

Dental Public Health Activity Descriptive Summary

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Sustainability of an Oral Health Program

When vital program funding from federal sources was reduced in 2013, it created a daunting challenge; how could core public oral health functions be performed and North Dakota's oral health infrastructure be maintained without the expected resources? Since this was a sudden and unexpected loss in funding, it necessitated cuts in staffing and reductions in program services. To minimize the damage from budget reductions, the North Dakota Oral Health Program (OHP) employed two general strategies: 1) creating new staffing approaches for performing essential program functions; and 2) identifying and pursuing new funding sources and resources.

The primary asset that enabled survival during this period was a strong network of organizational relationships, partnership groups (the Oral Health Coalition (OHC)), and oral health resources that had been developed through years of collaborative work. This network was built by OHP in collaboration with a variety of partners including numerous state agencies, non-profit organizations, providers, funders, third-party payers, educational institutions, and communities.

To protect staff and programs from suffering even deeper budget cuts, OHP worked with its partners in the OHC. The sharing of resources (e.g., travel and transportation, printing, administrative services) with partner organizations enabled OHC to stretch its budget dollars. Additionally, close collaboration with other North Dakota Department of Health (DoH) agencies led to job-sharing and leveraging of staff positions. Aided by the co-location of its offices with other DoH agencies, staff was also able to share resources such as newsletters, technical expertise, information fact sheets, and professional development opportunities.

The OHC and ND Dental Association also provided valuable contacts for tapping new funding sources to sustain the OHP infrastructure. Funding from DentaQuest Foundation and the Bremer Foundation helped to fill budget holes until the needed funding was restored. Having survived this difficult period, OHP has emerged stronger, with more diversified funding sources and stronger collaborative relationships with its many partners.

Lessons Learned:

The partnerships and relationships that evolved over several years of collaborative work among oral health care professionals, the North Dakota Dental Association, the Long Term Care Association, the Department of Public Instruction and others in North Dakota enabled leadership to draw upon this network of resources to sustain North Dakota's oral health programs and vital infrastructure until additional resources could be procured. The trust and goodwill in this network fueled creative solutions, leveraging of staff positions, job sharing, and resource sharing that sustained operations during this difficult period. Additionally, the network enabled identification of new partners and funding to help sustain operations. The heightened collaboration during this period served to further strengthen and expand this network and positive working relationships, thus creating a stronger foundation for ND oral health programs.

The OHP will definitely be prepared to share resources and positions as needed if funding issues were to arise in the future.

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