



## FOREWORD

On the December 2021 Dental Director call, the directors were asked to provide three words to describe their expectations for the coming year. The Word Cloud on the cover reflects their sentiments for 2022. Word clouds are one of my favorite ways to gather feedback. “Optimistic” and “Energized” were the two most popular words, along with a host of other words. These sentiments are reflected not only with the dental directors but throughout this annual report by all the activities the committee members and ASTDD consultants accomplished. One major achievement was the development and launch of the National Oral Health Data Portal. This has been a long-time ASTDD goal that was finally realized. Please visit the portal via the link in the report to view the depth and breadth of the data gathered thus far.



Optimistic and energized also convey my sentiments about the future of ASTDD as we move forward into 2022. It has been my honor to be the ASTDD President for the past two years, all during the pandemic. I am optimistic that ASTDD will continue to thrive and am energized about the new ideas and projects that we will accomplish.

I will close with the following quote by Mattie Stepanek. “Unity is strength, when there is teamwork and collaboration, wonderful things can be achieved.” Kudos to ASTDD members, consultants, and all the state/territorial oral health program staff for the great work that has been accomplished this past year.

Christine M Farrell, ASTDD President



**ASTDD Central Office**

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## Who We Are

### Association of State and Territorial Dental Directors Strategic Map 2019-2021

#### Vision

A strong and effective governmental oral health presence in states and territories to assure optimal oral health.

#### ASTDD Mission Statement

ASTDD provides leadership to:

- promote and support a governmental oral health presence in each state and territory,
- increase awareness of oral health as an important and integral part of overall health,
- address oral health equity,
- promote evidence-based oral health policies and practices, and
- assist in the development of initiatives to prevent and control oral diseases.

Build Infrastructure & Capacity of S/TOHP	Provide Guidance & Resources to S/TOHP	Assure ASTDD Organizational Effectiveness & Sustainability	Serve as the Collective Voice for S/TOHP
Strengthen S/TOHP Leadership	Promote Use of Evidence-based Policies & Practices	Assure ASTDD Staffing/ Consultant Capacity & Expertise	Identify & Address Cross-Cutting Issues
Assess & Respond to Member Needs Related to Infrastructure & Capacity	Provide Tools & TA to Evaluate & Improve S/TOHP Policies, Plans, Programs, Surveillance Systems, & Communications	Promote ASTDD Membership Strengthen Member Engagement	Build Consensus on Key Issues
Support S/TOHP Professional Development & Mentoring	Identify & Analyze Emerging Issues and Promising Approaches	Develop ASTDD Leadership Engage Those with Different Perspectives and Skill Sets in Leadership & Partnerships	Serve as a Thought Leader on S/TOHP Practice, Policy, Research, Analytics & Communication
Enhance Peer Connections & Communication	Connect Members to Resources	Create & Implement a Sustainability Plan	Collect & Disseminate Data & Information about S/TOHP
Build Support Among National, State, & Territorial Policy Makers, Funders & Advocates for S/TOHP	Promote & Support S/TOHP Collaborations	Maintain an Informed Board to Provide Governance, Strategic Planning & Support	
	Promote Collection, Analysis & Use of Data to Inform Planning & Decisions	Assure Strategic Communication	
		Establish & Support a Responsive Structure to Address Key Issues	
Serve a Primary Leadership Role in the National Oral Health Conference (NOHC)			
Cultivate Continuous Quality Improvement			
Expand and Strengthen Strategic Partnerships			
Promote Oral Health & Oral Health Equity across the Lifespan			
Foster Oral Health Literacy			

- S/TOHP is State and Territorial Oral Health Programs

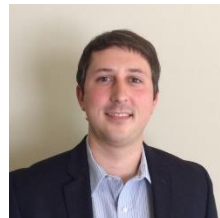
## Introduction

What did 2021 symbolize for us? Realistic optimism. What does that mean? We acknowledge daily realities but believe in the future and we grab control! Someone on a recent American Public Health Association panel said, “I’m not an optimist but a possibilist.” We all experienced public health fatigue but still kept our long-term goals in mind, maintained a sense of humor, and developed new strategies for improving the oral health of those populations most in need. We learned to play defense but still led the offense and changed strategies when the players or politics changed. This annual report highlights our accomplishments, demonstrating how productive we remained in the face of constantly changing and complex realities that differed by state and local communities. You’ll see the faces of some of the players along with the faces of some faithful and loyal pets who acted as comforters and office assistants. We have maintained a virtual office for many years so working from our homes is normal, and we’ve shared our experiences with those who are trying to find the best work and personal life balance. Despite many personal tragedies and losses, there have been new joys and additions to our family of members. Our leadership has remained committed and consistent. Our subject matter experts have served for several years providing high quality support and technical assistance. Let’s meet them.

### Leadership and Subject Matter Expertise

#### Members of the Board of Directors (BOD)

**Top row left to right:** President: Christine Farrell, RDH, BSDH, MPA (MI); President-Elect: Julia Wacloff, RDH, MS (AZ); Immediate Past President: Jason Roush, DDS (WV); Secretary: Samuel Zwetchkenbaum, DDS, MPH (RI); Treasurer: Russ Dunkel, DDS, BS, BA, FACD, FAID (WI)



**Bottom row left to right:** Director: Mona Van Kanegan, DDS, MS, MPH (IL); Director: Jay Kumar, DDS, MPH (CA); Director: Adam Barefoot, DMD, MPH (GA); Associate Member Director: John Welby, MS (MD)



#### Ex Officio Members

**Executive Director**, Christine Wood, RDH, BS and

**Executive Director Emeritus**, M Dean Perkins, DDS, MPH

### Administrative Support

Cheryl Thomas, Business Manager

Bradley Cummins, Sixth Street Design & Marketing, LLC

Website and Listserv Hosting and Maintenance



### Committee Chairs

**Left to right: Best Practices:** Steven P Geiermann, DDS; **Communications:** John Welby, MS; **Data and Oral Health Surveillance:** Mona Van Kanegan, DDS, MS, MPH; **Dental Public Health Policy:** Harry Goodman, DMD, MPH; **Fluorides:** Bruce Austin, DMD; **Healthy Aging:** Samuel Zwetchkenbaum, DDS, MPH; **Perinatal Oral Health:** Mark Moss, DDS, PhD; **School and Adolescent Oral Health:** Rudy F Blea, BA



### Subject Matter Experts/Consultants

**1st row left to right:** Lori Kepler Cofano, RDH, BSDH: **Best Practices, Healthy Aging, School and Adolescent Oral Health;** Kathy Geurink, RDH, MA: **Maternal and Child Health;** Harry Goodman, DMD, MPH: **Maternal and Child Health;** Reginald Louie, DDS, MPH: **Maternal, Child and Perinatal Oral Health, Dental Public Health Infrastructure, Territorial Support;** Jay Balzer, DMD, MPH: **Persons with Special Health Care Needs;** Kimberlie Payne, RDH, BA: **Communications, New Member Support;** Kathy Phipps, DrPH: **Data & OH Surveillance**



**2nd row left to right:** Michael Manz, DDS, MPH, DrPH: **Data & OH Surveillance;** Judith Feinstein, MSPH (Blue Heron Consulting): **Dental Public Health Policy, Fluorides;** Carissa Beatty and JoAnna Hillman, Emory Centers for Training and Technical Assistance: **Evaluation;** Mary Davis, DrPH, MSPH, Project Y Evaluation Services, LLC: **Evaluation;** Kathy Hunt, RDH, ECPII: **Head Start;** Gina Sharps, BSDH, MPH: **Head Start**

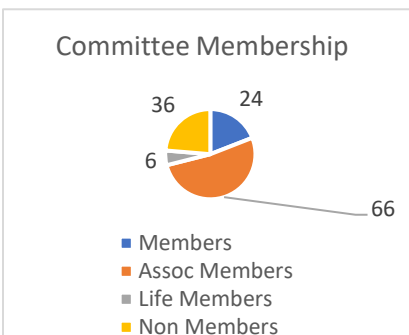


**3<sup>rd</sup> row left to right:** Sandy Tesch, RDH, MSHP: **School-based Dental Sealant Programs**; Beverly Isman, RDH, MPH, ELS: **Writer/Editor, Dental Public Health Infrastructure, Head Start**; Julie Janssen, RDH, MA: **Emergency Preparedness and Response, Dental Public Health Infrastructure**; Matt Jacob, BA: **Communication and Social Media**; John O'Malley, MHI, Positive Sum Population Health Informatics: **National Oral Health Data Portal**; Ohnmar Tut, BDS, MPhil: **Pacific Islands Needs Assessment and Support**; Magda de la Torre, RDH, MPH: **Caribbean Islands Needs Assessment**



### Membership and Peer Support

Dental Directors	State and Territorial Oral Health Program Staff Associate Members	Organizational Associate Members	Individual Associate Members	Total Associate Members	Life Members	Total
66	248	11 organizations with a total of 34 associate members under their membership	184	466	22	554



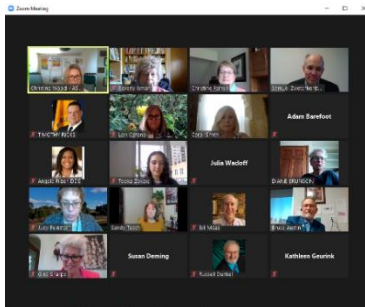
In 2021, ASTDD added 99 new associate members, some of whom joined committees or workgroups.

Upon joining ASTDD, each new member and associate member is welcomed by Chris Wood, Executive Director, and either Lori Cofano for the state/territorial directors/managers or Kimberlie Payne for the associate members. There were seven mentoring pairs at different stages in the Peer Support Program. Two program staff from the Commonwealth of the Northern Mariana Islands (CNMI) completed mentoring with Reg Louie and Ohnmar Tut. Thank you to Charles Craft, Chris Farrell, Debonny Hughes, Reg Louie, Katya Mauritson, Bob Russell and Ohnmar Tut for serving as mentors to directors/managers from the CNMI, Idaho, Massachusetts, Missouri, Ohio and Pennsylvania. One of the mentors suggested on their six-month evaluation that it would be helpful to start a discussion group for new directors. The first discussion was held in April with two more being held in 2021. Examples of topics included state-level oral health surveillance systems; school-based programs; COVID-19 challenges to program efforts, partnerships and workforce; use of ASTDD

Competencies; grantwriting logistics and resources. Updates were made to the [Dental Public Health 101 ppt](#) and [syllabus](#) and the [ASTDD Selected National Partner Organizations ppt](#); updates to the Mentoring Guide will be available early in 2022.

*“Each new director comes with a unique background and understanding (or lack) of the public health sector. The ecosystems they operate in are different from state to state. I think you’ve done an extraordinary job of assembling resources.”* Guy Deyton (MO)

*“It is so nice to have an organization that has such a personal touch with the members; thank you for all you do.”* Veronica Gates



Much of the focus this year was on peer support for our members. ASTDD continued to host 18 biweekly or monthly dental director ZOOM calls to facilitate peer connections and information sharing. Some topics included teledentistry, the Pregnancy Risk Monitoring System, COVID related issues such as supporting staff who were working remotely, and efforts to reduce the use of emergency departments for non-traumatic oral health conditions. Admiral Tim Ricks joined the group in January 2021 to provide COVID-19 updates and acquire feedback from the dental directors on issues that he later shared with several groups via webinars and other venues. A brief summary of each call was included in the [Roundup newsletters](#).

### Professional Development

#### National Oral Health Conference (NOHC)



For the second year, ASTDD and the American Association of Public Health Dentistry (AAPHD) held the NOHC virtually because of the pandemic. Approximately 560 people registered for the conference that was live streamed; on-demand recordings were available for some but not all sessions for six months after the meeting. Attendees could earn up to 21.75 continuing education credit hours. There were [12 primary sessions](#) (links to schedule with descriptions) mostly panels, [four roundtable sessions covering a total of 20 roundtables](#) (links to abstracts), [four poster sessions covering 61 posters](#) (links to abstracts), two exhibit sessions featuring live chats or emails and downloadable handouts for the 17 [exhibitors](#) (links to list), two professional networking sessions featuring 14 organizations or companies, and a keynote closing speaker, Allison Massari,



Evaluations were overwhelmingly positive, although some people experienced technical difficulties with the virtual format or online instructions. The feedback will allow for improvements in any online aspects of future NOHCs.

addressing *Transforming Lives: The Heart and Soul of Healthcare*. Twelve sessions showcased projects where ASTDD is directly involved while nine other projects were presented or primarily authored by state /territorial health department or oral health coalition staff. Many more abstracts listed state/territorial oral health programs or coalitions as partners and authors, highlighting the diversity and breadth of oral health projects and their

commitment to collaborations. A four-hour Federal Dental Session brought together the US Public Health Service, Army, Navy, Air Force and VA Health Administration dental programs to discuss issues of common interest. No workshops were held due to the virtual nature of the meeting. The Planning Committee chose a social responsibility initiative this year joining Team Feed to help end hunger in America; as of May 3 there were 57 donations totaling \$5,050.

*"Thank you for caring so deeply that you are actually doing something to make a tangible difference for those facing the inequities of our society. I am so happy to be able to participate and help!" NOHC attendee*

The 2022 NOHC will be in-person April 9-14 in Fort Worth, TX with COVID protocols in place. Plans are progressing well with seven weekend workshops on April 9-10 as well as Board meetings and Award ceremonies, a Federal Dental Services session, Dental Public Health Residency Directors meeting, and American Board of Dental Public Health exams. Many abstracts were submitted and selected for roundtables and posters, concurrent oral presentations and panels, and plenary sessions. Kudos to the members of the Planning Committee and our new meeting planning company Good Plan Jan LLC with business partners Jan Aument and Leticia Harnung.



**Webinars**

Given the restrictions for in-person meetings, the Communications Committee held five Spotlight webinars this year to highlight ASTDD or state/community reports or programs.

- [Engaging the Media during Children’s Dental Health Month](#) in Los Angeles County to promote healthy behavior and early dental visits, January 20, **106 attendees**
- [Social Media Campaign for Head Start Parents and Caregivers](#) on toothbrushing produced by an ASTDD contractor for the National Center on Health, Behavioral Health, and Safety, March 24, **90 attendees**
- [Love Your Baby’s Teeth Campaign Launch, Implementation and Analytics](#) in Los Angeles County, May 25, **110 attendees**
- [Oral Health Care of People with Special Health Care Needs BPAR](#) overview, September 22, **70 attendees**
- [Don’t Bury the Lede](#) focusing on how and where to present important information, December 8, **104 attendees.**

The Data Committee held a *2021 State Synopses* webinar for state/territorial oral health programs on January 28 on how to complete the data forms to submit for the *State Synopses*. [Best Practices for Teledentistry Today and in the Future](#) was held in collaboration with CareQuest Institute on December 16 with **more than 100 attendees**. Other webinars and examples of peer learning will be discussed under Committee activities.

## Supporting ASTDD Infrastructure and Activities

ASTDD has always been a small national nonprofit organization with a modest but diverse budget. The following income reflects different funding periods during 2020-21, with some going into 2022 or 2023 but does not include CDC carryover into 2022.

<b>COOPERATIVE AGREEMENT/CONTRACTUAL</b>	
CDC 5 Year 3 (9/1/20-8/31/21)	\$400,000.00
CDC 5 Year 2 carryover (9/1/20-8/31/21)	\$35,450.00
CDC 5 Year 4 (9/1/21-8/31/22)	\$400,000.00
Georgetown COHSII 1 Year 4 (7/1/20-6/30/21)	\$96,890.00
Georgetown COHSII 1 Year 3 carryover (7/1/20- 6/30/21)	\$40,810.00
Georgetown COHSII 1 Year 5 (7/1/21-6/30/22)	\$99,132.00
Georgetown NCHBHS 1 Year 1 (9/30/20-9/29/21)	\$172,000.00
Georgetown NCHBHS 1 Year 2 (9/30/21-9/29/22)	\$172,000.00
Gary and Mary West Foundation, Healthy Aging (1/1/20-12/31/21)	\$15,600.00
Delta Dental of Michigan, NOHDP (1/1/21-12/31/21)	\$129,000.00
CareQuest School-based programs during COVID (11/4/20-10/31/21)	\$20,000.00
CareQuest Teldentistry BPAR (5/7/21-10/31/21)	\$25,000.00
University of Pittsburg RESPITE Project (9/1/20-8/31/23)	\$30,000.00
DentaQuest NOHCT (2/1/21-1/31/22)	\$12,500.00
BSS TA (different amounts and time periods for 12 states/territories)	\$16,252.00
<b>UNRESTRICTED</b>	
2021 National Oral Health Conference profit	\$0.00
Member dues	\$34,550.00
BSS sales	\$4,000.00
Interest on CDs	\$500.00

Last year was a particularly lean year as we had to keep profit from the virtual NOHC in reserve as we anticipated significant expenses with future NOHCs. 2021 income was \$849,228.64 and expenses were \$869,735.61. Our net profit would have been about \$70,000 instead of -\$20,506.97 if multiple outstanding invoices from ASTDD to various funders had been paid in in 2021. There were carryover funds because of delayed school-related activities such as dental sealant programs, Head Start programs and Basic Screening Surveys interrupted by the pandemic, necessitating less technical assistance, and there was no travel. Recently we learned some good news that CDC has extended our five-year funding for an additional year to August 31, 2024 due to the COVID interruptions.

### ASTDD Activities by Committees and Workgroups

Although the pandemic may have interrupted some activities, it allowed us to spend more time updating several documents and scheduling interactive communities of practice.

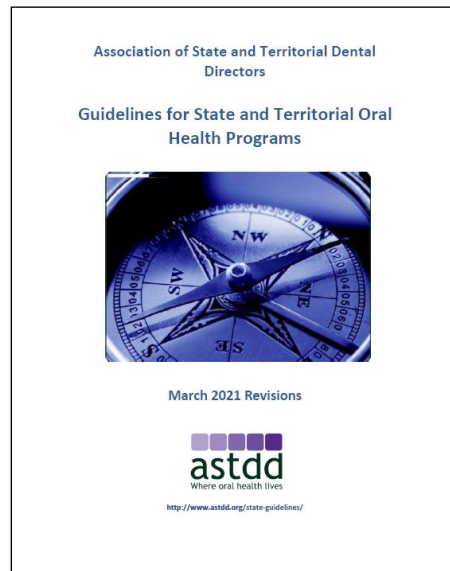
#### Key ASTDD Guidance Documents

ASTDD members and consultants have collaboratively developed key guidance documents for state and territorial oral health programs (S/TOHP) over the years. They are meant to be “living” documents that evolve

with S/TOHP needs, political and economic environments, and national guidelines. Last year’s annual report gave a glimpse into some of those documents; two have been completed and one is still in process.

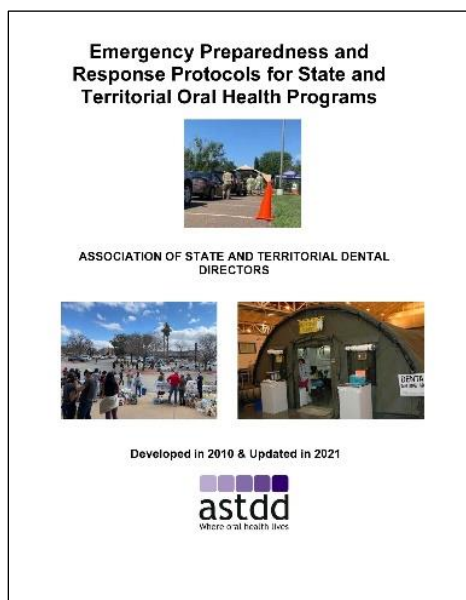
[ASTDD Guidelines for State and Territorial Oral Health Programs](#). The new version was released in March 2021.

Originally endorsed by more than 20 national organizations and federal agencies, this document provides guidance to health agency officials and public health administrators in the development and operation of strong oral health programs at the state level (also applies to DC and US territories and jurisdictions.) The framework for the *Guidelines* is based on the Core Public Health Functions of Assessment, Policy Development and Assurance and the Ten Essential Public Health Services to Promote Oral Health in the US. A matrix describes state oral health program roles for each of the essential services, examples of specific activities for each role (some may appear for more than one role), and links to selected resources to help programs accomplish these roles. The *Guidelines* document promotes integration of oral health activities into public health systems to assure healthy populations and communities for tomorrow. A companion document, [ASTDD Competencies for State Oral Health Programs](#), currently describes 78 competencies in seven domains that represent skill sets needed for a successful state oral health program, whether they are present in oral health program staff or are obtained from other programs or outside sources. This document is in the process of being updated to reflect the *Guidelines* updates as well as the 2021 updates to the [Core Competencies for Public Health Professionals](#) and the [21<sup>st</sup> Century Competencies for the Dental Public Health Specialist](#) released in 2016. S/TOHP that have access to expertise reflected in the competencies should be in a better position to carry out roles outlined in the *Guidelines*. S/TOHP are encouraged to routinely evaluate their progress against these *Guidelines and Competencies* and seek technical assistance from ASTDD as needed. A weekend workshop at the 2022 NOHC will help attendees understand and use both key documents.



[ASTDD Emergency Preparedness and Response Manual for State and Territorial Oral Health Programs](#)

In 2010 ASTDD produced an *Emergency Preparedness Protocols Manual* in the wake of Hurricane Katrina to provide guidance to S/TOHP and to address the increased need for coordinated emergency response among the dental community and the federal, state, and local emergency response systems in times of natural disasters. In 2021 we updated the manual to include infectious disease epidemics. Section 1 provides a broad overview of the crisis preparedness and response planning in America and promotes the need for public responsibility for population-based, oral health integration into the current Emergency Response System. Section 2 focuses on the role of the S/TOHP and essential crisis preparedness action steps including pre-crisis mitigation and preparedness, response, and recovery planning. The manual includes self-assessments, checklists, templates, worksheets, request for assistance forms and detailed information on all aspects of preparedness and response, including a continuity of operations plan.



## Best Practices Committee (BPC)

This committee supports more effective state, territorial and community programs through the development and sharing of Best Practice Approach Reports (BPARs). The collection of State Activity Submissions (SAS) and Descriptive Reports (DRs) promote the integration of oral health best practices into other programs. This activity supports the ASTDD Strategic Plan by encouraging the use of evidence-based practices and offering technical assistance.

The committee produced the following BPARs this year:

- [Oral Health Care of People with Special Health Care Needs](#)
- [Dissemination of Data from State-Based Surveillance Systems](#)
- [Teledentistry: Opportunities for Expanding the Capacity and Reach of the Oral Healthcare System.](#)

Webinars based on these reports are included in other sections of this report. Best Practices webpages were revised/updated on both the front and back end, thus reducing the number of “clicks” required to access BPARs. The collection of reports may be searched by date, name, or group (assessment, policy development or assurance core functions). Also on the website, see [Best Practices Resources](#) for forms, definitions, processes for submission of state activities and more.

The BPC sponsored and presented the 2021 Elevate Oral Care NOHC virtual session: *Don't Reinvent the Wheel: Best Practices for Improving Oral Health for Pregnant Women and Infants.*

*I have used a few of the BPARs in recent years:*

- ***Use of Fluoride in Schools and School-based Dental Sealant Programs:*** used as background information for an annual presentation I give to dental and dental hygiene students about our school-based services.
- ***State-based Oral Health Surveillance System:*** used in the background/literature review for one of my ABDPH case reports on developing and executing a surveillance activity.

*Rhonda Stephens, NC Dept of Health and Human Services*

## Dental Public Health Policy Committee (DPHPC)

The purpose of the DPHPC is to develop, promote and support resource and policy-related documents to assist S/TOHP to improve oral health.

Documents may include examples, recommendations, strategies, and/or information that S/TOHP can use to assist decision makers or the public to develop further understanding of dental public health issues or in choosing between alternative courses of action in specific situations. During 2021 the DPHPC produced three new documents:

- [Promoting Good Nutrition and Healthy Eating in Schools](#) in collaboration with the School and Adolescent Oral Health Committee and the National Maternal and Child Oral Health Resource Center (OHRC)

- [Healthy People 2030](#), first posted in November 2020, was updated in July 2021 to reflect the addition of oral health as a leading health indicator (OH-08: Increase use of the oral health care system)
- [Reducing Opioid Prescribing by Oral Health Professionals](#).

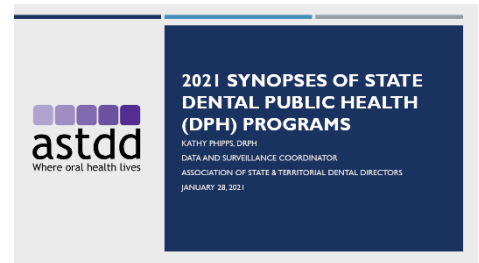
The DPHPC continues to review documents older than five years to identify content needing updates. The committee also provided comments on resources produced by other ASTDD committees or workgroups and to ASTHO's Population Health and Informatics Policy Committee on two policy statements: *Achieving Optimal Health for All by Eliminating Structural Racism*, and *Permanent, Sustainable Medicaid Financing for U.S. Territories*.

One annual committee activity in collaboration with AAPHD is to review proposed resolutions as presented to the American Dental Association's (ADA) House of Delegates for their Annual Session in October. The DPHPC prepared comments on seven of them that were consistent with ASTDD's interests and positions on the issues. The comments were approved by the BOD and submitted to the ADA.

On behalf of the Committee, consultant Judy Feinstein attended an American Public Health Association session in October on *Why Advocacy for Oral Health Policy Change is Critical* and then a CareQuest webcast, *Seven Recommendations to Boost Oral Health Advocacy Efforts*, in November; she summarized the sessions for a *Roundup* newsletter issue.

### Data and Oral Health Surveillance Committee (DC)

The committee oversees all activities of the Association regarding the National Oral Health Surveillance System (NOHSS), Behavioral Risk Factor Surveillance System (BRFSS), Youth Risk Behavior Surveillance System (YRBSS), Pregnancy Risk Assessment Monitoring System (PRAMS), the *Synopses of State Dental Public Health Programs*, Basic Screening Survey (BSS) training and technical assistance, and other data related projects and documents. Data Committee consultants provide technical assistance and training to S/TOHP on oral health assessment and surveillance. The DC also assists other ASTDD Committees with their data collection activities.



This year the consultants and committee:

- Completed the *2021 State Synopses* full report (in the Members only section of the website) and the [Summary Report](#)
- Updated the 2022 Synopses questionnaire including the online submission process
- Updated the list of [States with BSS Oral Health Data](#)
- The Children's BSS manual was approved by the CDC's OMB and Kathy Phipps completed the process of formatting the manual for publication in January 2022.
- Updated the list of [State Added BRFSS/PRAMS Questions](#)
- Updated the [Oral Health Surveillance Data Reference Guide](#)

- Updated the [Recommended Guidelines for Surveillance of Non-Traumatic Dental Care in Emergency Departments](#) and the abbreviated version, [Guidance on Assessing Emergency Department Data for Non-Traumatic Dental Conditions](#) as well as [Methods in Assessing Non-Traumatic Dental Care in Emergency Departments Publications Update](#)
- Created the [Compendium of ASTDD Oral Health Data and Surveillance Resources](#)
- Kathy Phipps completed the narrative portion of the Data Dissemination BPAR (see the Best Practices Committee section).

Despite pandemic restrictions, Kathy Phipps and Mike Manz provided 247 hours of technical assistance on oral health surveillance issues and the BSS to the following states/territories: Alabama, Arizona, Commonwealth of Northern Mariana Islands, Connecticut, Delaware, Florida, Georgia, Idaho, Hawaii, Illinois, Iowa, Kansas, Louisiana, Maryland, Michigan, Minnesota, Nebraska, Nevada, Montana, New Hampshire, New Jersey, North Dakota, Ohio, Pennsylvania, and Vermont. TA feedback from states was received relating to five Head Start BSS, 13 3<sup>rd</sup> grade BSS and two older adult BSS. Most TA focused on survey design, sample design and selection, and ZOOM training of examiners; much is still ongoing.

Example of outcomes:

*“Implementation of PA’s first BSS; we have now completed 50/80 schools!”*

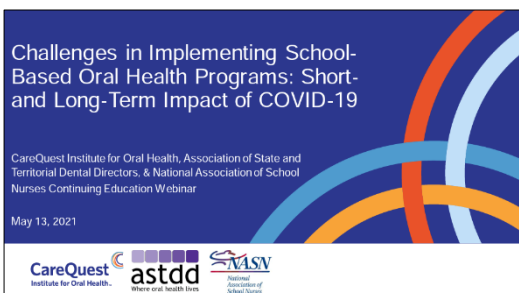
*“We were able to design our new five-year basic screening survey for Head Start and third grade children in Nebraska despite the pandemic challenges.”*

*“It is very helpful to collaborate with someone who has a long history of working with our office in the past and we are very pleased with the results.”*

*“We are happy with the current ASTDD support and assistance.”*

### School and Adolescent Oral Health Committee and Dental Sealant Programs Community of Practice

The ASTDD School and Adolescent Oral Health Committee (SAOHC) serves as a resource to S/TOHP and works to ensure a strong oral health component in all school and adolescent health initiatives. Six SAOHC calls were held in 2021 via Zoom. SAOHC members were invited to participate in Wisconsin’s virtual HPV Summit on May 7, 2021; a link to the meeting recordings was sent to the SAOHC for those not able to attend. The SAOHC also sponsored a [webinar on HPV](#) in June with a Regional Medical Director employed by Merck highlighting their materials to train providers on HPV vaccinations as 70% of oropharyngeal cancers are HPV positive. Lori Cofano was invited to be a subject matter expert on a coordinating team assembled by Susan Griffin from the CDC. The coordinating team will provide input on information related to the use of fluoride varnish in school programs. The goal is to have the information released in the *Community Guide*.



Throughout the past two years ASTDD and the CareQuest Partnership have facilitated a workgroup to solicit information from dental directors about their school-based program experiences during the pandemic. Results of surveys and interviews of states, DC and territories were shared on a May 13 webinar, co-branded with the National Association of School Nurses. The webinar [recording](#) and [slides](#) are available as well as a research brief, [Challenges in Implementing School-Based Oral Health Programs: Short and Long](#)

[Term Impacts of COVID-19](#) and an infographic, [Access to Oral Health in Schools: Key to Improved Oral Health Among Young Children](#). Other school health related resources also are on the [SAOHC webpage](#).

The ASTDD Sealant consultant, Sandy Tesch, serves as a member of the SAOHC and reports on CDC-funded school sealant program (SSP) activities. She provided monitoring and responses to questions posted on the SSP listserv; 55 messages were posted to the discussion list this year. Six dental sealant Community of Practice (CoP) and/or sealant-related trainings were conducted for SSPs during 2021. Updated infection prevention



and control resources were shared through the listserv. A training on the application of glass ionomer sealants was conducted in March by GC America. Topics during several of the CoP calls related to challenges during the pandemic: school closures and reopening, impact on SSP participation, caries-risk assessment tools, SEALS reporting, BSS, teledentistry services, additional personal protective equipment requirements, building partnerships, and SSP alternative activities allowable under the cooperative agreement. Collaborations with CDC included:

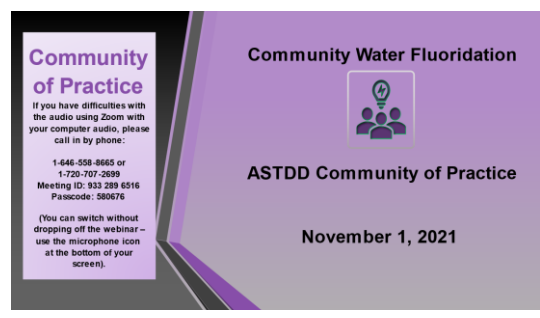
- CDC webinar conducted in January on developing the SOHP/SSP communications plan required in the CDC cooperative agreement.
- CDC offered listening sessions and TA for the grantees in response to their concerns about the impact of the pandemic on SSPs.
- CDC launched a new, on-demand SEALS training resource in November for current and former CDC grantees that utilize SEALS software for reporting program data. Sandy coordinated multiple SEALS-related responses with CDC staff.

*“ASTDD resources are amazing. Part of problem is finding time to look through, but it is worth making the time!”*

### Fluorides Committee (FC)

The Fluorides Committee provides ASTDD members with policies and guidelines for the appropriate use of fluorides in community/population-based programs designed for dental caries prevention. In collaboration with CDC and the ADA, the FC announced the 2021 Fluoridation Awards at the ASTDD Virtual Annual Business Meeting discussed later in this report. Judy Feinstein coordinates the

Community Water Fluoridation (CWF) Community of Practice (CoP) for the 20 states funded by the CDC’s Division of Oral Health and promotes use of a dedicated discussion listserv for the grantees; 59 messages were posted on the listserv in 2021. Judy facilitated five webinars during the year, all of which were well-attended and interactive.



- In January the group discussed items such as updates on the *New Wave Tablet and Feeder System* and plans for marketing and implementation; CWF media activities; working with state/local water

associations; use of CDC-FLO online training; and CDC cooperative agreement requirements around CWF.

- The March webinar was a presentation about the *New Wave Tablet and Feeder System* by the two companies involved in its development and open to other state fluoridation contacts to attend.
- In collaboration with Tracy Boehmer, CDC National Fluoridation Engineer, Judy coordinated the annual *CDC Fluoridation Update* as a Zoom webinar on May 12. More than 170 individuals registered and most attended. The session included *The Development of an Interactive Fluoridation Map for Pennsylvania*, presented by the Pennsylvania Oral Health Coalition and their partners at the University of Pittsburgh School of Dental Medicine and the Pittsburgh Water Collaboratory about their effort to create an educational resource for fluoridation status in Pennsylvania.
- In June, the CoP webinar included a discussion with Matt Jacob about the methods used and findings from the paper he co-authored with Alice Horowitz on *Oral Health Literacy and State Webpage Content on CWF*.
- November discussion focused on developing a toolkit/handbook for facilitating implementation of the New Wave Tablet and Feeder System.

In addition to the CoP, Judy provided TA to about 15 states with occasional assistance from committee members and the ADA on several topics. Committee member Jay Kumar moderated a national webinar in September reviewing the NASEM/National Toxicology Program's report, *NTP NASEM Review: What It Means and What's Next for Fluoride Science*. The committee also helped to review or draft several letters on behalf of ASTDD, including a letter to the National Academies regarding the revised peer review of the National Toxicology Program report. Several committee members attended an EPA webinar in November on chemical supply line issues (*Lessons from the Field: Tips to Mitigate Supply Chain Challenges*), looking for insight and support relative to fluoride additive shortages. There was follow up communication with EPA staff. Judy also served as moderator for the 2021 NOHC Roundtable, *Community Water Fluoridation during COVID-19*, presented by committee member Tooka Zookaie.

In several instances, the Curate post or Google Alert provided the first notice for a state oral health program of a fluoridation discussion scheduled for a public meeting, which allowed the staff to be better prepared.

We refined and continued our use of Curate, a data-mining company that provides a searchable database of local government meeting agendas and minutes. ASTDD shares a subscription with the American Fluoridation Society. Reports combining Curate findings with postings from Google Alerts are sent at least once or twice a month to state dental

directors, state fluoridation contacts, the Fluorides Committee, the American Network of Oral Health Coalitions (ANOHC), and the American Academy of Pediatrics' (AAP) Fluoride Responders listservs. The reports can serve as an early warning system for fluoridation-related activity.

Better information from states will increase our understanding of perceived barriers to reporting and maintaining optimal fluoridation.

The Committee began updating ASTDD fluoride related policy statements and other resource documents and expects to complete them by the end of 2022. The FC also finalized a questionnaire to states about data reporting in CDC's Water Fluoridation Reporting System (WFRS) to update state data for the National OH Data



Portal and to explore factors in under-fluoridation in many states. Two states field-tested the query in December and seven others should receive it early in January 2022, with plans to contact all states by later in the year.

### Communications Committee



Timely, strategic and clear communications are important keys to an organization’s success. The Communications Committee plans and

oversees many of ASTDD’s communication strategies in collaboration with Chris Wood and Bradley Cummins. ASTDD refreshed our branding elements this year to create a set of design standards and guidelines for print and other visual materials. These relate to using the logo and tagline, typography, color, and images and photos. We also reviewed and updated communication plans for all our communication vehicles. Members of the committee participate in ad-hoc workgroups for creating or updating ASTDD documents, and they provide final edits to ASTDD documents.

ASTDD maintains 21 Discussion Listservs for members, committees, communities of practice, and other special topics. In 2021 there were 220 posts to the Members listserv and 282 to the Dental Directors listserv.

A Social Media Workgroup handles all postings and is updating our library of social media messages. ASTDD’s Twitter account had an increase of 40% from the start of 2021 to the end of the year. The following three topics received the most engagement:

- The link between periodontal disease and diabetes
- The joint ASTDD and CareQuest Institute report on the challenges faced by school-based dental programs
- The role that dentists play in managing patients with eating disorders.

To involve ASTDD members in more of a learning collaborative, the Committee held its first Communications Community of Practice (CoP) on December 14, attended by 114 people. John Welby and Matt Jacob facilitated the discussion about challenges members encounter when posting, reviewing, or updating web content. Prior to the call participants were asked to respond to five questions related to their own websites, including agency protocols and limitations and relationships with public health information officers or communication directors.

Website statistics: about 22,000 users, 32,000 sessions and more than 70,873 page views.

Facebook: 665 followers

Twitter: 577 followers

Linkedin: 94 followers

Roundup newsletter: 5 issues plus a special NOHC issue

Annual Report: digital version only

Weekly Digest: 52 issues

“I never miss any of your ASTDD Spotlights, such great information.”

*Kari from Illinois*

“I appreciate the weekly digest, thank you for the great resource.”

*Matt from Wisconsin*

## Perinatal Oral health Committee (POHC)

The POHC serves as the primary ASTDD focal point for issues and resources relating to perinatal oral health and continues its partnership with the OHRC to support COHSII project activities (see the Projects section.) The committee updated its [perinatal oral health webpage](#) that includes several resources from states. The POHC developed a plan and budget for providing TA in 2022 to Guam, CNMI, Federated States of Micronesia (FSM) and American Samoa. TA efforts will include updating existing local BSS activities, training a local dentist to provide TA on BSS, assisting in implementing the Maternal and Child Health National Performance Measure (NPM) 13 in FY'22 and exploring adoption of NPM 13 and/or oral health-related State PMs in FY'23.



Committee members reviewed and provided comments on 1) the draft of *Prevention of Dental Caries in Children Younger Than Age 5 Years: Screening and Intervention* by the US Preventive Services Task Force; 2) the ASTHO policy statement in support of *Permanent, Sustainable Medicaid Financing for U.S. Territories*; and 3) the draft of *Promoting Oral Health During Pregnancy: October 2021* by the OHRC. The POHC continued to participate in the National Association of Chronic Disease Directors' Medical-Dental Integration Project, including participating in conference calls and reviewing materials.

### Evaluation and Quality Improvement

Our evaluation consultants Mary Davis of Project Y Evaluation Services, LLC and consultants Carissa Beatty, JoAnna Hillman and others from the Emory Centers for Training and Technical Assistance, provided general evaluation, performance management, and quality improvement technical assistance to support ASTDD and state oral health efforts, particularly those states funded by the CDC. To support ASTDD committees and other projects, they prepared a presentation and report on a COHSII survey of state NPM 13 activities. They reviewed a draft Community Water Fluoridation survey then met with the Fluorides committee to suggest revisions. The [ASTDD Evaluation and Quality Improvement webpage](#) contains many resources including links to webinars and to an updated [Toolkit for Planning, Evaluating, and Improving Interagency Collaboration for Oral Health Programs](#) with associated worksheets and a workbook, which was revised by our Evaluation consultants from Emory University to include language to be compliant with CDC Health Equity Language Guidelines.

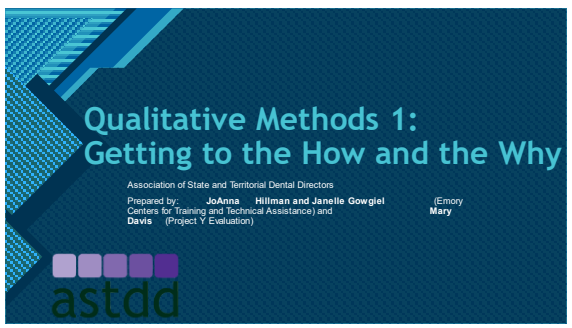
The ASTDD evaluation team and the CDC evaluation staff communicate regularly by email or ZOOM calls. There were approximately 30 posts on the evaluation listserv for CDC-funded states. Consultants reviewed all 20 CDC-funded state progress reports and evaluation reports and provided subsequent TA. In 2021, the evaluation consultants delivered the following webinar series to meet state technical assistance needs identified through reviewing state reports, conducting brief polls with state evaluators, and responding to questions from the states.

2/23 - Qualitative Evaluation Webinar #1: 15 Attendees

3/12 - Qualitative Evaluation Webinar #2: 15 Attendees

5/11/21 - Coffee Break Webinar on Preparing Evaluation Reports: 29 Attendees

12/6/21—Training Evaluation Webinar: 28 Attendees

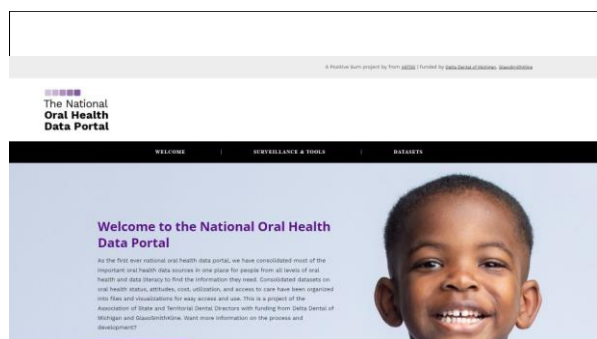


- Poll Results for all webinars:
- attendees rated the overall quality of the webinars as excellent or good
  - attendees strongly agreed/agreed they would be able to use the information / tools in their work

*"I don't have enough words to thank you for these resources." "I've been reviewing the additional materials and they are very helpful and much appreciated."* Responses to the listserv posts

## ASTDD Projects and Partnerships

### National Oral Health Data Portal



John O'Malley from Positive Sum LLC continued development of the [National Oral Health Data Portal](#) to launch in January 2022 with funding from Delta Dental of Michigan and Glaxo Smith Kline. After two years of development and the helpful input of many ASTDD members, the website is now live and publicly accessible. There is a vast collection of public oral health datasets to explore from stewards such as the CDC, the Health Resources and Services Administration (HRSA), Centers for

Medicare and Medicaid Services (CMS), Agency for Healthcare Research and Quality (AHRQ), and the ADA Health Policy Institute. We anticipate most people will use the site for the Tableau visualizations. John has developed several Tableau Workbooks and given examples of the types of analyses that can be run. Users can also download raw or curated data for their own analyses. We provide deep background on each different dataset so users can understand how the data were generated and what to be careful about during interpretation. There is an Orientation section to guide users through the dataset and dashboard and a Findings section with some top-level observation/analysis. The National Oral Health Data Portal is an ongoing project, and we value input as it evolves. We'll be adding more state-level datasets this year with some help from our friends at AHRQ, and we'll keep updating the current visualizations as new data become available.

### Healthy Aging

The Healthy Aging Committee (HAC) is a focal point for healthy aging issues, including chronic diseases, and resources for S/TOHP. Subject matter experts in healthy aging and oral health as well as S/TOHP staff serve on

the committee. The HAC is currently supported through a grant from the Gary and Mary West Foundation to develop a toolkit for state oral health programs, state units on aging and area agencies on aging to educate older adults on the importance of oral health to overall health. This is a three-year grant that will end in December of 2022 and is led by a separate workgroup. The workgroup includes state oral health programs and state units on aging from Alabama, Iowa, Missouri, Nebraska, Virginia and Wisconsin as well as a representative from the Administration on Aging/Administration for Community Living; Sam Zwetchkenbaum and Lori Cofano facilitate the workgroup. Two residents from Harvard's Dental Public Health Residency Program are developing infographics for two of the focus areas (oral health and overall health; oral health and nutrition). The seven areas selected for the toolkit are: 1) oral health and chronic diseases and their impact on overall health, 2) edentulism and oral health, 3) non-ventilator and ventilator associated pneumonia, 4) nutrition and oral health, 5) oral health and non-dental providers, 6) special populations' oral health needs, and 7) teledentistry. The workgroup is creating an inventory of existing educational materials that focus on older adult oral health, while the HAC updated the [Compendium of ASTDD Healthy Aging Resources](#) on the website.



HAC members were invited to attend the Gerontological Society of America's (GSA) Oral Health Interest Group (OHIG) meeting in October. GSA's virtual annual scientific session in November featured many sessions with oral health information. Several HAC members' collaboration efforts resulted in publications and presentations with GSA: [Pandemic-Driven Disruptions in Oral Health: 10 Transformative Trends in Care for Older Adults](#) and two webinars developed and presented by nationally recognized speakers under the theme of "Geriatric Oral Health and COVID-19: Old Problems, New Challenges, [Part 1](#) and [Part 2](#)."

*"Many thanks to Lori and the toolkit workgroup. So much good information gathered. The distribution and linkages of SOHP and AAA staff has great potential to elevate the importance of oral health and best practices to achieve it."*

### Responsibly Employing Safe Pain Interventions (RESPITE) Project



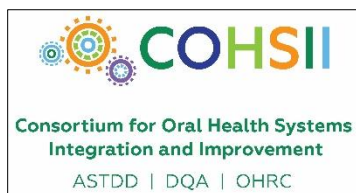
As reported last year, the University of Pittsburgh, School of Dental Medicine, together with the ADA Science & Research Institute, received a three-year grant from the US Food and Drug Administration (FDA) to develop an evidence-based clinical practice guideline for the management of acute dental pain. Through a contract, ASTDD has been providing dental public health expertise to the interdisciplinary team, helping develop implementation strategies, selecting intervention states, and reviewing content of the guideline and continuing education materials. State dental directors have contributed valuable feedback about dental prescribing practices and continuing education (CE) courses in their states as well as state networks and regulations. Expected outcomes are: 1) guideline for an established standard of care, 2) patients will receive safe and effective relief from acute dental pain, and 3) the risk of opioid diversion, opioid use disorder, and overdose will be reduced.

Since 2020 the project has accomplished many tasks. Several forums were conducted where citizens from across the country shared their values and preferences with respect to the management of acute dental pain. The results of these discussions were distilled into a statement, also approved by forum participants, that was shared with guideline panel members to guide their decision making. Existing empirical evidence about the effectiveness of various medications for managing acute dental pain was summarized in meta-analyses. At the end of August, the guideline panel began reviewing the evidence and the results from the forums and generated recommendations.

This fall the RESPITE team solicited feedback on a draft clinical practice guideline from stakeholders representing interested parties from diverse fields. The guideline panel then revised the draft to address issues raised by stakeholders. When the guideline was finalized, the guideline panel submitted manuscripts presenting the guideline as well as manuscripts summarizing the evidence synthesis and process used to obtain patient values and preferences. At the same time the chairside guides and decision aids were developed. The Continuing Education course has been recorded and is in the editing process.

With ASTDD's assistance, five states were identified to receive the CE course intervention, and five states to be controls. Selections were based on opioid prescription rates, interest and need expressed by state dental directors and their dental colleagues, geographic distribution, and location of CareQuest clinics for easier access to data. Clinicians in intervention states will receive messaging in early 2022 alerting them to the new guideline and providing them access to the free online CE course. Evaluations will be used to consider any necessary changes before the CE course is offered nationally. The team will also be developing a similar CME course for emergency department medical providers.

### **Center for Oral Health Systems Integration and Improvement (COHSII)**



The COHSII project is funded by the Maternal and Child Health Bureau (MCHB) and led by the OHRC in partnership with ASTDD and the Dental Quality Alliance (DQA). ASTDD executive director Chris Wood and consultants Kathy Geurink, Harry Goodman, and Reg Louie have provided expertise to the COHSII project and been closely involved since 2016. MCHB most recently awarded the OHRC

a three-year cooperative agreement to continue the COHSII project from 2021 through 2024. In 2021, ASTDD assisted OHRC with two key activities.

#### **1) Supporting the Networks for Oral Health Integration (NOHI) learning collaborative (LC).**

This project integrates oral health care into primary care at the community health center level to improve access to and use of oral health care for pregnant women, infants, and children at high risk for oral disease. The NOHI LC is composed of three regional projects; each project includes involvement from four states:

- Midwest Network for Oral Health Integration: Illinois, Iowa, Michigan, and Ohio
- Rocky Mountain Oral Health Network: Arizona, Colorado, Montana, and Wyoming
- Transforming Oral Health for Families: District of Columbia, Maryland, New York, and Virginia.

ASTDD provided TA to LC members to share successes, lessons learned, and challenges focused on building capacity around three core functions: 1) data, analysis, and evaluation; 2) outreach and education; and 3) policy and practice. Project staff and consultants held NOHI monthly webinars and a two-day virtual meeting.

Kathy Phipps, ASTDD data consultant, completed an analysis and report using data from the environmental scan of COHSII states.

- 2) Supporting states and jurisdictions in addressing oral health as part of the Title V MCH Services Block grant and related five-year needs assessment process.

TA focused specifically on NPM 13.1: preventive dental visits for pregnant women and NPM 13.2: preventive dental visits for children and adolescents ages 1 through 17. In FY '21, 27 states and jurisdictions selected NPM 13.1 and/or 13.2. Selections for FY'22 were submitted in September; those states and jurisdictions selecting the oral health NPMs will be announced in early 2022. When assisting states and jurisdictions to maintain or adopt NPM 13.1 and/or 13.2 common themes included collaboration and partnerships, access to care, data collection and surveillance, education, preventive services, and training. In addition to TA, consultants served as MCHB Title V Block Grant application reviewers.

COHSII also supported ASTDD to coordinate updates to select ASTDD Policy Statements and Best Practice Approach Reports completed or in progress in 2021 (listed elsewhere in this report).

## **National Center on Health, Behavioral Health and Safety (NCHBHS)**

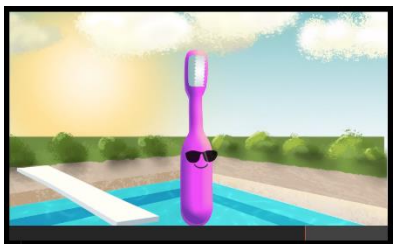
### **ASTDD Dental Hygienist Liaison (DHL) Project**

The DHL Project provides oral health training and technical assistance to Head Start Programs across the US. In partnership with the MCH OHRC at Georgetown University and the American Dental Hygienists' Association (ADHA), ASTDD oversees DHL activities for the NCHBHS. Funded by the Office of Head Start, the NCHBHS is currently in Year Two of a five-year grant. Through the DHL project, one dental hygienist from each state (2 in CA), the US Virgin Islands, and DC volunteer to help promote oral health for pregnant women and children enrolled in Head Start, serving as a communication link between NCHBHS and Head Start programs. Twelve Regional DHL Coordinators (RDHLC) provide mentorship to the state DHLs and serve as a contact for regional Head Start staff.



National presentations in 2021 included a roundtable session, *Head Start and the Dental Hygienist Liaison Project: Something to Smile About!* at the virtual 2021 NOHC, and *Something to Smile About! Head Start and the DHL Project* to the Head Start Regional Health Specialists, where they also introduced Juanita Simpson, the new RDHLC for Region XI (American Indian/Alaska Native Head Start) and Mariela Leyba, the new RDHLC for Region XII (Migrant and Seasonal Head Start). DHLs provided 19 state or regional presentations to more than 2,422 participants. Five one-hour webinars were offered to DHLs to support their roles. Topics included *Using Social Media Messages to Support Head Start Parents and Caregivers during COVID-19*, *Oral Health and COVID*, *Introduction to new Head Start NCHBHS*, *Oral Health & Trauma Informed Care*, and *Tips for Getting Your Presentation Accepted and Making it Engaging*. There were 113 posts on the Head Start discussion list and the RDHLCs met virtually for a day.

The Oral Health Team worked with Matt Jacob and a media company, Marketing for Change Co, to produce social media messages and graphics to reach Head Start parents and caregivers, especially during the pandemic when children were at home. These messages encourage them to instill good oral health habits at home during this stressful time and focus on three themes: toothbrushing with fluoride toothpaste twice a



day; replacing toothbrushes every three months; and storing toothbrushes properly. The campaign was launched in early February; by the end of February, these messages posted through multiple pathways generated 993,416 potential impressions on Facebook and 288,380 potential impressions on Twitter. Importantly, this content was posted on Facebook by Head Start associations, local programs and/or educators/staff in at least 27

states, plus Guam, the Virgin Islands, and Puerto Rico. [The materials can be accessed at Oral Health Social Media Package.](#)

ASTDD also co-hosted a Twitter chat in observance of National Children's Dental Health Month on February 24. The chat generated nearly 313,000 Twitter impressions, and more than 20 health stakeholders participated. In addition, the NCHBHS held a webinar, *Promoting Children's Oral Health*, for a broad audience interested in Head Start on February 22. Topics focused on strategies and resources to promote toothbrushing with fluoride toothpaste and good eating practices as well as what to expect when visiting the dentist during the COVID-19 pandemic.

Completion of data collection and analysis from the DHL Annual Assessment revealed:

- 40% reported an increase in access to care for Head Start children and they facilitated 29 direct referrals for oral health care
- 18% reported implementing an on-site fluoride varnish program
- DHLs attended 58 Head Start Health Services Advisory Committee meetings
- DHLs fielded 62 requests from Head Start staff
- Most common collaborations were with the Head Start health managers, with an average of 57% doing so each quarter, followed by 53% interacting with other dental hygienists



**Other Partnerships**

ASTDD continued to participate in calls and emails with the COVID-19 Public-Private Partner Dental Coordination Group, more than three dozen organizations and a dozen federal entities dedicated to improving the oral health of the nation. We work through coordinated messaging, sharing knowledge about the ongoing pandemic as it relates to oral health, promoting integration of oral health into overall health, and working collectively on oral health topics. ASTDD also participated in the CareQuest Institute's Pandemic Response Workgroup. ASTDD continues to participate in the Oral Health Progress and Equity Network (OPEN) with Christine Wood serving on the National Oral Health Connection Team, Kimberlie Payne serving as the state representative for Arizona, Adam Barefoot serving as the state representative for Georgia, and John Welby serving as the Co-Chair of the Public Perception Network Response Team. In addition, many ASTDD directors and associate members participate in other Network Response Teams, Network webinars, updates, and other training provided by OPEN. ASTDD members also participated as planners, speakers and attendees at several virtual meetings and conferences throughout the year.

In November ASTDD leadership held initial calls with Renee Joskow, DDS, MPH, FAGD in her new role as Senior Advisor to the National Institute for Dental and Craniofacial Research (NIDCR) director, and with Natalie

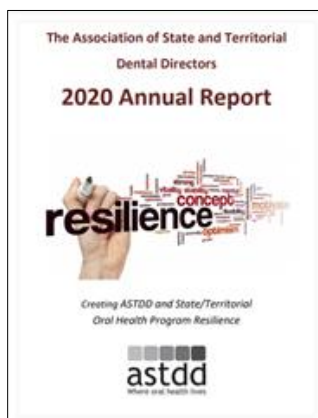
Chalmers, DDS, MHSc, PhD in her role as Chief Dental Officer in the Office of the Administrator, CMS, to discuss future collaborations and communications.

[Oral Health in America: Advances and Challenges](#) was released in late 2021. Several ASTDD dental directors and other members served as contributing authors and reviewers. ASTDD also submitted comments to the International Association for Dental Research (IADR) for their [Consensus Statement on Future Directions for the Behavioral and Social Sciences in Oral Health](#). This statement was endorsed by more than 400 individuals and groups from around the world, including ASTDD, and representing numerous disciplines in oral health and the behavioral and social sciences. In 2021 ASTDD wrote 28 different letters of support or provided comments with other national organizations. Comments were provided on items such as the Proposed US Preventive Services Task Force Draft Research Plan: Oral Health in Youth and Adults; the Consensus Statement on the Core Tenets of Chronic Condition Management in Schools; Draft Recommendation Statement and Draft Evidence Review on Screening and Interventions to Prevent Dental Caries in Children Younger Than Age 5; CMS Child and Adult Measure Core Sets; and the World Health Organization Draft Global Oral Health Strategy.

Throughout the past two years ASTDD has worked closely with the Caribbean and Pacific Island US Territories to conduct oral health needs assessments and update the relevant webpages on the ASTDD website. Summary information, reports and links that have been submitted are posted on the [Territorial and Freely Associated Oral Health Programs webpages](#).

## Celebrating our Achievements and Honoring Our Members

### ASTDD 2021 Virtual Annual Business Meeting and Awards Ceremony, April 9, 2021

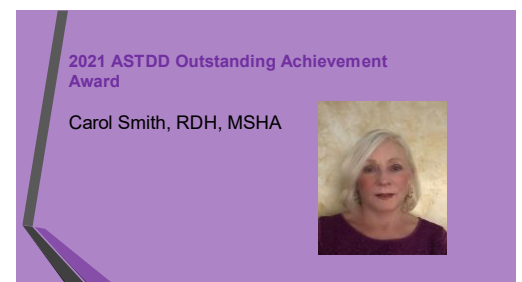


The Annual meeting was attended via ZOOM by about 109 members and associate members. The [2020 ASTDD Annual Report: Creating ASTDD and State/Territorial Oral Health Program Resilience](#) is posted on the website as well as the [2020 ASTDD Highlights PowerPoint](#) and the [recording of the meeting](#). Three nominees to the Board of Directors, Russ Dunkel as treasurer, Adam Barefoot as a director and John Welby continuing as the associate member director, were elected and then installed by Kimberlie Payne, the most recent Past President in attendance. The treasurer announced that ASTDD remains financially stable with increased membership dues and diverse funding sources. Chris Farrell delivered her President's message that was published in the March/April issue of *Roundup*. The

following ASTDD awards were presented; the [2021 ASTDD Awards Brochure](#) is on the website.

#### ASTDD Outstanding Achievement Award

Carol Smith has demonstrated outstanding leadership in the state of Georgia, in ASTDD and in other national organizations. She started with the GA Oral Health Program in 2009 and became director in 2011, serving in that role until 2018. Under her leadership, GA was successful in securing CDC funding for three consecutive five-year





project periods. She received the GA Department of Public Health Partnership Award in 2016 for her partnership with the Infectious Disease team to address an issue with dental unit water lines at a local dentist’s office. Carol served on the ASTDD BOD for two years and on numerous ASTDD Committees.

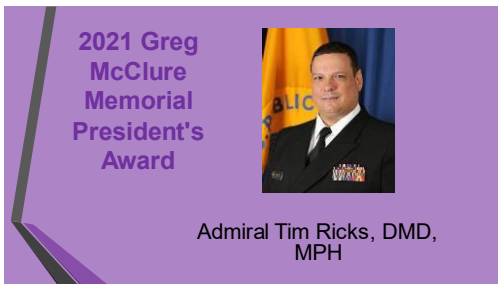
### ASTDD Distinguished Service Award

Michelle Landrum was honored for her commitment to improving the oral health of young children locally and nationally, particularly those in Head Start. She became an ASTDD consultant in 2009 as the Early Childhood Oral Health Committee Consultant and as the co-lead for the Head Start National Center on Health. She was co-creator and then the lead for the Dental Hygienist Liaison Project through two national center grants from 2011-2020. This project



has been recognized as an exemplary model by the federal Office of Head Start and the American Dental Hygienists’ Association. Michelle also served as Dental Hygiene Program faculty at Austin Community College in Austin starting in 2008, and becoming the Program Director in 2020 as the pandemic hit the US.

### Greg McClure Memorial President’s Award



Dr. Tim Ricks, USPHS Chief Dental Officer, among many other titles, has demonstrated his unique ability to search out connections and his passion for promoting the importance of dental public health along with oral health’s impact on overall health. He has been overseeing the development of the NIDCR Report on Oral Health and serves in numerous roles with the Indian Health Service. Dr. Ricks is an active associate member of ASTDD and has long supported state and

territorial oral health programs. He shares his monthly newsletter with ASTDD members and has reconvened the Federal dental session at the NOHC.

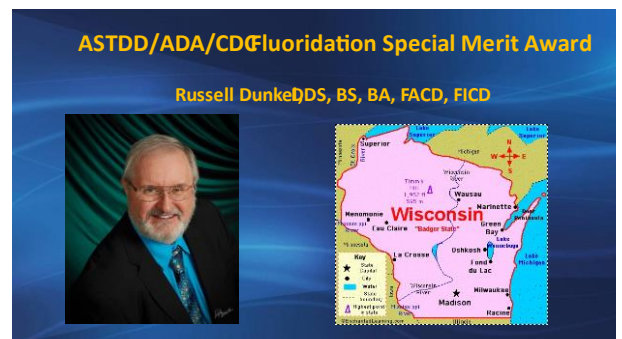
### American Dental Association/ASTDD/Centers for Disease Control and Prevention COMMUNITY WATER FLUORIDATION (CWF) AWARDS

Honoring 76 Years of Community Water Fluoridation in the United States

[Fluoridation Awards Brochure](#)

### Special Merit Award

Dr. Dunkel, Wisconsin State Dental Director, was honored for his creativeness and fortitude to fight fierce challenges to community water fluoridation in multiple communities and challenges to himself and others personally on multiple fronts. Because the pandemic restricted in-person testimony, Russ and many individuals and groups in the US and



internationally coordinated efforts to join in virtually to testify about the benefits and safety of fluoridation. Science and commitment to public health prevailed to keep Wisconsin fluoridated.

### Community Awards

- Fifty Year Awards: 379 water systems in 30 states (see list of states on graphic)
- Systems Reaching 75 Years of Continuous Water Fluoridation: 2 water systems in 2 states, the pioneers in fluoridation: Grand Rapids, Michigan and Newburgh, New York
- 2020 Community Fluoridation Reaffirmation Awards: Communities that defeated initiatives to discontinue community water fluoridation during the past year: Rangely, Colorado; Park Hills, Missouri; Tavares, Florida; Green Bay, Wisconsin
- 2020 State Fluoridation Quality Awards: Consistent optimally fluoridated water in over 90% of the adjusted water systems or population supplied by adjusted water systems as measured in the Water Fluoridation Reporting System (WFRS): Connecticut, Delaware, Indiana, Massachusetts, Michigan, North Dakota, Nevada, Utah
- 2020 Community Initiative Awards: There were no communities that passed water fluoridation initiatives during the past calendar year
- Healthy People 2020 Award: There were no states that achieved the Healthy People 2020 objective for the first time during the past calendar year.



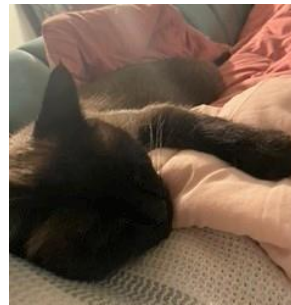
### Closing Thoughts

And now it is time to honor those furry friends who provide so much companionship and support for us during these crazy times. Some of them even learned to walk carefully across our computers or to chime in with barks and yelps and meows if they wanted attention or wanted to contribute.

### ASTDD Member Pet Companions and Home Office Assistants



Beth Lowe and Gus



Frances Wise and HB, Kedi and Zuki



Harry Goodman and Nutmeg



**Steve Geiermann and Chili Rhonda Stokely and Frank Julie Janssen and Checkers Julia Wacloff & Mishcka and Kita**



**Jana Winfree and Tibby Bev Isman and Sophie and Felix Lew Lampiris and Colette**



**Julie McKee and Wilbur and Olivia Kas Rafia and Panda Kimberlie Payne and Gus and Toby**



**Rudy Blea and Ms Linkin Robin Miller and Izzy Sarah Finne and Roxy Sam Zwetchkenbaum and Brisket**