



STATE ORAL HEALTH SURVEILLANCE PLAN TEMPLATE

INSTRUCTIONS AND RESOURCES

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Are you interested in developing or updating an oral health surveillance plan?

If yes, you may be interested in the ASTDD [Oral Health Surveillance Plan Template](#). The template is designed to help states with the cumbersome process of writing, revising or updating an oral health surveillance plan. The template is a complete surveillance plan document that, with a small amount of effort, can be modified to a customized document for your state. The template includes background information on the importance of public health surveillance, the importance of oral health surveillance, and a core set of indicators to include in a state oral health surveillance system (OHSS). It also includes an OHSS logic model.

Why should a state have a written oral health surveillance plan?

Both ASTDD and the Council of State and Territorial Epidemiologists (CSTE) recommend that all states have an OHSS and a written oral health surveillance plan. An OHSS plan helps a state (1) identify the indicators needed to monitor the oral health of its residents, (2) determine timelines for oral health data collection, and (3) develop strategies for disseminating data to key stakeholders and policy makers. The ultimate goal of a state-based OHSS is to obtain and disseminate **actionable health information to guide public health policy and programs**.

For more information on the importance of and rationale for a state-based oral health surveillance system refer to the 2013 CSTE whitepaper [State-Based Oral Health Surveillance Systems Conceptual Framework and Operational Definition](#). The whitepaper outlines the 10 items which CSTE considers essential in order for a state to be classified as having an oral health surveillance system. The 10 items are (#1) a written oral health surveillance plan updated in the last 5 years, (#2-9) data on eight core oral health indicators, and (#10) publicly available data.

How to use the oral health surveillance plan template

Step 1: Review ASTDD's State-Based OHSS Best Practice Approach Report

ASTDD's monograph [Best Practice Approach: State-Based Oral Health Surveillance Systems](#) provides detailed information on how to develop, implement and maintain an OHSS. By reviewing this document you will be able to decide if you need assistance from internal and/or external stakeholders who can contribute surveillance data, support the surveillance system, and benefit from surveillance information. If you decide that you need assistance from internal and/or external stakeholders, it might be useful to create an OHSS Advisory Committee.

Step 2: Determine which oral health indicators your state will include in its OHSS

There are a multitude of indicators that can be included in a state OHSS. You will need to determine, given staff and budget constraints, which indicators are obtainable and will meet the needs of the state. CSTE recommends that all states include a core set of eight oral health indicators but also encourages states to expand their oral health surveillance system to include a wider variety of indicators based on the needs and resources of the individual state. **The eight core oral health indicators are:**

- Oral health status data for a representative sample of third grade children (caries experience, untreated decay, and dental sealants on permanent molars)

- Permanent tooth loss data for adults (any tooth loss in 18-64 year olds, loss of 6+ teeth in 65+ year olds, and complete tooth loss in 65+ year olds)
- Data on the incidence of and mortality from cancers of the oral cavity and pharynx
- Data on the percent of Medicaid- and CHIP-enrolled children with a dental visit in the previous year
- Data on the percent of children 1-17 years with a dental visit in the previous year
- Data on the percent of adults (18+ years) and adults with diabetes having had a dental visit in the previous year
- Data on the fluoridation status of public water systems within the state (percent of population on public water systems receiving fluoridated water)
- Data on state oral health programs and the environment in which they operate, including workforce and infrastructure indicators (i.e. number of dental professionals, number of topical fluoride programs, number of dental sealant programs, and Health Professional Shortage Areas)

If states wish to add additional indicators, ASTDD recommends that the indicators be selected from the list of 36 oral health indicators approved by CSTE for inclusion in the National Oral Health Surveillance System (NOHSS). Quick reference guides to the NOHSS indicators by topic area and population group can be found in the ASTDD document [State Surveillance Data Reference Guide](#).

Step 3: Revise the surveillance plan template to meet your state's needs

Once you have decided which indicators to include in your OHSS, you can begin the process of revising the template. Items that should be changed are highlighted in yellow. For example, **Utopia** is used as a placeholder for a state's name and should be changed throughout the document. Yellow text boxes include additional comments or instructions. To remove the text boxes, click on the box and delete. Make sure to revise Table 1, Table 2 and Appendix 2 to include only those indicators that are appropriate for your state OHSS.

Step 4: Obtain appropriate approval and disseminate to key stakeholders

The approval process varies by state and you will need to decide who should review the oral health surveillance plan and whether or not it needs to be approved before being distributed to key stakeholders. Even if formal review and approval is not necessary, ASTDD recommends that every state share the surveillance plan with the epidemiologists in your state's Chronic Disease and MCH programs.

Where can I get additional help or find examples of state oral health surveillance plans?

ASTDD can help with the process of developing and implementing a state OHSS. Please contact us if you have any questions. If you want to see examples from other states, please refer to ASTDD's list [Oral Health Surveillance Plan Examples](#).

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