



Dental Public Health Activities & Practices

Practice Number: 54003
Submitted By: Oral Health Program, Washington State Department of Health and Washington State Oral Health Coalition
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SECTION I: PRACTICE OVERVIEW		
Name of the Practice: Washington State Oral Health Coalition		
Public Health Functions: Policy Development – Collaboration & Partnership for Planning and Integration Assurance – Building Linkages & Partnership for Interventions		
HP 2010 Objectives: 21-1 Reduce dental caries experience in children. 21-2 Reduce untreated dental decay in children and adults. 21-10 Increase use of oral health system. 21-12 Increase preventive dental services for low-income children and adolescents.		
State: Washington	Region: Northwest Region X	Key Words: Oral health coalition, collaborative planning, advocacy, partnerships
Abstract: Washington State Oral Health Coalition (WSOHC) is a broad-based group of organizations and individuals whose mission is to promote optimal oral health for all Washington State residents. The Coalition consists of more than 40 organizations representing public and private dental and health professionals, local, state and federal health agencies, social services, insurers, and education. The Coalition is a collaborative for improving oral health education and access to oral health care. WSOHC meets monthly and each year meetings are held in at least four regions of the state. Teleconferencing is available at each meeting to enable expanded member involvement. WSOHC sponsors an annual conference for oral health advocates from around the state to share best practices in oral health at the local and state levels. Since the Coalition's inception in 1993, it has focused on educating decision makers at the legislative and state agency levels about the importance of oral health and strategies to decrease dental disease. The Coalition along with other supporters successfully advocated for increased Medicaid funding, resulting in \$42 million to increase dental benefits for children in 1995. Through the first Community Integrated Services Systems (CISS) grant on oral health, WSOHC in partnership with the state Department of Health developed tools and support systems for local communities including an email listserv to link oral health advocates across Washington and provide updates on programs and research locally and across the nation. The Coalition developed a manual called <i>Community Roots for Oral Health: Guidelines for Coalition Building</i> . In 2000, the State Board of Health added oral health components to the Recommended Children's Preventive Services as a result of the Coalition's and other advocates' successful promotion.		
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SECTION II: PRACTICE DESCRIPTION

History of the Practice:

The Washington State Oral Health Coalition (WSOHC) emerged from work stimulated by the Washington State Department of Health (WA-DOH), Maternal and Child Health Oral Health Program (MCH-OH) in the mid-1980's. By 1988 MCH-OH had established two working panels, policy and technical. Both panels reported to the DOH Assistant Secretary of Health. The policy group aimed to create a three to five year plan of action for implementing an effective and accessible dental public health system. The technical panel aimed to identify strategies for primary prevention of dental disease to ensure preventive and restorative oral health services for children from low-income families or who had special needs. In 1989 MCH-OH convened a public health advisory committee, the *Dental Braintrust*. "*The Braintrust*" was comprised of individuals from public and private sectors whose education, training, and experience in academia, research, management, and service delivery recommended them as experts" (MCH-OH Dental Braintrust Report 1991). It was an outcome of this work that stimulated the creation of the Washington State Oral Health Coalition in 1993 by volunteers from public health, Medicaid, dental and dental hygiene associations, children's advocates, insurers, community clinics and other social service groups.

By 1994, WSOHC submitted a white paper to the Washington Legislature. This was followed by a consensus conference on expanding children's dental services. By 1995 this work had resulted in reinstatement of a UW Pediatric Dentistry Graduate Program and increased Medicaid funding (\$42 million) to include not only reimbursement for services, but funds to develop small projects with local health organizations as well as funds for a pilot demonstration program in Eastern Washington. Further, the sealant work group of the Prevention Task Force had completed and distributed guidelines about how to organize and administer school-based dental sealant programs.

Then, in 1996, WSOHC launched the first of its Community Roots for Oral Health Conferences with funding from a federal grant and in collaboration with Children's Alliance and the Western Washington Area Rural Health Center. It is at these annual conferences that businesses, consumers, state and local agencies, and providers meet to share best practices in oral health. Since then, local oral health coalitions have formed across the state and conferences, partnership development and advocacy has continued to improve oral health. Current Coalition goals focus on continuing to promote oral health, expanding access to care, building capacity of providers and promoting prevention through innovative partnerships.

Justification of the Practice:

While there have been advances in oral health in Washington, dental diseases continue to be a significant problem and affect individual's overall health, children's development and performance in schools, and later ability to get employment.

- Approximately 50% of the population lives in communities without fluoride-protected water.
- Over half of Washington second-graders have experienced dental decay.
- One in seven low income Washington children (14%) are reported by their parents to have unmet dental needs. This is almost 50% higher than the national rate, and is by far the highest among 13 surveyed states.
- Lack of dental care and coverage is greatest for low and moderate-income families, with 20% of children suffering 84% of overall tooth decay. One third of employees lack dental coverage.
- Only one fourth of children less than age 6, enrolled in medical assistance, received dental care from 1993-2000. The average caseload per Medicaid oral health provider more than doubled from 1993 to 2000.
- Parts of 23 counties have been designated federal Dental Health Professional Shortage Areas, and one half of Washington dentists are over 50 years old, so the number of dentists in the state is likely to decline rapidly -- particularly in rural areas.

Administration, Operations, Services, Personnel, Expertise and Resources of the Practice:

Washington State Oral Health Coalition is a broad-based group of organizations and individuals whose mission is to promote optimal oral health for all Washington State residents. The Coalition

consists of more than 40 organizations representing public and private dental and health professionals, local, state and federal health agencies, social services, insurers, and education. The Coalition is a collaborative for improving oral health education and access to oral health care. The coalition meets monthly in at least four regions of the state each year. Teleconferencing is available at each meeting to enable expanded member involvement.

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Other WSOHC accomplishments include the following. Sealant guidelines were developed and published for use in local and state programs in 1999 to support ongoing evaluation and quality assurance. In 2000, the State Board of Health added oral health components to the Recommended Children's Preventive Services as a result of the Coalition's and other oral health advocates' successful promotion. White papers have been developed and distributed to state and local decision makers on issues such as fluoridation and adult dental access. WSOHC is producing an oral health catalog to serve as a resource guide to oral health education and access programs and coalitions throughout the state.

Budget Estimates and Formulas of the Practice:

The Coalition is led and run by volunteers and operates on a minimal budget to support the annual conference. In 2001, WSOHC obtained 501(c)(3) status to enable the coalition to fundraise and expand activities. In-kind support is provided by Washington Dental Service Foundation to provide leadership and to support communications and member tracking. The Washington State Department of Health and other member organizations have also contributed significantly to the Coalition's operations over the years.

Lessons Learned and/or Plans for Improvement:

One of the key coalition goals is to continue to strengthen the involvement of advocates statewide. A section of each month's agenda is dedicated to community updates. This is an effective way to quickly learn about the activities in regions across the state. Teleconferencing is available at each meeting to enable expanded member involvement and meetings are held in at least four regions of the state each year.

The current areas of focus for the coalition are the following: encouraging health care providers to conduct a complete oral health assessment as part of EPSDT, generate support for a dedicated funding stream for adult dental services to support family oral health, heighten the position of oral health in Washington by establishing a Dental Director, and further coordinate oral health efforts across the state. The coalition is currently planning to hold an Oral Health Summit later in 2002.

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

Community Roots for Oral Health: Guidelines for Successful Coalitions, March 2000. Washington State Department of Health, Community and Family Health. 213 pp. This manual discusses how to build an oral health coalition. The material is presented in six steps: (1) setting the stage, (2) forming the coalition, (3) building a foundation, (4) reviewing systems and oral health strategies, (5) developing an oral health coalition plan, and (6) sustaining success. Contact: Nancy Reid by email at nancy.reid@doh.wa.gov

SECTION III: PRACTICE EVALUATION INFORMATION

Impact/Effectiveness

Does the practice demonstrate impact, applicability, and benefits to the oral health care and well-being of certain populations or communities?

Washington State Oral Health Coalition has demonstrated positive impacts on the oral health of state residents through its promotion of the importance of oral health, encouragement and support of the more than eight local oral health coalitions, and educating decision makers to support oral health-friendly policies. Specifically, the coalition's education efforts have resulted in increasing Medicaid funding by \$42 million for the children's dental program in 1995, incorporating oral health into the State Board of Health's Recommended Children's Preventive Services and maintaining the Medicaid adult dental program.

Efficiency

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

The Coalition is operated and run by volunteers. In-kind support is provided by organizations such as Washington Dental Service Foundation, the State Department of Health and other member organizations. In the future, the coalition may consider obtaining funds for staff support.

Demonstrated Sustainability

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

The Washington State Oral Health Coalition has demonstrated sustainable benefits in many ways. The coalition has become an effective network to share contacts and successes and to learn about oral health projects in the state. Sustainable benefits of the coalition's efforts also include increasing Medicaid funding for the children's dental program in 1995 and incorporating oral health into the State Board of Health's Recommended Children's Preventive Services.

Collaboration/Integration

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

Collaboration is at the heart of the Washington State Oral Health Coalition. The Coalition is a broad-based group of organizations and individuals whose mission is to promote optimal oral health for all Washington State residents. The Coalition consists of more than 40 organizations representing public and private dental and health professionals, local, state and federal health agencies, social services, insurers, and education. Coalition members include: The Children's Alliance, Children's Hospital & Medical Center, Community Health Centers of King County, Community Health Centers of Snohomish County, Group Health Northwest, International District Community Health Center, Office of the Superintendent of Public Instruction, Pierce College Dental Hygiene Clinic, Public Health-Seattle & King County, SmileSavers, Snohomish Health District, Tacoma-Pierce County Health Department, University of Washington Dental Public Health Department, US Public Health Service-Region X, Washington Assn of Community & Migrant Health Centers, Washington Dental Service, Washington Dental Service Foundation, Washington State Dental Association, Washington State Dental Hygiene Association, Washington State Department of Social & Health Services, Washington State Department of Health, Washington State Public Health Association, Yakima Neighborhood Health Services, and Yakima Valley Farm Workers Clinic.

WSOHC holds monthly meetings and sponsors an annual conference for oral health advocates from around the state. WSOHC strives to have statewide involvement by holding meetings in at least four regions of the state each year and providing teleconferencing options for those unable to attend meetings in-person.

Washington State Oral Health Coalition is a collaborator with the Watch Your Mouth campaign and works to further integrate oral health into the broader health system, e.g. EPSDT exams. The

Coalition has representation on the Health Coalition for Children & Youth operated by the Children's Alliance.

Objectives/Rationale

Does the practice address HP 2010 objectives, the Surgeon General's Report on Oral Health, and/or build basic infrastructure and capacity for state/territorial oral health programs?

Washington State Oral Health Coalition supports several HP 2010 objectives through promotion and advocacy including reducing dental caries experience in children; reducing untreated dental decay in children and adults; increasing the use of oral health systems; increasing preventive dental services for low-income children and adolescents.

Extent of Use Among States

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

Other states have formed statewide and local oral health coalitions in recent years and have made use of the *Community Roots for Oral Health: Guidelines for Successful Coalitions*.