package, and the “Launch” webcast on August 12, 2013) enabled me to understand the purpose of the Project.	<b>3</b>	<b>7</b>	<b>1</b>	<b>0</b>	<b>0</b>
The initial information I received about the Project (e.g., the project announcement, the application package, and the “Launch” webcast on August 12, 2013) enabled me to clearly identify what my organization was expected to contribute.	<b>1</b>	<b>9</b>	<b>1</b>	<b>0</b>	<b>0</b>
The initial information I received about the Project (e.g., the project announcement, the application package, and the “Launch” webcast on August 12, 2013) enabled me to define what constituted a joint Project Plan.	<b>3</b>	<b>6</b>	<b>2</b>	<b>0</b>	<b>0</b>
Comments and suggestions for improving the Project’s design.	<p><b>The value of the project became clearer as the project progressed.</b></p> <p><b>I found it a little confusing.</b></p>				
The initial meeting with my counterpart, during which we completed self-assessments, the Communities of Practice tool, and identified 2-3 competencies that we wanted to improve together, fulfilled the intended purpose of the meeting which was to better understand each other’s programs.	<b>7</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>
Comments	<p><b>I cannot comment. I was not part of this. I came later into the project.</b></p> <p><b>From the jumble, commonalities were identified.</b></p>				

The meeting(s) to review the “Collaboration Matrix,” fulfilled the intended purpose of the meeting, which was to review programmatic materials to identify activities on which my program and my counterpart’s could collaborate for purposes of developing a joint Project Plan.	4	6	0	0	0
Comments	<b>Our coach was great to work with. Encouraging and kept us on track.</b>				
The final meeting accomplished its intended purpose, which was to initiate and finalize our joint Project Plan.	3	6	1	0	0
Comments and suggestions for improving the Project’s design.	<b>Feasibility and practicality emerged</b>				
The Consultant assigned to work with me and my counterpart clarified issues and questions that arose during the course of our meetings.	8	2	0	0	0
The Consultant assigned to work with me and my counterpart functioned as a sounding board to explore ideas and potential projects.	9	1	0	0	0
The Consultant assigned to work with me and my counterpart generally contributed to constructive interactions that enabled me and my counterpart to work together collaboratively.	9	1	0	0	0
Comments and suggestions for improving the Project’s design.	<b>I was not a part of this process</b> <b>Our coach was fantastic!</b>				
The joint Project Plan that my organization developed with my counterpart contains important activities that maximize our	5	5	1	0	0

collaborative efforts.									
The joint Project Plan that my organization developed with my counterpart is feasible given existing levels of staff and resources.									
The joint Project Plan that my organization developed with my counterpart will contribute to strengthening the oral health safety-net in our State.									
Comments									
<b>Both parties are so busy it is difficult to dedicate the time necessary to fully implement the proposed project.</b>									
Overall, the Project enabled my organization to identify complementary activities that will form the basis of an ongoing, substantive working relationship.									
Comments and suggestions for improving the Project's design.									
<b>None</b>									
Which 3 of the following <a href="#">domains</a> do you see has having improved the most as a result of implementing this project:									
Build Support	Plan and Evaluate Programs	Influence Policies and Systems Change	Manage People	Manage Programs and Resources	Use Public Health Science	Lead Strategically	None of the Domains	Too soon to tell	
5	5	1	0	3	0	2	0	3	
Please describe any barriers encountered during the project									
<p><b>We have not experienced any significant barriers at this point.</b></p> <p><b>At first the SOHP and the PCA were not on the same page. It was a matter of clarification of what exactly we were expecting from each other. Once we clarified what my members were willing to do, we were all set.</b></p> <p><b>Switching projects mid-planning because of legislative changes.</b></p> <p><b>Time constraints of SOHP and PCA participants to meet regularly.</b></p>									

	<p><b>No funding for time spent developing the project.</b></p> <p><b>Again, time limitations and conflicting priorities made it difficult to take the project as far as we would have liked.</b></p> <p><b>Of course I wish I had made more time for the project. My program was understaffed for me to spend the energy I wanted to.</b></p>
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<p>Please describe unintended or unexpected outcomes, both positive and negative, that resulted as a result of the project.</p>	<p><b>Positive. We have worked with each other in the past and will continue.</b></p> <p><b>Positive. Building a framework for other collaborations in the future.</b></p> <p><b>Too soon. No results yet. We are just getting started with implementation.</b></p> <p><b>Partnership led to more collaboration on several additional oral health projects.</b></p> <p><b>It was worth it to make the time a priority. In order to enact the program to full potential will take time and resources that are in short supply.</b></p> <p><b>A complete work plan! Very positive.</b></p> <p><b>SOHP staff has a better understanding of the challenges the PCA faces in getting FQHC dentists to respond to programs and leadership provided by the PCA.</b></p> <p><b>My counterpart changed twice for a total of three partners. One of the partners assured through our Managed Care Organizations that the dental procedure WOULD be reimbursed when provided by a non-dentist.</b></p>
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How do you plan to disseminate information about the project to constituencies within the state? (please check all that apply)	PCA Annual Conference	SOHP Annual Conference	State Oral Health Program newsletter	PCA newsletter	Email to partners	Presentation at a coalition meeting	Other
	<b>5</b>	<b>1</b>	<b>1</b>	<b>3</b>	<b>5</b>	<b>5</b>	<b>0</b>

Comments	<p><b>Meetings with Medical, Dental Directors and Executive Leadership at Community Health Centers.</b></p> <p><b>Haven't discussed this, but makes sense to share at our State Oral Health Coalition meeting.</b></p>
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<p>For PCAs only) Did attending the National Oral Health Conference impact your understanding or interest in oral health?</p>	<p><b>Yes - 8</b></p>	<p><b>No - 0</b></p>
<p>What technical assistance could have been helpful from the partner organizations?</p>	<p><b>More discussion.</b></p> <p><b>Nothing to add.</b></p> <p><b>If we had more time, planning with dental directors or other PCA staff may have helped.</b></p>	
<p>Please provide any additional comments or suggestions about the project you wish to share. These might be suggestions for improving the Project's design or your overall experience relative to the project.</p>	<p><b>It has been a wonderful opportunity to reestablish a relationship with the SOHP. We have designed a great project that has a potential to impact multiple communities in our state. It is our hope that we can secure funding to incorporate additional sites in this project.</b></p> <p><b>Incentive funding for participation.</b></p>	

## Appendix 2 – Application Instructions



### FACILITATING PARTNERSHIPS AND COLLABORATION BETWEEN STATE ORAL HEALTH PROGRAMS AND PRIMARY CARE ASSOCIATIONS PROJECT

**WHAT:** The “Facilitating Partnerships and Collaborations Between State Oral Health Programs and Primary Care Associations Project” will provide an opportunity for State Oral Health Program Directors and PCA Directors and/or PCA Oral Health Managers to engage in a process designed to deepen their understanding of each other’s current and potential capacities, enabling both to identify complementary activities that form the basis of an ongoing, substantive working relationship. The State Oral Health Program Director and the PCA Director and/or PCA Oral Health Manager must submit a joint application.

**WHEN/WHERE:** The “Facilitating Partnerships and Collaborations between State Oral Health Programs and Primary Care Associations Project” will involve the following:\*

- Submission of a joint application;
- Participation in a “Launch” webcast to outline the Project’s key activities, timeframes, and intended results; provide an overview of the respective roles and responsibilities of SOHPs and PCAs in the oral health safety net; and highlight states and activities where collaboration between PCAs and SOHPs has been successful;
- A face to face meeting, to better understand each other’s programs. This will be facilitated via teleconference by a Project Coach. The State Oral Health Program Director and the PCA Director or PCA Oral Health Manager will complete self-assessments, a Communities of Practice tool, and select 2-3 competencies they wish to improve together;

- One or two face-to-face meetings, facilitated via teleconference by a Project Coach, to review key programmatic materials with the intent to identify activities in which the State Oral Health Program and Primary Care Association could collaborate;
- A face to face meeting, facilitated via teleconference by a Project Coach, to initiate development of a joint Project Plan. Project Plans should address one of the following:
  - a. Surveillance: how State Oral Health Programs and Community Health Centers could contribute to each other’s surveillance and needs assessment activities ; developing population-based interventions that are informed by surveillance data; developing county-specific oral health profiles to include demographic data, oral health status insurance status, etc, and target service delivery interventions and funding accordingly;
  - b. Recruitment and retention: creating systems and programs to place dental students and residents at CHCs; convene seminars for students/residents about practicing at safety net sites;
  - c. Implementing Community-based Prevention Programs: pilot community-based oral health programs at health centers; partner with health centers to implement school-based sealants, and replicate as appropriate;
  - d. Strengthening the Capacity of the Safety Net: jointly identify policy and financial models to implement new service delivery programs in CHCs; convene educational sessions for safety net clinics on operational and clinical topics; collaborate to identify multiple sources of funding for dental programs;
  - e. Support for New Workforce Models: work with health centers to establish training centers for new mid-level dental personnel and community oral health coordinators; advocate for policies and programs that strengthen the oral health safety net;
  - f. Other innovative projects as approved by ASTDD and NNOHA;
- A Mid-project Community Learning Event (webcast or conference call) for all the project participants to share their initial progress, challenges, and lessons learned with the Project Team and Project Coaches;
- A face to face meeting to finalize the Project Plan and plan their presentation;
- A joint presentation about the Project Plan at the 2014 National Oral Health Conference (NOHC) in Fort Worth, TX in April 2014.

**\* All participants should be willing to commit to all steps.**

**HOW:** Travel support for Primary Care Association representatives to present at the NOHC will be partially supported by the Association of State and Territorial Dental Directors, the National Network for Oral Health Access and the Health Resources and Services Administration and other sponsors.

## **REGISTRATION**

**and FEES:** There is no registration fee to participate in the “Facilitating Partnerships and Collaborations Between State Oral Health Programs and Primary Care Associations Project.”

## **APPLICATION**

**PROCEDURES:** Team members should complete the attached “Facilitating Partnerships and Collaborations Between State Oral Health Programs and Primary Care Associations Project” Application form and send to: **Terri Means at NNOHA** [terri@nnoha.org](mailto:terri@nnoha.org). **Deadline for Application: June 30, 2013**

**Selections will be made by July 15, 2013**

**For questions about the Project, please contact Christine Wood at 775-626-5008 or [cwood@astdd.org](mailto:cwood@astdd.org) or Annette Zacharias at (303) 957-0635 or [annette@nnoha.org](mailto:annette@nnoha.org).**

## Appendix 3 – Application



# Facilitating Partnerships and Collaborations between State Oral Health Programs and Primary Care Associations

## Project Application

### Primary Care Association

Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email: \_\_\_\_\_

Length of time you been in your current position: \_\_\_\_\_

### State Oral Health Program

Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email: \_\_\_\_\_

Length of time you been in your current position: \_\_\_\_\_

Describe your current relationship and activities between the SOHP, PCA, and CHCs in your state.

Describe how this project will positively impact challenges and opportunities currently experienced in your state (2-3 sentences).



## Appendix 5 – Coaches Tasks

Review joint application.

Participate in a “Launch” webcast to outline the Project’s key activities, timeframes, and intended results; provide an overview of the respective roles and responsibilities of SOHPs and PCAs in the oral health safety net; and highlight states and activities where collaboration between PCAs and SOHPs has been successful.

Create meeting agendas.

Via phone conference, facilitate a face to face meeting of the SOHP Director and the PCA Director. The purpose of this meeting will be to better understand each other’s programs. During this process the SOHP Director and the PCA Director or PCA Oral Health Manager will:

- Complete Self-assessments;
- Complete a Communities of Practice tool; and
- Select 2-3 competencies they wish to improve together.

Via phone conference, facilitate one or two face-to-face meetings of the SOHP Director and the PCA Director to review key programmatic materials (the Matrix) with the intent to identify activities in which the State Oral Health Program and Primary Care Association could collaborate.

Via phone conference, facilitate a face-to-face meeting of the SOHP Director and the PCA Director to initiate development of a joint Project Plan. Project Plans should address one of the following:

- Surveillance: how State Oral Health Programs and Community Health Centers could contribute to each other’s surveillance and needs assessment activities ; developing population-based interventions that are informed by surveillance data; developing county-specific oral health profiles to include demographic data, oral health status insurance status, etc, and target service delivery interventions and funding accordingly;
- Recruitment and retention: creating systems and programs to place dental students and residents at CHCs; convene seminars for students/residents about practicing at safety net sites;
- Implementing Community-based Prevention Programs: pilot community-based oral health programs at health centers; partner with health centers to implement school-based sealants, and replicate as appropriate;
- Strengthening the Capacity of the Safety Net: jointly identify policy and financial models to implement new service delivery programs in CHCs; convene educational sessions for safety net clinics on operational and clinical topics; collaborate to identify multiple sources of funding for dental programs;

- Support for New Workforce Models: work with health centers to establish training centers for new mid-level dental personnel and community oral health coordinators; advocate for policies and programs that strengthen the oral health safety net;
- Other innovative projects as approved by ASTDD and NNOHA.

Participate in a Mid-project Community Learning Event (webcast or conference call) for all the project participants to share their initial progress, challenges, and lessons learned with the Project Team and Project Coaches.

Via phone conference, facilitate a face-to-face meeting of the SOHP Director and the PCA Director to finalize the Project Plan and plan their presentation.

Attend a joint presentation about the Project Plan at the 2014 National Oral Health Conference (NOHC) in Fort Worth, TX in April 2014.

## Appendix 6 - Worksheet for Meeting 1

### State Dental Director

1. Talk about your background, e.g., professional training, public health experience, interests
2. Briefly describe your primary responsibilities and the major activities conducted by your program.
3. Describe the current staffing in your program.
4. What are some of the major dental public health issues facing your state from your perspective?

### PCA Director/Staff

1. Talk about your background, e.g., professional training, public health experience, interests
  2. Briefly describe your primary responsibilities and the major activities conducted by your association.
  3. Describe the current staffing in your association
  4. What are some of the major primary care issues facing your state from your perspective?
5. Rate how you perceive your two organizations' current relationship, using the descriptions below as a guide.

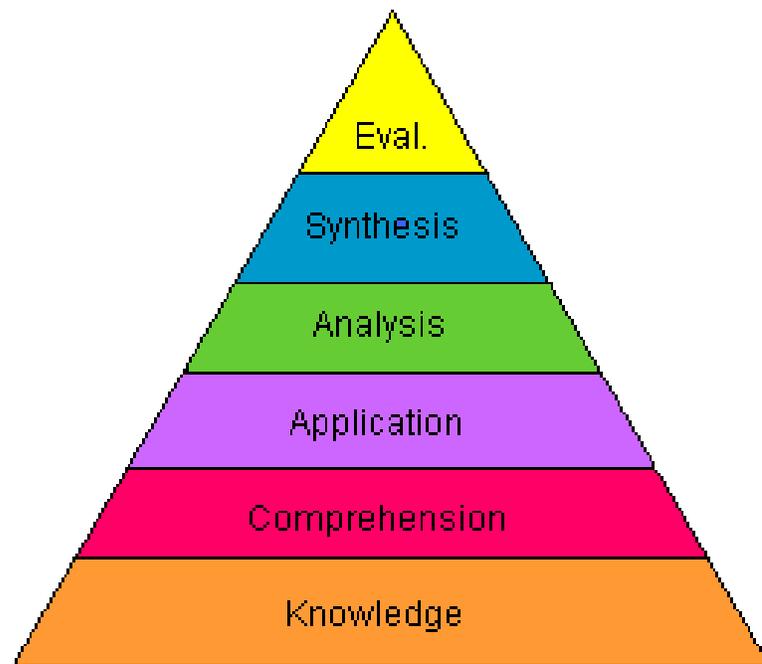
1    2    3    4   Comments:

Networking 1	Cooperation 2	Coordination 3	Collaboration 4
-Aware of each other's organization and assessing fit with mission, etc  -Infrequent or one-way communication	-Share information to increase organizational understanding  - Directors or staff meet to discuss activities  -Communicate on an "as needed" or more regular basis	-Very knowledgeable about each other's organization  -Develop some joint communications and share some resources  -Regular meetings and informal communication  -Some shared decision making	-Active participation in each other's activities  -Share some resources and work together to leverage additional ones  -Frequent and active communication characterized by mutual respect and trust  -Consensus is reached on relevant decisions

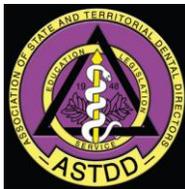


Appendix 7

# ASTDD Competencies for State Oral Health Programs



**Bloom's Taxonomy**



## ASTDD Leadership Committee

September 2009

## **Background and Purpose**

The Association of State and Territorial Dental Directors (ASTDD) is pleased to release *ASTDD Competencies for State Oral Health Programs*, also posted on the ASTDD website (Search for the title under the A-Z tab.) The Competencies were developed as a companion tool to *ASTDD Guidelines for State and Territorial Oral Health Programs*. They focus on core public health functions and essential services categorized under 7 domains; clinical skills are not included. A set of Guiding Principles outlines overarching concepts that should be reflected throughout a program. These competencies represent those skill sets needed for a successful state oral health program, whether they are present in oral health program staff or are obtained from other programs or outside sources. Every individual working in an oral health program need not be proficient in each competency. Competencies can help states determine where the program stands and what are realistic expectations and aspirations. The competencies promote identifying, leveraging and sharing of resources and collaboration with partners to maximize skill sets. To reflect varying levels of skills, four levels of attainment are included for each competency. Higher level skills are built on lower level skills, and lower level skills are embedded in higher level ones.

In developing the *Competencies* document, the ASTDD Leadership Committee reviewed numerous professional public health competencies as well as the performance standards for the Public Health Accreditation Board's national accreditation standards for health departments. Selected states participated in a prioritization exercise, and feedback was obtained during numerous national presentations to a variety of groups to arrive at the final product. A state oral health program that has access to expertise reflected in the competencies should be in a better position to carry out the activities outlined in the *ASTDD Guidelines for State and Territorial Oral Health Programs*, a companion document. ASTDD hopes that others such as territorial, federal, regional, tribal and local oral health programs might be able to adapt these competencies for their own settings.

### **Potential Ways to Use the Competencies:**

- Assess the current skills of people available to the oral health program; identify where there are gaps for the program or skills that are not currently being used to benefit the program
- Look for expertise in other state agency personnel or in community partners to fill gaps
- Use assessment findings to inform strategic planning
- Use assessment findings to justify requests for additional resources
- Share competencies with other health department units, policymakers and community partners to demonstrate the skill sets and commonalities needed for public health programs
- Set goals for program advancement using the competency levels of attainment and evaluate on a periodic basis.
- Create professional development opportunities for the program or individuals to increase skills in specific competencies
- Create scopes of work based on relevant competencies

- Design job applicant interview questions around relevant competencies
- Develop individual performance plans and use competency levels of attainment to evaluate performance

ASTDD encourages states to use *ASTDD Competencies for State Oral Health Programs* in a variety of ways and provide feedback on their use. Technical assistance is available from ASTDD to help states use the competencies. To request such assistance, email Christine Wood at [cwood@astdd.org](mailto:cwood@astdd.org).



Margaret Snow, DMD, MPH

President and Leadership Committee Co-Chair

ASTDD

# ASTDD Competencies for State Oral Health Programs

## Guiding Principles

State Oral Health Program Competencies should reflect the following principles throughout the program rather than devoting a single competency to each concept:

1. Integrating oral health and general health
2. Programming for all life stages (lifespan approach)
3. Recognizing and reducing oral health disparities
4. Identifying, leveraging and using resources
5. Social responsibility to advocate for/serve underserved populations
6. Demonstrating an understanding and respect for other professions, their goals and roles
7. Respecting diversity and attaining cultural competency, including fostering health literacy
8. Dedication to lifelong learning and quality improvement.

## Specific Domains and Competencies (Skill Sets)

**Domain 1. Build Support:** State oral health programs establish strong working relationships with stakeholders to build support for oral health through promotion, disease prevention and control.

- Establish and maintain linkages with key stakeholders
- Communicate in writing and electronically with professional and lay audiences
- Communicate orally with professional and lay audiences
- Compile compelling stories about oral health issues and programs
- Use the media, advanced technologies and community networks to strategically communicate information
- Listen to others in an unbiased manner, respecting and promoting differing points of view
- Advocate for oral health programs and resources
- Use collaboration strategies to build and sustain partnerships
- Lead or participate in groups to address emerging issues
- Present the business case for oral disease prevention
- Facilitate use of coalitions as change agents for oral health
- Develop social capital and political savvy to navigate organizational systems quickly
- Facilitate group interactions and decision-making
- Participate in national groups to facilitate support for and implementation of oral health programs

**Domain 2. Plan and Evaluate Programs:** State oral health programs develop and implement evidence-based interventions and conduct evaluations to ensure ongoing feedback and program effectiveness.

- Assess oral health needs of the population
- Conduct internal and external needs and assets assessments (SWOT assessment)
- Involve community members to develop program goals and objectives that reflect the community's needs and assets
- Match intervention strategies to accomplish selected goals and objectives
- Apply principles of cultural competency to program design and evaluation
- Tailor information to reflect the community's needs
- Formulate program, research, and policy evaluation questions
- Implement an evaluation plan that includes process and outcome measures
- Use logic models to inform decisions
- Use evaluation findings to guide decision making, generate recommendations and improve programs
- Monitor oral health needs using oral health surveillance methodology and indicators
- Respond to health hazards that affect oral health and the oral health workforce
- Create emergency preparedness and response plans

**Domain 3. Influence Policies and Systems Change: State oral health programs promote and implement strategies to inform, enhance or change the health-related policies of organizations or governmental entities capable of affecting the health of populations.**

- Use key informants and opinion leaders to assess public perceptions of oral health issues
- Communicate with change agents that are capable of effecting policy or systems changes
- Broaden the range of stakeholders who are engaged in policy development
- Combine data and stories to create compelling arguments to influence policies.
- Develop comprehensive risk communication strategies for oral health issues
- Apply historical perspective of the development, structure and interaction of public health and health care systems to current oral health policy issues
- Use health economics and business concepts and language to describe the value of oral health programs

**Domain 4. Manage People: State oral health programs oversee and support the optimal performance and growth of team members.**

- Manage effective teams
- Prioritize work responsibilities to accomplish multiple tasks
- Use time management skills
- Maintain a diverse workforce
- Assess team member skills and match skills to tasks
- Identify and resolve conflicts
- Conduct performance appraisals using constructive feedback
- Support professional and personal development
- Value and support personal and professional balance
- Facilitate productive meetings

- Motivate individuals and teams to achieve goals

**Domain 5. Manage Programs and Resources: State oral health programs ensure the administrative, financial and staff support necessary to sustain activities and to build opportunities.**

- Manage oral health programs within budget constraints
- Prioritize potential funding opportunities
- Prepare proposals to create a diversified funding base
- Justify a line item budget and an activity based budget
- Negotiate budgets and contract requirements with both funders and contractors
- Navigate bureaucratic systems to fulfill management functions
- Implement public health laws, regulations and policies related to oral health programs
- Provide technical assistance where needed or requested
- Manage information systems for collection, retrieval and use of data

**Domain 6. Use Public Health Science: State oral health programs gather, analyze, interpret and disseminate data and research findings to assure that oral disease prevention and control approaches are evidence-based.**

- Articulate the underlying causes and management of oral diseases, including behavioral, medical, genetic, environmental and social factors
- Use scientific evidence to inform program and policy decisions
- Assess determinants of oral health and how they create oral health disparities
- Use approaches to problems that take into account population differences
- Apply ethical principles to the collection, maintenance, use and dissemination of data and information
- Identify data and information sources
- Use accepted methods to collect oral health and program related data and information
- Use accepted methods for analyzing data and information
- Analyze oral epidemiologic and surveillance data to identify disease burden and trends, as well as potentially effective intervention strategies
- Identify promising models or best practice for possible adaptation or replication
- Identify factors that influence delivery and use of public health and oral health programs and services

**Domain 7. Lead Strategically: State oral health programs create strategic vision, serve as a catalyst for change and demonstrate program accomplishments.**

- Demonstrate critical thinking
- Respond with flexibility to changing needs
- Leverage resources, both monetary and human
- Create key values and a shared vision
- Foster incorporation of new ideas

- Apply problem-solving processes and methods to challenging situations
- Facilitate integration between oral health programs and other state and local health related programs
- Create a culture of ethical standards within organizations and communities
- Oversee the development and implementation of a state oral health plan
- Translate policy into organizational plans, structures and programs
- Identify policy agendas for state oral health programs
- Assess state oral health program capacity within the context of the *Essential Public Health Services to Promote Oral Health* and core functions.
- Assist primary care providers, organizations and health plans to develop, implement or evaluate models of family-centered care or services across the lifespan

## Levels of State Oral Health Program Competencies

**Domain 1. Build Support:** State oral health programs establish strong working relationships with stakeholders to build support for oral health through promotion, disease prevention and control.

Competency	Level 1 (Basic)	Level 2	Level 3	Level 4 (Advanced)
Establish and maintain linkages with key stakeholders	Identify key stakeholders	Communicate with stakeholders on a regular basis	Conduct collaborative activities with stakeholders	Evaluate linkages with stakeholders
Communicate in writing and electronically with professional and lay audiences	Use clear, concise, grammatically correct written language	Format written documents in easy to read style	Adapt information for a variety of written and electronic formats	Solicit and use feedback on written and electronic communication to make improvements
Communicate orally with professional and lay audiences	Use clear, concise, grammatically correct language in oral presentations	Increase interest and relevance of communication through examples, stories, etc.	Adapt oral communication for different population groups or situations.	Solicit and use feedback on oral communication to make improvements.
Compile compelling stories about oral health issues and programs	Collect or document examples of a variety of OH issues and programs	Develop examples into stories	Use language and format to create compelling stories	Acquire feedback to see if stories raised emotions or prompted action.
Use the media, advanced technologies and community networks to strategically communicate information	Identify various media channels, technologies and community networks	Develop strategies to fit the selected channels, technologies and networks	Use the selected strategies to communicate information	Evaluate and revise communication strategies

\* SOHP = State Oral Health Program \*OH = oral health

Listen to others in an unbiased manner, respecting and promoting differing points of view	Describe characteristics of active and nonjudgmental listening	Use active listening skills and encourage different viewpoints	Foster active listening skills and consideration of different viewpoints in others	Acquire feedback on listening and communication skills and initiate improvements
Advocate for oral health programs and resources	Discuss differences between education, advocacy and lobbying	Develop key advocacy messages	Use key messages with policymakers, stakeholders and others	Evaluate effectiveness of advocacy messages and make improvements
Use collaboration strategies to build and sustain partnerships	Identify important collaboration strategies and potential partners	Initiate communication with potential partners and propose collaborations	Strategize with partners to implement joint activities	Evaluate collaborative strategies and their effect on building and sustaining partnerships
Lead or participate in groups to address emerging issues	Identify emerging issues as part of a group	Strategize how to prioritize and manage emerging issues	Serve on workgroup or task force to implement strategies to address emerging issues	Evaluate strategies used to address emerging issues
Present the business case for oral disease prevention	Locate information on the costs/benefits of methods for preventing oral diseases	Analyze and summarize information on the costs and benefits of oral disease prevention	Develop and use materials that present the business case for oral disease prevention	Determine effectiveness of the materials that present the business case for oral disease prevention
Facilitate use of coalitions as change agents for oral health	Assemble or join coalitions around a common oral health goal	Create a coalition action plan for priority objectives	Implement action plan to facilitate change	Determine effectiveness of coalition in initiating changes in oral health
Develop social capital and	Learn key principles of	Identify key contacts at	Develop relationships with	Use key contacts and their

political savvy to navigate organizational systems quickly	developing social capital and political savvy	organizations who understand the bureaucratic structures and processes	the key contacts to learn about the organizations	knowledge to successfully and quickly achieve desired outcomes
Facilitate group interactions and decision-making	Identify methods and resources for leading group discussions	Select and practice basic methods for facilitating group interaction and decision-making	Use increasingly advanced methods for group process	Solicit feedback on facilitation skills and make improvements
Participate in national groups to facilitate support for and implementation of state oral health programs	Search for information on national groups that might benefit state oral health programs	Select one or more of the national groups and join a committee or workgroup	Provide information and advocate for state oral health programs as a member of the group	Document increased support for state oral health programs as a result of your involvement

**Domain 2: Plan and Evaluate Programs: State oral health programs develop and implement evidence-based interventions and conduct evaluations to ensure ongoing feedback and program effectiveness.**

Competency	Level 1 (Basic)	Level 2	Level 3	Level 4 (Advanced)
Assess oral health needs of the population.	Identify methods to assess oral health needs	Utilize selected methodologies to collect data to assess oral health needs	Analyze data and describe specific findings	Validate findings and prioritize needs
Conduct internal and external needs and assets assessment (SWOT assessment)	Identify methods to assess internal/external program needs and assets	Utilize methodologies to collect data to assess internal/external program needs and assets	Analyze data and generate specific findings from assessments	Develop priority needs and actions, based on assessments of program needs and assets

Involvement of community members to develop program goals and objectives that reflect the community's needs and assets.	Identify representative community members to inform the development of program goals and objectives	Engage key community members in collaborative planning	Use results of collaborative planning to develop program goals	Solicit and use feedback to determine how well programs reflect the community's needs and assets
Match intervention strategies to accomplish selected goals and objectives.	Identify evidence-based intervention strategies for each objective	Develop activities/action steps based on selected interventions	Implement the selected action steps	Determine how well the selected intervention strategies met the specific goals and objectives
Apply principles of cultural competency to program design and evaluation.	Identify principles of cultural competency that apply to program design and evaluation by employing key informants and current research	Use identified principles of cultural competency to plan for evaluation	Use field tests or focus groups with intended audience to determine degree of cultural competence of program and evaluation strategies	Incorporate recommended modifications to program design and evaluation
Tailor information to reflect the community's needs.	Ask community to define needs and identify key messages to be used	Develop drafts of information that reflect the community's needs	Adapt information dissemination to reflect the community's needs	Solicit and use feedback from key informants in community to make information improvements
Formulate program, research, and policy evaluation questions.	Identify relevant program, research and policy evaluation issues	Draft evaluation questions relevant to selected programs, research and policies	Develop strategies to answer evaluation questions	Determine how well the strategies answered the questions
Implement an evaluation plan that includes process	Describe the difference between process and	Develop an evaluation plan with measurable and time-framed process and	Formulate findings and recommendations supported by program	Design program improvements and modifications based on

and outcome measures.	outcome objectives	outcome targets.	evaluation	findings and recommendations
Use logic models to inform decisions.	Describe the components of a logic model and their use in program planning and evaluation	Employ the logic model to inform decisions, e.g., setting program goals, objectives, targets and outcomes	Generate findings and recommendations supported by logic model	Evaluate the utility and benefit of using logic models to inform decisions
Use evaluation findings to guide decision making, generate recommendations and improve programs.	Identify evaluation activities that have generated findings	Compile and analyze relevant evaluation findings to identify significant findings and where gaps exist	Summarize evaluation findings and compare to evaluation questions and plan	Evaluate how useful the evaluation findings were for decision making, generating recommendations and improving programs
Monitor oral health needs using oral health surveillance methodology and indicators.	Identify oral health surveillance methodologies and indicators for monitoring oral health	Utilize identified methodologies to collect, store and analyze data to monitor oral health	Compile a report based on the findings from each indicator and the methodologies used	Validate that methods and findings meet the expectations for monitoring oral health and implement any revisions
Respond to health hazards that affect oral health and the oral health workforce.	Identify health hazards that affect oral health and the oral health workforce	Communicate with key stakeholders regarding health hazards that affect oral health and the oral health workforce	Conduct collaborative activities with key stakeholders regarding health hazards that affect oral health and the oral health workforce	Evaluate changes in health hazards and response mechanisms that affect oral health and the oral health workforce

Create emergency preparedness and response plans.	Identify oral health components of emergency preparedness and response plans	Communicate with key stakeholders and partners involved in emergency preparedness and response plans	Conduct collaborative activities with key stakeholders and partners involved in emergency preparedness and response plans	Participate in the periodic evaluation of emergency preparedness and response plans
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**Domain 3. Influence Policies and Systems Change: State oral health programs promote and implement strategies to inform, enhance or change the health-related policies of organizations or governmental entities capable of affecting the health of populations.**

Competency	Level 1 (Basic)	Level 2	Level 3	Level 4 (Advanced)
Use key informants and opinion leaders to assess public perceptions of oral health issues	Identify key informants and opinion leaders	Communicate with key informants and opinion leaders on a regular basis	Conduct collaborative activities with key informants and opinion leaders	Evaluate linkages with key informants and opinion leaders
Communicate with change agents that are capable of effecting policy or systems changes	Identify critical change agents for specific issues	Communicate with critical change agents to discuss policy and system change opportunities	Conduct collaborative activities around selected issues with the change agents	Evaluate the success of the change agents to influence policy or systems change
Broaden the range of stakeholders who are engaged in policy development	Identify stakeholders who could be involved in policy development	Communicate with potential stakeholders to gain their policy ideas and commitment around specific issues	Collaborate with stakeholders to impact policy development	Assess the success and commitment of these stakeholders to affect policy development and change
Combine data and stories to create compelling arguments to influence	Collect examples of data and stories that could be developed into compelling	Create communication tools using the collected	Use communication tools to influence desired policy	Acquire feedback to determine the effectiveness of the

policies.	arguments to influence policies	data and stories	changes	communication tools to influence policies
Develop comprehensive risk communication strategies for oral health issues	Identify existing perceptions and potential risk communication messages for oral health issues	Develop and pilot risk communication strategies for the selected messages	Implement the planned risk communication strategies for the selected messages	Evaluate the ability of the risk communication strategies to alter existing perceptions
Apply historical perspective of the development, structure and interaction of public health and health care systems to current oral health policy issues	Identify relevant current oral health policy issues and determine the historical perspectives of those policy issues	Determine the role that historical perspective had in the development, structure and interaction of PH and health care systems to current oral health policy issues	Use the historical information to develop strategies for new policy development activities or to enhance existing policies	Assess the value of applying an historical perspective to current oral health policy issues
Use health economics and business concepts and language to describe the value of oral health programs	Identify the health economics and business concepts and language that impacts the oral health program	Analyze those business and economic concepts and language that positively or negatively affect perceived value of the oral health program	Formulate a plan to enhance the oral health program's visibility and value by building on the health economic and business concepts most relevant to the program	Assess the effectiveness of using health economics and business concepts and language to explain the value of the oral health program

**Domain 4. Manage People: State oral health programs oversee and support the optimal performance and growth of team members.**

Competency	Level 1 (Basic)	Level 2	Level 3	Level 4 (Advanced)
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Manage effective teams	Identify appropriate outcomes for each team	Review expected outcomes with teams and solicit team input	Implement team activities and document outcomes	Analyze team outcomes as compared to expectations to evaluate effectiveness
Prioritize work responsibilities to accomplish multiple tasks	Identify all tasks	Prioritize necessary tasks based on mission and goals of the program	Make assignments based on skills, priorities and timelines	Review progress on all tasks to determine if work assignments were appropriate and feasible
Use time management skills	Identify work/tasks, responsible parties and the timelines for their completion	Review priorities established for work/tasks in the context of available time and resources	Analyze progress on work/tasks over time	Assess ability to utilize available time to accomplish work/tasks
Maintain a diverse workforce	Identify composition of current workforce	Establish “ideal” composition of a diverse workforce, considering a multitude of factors	Review progress towards achieving “ideal” composition of workforce	Assess diversity outcomes and respond to identified deficiencies if any
Assess team member skills and match skills to tasks	Identify all team member skills and all tasks using appropriate methodologies	Match team member skills to appropriate tasks	Develop plan to enhance team member skills in areas where there is insufficient skill to accomplish tasks	Evaluate the ability of team members and their mix of skills to accomplish tasks
Identify and resolve conflicts	Create environment that allows for conflicts to be recognized quickly	Review conflicts with team members involved to determine the facts or opinions	Demonstrate openness in considering all factors in dispute and seek compromise where possible	Evaluate conflict resolution process and the ability of the team to achieve organizational objectives despite conflicts
Conduct performance appraisals using	Establish mutually agreed on performance standards	Review performance standards regularly	Allow those being reviewed to provide	Assess performance review process with team

constructive feedback			constructive feedback on their performance during the review process	members and solicit input for improvements
Support professional and personal development	Encourage team members to seek opportunities for personal and professional growth	Create personal and professional development plans	Determine whether personal and professional development plans are met and, if not, why not	Evaluate personal and professional development outcomes in relation to the support provided
Value and support personal and professional balance	Discuss the value of personal and professional balance with team members	Encourage activities and schedules that enhance personal and professional balance	Gain feedback on enablers and barriers to personal and professional balance	Assess satisfaction with current support and balance

Facilitate productive meetings	Review tips for scheduling and conducting productive meetings	Incorporate the tips into a series of meetings	Acquire feedback from participants on the effectiveness of the meetings	Analyze participant feedback and revise approaches based on recommendations
Motivate individuals and teams to achieve goals	Establish clear goals for individuals and teams	Communicate to individuals and teams the value of attaining the established goals	Work with teams and individuals to develop positive reinforcement opportunities if goals are achieved or exceeded	Assess achievement of goals and consistently reward appropriately

**Domain: 5 Manage Programs and Resources: State oral health programs ensure the administrative, financial and staff support necessary to sustain activities and to build opportunities.**

Competency	Level 1 (Basic)	Level 2	Level 3	Level 4 (Advanced)
Manage oral health programs within budget constraints	Review budget and different funding sources at the beginning of each year or each funding period	Review expenditures on a monthly basis to determine need for adjustments and reasons for delays	Make adjustments and justify redirection of funds to account for necessary over- and under-expenditures	Analyze factors that affect overall budget management and within categories to determine changes needed for the next year
Prioritize potential funding opportunities	Identify potential funding opportunities	Research funding opportunities to determine congruence for eligibility, focus and resources available	Pursue funding opportunities that are the best “fit” for program needs	Evaluate success of receiving or not receiving funding in terms of the “fit” for the program and potential funder

Prepare proposals to create a diversified funding base	Identify elements of successful proposals	Review RFPs and guidances from a variety of funders	Write draft proposals and solicit feedback for improvements	Ask for feedback from reviewers on successful and unsuccessful submissions
Justify a line-item budget and an activity- based budget	Outline items to include in a line-item budget and an activity-based budget	Document rationales for why each line item or activity is needed	Estimate costs for each line item or activity and how the costs were derived	Compare actual costs of each line item or activity to estimated costs
Negotiate budgets and contract requirements with both funders and contractors	Develop alternative budgets for different funding scenarios	Identify elements that need to be included in contracts to safeguard all parties	Prioritize budget and contract elements that are crucial and those that are more negotiable	Determine satisfaction of all parties with final contracts and budgets
Navigate bureaucratic systems to fulfill management functions	Identify contacts/entry points for each level of bureaucracy	Determine enablers and barriers to navigating a particular system	Document successful and unsuccessful navigational strategies	Analyze successful and unsuccessful navigational strategies to inform future approaches
Implement public health laws, regulations and policies related to oral health programs	Identify relevant public health laws, regulations and policies for oral health programs	Review each law, regulation and policy to determine the oral health program's role and roles of other groups	Determine effectiveness of current laws, regulations and policies and the way they are monitored and enforced	Identify any changes needed to laws, regulation and policies to improve oral health of the population
Provide technical assistance where needed or requested	Assess need for oral health program technical assistance (TA)	Determine resources (human and other) needed and available to provide TA	Prioritize TA needs and requests to fit with available resources	Evaluate effectiveness of TA from recipients' standpoint and use of program resources
Manage information	Determine information	Determine if current	Determine how well each	Create plans for reviewing

systems for collection, retrieval and use of data	system needs, including people to run the systems	systems and staff are adequate or if additional capacity is needed	aspect of the information systems is meeting program needs	and upgrading information systems as needs arise
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**Domain 6. Use Public Health Science: State oral health programs gather, analyze, interpret and disseminate data and research findings to assure that oral disease prevention and control approaches are evidence-based.**

Competency	Level 1 (Basic)	Level 2	Level 3	Level 4 (Advanced)
Articulate the underlying causes and management of oral diseases, including behavioral, medical, genetic, environmental and social factors	List common oral diseases, their causes and their management	Update knowledge on a regular basis to review known causes, management options and current/future research priorities	Develop talking points for different audiences on the causes and management of oral diseases	Evaluate audience understanding of the causes and management of oral diseases
Use scientific evidence to inform program and policy decisions	List the various levels of evidence for determining effectiveness of interventions	Review articles and guidelines to compare evidence of effectiveness for selected approaches	Select the best interventions and policies based on scientific evidence and other factors	Evaluate the effectiveness of the selected interventions and policies
Assess determinants of oral health and how they create oral health disparities	Discuss determinants of health and oral health, and the relationship	Identify methods for assessing determinants of oral health	Select and use assessment tools to collect information on possible determinants of oral health	Analyze collected information to identify differences among populations (disparities)
Use approaches to problems that take into account population	Identify population differences across variables	Gain feedback from targeted populations on potential approaches to	Select and implement approaches based on scientific evidence and community feedback on	Evaluate effectiveness of approaches for different population groups

differences		problems	relevance	
Apply ethical principles to the collection, storage, use and dissemination of data and information	Identify principles of ethics related to collection, storage and dissemination of data and information	Discuss methods that assure adherence to ethical principles	Select and pilot methods to determine any problems that might cause breaches in ethics	Check methods on a regular basis to prevent/adjust for ethical breaches
Identify data and information sources for variables of interest	List data items of interest to the program	Search electronic and print resources for data and other information sources	Review a variety of data and information sources to determine validity and relevance	Review data and information sources regularly for updates
Use accepted methods to collect oral health and program related data and information	Identify methods to collect oral health and program data and information	Review each method for reliability, generalizability, relevance to the program and resources needed	Select best methods to collect needed information using available resources	Evaluate if methods used were able to collect all information needed and that information is reliable and useful
Use accepted methods for analyzing data and information	Identify accepted methods to analyze selected variables	Compare methods for statistical appropriateness and power	Review data analysis for gaps, inconsistencies and other problems	Determine if the analytical methods yielded the most useful information
Analyze oral epidemiologic and surveillance data to identify disease burden and trends, as well as potentially effective intervention strategies	Select items and methods for analysis to determine oral disease burden and trends	Decide on purpose, target audience and format for disseminating the oral disease burden and trend information	Use analysis and synthesis of data to create a document that addresses all three topics and includes data sources	Acquire feedback on perceptions and use of information in the oral disease burden/trends document
Identify promising models and best practices for possible adaptation or	Review or develop criteria for defining promising	Search literature, websites and other avenues for potential practices that fit	Assess the models for applicability to state or	Pilot selected models to assess replicability or need

replication	models and best practices	the criteria	local environments	for adaptations
Identify factors that influence delivery and use of public health and oral health programs and services	Review literature to determine potential variables of relevance to oral health and public health programs/services	Develop assessment tools and approaches to collect data on the selected variables	Collect and analyze data to determine the significant factors	Use the identified factors to select approaches to improve delivery and use of services

**Domain 7: Lead Strategically: State oral health programs create strategic vision, serve as a catalyst for change and demonstrate program accomplishments.**

Competency	Level 1 (Basic)	Level 2	Level 3	Level 4 (Advanced)
Demonstrate critical thinking.	Describe attributes and qualities of critical thinking	Utilize and demonstrate attributes of critical thinking	Formulate or review strategic mission, vision and approaches	Validate strategic mission, vision and approaches
Respond with flexibility to changing needs.	Identify attributes of flexibility in responding to changing needs	Demonstrate attributes of flexibility	Document examples of the attributes when responding to changing needs	Assess which attributes of flexibility worked best in response to changing needs
Leverage resources, both monetary and human.	Describe methods and approaches to leverage a variety of resources	Identify groups that may be able to provide or advocate for needed resources	Approach groups and explore “win-win” relationships to leverage resources	Evaluate the effectiveness of approaches and collaborations to leverage resources
Create key values and a shared vision.	Brainstorm key values and elements of a vision statement	Obtain feedback from key informants on priority values and shared vision	Develop consensus on key values and shared vision	Solicit and use feedback on key values and shared vision to determine how well they

				reflect each group's needs and assets
Foster incorporation of new ideas.	Describe environments and behaviors that foster and embrace new ideas	Create an environment that fosters and embraces new ideas	Demonstrate how new ideas have been considered and adopted to improve/enhance the program	Assess the value of new ideas in program improvement and enhancement
Apply problem-solving processes and methods to challenging situations.	Describe problem-solving methods for addressing challenging situations	Role play problem-solving methods for challenging situations	Document the effectiveness of various problem-solving methods	Assess relative value of various methods in solving problems
Facilitate integration between oral health programs and other state and local health related programs.	Identify existing or potential state or local health related programs with which oral health could be integrated	Create plans for integrating oral health concepts or activities with specific state or local health-related programs	Document ways that integration occurred	Evaluate effectiveness, including mutual benefits, of integrating oral health with specific state or local health related programs
Create a culture of ethical standards within organizations and communities.	Identify ethical standards essential to the culture of organizations and communities	Facilitate or encourage the adoption of ethical standards within the cultural fabric of organizations and communities	Ensure the adoption of ethical standards	Determine whether the ethical standards are adhered to and if modifications are necessary
Oversee the development and implementation of a state oral health plan.	Identify essential stakeholders and methods to develop a state oral health plan	Utilize selected approaches with stakeholders to develop consensus for a state oral health plan	Track outputs and outcomes from plan implementation	Determine whether plan addressed the state's needs and assets and revise as needed
Translate policy into	Describe how policies are	Identify OH policies and	Document approaches	Evaluate the effectiveness of

organizational plans, structures and programs.	adopted into organizational plans, structures and programs	approaches to institutionalize these policies into plans, structures and programs	used to institutionalize OH policies	approaches used to translate OH policies into organizational plans, structures and programs
Identify policy agendas for the state oral health program.	Describe key oral health policy topics for the state oral health program	Develop approaches to establish policy agendas for the program	Implement policy agendas for the program	Evaluate effectiveness and responsiveness of OH policy agenda addressing the community's needs
Assess state oral health program capacity within the context of the <i>Essential Public Health Services to Promote Oral Health</i> .	Describe <i>Essential Public Health Services to Promote Oral Health</i> in relation to assessment, assurance and policy development	Identify respective state roles (under each essential service) and examples of how to fulfill those roles	Use assessment findings to create strategic plan for increasing capacity to perform the state oral health program roles	Periodically evaluate state oral health program capacity in performing roles in the <i>Essential Public Health Services to Promote Oral Health</i>
Assist primary care providers, organizations and health plans to develop, implement and evaluate models of family-centered care or services across the lifespan.	Describe the attributes of family-centered care and services across the lifespan and existing models	Identify key providers, organizations and health plans that desire assistance with models of family-centered care or services across the lifespan	Document the assistance provided using selected models	Evaluate the effectiveness of assistance to determine the value of various models

## Appendix 8

### A Collaboration Matrix: Charting the Program Overlap Between State Oral Health Programs and Primary Care Associations

State Oral Health Programs: 10 Essential Public Health Services	Primary Oral Health Care: ❖ Community Health Center Dental Operations ❖ PCA Education & Advocacy, and Technical Assistance & Training Activities	Programmatic Overlap: Examples of Potential Collaborative Activities	Resources
<b>Assessment</b>			
1. Assess oral health status and implement an oral health surveillance system.	❖ Community health centers conduct oral health needs assessments every 5 years.	<ul style="list-style-type: none"> <li>➤ A CHC’s oral health needs assessment can be coordinated with, informed by, and in turn inform an SOHP’s data collection and surveillance activities at the state level.</li> <li>➤ The SOHP and the PCA can include questions on each other’s surveys.</li> <li>➤ An SOHP and a PCA can develop a plan for utilizing health centers to conduct the Basic Screening Survey.</li> <li>➤ SOHPs can analyze BRFSS /PRAMS/YRBSS and Medicaid dental utilization data in conjunction with the PCA and its member health centers (and also in conjunction</li> </ul>	<ul style="list-style-type: none"> <li>• Lists/maps of CHCs with and without dental clinics; clinic locations; information about the capacity and infrastructure of the dental clinics;</li> <li>• Lists/maps of dental HPSAs</li> <li>• State surveillance indicators and relevant reports, e.g., ASTDD Basic Screening Survey data, BRFSS/PRAMS/YRBSS data; Medicaid 416 data.</li> <li>• SOHP Burden Document</li> </ul>

<b>State Oral Health Programs:</b>  <b>10 Essential Public Health Services</b>	<b>Primary Oral Health Care:</b> ❖ <b>Community Health Center Dental Operations</b> ❖ <b>PCA Education &amp; Advocacy, and Technical Assistance &amp; Training Activities</b>	<b>Programmatic Overlap:</b>  <b>Examples of Potential Collaborative Activities</b>	<b>Resources</b>
		with the Medicaid Agency).	<ul style="list-style-type: none"> <li>• Annual reports</li> </ul>
2. Analyze determinants of oral health and respond to health hazards in the community.	❖ Health Centers collect patient demographics and other data through their EDR.	<ul style="list-style-type: none"> <li>➤ SOHPs can collaborate with CHCs to collect and analyze information on factors that affect oral health, e.g., age, education, literacy, dental services utilization, including enablers and barriers to care, and evaluate the need for community water fluoridation, sealant programs, etc.</li> <li>➤ SOHPs and CHCs can collaborate to determine and disseminate information about fluoride levels in water systems and wells.</li> </ul>	<ul style="list-style-type: none"> <li>• Annual service delivery reports with demographic breakouts</li> <li>• Survey results/reports of knowledge, attitudes, practices.</li> <li>• NNOHA webinar on oral health literacy: <a href="http://www.nnoha.org/practice-management/webinars.html">http://www.nnoha.org/practice-management/webinars.html</a></li> <li>• <a href="#">My Water's Fluoride –CDC Water Fluoridation Reporting Systems (WFRS)</a></li> </ul>
3. Assess public perceptions about oral health issues and educate and empower people to achieve and	❖ Health centers as dental homes perform risk assessments and provide the following information to patients: ❖ Anticipatory guidance	<ul style="list-style-type: none"> <li>➤ SOHPs can leverage the expertise and experience of CHCs to create culturally and linguistically appropriate oral health educational activities and materials, and to train other oral health providers about health communication and health promotion.</li> </ul>	<ul style="list-style-type: none"> <li>• State or local survey results/reports on perceptions.</li> <li>• Website locations of state oral health education materials that are available and culturally appropriate.</li> <li>• <a href="#">Toolkit for Making Written</a></li> </ul>

<b>State Oral Health Programs:</b>  <b>10 Essential Public Health Services</b>	<b>Primary Oral Health Care:</b> ❖ <b>Community Health Center Dental Operations</b> ❖ <b>PCA Education &amp; Advocacy, and Technical Assistance &amp; Training Activities</b>	<b>Programmatic Overlap:</b>  <b>Examples of Potential Collaborative Activities</b>	<b>Resources</b>
maintain optimal oral health.	on growth/development ❖ Information regarding proper nutrition and dietary practices ❖ Information about proper care of the teeth and gingival tissues.	➤ SOHPs can interface with health centers to create health messages that support or add to other health messages and vice versa, e.g., diabetes, chronic disease, tobacco, and HIV.	<a href="#">Material Clear and Effective</a>
<b>Policy Development</b>			
4. Mobilize community partners to leverage resources and advocate for and act on oral health issues.	❖ PCAs leverage their political capital to prioritize oral health issues and develop a strong voice for the underserved at the state level. ❖ PCAs and health centers can	➤ PCAs can advocate at the state level for legislation and rules that promote the development and expansion of community oral health services and infrastructure. ➤ SOHPs can collaborate with PCAs to help underserved communities develop or expand community health center dental programs.	<ul style="list-style-type: none"> <li>• A Guide for Developing and Enhancing Community Oral Health Programs <a href="http://www.aacdp.com/guide/">http://www.aacdp.com/guide/</a></li> <li>• Environmental Scan Results</li> <li>• The State Oral Health Plan</li> <li>• The State Oral Health Policy Plan</li> </ul>

<b>State Oral Health Programs:</b>  <b>10 Essential Public Health Services</b>	<b>Primary Oral Health Care:</b> ❖ <b>Community Health Center Dental Operations</b> ❖ <b>PCA Education &amp; Advocacy, and Technical Assistance &amp; Training Activities</b>	<b>Programmatic Overlap:</b>  <b>Examples of Potential Collaborative Activities</b>	<b>Resources</b>
	collaboratively advocate for community water fluoridation.	<ul style="list-style-type: none"> <li>➤ SOHPs and PCAs can actively engage in their state oral health coalition and committees.</li> <li>➤ SOHPs and PCAs can assist health centers to form community-based oral health coalitions.</li> <li>➤ SOHPs can collaborate with health centers and local Area Agencies on Aging to leverage oral health resources for seniors.</li> </ul>	
5. Develop and implement policies and systematic plans that support state and community oral health efforts.	Health centers develop strategic and operational oral health plans in response to their community-based surveillance activities and needs assessments.  ❖ Many PCAs offer	<ul style="list-style-type: none"> <li>➤ SOHPs can develop a State Oral Health Plan in collaboration with the PCA and other stakeholders.</li> <li>➤ SOHPs and PCAs can share policy tracking and evaluation results, including successes and challenges.</li> <li>➤ SOHPs can engage PCAs to help disseminate oral health policies and priorities to gain support from partners,</li> </ul>	<ul style="list-style-type: none"> <li>• SOHP Policy Tracking Database</li> <li>• NNOHA’s policy resources in the areas of Community Water Fluoridation, School-Based Sealants and Workforce</li> <li>• <a href="#">State Oral Health Plan Comparison Tool</a></li> <li>• <a href="#">The Community Tool Box: Community Assessment, Agenda Setting, and Choice of Broad Strategies</a></li> </ul>

<b>State Oral Health Programs:</b>  <b>10 Essential Public Health Services</b>	<b>Primary Oral Health Care:</b> ❖ <b>Community Health Center Dental Operations</b> ❖ <b>PCA Education &amp; Advocacy, and Technical Assistance &amp; Training Activities</b>	<b>Programmatic Overlap:</b>  <b>Examples of Potential Collaborative Activities</b>	<b>Resources</b>
	policy and advocacy T/TA.	the public, and policy makers. ➤ SOHPs can collaborate with PCAs and health centers to provide training and consultation to communities on local oral health strategic plans and oral health policy development.	
<b>Assurance</b>			
6. Review, educate about and enforce laws and regulations that promote oral health and ensure safe oral health practices.	❖ Provide training and TA on OSHA standards and infection prevention and control practices; radiologic health, use and dispensing of amalgam, etc	➤ Educate the public on changes under the Affordable Care Act.  ➤ PCAs, health centers and SOHPs can and educate the public about laws and regulations that affect delivery of safe dental care including new workforce models and delivery systems.  ➤ PCAs and SOHPs can keep abreast of limitations in scope of CHC services at different locations and in dental financing changes for Medicaid, CHIP, etc.	<ul style="list-style-type: none"> <li>• <a href="#">Organization for Safety, Asepsis and Prevention</a></li> <li>• <a href="#">Mobile and Portable Dental Services in Pre-school and School Settings: Complex Issues</a></li> <li>• State dental boards and practice acts</li> </ul>

<b>State Oral Health Programs:</b>  <b>10 Essential Public Health Services</b>	<b>Primary Oral Health Care:</b> ❖ <b>Community Health Center Dental Operations</b> ❖ <b>PCA Education &amp; Advocacy, and Technical Assistance &amp; Training Activities</b>	<b>Programmatic Overlap:</b>  <b>Examples of Potential Collaborative Activities</b>	<b>Resources</b>
7. Reduce barriers to care and assure use of personal and population-based oral health services	❖ CHCs are uniquely positioned to implement school-based sealant programs. ❖ Health center dental programs would benefit from technical assistance/training activities that are coordinated centrally.	Scope of CHC SOHPs can look to health centers to pilot school-based sealant or care programs and other community-based prevention interventions. ➤ SOHPs can serve as a central contact point for health centers to arrange technical assistance and training and refer health centers to experts and resources. ➤ SOHPs and CHC can collaborate with dental schools and others to initiate teledentistry programs.	<ul style="list-style-type: none"> <li>• Lists and maps of school-based programs (sealants, fluoride varnish, etc.), school-based dental clinics, and mobile van programs in the state.</li> <li>• NNOHA’s current study on school-based dental programs (data collection in progress).</li> </ul>
8. Assure an adequate and competent public and private oral health workforce.	❖ Assuring the recruitment and retention of dental professionals with both the interest and training to work at community health center dental programs is frequently challenging.	➤ PCAs and SOHPs in several states could create systems and programs to place dental students and residents at CHCs. ➤ SOHPs and PCAs could collaborate to establish training centers for mid-level dental personnel and community oral health coordinators. ➤ SOHPs can collaborate with PCAs to create an oral health workforce	<ul style="list-style-type: none"> <li>• SOHP Organizational Chart</li> <li>• PCA Organizational Chart</li> <li>• Information on programs and incentives to attract and retain providers (loan repayment, etc.)</li> <li>• In some states SOHPs and PCAs have already collaborated to develop a potential loan repayment program.</li> </ul>

<b>State Oral Health Programs:</b>  <b>10 Essential Public Health Services</b>	<b>Primary Oral Health Care:</b> ❖ <b>Community Health Center Dental Operations</b> ❖ <b>PCA Education &amp; Advocacy, and Technical Assistance &amp; Training Activities</b>	<b>Programmatic Overlap:</b>  <b>Examples of Potential Collaborative Activities</b>	<b>Resources</b>
		<p>development plan that implements current and new workforce models.</p>	<ul style="list-style-type: none"> <li>• Projects funded by HRSA’s Grants to States for Oral Health Workforce Activities</li> <li>• U.S. Oral Health Workforce in the Coming Decade. IOM Workshop Summary  <a href="http://www.iom.edu/Reports/2009/OralHealthWorkforce.aspx">http://www.iom.edu/Reports/2009/OralHealthWorkforce.aspx</a></li> <li>• Recruitment and Retention of a Quality Health Workforce in Rural Areas: Oral Health  <a href="http://www.ruralhealthweb.org/go/left/policy-and-advocacy/policy-documents-and-statements/official-nrha-policy-positions">http://www.ruralhealthweb.org/go/left/policy-and-advocacy/policy-documents-and-statements/official-nrha-policy-positions</a></li> <li>• Enhancing the Dental Public Health Workforce and Infrastructure: Workshop Proceedings  <a href="http://www.astdd.org/enhancing-the-dental-public-health-">http://www.astdd.org/enhancing-the-dental-public-health-</a></li> </ul>

<b>State Oral Health Programs:</b>  <b>10 Essential Public Health Services</b>	<b>Primary Oral Health Care:</b> ❖ <b>Community Health Center Dental Operations</b> ❖ <b>PCA Education &amp; Advocacy, and Technical Assistance &amp; Training Activities</b>	<b>Programmatic Overlap:</b>  <b>Examples of Potential Collaborative Activities</b>	<b>Resources</b>
			<a href="#">workforce-and-infrastructure/</a>
9. Evaluate the effectiveness, accessibility and quality of personal and population-based oral health promotion activities and oral health services.	❖ Health centers compile practice management information and annual Uniform Data System (UDS) reports.	➤ PCAs could aggregate or summarize practice management and UDS information on a statewide basis to inform discussions with the SOHPs about existing strengths and opportunities to improve the quality of community-based services provided by health centers. ➤ SOHPs could validate and share the results of the evaluations with the PCA and health centers to consider interventions to improve community-based oral health services for the underserved.	<ul style="list-style-type: none"> <li>• <a href="#">W.K. Kellogg Foundation. Community-Based Oral Health Programs: A Need and Plan for Evaluation</a></li> <li>• <a href="#">Seal America. The Prevention Invention, Step 10, Program Evaluation</a></li> <li>• <a href="#">Safety Net Dental Clinic Manual. Chapter 5.</a></li> <li>• <a href="#">CDC. Introduction to Program Evaluation for Public Health Programs: A Self-Study Guide</a></li> </ul>
10. Conduct and review research for new insights and innovative	❖ Health center dental providers participate in the National Dental Practice-based Research Network. ❖ Health Center quality	➤ SOHPs can share new research from journal articles, scientific meetings, etc with PCAs and health centers for application in community settings. ➤ PCAs and CHCs can share new research emerging from the NDPBRN and from	<ul style="list-style-type: none"> <li>• National Dental Practice-based Research Network  <a href="http://nationaldentalpbrn.org/">http://nationaldentalpbrn.org/</a></li> <li>• Operations Manual Quality Chapter:  <a href="http://www.nnoha.org/practice">http://www.nnoha.org/practice</a></li> </ul>

<b>State Oral Health Programs: 10 Essential Public Health Services</b>	<b>Primary Oral Health Care:</b> ❖ Community Health Center Dental Operations ❖ PCA Education & Advocacy, and Technical Assistance & Training Activities	<b>Programmatic Overlap: Examples of Potential Collaborative Activities</b>	<b>Resources</b>
solutions to oral health problems.	improvement initiatives.	rural health conferences	<a href="#">management/manual.html</a> <ul style="list-style-type: none"> <li>• <a href="#">Cochrane Oral Health Group Reviews</a></li> </ul>

## Appendix 9 – Work Plan

### Objective 1.

Activities	Responsible Parties	Timelines	Eval Methods	Indicators of Success	
				Process	Outcomes

### Objective 2.

Activities	Responsible Parties	Timelines	Eval Methods	Indicators of Success	
				Process	Outcomes

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**Objective 3.**

<b>Activities</b>	<b>Responsible Parties</b>	<b>Timelines</b>	<b>Eval Methods</b>	<b>Indicators of Success</b>	
				<b>Process</b>	<b>Outcomes</b>

**Objective 4.**

<b>Activities</b>	<b>Responsible Parties</b>	<b>Timelines</b>	<b>Eval Methods</b>	<b>Indicators of Success</b>	
				<b>Process</b>	<b>Outcomes</b>

## Appendix 10 – Evaluation Survey

### A PROJECT TO FACILITATE PARTNERSHIPS AND COLLABORATION BETWEEN STATE ORAL HEALTH PROGRAMS AND PRIMARY CARE ASSOCIATIONS PROJECT EVALUATION

Dear Project Participant: the following evaluation questions are designed to obtain your feedback about the Project based on your experiences and insights. The Project Design Team will use your feedback to assess the Project's success in relation to its intended results, and based on that assessment modify the Project's design and work with organizations interested in providing financial support for future iterations of the Project.

#### Instructions:

- The PCA team member and State Oral Health Program team member that participated in the Project should each complete an evaluation. Each evaluation will be kept confidential.
- Please email your evaluations to \_\_\_\_\_.
- The term “counterpart” refers to the organization with which you partnered. If you are the PCA, your counterpart was the State Oral Health Program.
- Please respond to the following questions in terms of both the rating scale and provide narrative comments to qualify your ratings.

1. The initial information I received about the Project (e.g., the project announcement, the application package, and the “Launch” webcast on August 12, 2013)

a. Enabled me to understand the purpose of the Project.

**Strongly Agree      Agree      Neither Agree nor Disagree      Disagree      Strongly Disagree**

b. Clearly identified what my organization was expected to contribute.

**Strongly Agree      Agree      Neither Agree nor Disagree      Disagree      Strongly Disagree**

c. Defined what constituted a joint Project Plan.

**Strongly Agree      Agree      Neither Agree nor Disagree      Disagree      Strongly Disagree**

#### **Comments, and suggestions for improving the Project's design:**

2. The initial meeting with my counterpart, during which we completed self-assessments, the Communities of Practice tool, and identified 2-3 competencies that we wanted to improve together, fulfilled the intended purpose of the meeting which was to better understand each other's programs.

**Strongly Agree      Agree      Neither Agree nor Disagree      Disagree      Strongly Disagree**

3. The meeting(s) to review the “Collaboration Matrix,” fulfilled the intended purpose of the meeting, which was to review programmatic materials to identify activities on which my program and my counterpart’s could collaborate for purposes of developing a joint Project Plan.

**Strongly Agree    Agree    Neither Agree nor Disagree    Disagree    Strongly Disagree**

4. The final meeting accomplished its intended purpose, which was to initiate and finalize our joint Project Plan.

**Strongly Agree    Agree    Neither Agree nor Disagree    Disagree    Strongly Disagree**

**Comments, and suggestions for improving the Project’s design:**

5. The Consultant assigned to work with me and my counterpart:

a. Clarified issues and questions that arose during the course of our meetings.

**Strongly Agree    Agree    Neither Agree nor Disagree    Disagree    Strongly Disagree**

b. Functioned as a sounding board to explore ideas and potential projects.

**Strongly Agree    Agree    Neither Agree nor Disagree    Disagree    Strongly Disagree**

c. Generally contributed to constructive interactions that enabled me and my counterpart to work together collaboratively.

**Strongly Agree    Agree    Neither Agree nor Disagree    Disagree    Strongly Disagree**

**Comments, and suggestions for improving the Project’s design:**

6. The joint Project Plan that my organization developed with my counterpart:

a. Contains important activities that maximize our collaborative efforts.

**Strongly Agree    Agree    Neither Agree nor Disagree    Disagree    Strongly Disagree**

b. Is feasible given existing levels of staff and resources.

**Strongly Agree    Agree    Neither Agree nor Disagree    Disagree    Strongly Disagree**

c. Will contribute to strengthening the oral health safety-net in our State.

**Strongly Agree    Agree    Neither Agree nor Disagree    Disagree    Strongly Disagree**

7. Overall, the Project enabled my organization to identify complementary activities that will form the basis of an ongoing, substantive working relationship.

**Strongly Agree    Agree    Neither Agree nor Disagree    Disagree    Strongly Disagree**

**Comments, and suggestions for improving the Project’s design:**

8. Which 3 of the following [domains](#) do you see has having improved the most as a result of implementing this project:
- Domain 1. Build Support
  - Domain 2. Plan and Evaluate Programs
  - Domain 3. Influence Policies and Systems Change
  - Domain 4. Manage People
  - Domain 5. Manage Programs and Resources
  - Domain 6. Use Public Health Science
  - Domain 7. Lead Strategically
  - None of the domains
  - Too soon to tell
9. Please describe any barriers encountered during the project.
10. Please describe unintended or unexpected outcomes, both positive and negative, that resulted as a result of the project.
11. How do you plan to disseminate information about the project to constituencies within the state? (please check all that apply)
- PCA Annual conference
  - SOHP annual conference
  - State Oral Health Program newsletter
  - PCA newsletter
  - Email to partners
  - Presentation at coalition meeting
  - Other (please specify)
12. (For PCAs only) Did attending the National Oral Health Conference impact your understanding or interest in oral health?
- Yes
  - No
13. What technical assistance could have been helpful from the partner organizations?
14. Please provide any additional comments or suggestions about the project you wish to share. These might be suggestions for improving the Project's design or your overall experience relative to the project.