

Dental Public Health Activity Descriptive Report Submission Form

You are being asked to complete this form based on the submission of a state activity that has been reviewed by the Best Practices Committee and has been determined to be an example of a best practice. Please provide a full and detailed description of your **successful dental public health activity** (e.g., a practice, program, service, event, or policy) by completing this form. Add space and expand the submission form as needed. Thank you.

CONTACT INFORMATION OF THE PERSON PREPARING THE SUBMISSION
<p><i>Include name, title, agency/organization, address, phone, fax & email address. Add space as needed.</i></p> <p>Julia Wacloff, RDH, MSPH, Chief, Office of Oral Health, Arizona Department of Health Services, Office of Oral Health, 150 N. 18th Ave. #320, Phoenix, AZ 85007, Phone: 602-542-1866, Fax: 602-364-1474, Email: julia.wacloff@azdhs.gov</p>

TO BE COMPLETED BY ASTDD	
Descriptive Report Number:	04004
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Submission Filename:	DES04004AZfinancialsupportCWF

SECTION I: ACTIVITY OVERVIEW

Name of the Dental Public Health Activity (e.g., name of program, service, event, or policy):

Financial Support for Community Water Fluoridation

Public Health Functions: Check one or more categories related to the practice.

"X"	Assessment
	1. Acquiring Data
	2. Use of Data
Policy Development	
X	3. Collaboration and Partnership for Planning and Integration
	4. Oral Health Program Policies
	5. Use of State Oral Health Plan
	6. Oral Health Program Organizational Structure and Resources
Assurance	
X	7. Population-based Interventions
	8. Oral Health Communications
X	9. Building Linkages and Partnerships for Interventions
	10. Building State and Community Capacity for Interventions
	11. Access to Care and Health System Interventions
	12. Program Evaluation for Outcomes and Quality Management

Healthy People 2020 Objectives: Check one or more [key objectives](http://www.healthypeople.gov/2020/default.aspx) related to the practice. If appropriate, add other HP 2020 Objectives, such as tobacco use or injury. Full listing of objectives is provided online at <http://www.healthypeople.gov/2020/default.aspx>

"X"	Healthy People 2020 Oral Health Objectives	
X	OH-1	Reduce the proportion of children and adolescents who have dental caries experience in their primary or permanent teeth
	OH-2	Reduce the proportion of children and adolescents with untreated dental decay
	OH-3	Reduce the proportion of adults with untreated dental decay
X	OH-4	Reduce the proportion of adults who have ever had a permanent tooth extracted because of dental caries or periodontal disease
	OH-5	Reduce the proportion of adults aged 45 to 74 years with moderate or severe periodontitis
	ON-6	Increase the proportion of oral and pharyngeal cancers detected at the earliest stage
	OH-7	Increase the proportion of children, adolescents, and adults who used the oral health care system in the past year
	OH-8	Increase the proportion of low-income children and adolescents who received any preventive dental service during the past year
	OH-9	Increase the proportion of school-based health centers with an oral health component
	OH-10	Increase the proportion of local health departments and Federally Qualified Health Centers (FQHCs) that have an oral health component
	OH-11	Increase the proportion of patients who receive oral health services at Federally Qualified Health Centers each year
	OH-12	Increase the proportion of children and adolescents who have received dental sealants on their molar teeth
X	OH-13	Increase the proportion of the U.S. population served by community water systems with optimally fluoridated water

OH-14	Increase the proportion of adults who receive preventive interventions in dental offices
OH-15	Increase the number of States and the District of Columbia that have a system for recording and referring infants and children with cleft lips and cleft palates to craniofacial anomaly rehabilitative teams
OH-16	Increase the number of States and the District of Columbia that have an oral and craniofacial health surveillance system
OH-17	Increase health agencies that have a dental public health program directed by a dental professional with public health training

"X"	Other Healthy People 2020 Objectives: (list objective number and topic)

State/Territory: Arizona

Federal Region: IX

Key Words for Searches: Community water fluoridation, fluoridation, water fluoridation, community support, funding fluoridation equipment

Abstract:

Provide a [full and detailed paragraph](#) of the dental public health activity (a practice, program, service, event, or policy). Include information on: (1) what are you doing; (2) who is doing it and why; (3) what is the cost; and (4) why do you think it made a difference such as the benefits & achievements. Prepare one or more paragraphs. [Add space as needed but please limit the summary description to around one page.](#)

Water fluoridation, although a scientifically sound, safe and cost-effective measure to improve oral health, becomes a political controversy in some communities. Funding is frequently an issue tied to the debate. Since 1999, the Arizona Department of Health Services, Office of Oral Health (OOH) provides financial support for communities that are considering, or have recently approved but not yet implemented, community water fluoridation. Specifically, the OOH supplements local funds to initially purchase and install required fluoridation equipment through grants. To date, grants have ranged from \$40,000 to \$63,000. The funding does not typically cover the entire cost of purchasing and installing the fluoridation equipment but does provide much needed support to communities to initiate water fluoridation. This grant program has successfully assisted three communities in implementing community water fluoridation in Arizona. These three communities, totaling more than 150,000 residents, received assistance for the purchase of their start-up fluoridation equipment. In one community, although water fluoridation was already approved, the funding for the start-up could not be secured and the grant enabled the community to implement its fluoridation. In the other two communities, where community water fluoridation had not yet been approved, information on the availability of funding from the state health department was provided to the town/city councils to assist in assessing the financial ability of the communities to implement fluoridation. This resulted in the councils approving water fluoridation for the communities.

Contact Persons for Inquiries:

Include name, title, agency/organization, address, phone, fax & email address for 1-2 contact persons. Add space as needed.

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SECTION II: ACTIVITY DESCRIPTION

Please describe the practice/program/service/event by completing the following subsections. Include details to help readers understand what you do and how you do it. Add space to the form as needed. Thank you.

History of the Activity:

Use this subsection to provide information such as: when did the activity/program/service/event begin, what were the key issues that led to the initiation of the activity and what were the milestones in the development of the activity.

Since 1999, the Arizona Department of Health Services, Office of Oral Health has provided grants to assist local municipalities in the start-up of water fluoridation by purchasing fluoridation equipment and paying for its installation. To date, grants have ranged from \$40,000 to \$63,000. Three communities, totaling more than 150,000 residents, received assistance for the purchase of their start-up fluoridation equipment. In one community, although water fluoridation was already approved, the funding for the start-up could not be secured and the grant enabled the community to implement its fluoridation. In the other two communities, where community water fluoridation had not yet been approved, information on the availability of funding from the state health department was provided to the town/city councils to assist in assessing the financial ability of the communities to implement fluoridation. This resulted in the councils approving water fluoridation for the communities.

Justification of the Activity:

Use this subsection to provide information such as the need of the activity/program/service/event specific to your state or setting and the evidence supporting the effectiveness/impact of the approach or method of the activity.

Community water fluoridation is one of the greatest public health achievements of the 20th century. Nearly a hundred national and international organizations endorse/support water fluoridation as an effective method for preventing tooth decay. A recent systematic review of scientific evidence by a special task force in developing a Guide to Community Preventive Services resulted in a strong recommendation of water fluoridation's effectiveness (MMWR in August 2001). Water fluoridation, although a scientifically sound, safe, cost-effective measure to improve oral health, becomes a political controversy in some communities. Funding is frequently an issue tied to the debate. The funding offered by the Office of Oral Health assists communities in addressing the initial financial costs associated with community water fluoridation.

Inputs, Activities, Outputs and Outcomes of the Activity:

Use this subsection to provide information detailing the activity/program/service/event regarding its inputs (such as staff, volunteers, funding and other resources), activities (such as administration and operations), outputs (such as the number of clients served, service units delivered and products developed), and outcomes (such as changes in health status, knowledge, behaviors and care delivery systems). USE THIS SUBSECTION TO DESCRIBE YOUR ACTIVITY/PROGRAM IN DETAIL (USE HEADINGS TO ORGANIZE INFORMATION ON VARIOUS ASPECTS OF THE ACTIVITY/PROGRAM).

Communities considering water fluoridation or having already approved its implementation for the near future are notified of the availability of funding. Upon council/voter approval to implement water fluoridation, a contract from the state health department and the community is drafted. Communities must provide some of their own funding or have solicited financial support from other entities to augment the grant provided by the Office of Oral Health for start-up water fluoridation costs. After the water fluoridation equipment is installed and fully operational for 30 days and a water report is provided to the Office of Oral Health documenting optimal fluoridation levels, the funding amount of the contract or an amount equaling the actual costs of equipment purchase and installation is remitted.

Budget Estimates and Formulas of the Activity:

Use this subsection to provide information related to the program budget, key cost components and/or unit cost analysis of the activity/program/service/event.

Approximately \$40,000 annually has been available to communities for water fluoridation.

Lessons Learned and/or Plans for Improvement:

Use this subsection to provide information related to the lessons learned through the activity/program/service/event or plans for improving the practice that may be useful advice for readers.

- Prior approval of water fluoridation by a community facilitates the distribution of funds in a more timely manner.
- A close working relationship with the water utilities manager is critical for coordinating assistance and disseminating accurate information during any political challenge.

Available Information Resources:

Use this subsection to provide information such as models, tools and guidelines developed for, use by or relevant to the activity/program/service/event that can be requested as resources or used as reference information.

- A brochure on the benefits of community water fluoridation.

SECTION III: ACTIVITY EVALUATION INFORMATION

Please answer the following questions. Section III is intended to be a short recap highlighting selected information from Section II. Illustrate with key data and examples specific to your activity in the responses. This section should be less than 2 pages. Add space to the form as needed. Thank you.

Impact/Effectiveness

How has the activity demonstrated impact, applicability, and benefits to the oral health care and well-being of certain populations or communities (i.e., reference scientific evidence, outcomes of the activity and/or evaluation results)?

Water fluoridation has been shown to have substantial lifelong decay prevention effects and is a highly cost-effective means of preventing tooth decay in the United States, regardless of socioeconomic status (American Dental Association, Fluoridation Facts, 1999). A special task force in developing a Guide to Community Preventive Services strongly recommends water fluoridation based on a systematic review of the scientific evidence on water fluoridation's effectiveness (MMWR in August 2001). To date, this grant program has successfully assisted three communities in implementing community water fluoridation in Arizona.

Efficiency

How has the activity demonstrated cost and resource efficiency where expenses are appropriate to benefits? How has the activity demonstrated realistic and reasonable staffing and time requirements? Provide unit cost analysis or cost-benefit analysis if appropriate.

Communities must provide some of their own funding or have solicited financial support from other entities to augment the grant provided by the Office of Oral Health for start-up water fluoridation costs. Internal management of this program is quite simple; essentially, it is merely a business function of establishing a contract for the transfer of available funds.

Demonstrated Sustainability

How has the activity showed sustainable benefits and/or how has the activity been sustainable within populations/communities and between states/territories? What mechanisms have been built into the activity to assure sustainability?

The Arizona Department of Health Services, Office of Oral Health has provided water fluoridation grants since 1999. From a state perspective, the model relies upon ongoing subsidies that have been primarily sustained from CDC funding and by the state health department's political will to prioritize funding for this purpose.

Collaboration/Integration

How has the activity built effective partnerships/collaborations among various organizations and integrated oral health with other health projects and issues? What are the traditional, non-traditional, public and private partnerships/collaborations established by the activity for integration, effectiveness, efficiency and sustainability?

Community water fluoridation campaigns are traditionally community-based partnerships to effect local policy. This grants program does not engage in the local politics but only provides a possible resource to implement the will of local leadership (town/city councilors) or voters.

Objectives/Rationale

How has the activity addressed HP 2020 objectives, met the National Call to Action to Promote Oral Health, and/or built basic infrastructure and capacity for state/territorial/community oral health programs?

Community water fluoridation, a population-based intervention that builds infrastructure for a state oral health program, is effective in preventing dental caries in both children and adults. The grants program supports water fluoridation and efforts to achieve the following HP 2020 objectives:

OH-13 Increase persons on public water receiving fluoridated water

OH-1 Reduce dental caries experience in children

OH-4.2 Reduce the proportion of older adults aged 65 to 74 years who have lost all of their natural teeth

Extent of Use Among States

Describe the extent of the activity or aspects of the activity used in other states?

The ASTDD State Synopses show that 100% of states have water fluoridation programs.