



Dental Public Health Project/Activity Descriptive Report Form

Please provide a detailed description of your **successful dental public health project/activity** by fully completing this form. Expand the submission form as needed but within any limitations noted. Please return completed form to: lcofano@astdd.org

NOTE: Please use Arial 10 pt. font.

CONTACT PERSON PREPARING THE SUBMISSION AND TO ANSWER QUESTIONS

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PROVIDE CONTACT INFORMATION FOR ONE ADDITIONAL PERSON WHO COULD ANSWER QUESTIONS REGARDING THIS PROGRAM

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SECTION I: ACTIVITY OVERVIEW

Title of the dental public health activity:

Iowa Lifelong Smiles Coalition

Public Health Functions* and the 10 Essential Public Health Services to Promote Oral Health:

Check one or more categories related to the activity.

“X”	Assessment
	1. Assess oral health status and implement an oral health surveillance system.
	2. Analyze determinants of oral health and respond to health hazards in the community
x	3. Assess public perceptions about oral health issues and educate/empower them to achieve and maintain optimal oral health
	Policy Development
x	4. Mobilize community partners to leverage resources and advocate for/act on oral health issues
	5. Develop and implement policies and systematic plans that support state and community oral health efforts
	Assurance
	6. Review, educate about and enforce laws and regulations that promote oral health and ensure safe oral health practices
x	7. Reduce barriers to care and assure utilization of personal and population-based oral health services
	8. Assure an adequate and competent public and private oral health workforce
	9. Evaluate effectiveness, accessibility and quality of personal and population-based oral health promotion activities and oral health services
	10. Conduct and review research for new insights and innovative solutions to oral health problems

[*ASTDD Guidelines for State and Territorial Oral Health Programs that includes 10 Essential Public Health Services to Promote Oral Health](#)

Healthy People 2030 Objectives: Please list HP 2030 objectives related to the activity described in this submission. If there are any state-level objectives the activity addresses, please include those as well.

Provide 3-5 Key Words (e.g. fluoride, sealants, access to care, coalitions, policy, Medicaid, etc.) These will assist those looking for information on this topic:

Older adults, seniors, coalitions, partners, access to care: adults and older adults services, access to care: individuals with special health care needs, prevention: adults and older adults oral health, prevention: individual with special health care needs

Executive Summary: Complete after Section II: Detailed Activity Description. Please limit to 300 words in one or two paragraphs.

Provide a brief description of the dental public health activity. Include information on: (1) what is being done; (2) who is doing it and why; (3) associated costs; (4) outcomes achieved (5) lessons learned, both positive and negative.

The Lifelong Smiles Coalition was formed to address access to oral health care for older adults in Iowa through community learning and engagement to form a collective action plan. The need for this effort is great:

- As of July 2019, there were 552,125 adults over the age of 65 living in Iowa, according to the United States Census Bureau.
- One in three adults over the age of 65 in Iowa have untreated tooth decay.
- In 2015, the percentage of people in the United States with no dental insurance was 29% overall and 62% for older adults
- In 2019, only 2411 out of the 8281 Iowans on the Medicaid Elderly Waiver program received a dental service.
- Only twenty percent of long-term care facilities currently offer oral exams and screenings, but poor oral health can impact the health and well-being of nursing home and homebound elderly.
- Left untreated, diseases of the mouth can lead to systemic health problems, especially in those with compromised immune systems.

The coalition was formed following meetings sponsored by the Delta Dental of Iowa Foundation to begin discussions about the issue. The Delta Dental of Iowa Foundation has committed to funding a consultant to facilitate Coalition activities and cover meeting costs.

The Coalition works through an actionable knowledge process with the end goal of building capacity and large-scale social impact. Its mission is to increase access to oral health care for older frail Iowa adults. Through the collective action plan, the Coalition addresses barriers to oral health care with four strategic subcommittees: 1) Education and Training, 2) Coordination and Outreach, 3) Program Policy and Outreach, and 4) Sustainability.

The focus of the Education & Training Committee is to develop and promote awareness, education, and training opportunities for oral health professionals, the direct care workforce, and those providing care and support for older adults. Oral health equity is integrated into all Coalition activities. An Oral Health Equity primer video was recorded and is available [here](#). The focus of the Coordination and Outreach Committee is to provide outreach to the public and stakeholders about the importance of optimal oral health and support strategies that coordinate access to care. The focus of the Program Policy and Reimbursement Committee is to stay actively engaged in policy activities related to oral health care and aging and explore innovative payment models. The focus of the Sustainability Committee is to implement strategies for sustainability for membership, stakeholders, leadership, and coalition retention and growth.

The steering committee is comprised of each of the committee chairs and an elected Chair and Co-chair. Coalition membership is broadly focused with leaders and advocates that serve the aging population, oral health care organizations, and public health organizations. Individual oral health professionals are actively engaged in the coalition. Partners include: Delta Dental of Iowa- Dental Wellness Plan, Delta Dental of Iowa Foundation, Dental Connections, Inc, DMACC, Easter Seals Iowa, EMBARC, EveryStep, Home Instead, Iowa Association of Area Agencies on Aging, Iowa CareGivers, Iowa Chapter Alzheimer's Association, Iowa Dental Association, Iowa Dental Hygienists' Association, Iowa Department on Aging, Iowa Department of Public Health, Iowa Health Care Association, Iowa Healthcare Collaborative, Iowa Primary Care Association, Iowa Public Health Association, Iowa Medicaid Enterprise, LeadingAge Iowa, MCNA- Dental Wellness Plan, Mid Iowa Community Action, Inc., Office of State Long-Term Care Ombudsman, Principal Financial Group, The University of Iowa College of Dentistry and Dental Clinics, The University of Iowa College of Nursing, and Telligen.

The Coalition has a consultant that facilitates and coordinates activities and meetings, while ensuring progress and effective communication. Lifelong Smiles Coalition has a wide variety of entities participating, which provides a comprehensive approach to collective action planning. Because it has been less than a year since the coalition was formed and endorsed projects funded, lessons learned

from the field are still being gathered. The many different Coalition partners and guidance from the subject matter experts will guide successful implementation.

SECTION II: DETAILED ACTIVITY DESCRIPTION

Provide detailed narrative about the dental public health activity using the headings provided and answering the questions. Include specifics to help readers understand what you are doing and how it's being done. References and links to information may be included.

****Complete using Arial 10 pt.**

Rationale and History of the Activity:

1. What were the key issues that led to the initiation of this activity?

The Delta Dental of Iowa Foundation sponsored three actionable knowledge sessions in an effort to reach their strategic goal of increasing access to oral health care for homebound and nursing home residents. They held an Educate Session in November 2012 in which 180 attendees had the opportunity to hear experts discuss best practices that have been implemented in Iowa and across the country. A consultant was retained in the spring of 2013 to reach out to stakeholders and provide technical assistance, meeting facilitation, and organizational capacity. The Motivate Session was held in July 2013. Eighteen attendees from ten agencies/organizations began planning on how to reach that goal. They developed three strategic initiative committees: Education and Training, Older Adult Oral Health Care Coordination, and Program Policy and Reimbursement. During the Activate session held in November 2013, action plans were developed for each of the three strategic committees. The mission of the coalition is to increase access to oral health care for older frail Iowa adults. Coalition Structure Guidelines were adopted in February of 2014 and Coalition leaders were elected July 2014. The Delta Dental of Iowa Foundation covered meeting and facilitation costs associated with Coalition activities.

In the fall of 2015, the Delta Dental of Iowa Foundation provided nearly \$600,000 for three separate two-year grants to fund the following:

- The Iowa Department of Public Health's [I-Smile™ Silver](#) project is a community-based system of care to improve the oral health of Iowans age 60 and older. The department has contracts with Lee, Scott, and Webster County Health Departments to operate I-Smile Silver locally. The three health departments each have a dental hygienist serving as the local I-Smile Silver Coordinator. I-Smile Silver Coordinators work with community partners to address oral health care for adult and older Iowans. Medical and dental care providers, home health agencies, nursing facilities, community organizations, and businesses are a few of the partners working with the I-Smile Silver coordinators to improve access to oral health care for adult and older Iowans.
- [Iowa CareGivers](#) provides oral health education for direct care professionals through [Mouth Care Matters](#), helping them better address the oral health care needs of homebound and nursing home residents. In February 2021, the Office of Education and Training and Mouth Care Matters project conducted an evaluation of the Mouth Care matters program from an outcome standpoint and evaluated if the oral health of the people they are taking care of is changing. The publication can be found [here](#). This project was a cluster randomized controlled trial with the NFs as the cluster unit. Three local NFs of similar size within a 20-minute drive of Iowa City, IA agreed to participate in this project. Nursing facility A (NF-A), nursing facility B (NF-B), and nursing facility C (NF-C) contain 65, 90, and 57 beds respectively. The NFs were randomly assigned by picking names from a bowl to three

different interventions: (1) NF-A (all CNAs were offered MCM training), (2) NF-B (3 CNAs were offered the MCM training) to simulate an oral health care champion model,³² and (3) NF-C (control, no CNAs were trained in MCM). The Director of Nursing for NF-B selected which CNAs would undergo the MCM training. Oral exams were then completed at baseline (prior to CNAs participation in the MCM training), then 3 and 6 months after baseline. Examiners were not blinded to the facility's designated interventions. Resident participation in the study was concealed from CNAs. Study results showed that increasing the number of CNAs trained in the Mouth Care Matters educational program positively impacted NF residents' oral hygiene.

- The [University of Iowa College of Dentistry and Dental Clinics](#) established an Office of Education and Training to coordinate, develop, and evaluate continuing dental education programs for dentists, hygienists, and assistants, specifically targeted at geriatric oral health care (example [here](#))

Coalition members include a variety of partners, with only two organizations solely focused on oral health care: Delta Dental of Iowa- Dental Wellness Plan, Delta Dental of Iowa Foundation, Dental Connections, Inc, DMACC, Easter Seals Iowa, EMBARC, EveryStep, Home Instead, Iowa Association of Area Agencies on Aging, Iowa CareGivers, Iowa Chapter Alzheimer's Association, Iowa Dental Association, Iowa Dental Hygienists' Association, Iowa Department on Aging, Iowa Department of Public Health, Iowa Health Care Association, Iowa Healthcare Collaborative, Iowa Primary Care Association, Iowa Public Health Association, Iowa Medicaid Enterprise, LeadingAge Iowa, MCNA- Dental Wellness Plan, Mid Iowa Community Action, Inc., Office of State Long-Term Care Ombudsman, Principal Financial Group, The University of Iowa College of Dentistry and Dental Clinics, The University of Iowa College of Nursing, and Telligen.

2. What rationale/evidence (may be anecdotal) did you use to support the implementation of this activity?

The need in Iowa for this effort is great:

- As of July 2019, 552,125 adults over the age of 65 living in Iowa, according to the United States Census Bureau.
- One in three adults over the age of 65 in Iowa have untreated tooth decay.
- In 2015, the percentage of people in the United States with no dental insurance was 29% overall and 62% for older adults.
- Only twenty percent of long-term care facilities currently offer oral exams and screenings, but poor oral health can impact the health and well-being of nursing home and homebound elderly.
- Left untreated, diseases of the mouth can lead to systemic health problems, especially in those with compromised immune systems.

3. What month and year did the activity begin and what milestones have occurred along the way? (May include a timeline.)

Iowa ranks high among states with an aging population. The extent to which access to oral healthcare is limited, the systemic barriers that impact access, and the reasons oral health should be a higher priority with this population are less known, especially outside the traditional oral health community. The Delta Dental of Iowa Foundation board members knew that using data to tell the story lays the groundwork to build support for a broad-based and long-term effort.

To accomplish this, the board facilitated a [Collective Impact](#) process.

2012-2013

- From 2012 to 2013, an Educate, Motivate, and Activate methodology was utilized to create the context around which the Lifelong Smiles Coalition formed. This process sought to ensure a group of engaged stakeholders understood the issues and were armed with strategies to address them.
- To formulate the Coalition structure, an additional, ad hoc committee was formed to consider governance needs, membership, and policies. This later became the Steering Committee, which remains in place to ensure the Coalition can quickly react and respond to issues and opportunities as needed.
- Once the structure was established, the Delta Dental of Iowa Foundation staff purposely began to back away from the leadership role so that Coalition leadership and members were empowered to truly lead the Coalition. The Foundation's role evolved into a backbone organization to support the coalition's work.

2014

- The Lifelong Smiles Coalition held their first meeting early in 2014. Establishing a governance structure was key to ensuring the Coalition was empowered to act independently from the Delta Dental of Iowa Foundation. Foundation staff remained involved in a supportive role until a structure was firmly in place. This allowed Coalition leadership to move forward with its work.
- Guidelines were established that addressed Coalition membership, rights, and voting processes. A Steering Committee was formed to ensure the Coalition was nimble and could act quickly when necessary.
- A series of committees were established to ensure key issues were closely addressed.
- Nomination processes and meeting frequencies were established.
- The Coalition Consultant was in place to provide coordination, ensure communications run smoothly, and provide staff support to the governance and committee structure.
- Coalition membership has grown significantly over the last six years, from 12 organizational members in 2015 to 27 members in 2020. Notably, much of the growth has been in organizations not traditionally involved in oral health issues. This speaks to the success of the Lifelong Smiles Coalition in driving and expanding the oral health conversation and resulting in increased awareness and attention to the oral health needs of aging Iowans.

2015

- The Coalition developed a website: www.lifelongsmilescoalition.com
- The Coalition began conducting outreach at conferences and trade shows.
- Legislative Education: The first Lifelong Smiles Coalition Legislative Breakfast was held in January. The purpose was to introduce legislators to the Coalition.
- Medicaid Engagement Project: The Coalition met in a special meeting in July to develop a document highlighting the main requirements needed in any future Medicaid program benefit changes in our target population. Coalition leadership met with the Medicaid director in September.

2017

- [Coalition Facebook page](#) went live April 1.
- Iowa's State Innovation Model Project: Lifelong Smiles Coalition was one of the main stakeholders assisting in this process. Because of this involvement, oral health questions were added to the [Assess my Health](#) assessment for the Dental Wellness Plans in Iowa.

2018

- Medicaid Dental Benefits Document created and distributed.
- Participated in the Demand Medicare Benefits campaign.
- [Medicare Retirees Dental Benefits educational handouts](#) created and distributed.

2019

- June, Coalition members celebrated the accomplishments of the last five years.

- Delta Dental of Iowa Foundation donated funds for a 5-year professorship in geriatric and special needs at the University of Iowa. Dr. Cowen was named the first recipient in September 2019.
- Mouth Care Matters was awarded a Retirement Research Foundation grant to integrate effective and consistent oral health care practices and policies. An employer tool kit was created and classes were provided for direct care workers to increase awareness of oral health care among all staff, including dieticians, social workers, and therapists. Delta Dental of Iowa Foundation funded \$20,000 towards Phase 2 of the Mouth Care Matters project which included a focus on employers and nursing staff.

2020:

- January: The committees reviewed all workplan tasks using a relevancy and impact process. Tasks were prioritized and some thoughtfully retired.
- February: Coalition participated in a Movement Evaluation Session resulting in a report that can be found [here](#).
- Throughout the Year: Coalition members identified issues regarding public health supervision of hygienists and settings related to the statute change. Coalition members worked with the Iowa Dental Board to identify solutions to help underserved elderly access preventive dental services.
- Summer 2020: sustainability committee members piloted an [oral health survey](#), distributed in the fall of 2020, which sought to learn about oral health attitudes and behavior from the general public in order to inform coalition activities and policy decisions. Survey analysis occurred in early 2021 and data was used by the Coalition strategic committees to inform workgroup action plan tasks.
- September: "[You're Worth It](#)" [social media](#) campaign in conjunction with Healthy Aging Month. Our partners shared selfies showing they were "Worth a Lifelong Smile." Videos highlighted [Senator Chuck Grassley](#), [Emily Mendez](#), [Dr. Mike Metts](#), and [Dr. Bob Russell](#).

The sections below follow a logic model format. For more information on logic models go to: [W.K. Kellogg Foundation: Logic Model Development Guide](#)

INPUTS	PROGRAM ACTIVITIES	OUTPUTS	OUTCOMES
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1. What resources were needed to carry out the activity? (e.g., staffing, volunteers, funding, partnerships, collaborations with various organizations, etc.)

Technical consultant support was provided through Delta Dental of Iowa Foundation, which also covered costs associated with in person meetings and trainings. Such collaboration is key to coalition success. There are 28 official voting organizations, with only two being dental organizations. Four new organizations have joined the Coalition since 2019.

INPUTS	PROGRAM ACTIVITIES	OUTPUTS	OUTCOMES
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2. Please provide a detailed description the key aspects of the activity, including the following aspects: administration, operations, and services.

The Coalition addresses barriers to oral health care through the four strategic subcommittees: 1) Education and Training, 2) Coordination and Outreach, 3) Program Policy and Outreach, and 4) Sustainability. Each committee has volunteer leadership, which the Coalition Consultant supports the logistics of each subcommittee.

The Education & Training Committee develops and promotes awareness, education, and training

opportunities for oral health professionals, the direct care workforce, and those providing care and support for older adults. The Office of Education and Training at the University of Iowa College of Dentistry and the Mouth Care Matters grant projects are maintained under this committee, as well as managing Lifelong Smiles presentations and collecting stakeholder stories promotion and evaluation use. Oral health equity is a key component of the coalition, with the specific exploratory task in this committee. An oral health equity primer [video](#) has been created.

The Coordination and Outreach Committee provides outreach to the public and stakeholders about the importance of optimal oral health and support strategies that coordinate access to care. This Committee maintains the website and Facebook page. A variety of social media campaigns have also been developed.

The Program Policy and Reimbursement Committee engages in policy activities related to oral health care and aging. It explores innovative payment models including development of dental product informational brochures for nursing facilities, residents and caregivers (already completed) and hosting legislative educational sessions (two completed). Iowa has privatized the Medicaid program, although dental was carved out of this transition. This committee developed a comprehensive list of items that need to be addressed in any Medicaid dental program.

The Sustainability Committee implements strategies for sustainability for membership, stakeholders, leadership, and coalition retention and growth.

INPUTS	PROGRAM ACTIVITIES	OUTPUTS	OUTCOMES
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3. What outputs or direct products resulted from program activities? (e.g., number of clients served, number of services units delivered, products developed, accomplishments, etc.)

Basic infrastructure has been created in our state by the Coalition’s efforts through the increased educational opportunities for oral health professionals and for those who serve homebound and nursing home residents.

Other outcomes include:

- Creation of [primer video](#) on oral health equity featuring Coalition member Dr. Jessica Williams, DMD, FACD.
- [Educational Handouts](#).
- [Social Media campaigns](#) were developed, including National Healthy Aging Month, #BubbleChallenge, and #HealthyAging
- Emergency Department Discharge Plans were created for referral to I-Smile™ Silver following dental-related visits.
- Referral systems were established with dentists and other healthcare providers in the I-Smile Silver counties. A partnership was established with the Iowa Healthcare Collaborative to incorporate oral assessment, referral, and care coordination into the Statewide Diabetes Strategic Plan.
- [Older Iowans Struggle to Access Dental Care](#) document.
- [Is Iowa ready to meet the oral health needs of the Silver Tsunami?](#) document.
- [Don't Retire your Dental Care](#) document.

INPUTS	PROGRAM ACTIVITIES	OUTPUTS	OUTCOMES
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4. What outcomes did the program achieve? (e.g., health statuses, knowledge, behavior, care delivery system, impact on target population, etc.) Please include the following aspects:
 - a. How outcomes are measured

- b. How often they are/were measured
- c. Data sources used
- d. Whether intended to be short-term (attainable within 1-3 years), intermediate (achievable within 4-6 years), or long-term (impact achieved in 7-10 years)

The Office of Education and Training has presented on geriatric/oral health and the Lifelong Smiles Coalition numerous times in the last few years.

In February 2021, the Office of Education and Training and Mouth Care Matters project conducted an evaluation of the Mouth Care matters program from an outcome standpoint and evaluated if the oral health of the people they are taking care of is changing. The publication can be found [here](#).

Budgetary Information:

NOTE: Charts and tables may be used to provide clarity.

1. What is the annual budget for this activity?

For details contact Elizabeth Faber, Lifelong Smiles Coalition Consultant at: elizabethfaber@gmail.com

2. What are the costs associated with the activity? (Including staffing, materials, equipment, etc.)

The budget for the Coalition includes costs associated with the consultant time, meeting room fees, promotional materials, copying, and website maintenance.

3. How is the activity funded?

Funding for the Coalition is being provided at this time by the Delta Dental of Iowa Foundation.

4. What is the plan for sustainability?

The Coalition has a Sustainability Committee, which is charged with implementing strategies for sustainability for membership, stakeholders, leadership, and coalition retention and growth. At this point, Delta Dental of Iowa Foundation provides funding for the coalition so additional dollars have not be sought. Sustainability tasks are focused on ensuring members are engaged. This includes educational presentations at coalition and/or committee meetings, focused meetings following an action plan, follow-up, and also recruitment of appropriate members. Ensuring leadership succession is also key.

Lessons Learned and/or Plans for Addressing Challenges:

1. What important lessons were learned that would be useful for others looking to implement a similar activity? Was there anything you would do differently?

Lessons learned in coalition development include the development of an action plan, involving a variety of stakeholders, and having organizations committed to financially supporting coalition efforts. Each committee also reviews all action plan tasks annually to ensure they are relevant and impactful. Before taking on new tasks, committee members analyze if those tasks fit within the scope of the committee, if there are enough resources/passion/time/energy/appropriate people to work on it, and if the task will be both relevant and impactful. When there has been turnover in leadership and committee members, it has been helpful to have these processes in place. Coalition work needs the support of a paid staff to keep work moving forward.

2. What challenges did the activity encounter and how were those addressed?

Turnover of volunteer leaders has presented challenges through the years. However, by having the assistance of the same consultant, these challenges did not have a huge impact. Other challenges included lack of time by coalition members. The pandemic also created a challenge, however, virtual meetings continued along with progress on action plan tasks.

Available Information Resources:

Share any models, tools, and/or guidelines developed by the program specifically for this activity that may be useful to others seeking additional information. Hyperlink resources if possible.

Information about the Mouth Care Matters Program can be found at the Iowa Caregiver’s website: <http://www.iowacaregivers.org/>

Information on the Lifelong Smiles Coalition can be found at www.lifelongsmilescoalition.org

Social media: <https://www.facebook.com/lifelongsmilescoalition>

TO BE COMPLETED BY ASTDD	
Descriptive Report Number:	18009
Associated BPAR:	Oral Health of Children, Adolescents and Adults with Special Health Care Needs; Oral Health in the Older Adult Population (Age 65 and older)
Submitted by:	Iowa Lifelong Smiles Coalition
Submission filename:	DES18009IALifelongsmiles-2021
Submission date:	March 2016
Last reviewed:	April 2021
Last updated:	April 2021