

# The Association of State and Territorial Dental Directors 2020 Annual Report



*Creating ASTDD and State/Territorial  
Oral Health Program Resilience*





## FOREWORD

This past year the pandemic has focused the spotlight on public health and has made policymakers and the public more aware of public health science and the importance of the public health workforce. ASTDD members rose to the occasion by developing guidance and protocols around improved infection control procedures, increased personal protective equipment (PPE) for the oral health workforce and measures to help mitigate viral spread by aerosol-generating procedures. Dental directors conducted regular virtual meetings, meeting more often and with record participation to discuss policy development and best practice procedures. State/territorial (S/TOHP) oral health program staff were mobilized and deployed to assist with contact tracing and hotline calls, to disseminate PPE to dental offices and myriad other tasks. With the introduction of vaccines, S/TOHP staff now are poised to continue their efforts through assisting with vaccine administration. During 2020 ASTDD also continued efforts to increase awareness of the value of community water fluoridation and highlighted innovative ways to provide dental sealants and fluoride varnish to maintain the oral health of children while at home. Kudos to ASTDD members for all the great work that has been accomplished during this challenging year.

Christine M Farrell, ASTDD President

***Hope! Love! Health! Collaboration! A few of the emotions and values Dental Directors shared and want to carry forward into 2021.***



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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

## ASTDD FOCUS AREAS: STRENGTHEN S/TOHP LEADERSHIP

### AND ASSURE STAFFING/CONSULTANT CAPACITY & EXPERTISE

ASTDD is only as strong and resilient as its members. Definitions of resilience vary across fields, but all address two essential aspects: continuity and recovery in the face of change.

In their book, *Resilience, Why Things Bounce Back*, Andrew Zolli and Ann Marie Healy promote the following definition. “Resilience is the capacity of a system, enterprise, or a person to maintain its core purpose and integrity in the face of dramatically changed circumstances.” pg 7.

Resilient organizations must be good at situational awareness and analysis and be flexible enough to scale up and down as needed. Organizations such as ASTDD must foster and embody the critical roles of trust, cooperation and collaboration. Diversity plays a key role as do informal networks and “translational leaders who connect constituencies and weave various networks, perspectives, knowledge, systems and agendas into a coherent whole.” (pg. 15) This report hopes to show how ASTDD and its members exemplified resilience during the many challenges of 2020.

#### Membership (as of 12/31/20)

Total Membership: 568

State/Territorial Oral Health Programs	Life Members	Organizational Members	Individual Associate Members
50 States + DC + 11 territories	23	12 orgs	
233 assoc members		47 assoc members	203

Most new associate members in 2020 (116) worked in S/TOHP, 24 worked in community health centers, 14 in education, 9 in other health department programs such as MCH or Chronic Disease, 7 in oral health coalitions, and 57 in other settings.

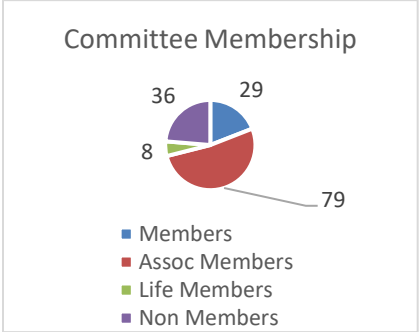
In 2019 we changed the S/TOHP category to include staff as well as directors to more fully involve them, assure they received relevant ASTDD information and had the opportunity to participate in committees, workgroups and the National Oral Health Conference (NOHC). This change was greatly appreciated by states. Upon joining ASTDD, each new member and associate member is welcomed by Chris Wood, Executive Director. Kimberlie Payne holds orientation phone calls with new associate members to review ASTDD communication pathways, committees and resources. She also interviews them about their professional responsibilities and interests and discusses which ASTDD opportunities and resources might be most beneficial to them. About 18 joined a committee or workgroup during the year. Lori Cofano orients new dental directors through the peer support

program, discussed later in the report.

“Contacting me as a new Associate Member is such an amazing service, thank you so much.” Kristi Thomas (MI)

When documenting the ethnic diversity of dental directors, 45% (17 SOHP and 11 TOHP directors) represent a race/ethnicity other than White (5 directors didn't respond).

ASTDD is significantly more diverse than previous years and, hopefully, will continue to improve with heightened recruitment efforts of under-represented groups into oral health professions and public health graduate programs. We have not yet gathered ethnicity information for associate and life members but feel it is important to do so. A diverse membership is essential and will help us continue to increase our focus on health equity.



Most ASTDD activities are conducted through committees or project/topic related workgroups led by a seasoned member, associate member or life member, and coordinated by a subject matter expert (SME). The chart shows commitment to the organization, with 29 members, 8 life members, 79 associate members and 36 non-members serving on the major ad-hoc committees this year to broaden input and dissemination of information.

### Leadership

#### Committee Chairs and Meeting Planners

**Awards:** Jason Roush, DDS

**Nominating Committee:** Kimberlie Payne, RDH, BA

**Annual Meeting Committee:** Jason Roush, DDS; Christine Farrell, RDH, BSDH, MPA; Kimberlie Payne, RDH, BA; Jay Kumar, DDS, MPH; Beverly Isman, RDH, MPH, ELS; Christine Wood, RDH, BS; **Association Central Meeting Planners:** Jan Aument, Bonnie Chandler, Sandi Steil; and **six AAPHD members**

**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

ASTDD's resilience resulted partly because our central office operates virtually, and all our subject matter experts (SME) work from their homes so that communication and accomplishment of many activities were not affected by the pandemic. Also, there are no set "work hours" so efforts may occur across the many time

zones seven days a week and evenings, and can occur while people are traveling domestically or internationally. Communication is often instantaneous—requests do not “sit on somebody’s desk.” ZOOM technology also became a cost-effective and primary tool for group communication and information sharing this year.

### **Subject Matter Experts**

#### **Best Practices**

Lori Kepler Cofano, RDH, BSDH

### **MCH Center for Oral Health Systems Integration and Improvement**

Kathy Geurink, RDH, MA

Harry Goodman, DMD, MPH

Reginald Louie, DDS, MPH

### **Children with Special Health Care Needs**

Jay Balzer, DMD, MPH

#### **Communications**

Kimberlie Payne, RDH, BA

#### **Data & OH Surveillance**

Michael Manz, DDS, MPH, DrPH

Kathy Phipps, DrPH

#### **Dental Public Health Policy**

Blue Heron Consulting/Judith Feinstein, MSPH

#### **Evaluation**

Emory Centers for Training and Technical Assistance/ JoAnna Hillman

Project Y Evaluation Services, LLC/Mary Davis, DrPH, MSPH

#### **Fluorides**

Blue Heron Consulting/Judith Feinstein, MSPH

#### **Head Start**

Kathy Hunt, RDH, ECPII

Michelle Landrum, RDH, MEd

Gina Sharps, BSDH, MPH

#### **Healthy Aging**

Lori Kepler Cofano, RDH, BSDH

### **National Oral Health Data Portal**

Positive Sum Population Health Informatics/John O'Malley, MHI

### **Perinatal Oral Health**

Reginald Louie, DDS, MPH

### **School and Adolescent Oral Health**

Lori Kepler Cofano, RDH, BSDH

### **School-based Dental Sealant Programs**

Sandy Tesch, RDH, MSHP

### **Territorial Support**

Reginald Louie, DDS, MPH

Pacific Islands Consultant - Ohnmar Tut, BDS, MPhil

### **Writer/Editor/Dental Public Health Infrastructure Specialist**

Beverly Isman, RDH, MPH, ELS

Monthly activity summaries and annual committee reports are shared with the SME and the Board of Directors (BOD). SME communicate with and support each other primarily through email and topic-focused phone or ZOOM calls. All attended and some presented during the virtual NOHC. Two professional development webinars were offered to them this year by our Evaluation SME: *Virtual Facilitation* to help them with ZOOM meetings, and *Survey Methodology*, focusing on design, implementation, and reporting. We ensure that several SME files back up to the ASTDD server on a regular and reoccurring basis as everyone uses their home computers.

Most SME have served ASTDD as SMEs or dental directors for more than 20 years, providing continuity, historical perspectives and incredible expertise and insights about dental public health and national/state/territorial issues.

### **Board of Directors**

The BOD meets monthly via ZOOM and did not meet in-person this year due to the pandemic. Some leadership positions changed during the annual business meeting in May so BOD members before and after that meeting are listed, with photos of the current BOD.

### **Members of the BOD**

President: Jason Roush, DDS (WV) then Christine Farrell RDH, BSDH, MPA (MI)

President-Elect: Christine Farrell, then Julia Wasloff RDH, MS (AZ)

Immediate Past President: Kimberlie Payne (formerly Yineman), RDH, BA then Jason Roush

Secretary: Julia Wacloff, then Samuel Zwetchkenbaum, DDS, MPH (RI)

Treasurer: Robin Miller, RDH, MPH (VT)

Director: Mona Van Kanegan, DDS, MS, MPH (IL)

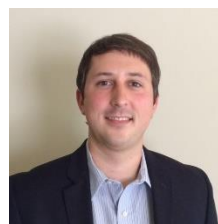
Director: Bruce Austin, DMD (OR) then Jay Kumar, DDS, MPH (CA)



Director: Lindy Bollen Jr, DDS (AR) then Adam Barefoot, DMD, MPH (GA)

Associate Member Director: John Welby, MS (MD)

Ex Officio members are Executive Director, Christine Wood, RDH, BS and Executive Director Emeritus, M. Dean Perkins DDS, MPH



The BOD approved and sent 23 letters of support or comments in 2020, six of which were in support of community water fluoridation in selected communities. ASTDD submitted testimony to support 11 American Dental Association (ADA) resolutions and asked for revisions on one other; all 11 were adopted and the 12<sup>th</sup> was revised and adopted. Letters were also sent to the National Academies of Sciences, Engineering and Medicine regarding a draft National Toxicology Report related to fluoride and also to the American Nurses Association and Alliance of Nurses about apparent biases expressed against fluoride and water fluoridation by a featured speaker in one of their webinars. ASTDD also was included on multiple sign-on letters to Congress and various federal agencies on several issues. Although most in-person conferences were held as virtual meetings this year, ASTDD was well represented at many of them. Reports from these meetings were included in monthly [Roundup](#) issues.

### Administrative Support

M. Dean Perkins, DDS, MPH; Webmaster      Cheryl Thomas, Business Manager

Bradley Cummins, Sixth Street Design & Marketing, LLC; Website and Listserv Hosting and Maintenance

### Communication Pathways

Website statistics: about 23,000 users, 33,000 sessions and more than 72,000 page views.

Discussion Listservs: 24

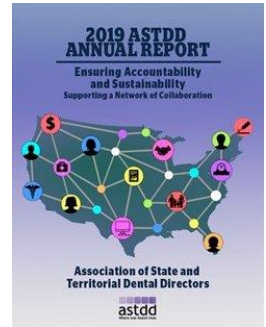
Facebook: 500 followers

Twitter: 400 followers

This year we evaluated and revised communication plans for all current ASTDD communication vehicles to assure we include the appropriate formatting and messages for the primary audiences. In 2020, in addition to regular and frequent updates to our website content, ASTDD devoted significant resources to improving both the back end and user side of the Best Practices section of the ASTDD

website. We began major updates to the Territorial and Freely Associated Oral Health Programs webpages. ASTDD owns several domain name registrations including National Oral Health Data Portal, Fluoridation Learning Online, FluidLaw, and the Mobile Portable Dental Manual. We process on-line membership payments and BSS Toolkit purchases and developed a system to ensure ASTDD can verify all checks submitted for payment for authenticity prior to payment. ASTDD maintains discussion lists for committees, projects and the membership: the most active ones this year were: Dental Directors (408 posts by 155 people), ASTDD Members (323 by 150 people—missing August stats) Head Start Dental Hygienist Liaisons (152 posts by 85 people), CDC-Funded Sealant Coordinators (62 posts), CDC-Funded Fluoridation Coordinators (57 posts), US Affiliated Pacific Island Contacts (54 posts), and CDC-Funded Evaluators (25 posts).

We published six regular issues and one special NOHC issue of the bimonthly online [Roundup](#) newsletter highlighting ASTDD’s accomplishments as well as the [ASTDD 2019 Annual report](#). Most of these resources are regularly read, shared and used by the majority of S/TOHP, especially the *Weekly Digest*. All issues of the *Weekly Digest* are archived and searchable in the [Members Only](#) section of the website.

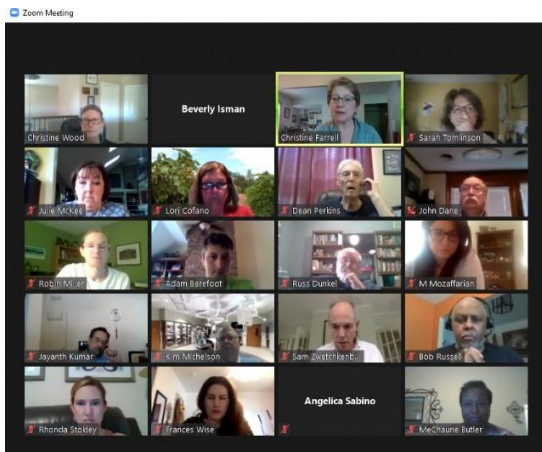


ASTDD's social media presence became more dynamic in 2020, with the addition of LinkedIn to its platforms beginning in November. This allows ASTDD to build its credibility and create a meaningful network with other established non-profit organizations and professionals. Our Twitter presence is also growing. In addition to regular tweeting, we participated in two Twitter chats, one in January and a second in September, "A Virtual Day of Action" hosted by the Oral Health Progress and Equity Network (OPEN). We continue to connect on Facebook with more than 500 members and followers, both individuals and partner organizations, by showcasing new reports, news and journal articles and oral health programming across the country.

“I use the Weekly Digest to prepare for my week, thank you for the great resource.” *Shelly from New Hampshire*

“I love the Roundup and how it shows more of a personal touch.” *Matt from New York*

### Professional Development and Peer Support



This was an unpredictable and unprecedented year for everyone, but particularly for S/TOHP. Most programs were asked to suspend many of their regular oral health activities to assist with COVID-19 related efforts. They showed the rest of the public health sector that they aren’t just about “teeth” but have valuable skills that cross over into other important public health arenas. In addition to the BOD monthly ZOOM meetings and a record number of discussions on the dental directors listserv, S/TOHP dental directors participated in 20 usually biweekly

Thirty to 40 directors and SMEs generally participated in the calls. This represents the most significant level of peer support ever seen among the dental directors.

ZOOM calls starting in March to share information and to provide mutual support and foster a sense of community and to prevent feelings of professional isolation. They shared how their programs were being

affected and what guidance and documents they were using; compiled questions and concerns for CDC about Personal Protective Equipment shortages, guidelines for emergency dental care, reopening practices and other issues; listened to guest speakers such as Dr. Lyndon Cooper discussing aerosolization in dentistry; and responded to multiple queries on specific topics. Most of the discussions focused on COVID-19 related issues, including which states were permitting dental professionals to order or conduct COVID 19 testing or administer the COVID-19 vaccine, impacts on Basic Screening Surveys to collect data for their oral health surveillance systems, and interruption in school dental sealant programs. ASTDD was honored to host them, provide notes, communicate with federal agencies and post resources on multiple ASTDD communication pathways. Topics for discussions were highlighted in bimonthly *ASTDD Roundup* newsletter articles, and many directors used multiple communication pathways to disseminate information in their states. Some dental directors were interviewed for an *ADA News* article for January 2021, and Michelle Landrum, SME and associate member, contributed an article for the American Dental Hygienists' Association *Access* magazine on *Effects of the COVID-19 Pandemic on Dental Hygiene Education*.

ASTDD also participated in calls and emails and submitted many questions to the COVID-19 Public-Private Partner Dental Coordination Group comprised of federal agencies and almost 30 national organizations to share information. In addition, ASTDD participated in the DentaQuest Partnership for Oral Health Advancement Pandemic Response in Oral Health Workgroup.

Thirteen dental directors/program managers participated in the **mentoring program** this year, led by Lori Cofano. John Dane, Chris Farrell, Reg Louie, Katya Mauritsen, Kimberlie Payne, Bob Russell, Sarah Tomlinson, Ohnmar Tut, Mona Van Kanegan, Julia Wacloff, Kathy Weno and Sam Zwetchkenbaum served as mentors to directors/managers from Alabama, Alaska, Connecticut, Commonwealth of the Northern Mariana Islands (CNMI), Idaho (two different program managers), Kansas, Massachusetts, Montana, New Jersey, North Dakota, Ohio, Pennsylvania, and Wisconsin. The NOHC 2020 pre-conference workshop: *Keeping the Ship Upright for Smooth Sailing: Using Mentoring to Help Steer Your Program* was presented on September 9<sup>th</sup> and 16<sup>th</sup> via Zoom. Presenters included Lori Cofano, Chris Farrell, Tommy Johnson, Kimberlie Payne and Bob Russell.

"The Peer Program is an invaluable asset to ANY new dental director. To know that there is someone available to answer questions and offer suggestions, and eager to do so, offers a tremendous feeling of confidence." Tommy Johnson (AL)

### **Annual Business Meeting and Awards Ceremony**

The ASTDD Virtual Business Meeting and Awards Ceremony was held on May 13, 2020 with 34 dental directors and 98 associate members participating. Reports were given on membership and financial status, and BOD officers were installed. Links were provided to recorded videos of guest speakers and to the various presentation PowerPoints and videos and the awards brochures and Powerpoint; these were posted on the Members Only section of the ASTDD website.



Three major awards recognized Exemplary Performance.

Since 2018 **Dr. Tut** has served as the ASTDD Consultant for Pacific Territorial Oral Health Programs. She was a critical and essential part of ASTDD's team in implementing the oral health infrastructure needs assessment and strategies project for the US Affiliated Pacific Islands (USAPI) funded through our CDC Cooperative Agreement.



**Matt Jacob** is an ASTDD associate member who serves on ASTDD's Communications Committee and its Social Media Working Group. Matt has given presentations on oral health-related communication strategies to several organizations and has worked with John Welby on a Messaging Matrix project for the past two years for ASTDD, conducting trainings and NOHC workshops as well as providing feedback and tips to DPH residents presenting projects.

**American Fluoridation Society** members provide "boots on the ground" to: help communities with local fluoridation activities and training local advocates for community water fluoridation (CWF) promotion; organize scientific meetings to promote CWF; work at the local, state, and national levels to extend CWF in the US; research scientifically sound publications; comment on published articles and reports; and maintain links and share information with international colleagues. The annual Fluoridation Awards are discussed later in the report.



### 2020 Virtual National Oral Health Conference (NOHC)



As the coronavirus began to spread in the US, California instituted measures that precluded our having an in-person event in San Diego in April. Many decisions were required during a short timeframe to avoid significant cancellation fees and to plan a virtual meeting. This was the 21<sup>st</sup> year of the ASTDD/AAPHD-sponsored NOHC. Many of the accepted workshops and some of the panel presentations withdrew their participation for consideration at a later time as the virtual format was not conducive to their proposed learning formats. The Meeting Planners worked with Animatic Media Company to use a Conference on Demand format for the live presentations and recordings.

Twenty keynote and panel presentations were scheduled each Friday from May 29-June 26, involving 63 presenters. Individuals attending each session ranged from 108 to 188. Posters and roundtables were not presented but 112 poster abstracts and 68 roundtable abstracts were shared via pdf files. There were 349 registrants representing more than 159 organizations, a good number but far less than when we have in-person meetings.

A [special issue of Roundup](#) highlighted some of the sessions. In addition, on April 14 eight Dental Public Health residents presented their projects virtually during a Five-Minute Masterpiece session, originally scheduled for the NOHC. The focus of the session was using “plain language” appropriate for a non-dental audience and one slide to describe a current or completed project. Matt Jacob and John Welby from the ASTDD Communications Committee provided individual feedback to the presenters; 76 people attended the session.

100% of the participants who completed online evaluations noted high satisfaction with the overall virtual conference experience and the variety and quality of topics.

#### Selected Comments from the NOHC Evaluations

“Convenient, high quality presentations. Particularly like the fact that I can rewatch the presentations and follow along with downloadable ppts.”

“I liked that it was spread out over the course of several Fridays so I wasn’t burnt out by the end.

“This was a great conference to attend regardless of primary nature of practice.”

“I thoroughly enjoyed every session I attended. As a new employee in Public Health, the information was very helpful and useful to my new role.”

### 2021 Virtual National Oral Health Conference (NOHC) Planning



As the pandemic dragged on, ASTDD and AAPHD leadership made the difficult decision to conduct the 2021 NOHC virtually instead of meeting in Orlando, necessitating many concessions regarding the venue contract and meetings in future years. The call for abstracts for 60-minute seminars resulted in 49 abstract submissions with the top 11 being chosen for the available live streaming time slots on three consecutive Fridays starting April 16, 2021. Abstracts for roundtables to be held on April 17 and posters on April 24 were due in January. Available time slots are much reduced from the number of presentations during in-person NOHC years. All sessions other than the Federal Dental Session and professional networking sessions will be recorded, with speakers available for questions during their appointed times. The [2021 NOHC website](#) contains more details.

### Support/Income for ASTDD and Services in 2020

ASTDD’s ability to diversify its sources of support, as reflected in the following table, contributes to its resilience. Each funding source varies in fiscal cycles, so most cross calendar years. The amounts in the table on the next page represent income received in 2020.

Funding Source	Amount	What Funding Supports
CDC Division of Oral Health	\$395,723	Multiple focus areas and SME for TA, training and resource documents
Office of Head Start, Georgetown Univ, OHRC	\$159,999	National Center on Early Childhood Health and Wellness Dental Hygienist Liaison project
HRSA MCHB, Georgetown Univ, OHRC	\$94,414	Center for Oral Health Systems Integration and Improvement SME for TA to states and territories
Delta Dental of Michigan and GlaxoSmithKline	\$96,000	National Oral Health Data Portal
Membership dues	\$39,925	Discretionary funds
National Oral Health Conference registration	\$22,500	2019 Virtual NOHC expenses; there was no profit from the 2020 NOHC as all funds are being applied towards the penalties from cancelling the 2021 in-person NOHC
Merced County, CA	\$19,995	Fiscal agent for Matt Jacob to develop oral health messaging
DentaQuest Foundation	\$19,028	ASTDD ED participation in OPEN National Oral Health Connection Team and one State Representative
Gary and Mary West Foundation/Apple Tree Dental	\$15,600	Healthy Aging Toolkit
Basic Screening Survey Sales and S/TOHP MOUs	\$15,270	BSS module sales and TA to states not funded by CDC
DentaQuest Partnership for OH Advancement	\$10,000	School-Based Services During COVID Toolkit
American Fluoridation Society	\$2,500	CWF Rollback Catalog
ADA	\$1,000	Annual Fluoridation Awards

Details about each area of support and focus are discussed in this report. Total income in 2020 was \$890,044 and expenses were \$883,051, resulting in a net gain of only \$6,992 because two large outstanding invoices were not paid until 2021.

## FOCUS AREA: PROMOTE USE OF EVIDENCE-BASED POLICIES AND PRACTICES

A primary purpose of ASTDD’s ad-hoc committees and workgroups and participation in special projects is to provide evidence-based resources for use by S/TOHP and their stakeholders as well as policymakers. We took the opportunity to address members’ needs as they changed throughout the year and as expressed via multiple Survey Monkey queries, ZOOM calls, webinar evaluations and interviews. ASTDD also provided significant technical assistance to S/TOHP when CDC staff were deployed to address COVID issues.

More frequent communication allowed feedback on the use of resources and guidance as well as improvements when indicated. Enhanced partnerships created increased support, more diverse perspectives and broader dissemination of information.

## Best Practices Committee

This committee supports more effective state, territorial and community programs through the development and sharing of Best Practice Approach Reports (BPAR). The collection of State Activity Submissions (SAS) and Descriptive Reports (DR) promote the integration of oral health best practices by other programs. The DR form has been updated and will be used for BPAR in 2021 and thereafter. [State and Territorial Oral Health Programs and Collaborative Partnerships BPAR](#), with Judith Feinstein, MSPH serving as primary author, was posted to the ASTDD website in March. Twenty states and one territory submitted DR associated with this BPAR. To respond to member requests to highlight new resources, Lori Cofano and Judy Feinstein offered an *ASTDD Spotlight* on this BPAR with more than 90 participants. Three additional documents are in process: Data Dissemination BPAR, and updates to the *School-Based Sealant Programs BPAR* and the *Oral Health of Children, Adolescents and Adults with Special Health Care Needs BPAR*.



## Dental Public Health Policy Committee



This committee develops, promotes and supports resources and policy-related documents to assist S/TOHP by describing the issues and evidence base at a high level, and to reflect ASTDD's priorities and stance on dental public health issues. Documents may include examples, strategies, recommendations or information that S/TOHP can use to assist decision makers (such as healthcare provider; federal, state or private agencies; employers; public health officials), or the public, in developing further

understanding of dental public health issues or in choosing between alternative courses of action in specific situations. In 2020 the committee produced four new documents:

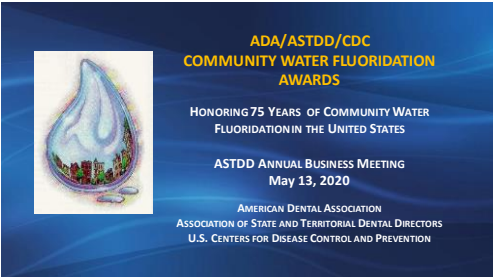
- [Reducing Emergency Department Utilization for Non-Traumatic Dental Conditions](#), working with Dane L. McClurg, DDS, MPH, was finalized and posted to ASTDD's website in January.
- [Perinatal Oral Health](#), working with the Perinatal Oral Health Committee and Ruth Barzel, MA from the National Maternal and Child Oral Health Resource Center (OHRC), was posted to ASTDD's website in February.
- [Promoting Antibiotic Stewardship in Dentistry](#), working with DPH residents Kobie Gordon DDS, Erinne Kennedy DMD, MPH, MMSc, and Cara Ortega DDS, MPH, was posted to ASTDD's website in April. This paper was the basis for a presentation during the NOHC by the three authors.
- [Healthy People 2030 Oral Health Objectives](#), working with Katrina Holt, MPH, MS, RD, FAND (OHRC), was posted to ASTDD's website in November.

In addition, the committee helped update the Association of State and Territorial Health Officials' (ASTHO) 2015 *Oral Health Position Statement* (now known as [Oral Health Policy Statement](#)) that was approved and posted to ASTHO's website in February. This paper is linked to a longer background document.



## Fluorides Committee

The Fluorides Committee provides ASTDD membership with the partnerships, policies and guidelines needed for the appropriate use of fluorides in community/population-based programs designed for dental caries prevention. Technical assistance is provided as needed to state dental directors and fluoridation contacts. The Committee also coordinates annual fluoridation awards in collaboration with the ADA and CDC at ASTDD's Annual Meeting. The *Fluoridation Awards Toolkit* was revised to include templates and instructions for states

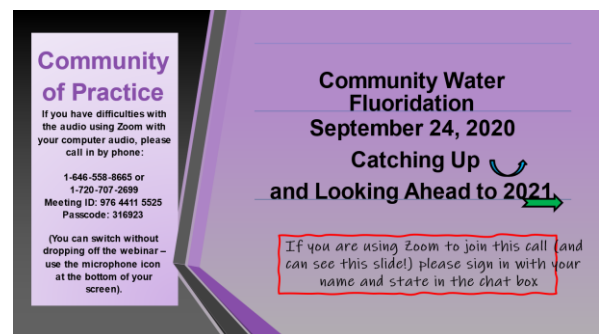


to prepare their own award certificates, with updated language in sample letters. The list of 50-Year Awards for Continuous Water Fluoridation, the Community Initiative Awards to two communities that passed water fluoridation initiatives during the past calendar year, the six Community Fluoridation Reaffirmation Awards, and the six states receiving the State Fluoridation Quality Awards can be viewed on the Members Only portion of the website. In collaboration with Tracy Boehmer, CDC National Fluoridation Engineer, Judy Feinstein

coordinated and presented the annual CDC Fluoridation Update as a Zoom webinar on May 20 in lieu of the usual NOHC session, with about 120 people participating. A highlight of this session was an update on the "New Wave Fluoridation Tablet and Feeder System."

Other activities included:

- Provided annual report on ASTDD Fluoridation Activities (June 2019 to May 2020) to the National Fluoridation Advisory Committee (NFAC), an advisory committee of the ADA Council on Advocacy for Access and Prevention (CAAP).
- Continued to coordinate the CWF "Community of Practice" for the 20 states funded by the CDC's Division of Oral Health based on their stated needs, and promoted the use of a dedicated listserv for the grantees. Judy Feinstein facilitated five webinars during the year. Many of these resources were also shared with non-funded states.
- Provided limited technical assistance to three states related to their CDC grants.
- Facilitated a call in April following up from previous calls with 11 interested states to discuss termination of their school-based fluoride mouthrinse programs, alternatives, and messaging.
- Maintained/updated the [Fluoridation Rollback Catalog](#) monitoring news reports with Google Alerts and public notices with our new subscription to Curate, a data-mining company that provides a searchable database of local government meeting agendas and minutes.



## School and Adolescent Oral Health Committee

The SAOH Committee promotes the importance of good oral health practices that improve the oral health of schoolage children and adolescents through education, networking and collaborative partnerships at local and national levels. School-based dental sealant programs are a focus area for activities. Members provided input on the School Based Health Alliance (SBHA) document, [School Oral Health Playbook](#), as well as reviewing and providing input on their sealant program evaluation/practice management tool, SCORE, and provided input on the Maternal and Child Oral Health Resource Center document, [Nutrition and Oral Health: A Resource Guide](#).



In June 2020, in response to the COVID-19 pandemic, a COVID-19 School-Based Programs Workgroup was formed. Workgroup members include multiple S/TOHP dental directors, the Organization for Safety, Asepsis and Prevention (OSAP), the National Association of School Nurses (NASN) and the SBHA. The workgroup partnered with the DentaQuest Partnership for Oral Health Advancement to:

- 1) Conduct an assessment of all S/TOHP about the impact the COVID-19 pandemic had on school-based programs and the Basic Screening Survey (BSS). Forty-three states and one territory responded, and follow-up interviews were conducted to ask about challenges, lessons learned, and resources programs developed in response to COVID-19. A Summary Report and collection of resources shared by states is posted on the [SAOH webpage](#).
- 2) Present a webcast, [School-Based Oral Health Care and COVID-19](#) on December 10, 2020.
- 3) Develop a [research brief](#) and [infographic](#) highlighting the disruption of school-based services and the implications on the oral health of children due to COVID-19.



The workgroup collaborated with the Data Committee and NASN to create resources for oral health screenings by school nurses. A four-page document, [Considerations for School Nurses in Return to School: Dental Screening](#) and a one-page infographic, [School Nurses: the Key to Good Oral Health During COVID-19](#), was disseminated to the NASN membership via their *Weekly Digest* and to ASTDD members in our *Weekly Digest*.

Twelve dental sealant Community of Practice (CoP) and/or sealant-related trainings were conducted for CDC-funded school sealant programs (SSP) during 2020. Participants discussed concerns about delays in school-based programs entering schools, use of glass ionomer (GI) vs resin sealant materials, sealant program data reporting, teledentistry services, new PPE requirements, and approved program activities for addressing the COVID pandemic and allowable expenses. One webinar in January 2020 featured Kathy Eklund from OSAP

on *Infection Prevention and Control (IPC) 2020: Evaluating Compliance in Portable and Mobile Oral Healthcare Settings*. In December 2020, CDC staff discussed new CDC infection control documents on *Considerations for School Sealant Programs during the COVID Pandemic*. Sandy Tesch coordinated multiple trainings with Susan Griffin and Srdjan Lesja from the CDC SEALS team to assist funded SSP with data entry, batching, and uploading data files into the SEALS tracking program. Per request by sealant coordinators, the group developed a PowerPoint presentation for training or assisting dental providers to standardize the process of selecting teeth for sealant placement: [Dental Sealant Standardization](#) and the [Pre/Post Test Quiz](#).

### ASTDD Sealant Guidance

Clinical settings	School-based programs
Published 2008 and 2016 - JADA	Published 2009 - JADA
Expert panel	Expert panel
ADA	CDC-Supported



### Head Start Dental Hygienist Liaison Project

ASTDD works in partnership with the OHRC and the American Dental Hygienists' Association (ADHA) to oversee activities for the Dental Hygienist Liaison Project. The Office of Head Start, Administration for Children and Families, funded the DHL project through the National Center on Early Childhood Education and Wellness through September 29, 2020 and then through a new grant starting on September 30 through the National

Center on Health, Behavioral Health, and Safety (NCHBHS). NCHBHS is a consortium of partners that design evidence-based resources and deliver innovative training and technical assistance to build the capacity of Head Start and other early childhood programs. The DHL Project provides oral health training and technical assistance to Head Start programs across the United States. Under the DHL project, one dental hygienist from each state volunteers to help promote oral health for pregnant women and children enrolled in Head Start, serving as a communication liaison for the Center. In addition, nine DHLs serve as regional coordinators and mentors for the state DHLs in their regions. Activities during 2020 included:

- Fifteen in-person and virtual oral health presentations were held at the local/state, regional, and national levels. Three national presentations were cancelled due to the COVID-19 pandemic. Michelle Landrum and DHLs Beth Stewart, Michelle Martin and Diane Flanagan presented *Using Interprofessional Collaboration to Increase Access to Care and Improve Oral Health Literacy* as part of the virtual 2020 NOHC.
- More than one-third of the DHLs participated in Head Start health services advisory committee meetings and an average of 15 percent in state health managers' network meetings. DHLs report on a monthly basis how they reach out to their state's Head Start programs and other partners to share approved oral health resources, respond to oral health related questions, provide screening and preventive services as needed, and help link families to dental homes.



In 2020, ASTDD recognized the DHL project as a best practice approach for collaborative partnerships (see [Best Practice Approach: State Oral Health Coalitions and Collaborative Partnerships](#)), and articles on the DHL project and about DHLs appeared in the July/August 2020 issue of *Access*, ADA's magazine.

## FOCUS AREA: IDENTIFY AND ADDRESS CROSS-CUTTING ISSUES

### Data and Oral Health Surveillance Committee and National Oral Health Data Portal Project

The Data committee oversees all ASTDD activities 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) and the *Synopses of State Dental Public Health Programs*. The committee completed the *2020 Synopses Report* (posted in Members Only) and [Summary Report](#), and updated the 2021 Synopses questionnaire including an online submission process. They worked with CDC on revisions to the children's BSS manual in preparation for OMB/PRA review and updated the following documents:

- [State-Added BRFSS/PRAMS/YRBSS Questions](#)
- [Assessing Non-Traumatic Dental Care in Emergency Departments](#)
- [State Surveillance Data Reference Guide](#)

Using data from the *2020 Synopses*, the committee created infographics on:

- [The Importance of State Oral Health Surveillance Systems](#)



- [Important State Collaborations Around Oral Health and Chronic Diseases](#)
- [The Importance of State Oral Health Program Plans](#)

Kathy Phipps also presented a webinar on oral health issues for the Council of State and Territorial Epidemiologists (CSTE) Chronic Disease/Maternal and Child Health/Oral Health Committee. Kathy, Mike Manz and Ohnmar Tut provide BSS training and technical assistance to states and territories. Despite the pandemic and interrupted surveys, 21 states and one territory received technical assistance and nine were at a stage to provide feedback. Some examples of outcomes are highlighted in the text box.

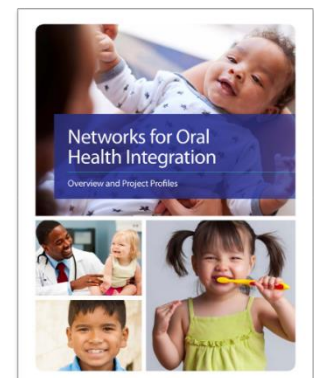
#### **Examples of BSS Technical Assistance Outcomes**

(IL) Full BSS report and brief comparing state and national data; presented as a poster at APHA; will use part of data sets in state oral health plan. (GA) Finished our 2016 BSS report for 3<sup>rd</sup> grade; helped guide me in selection of a new oral health epidemiologist and build out our oral health surveillance system; helped determine supplemental state-added questions to PRAMS and BRFS; guided my preparation and weighting of our Head Start data for analysis and plans for our 2021-2022 BSS; helped decisions regarding data entry and validation.

We continued to work with Positive Sum LLC on development of the National Oral Health Data Portal website and plan to launch that in 2021. John O'Malley and colleagues have developed the data portal in two phases: the first created the overall look and feel of the data portal website. The second phase has focused on the look and feel of Tableau vizzes (data visualizations.) These dashboards are complex, comprehensive and branded with an appealing ASTDD logo and purple/orange primary color scheme. There are dashboards for individual datasets and for data aggregations such as the NOHSS, state data, Healthy People 2020 and 2030, and COVID dashboard. ASTDD received additional funding from Delta Dental Foundation of Michigan to carry us into the Fall of 2021, expanding the scope of our project to include unique state-based datasets, updating 2020 data, and begin using existing public data in new ways such as imputing local periodontitis rates based on National Health And Nutrition Examination Survey (NHANES) data or replicating the ADA Health Policy Institute dental access maps.

### **Maternal and Child Health Projects**

ASTDD continued its partnership with the OHRC, the lead for the Center for Oral Health Systems Integration and Improvement (COHSII), a consortium working in partnership with the Dental Quality Alliance (DQA) and funded by the HRSA Maternal and Child Health Bureau (MCHB). ASTDD consultants provided training and technical assistance to three MCHB-funded grantees of the Networks for Oral Health Integration (NOHI) within the MCH Safety Net. The consultants and Perinatal Oral Health Committee also provided support through COHSII to many of the 32 state/territorial MCH and S/TOHP that selected the Title V MCH Services Block Grant National Performance Measure (NPM)13.1 or 13.2. They provided opportunities for the programs to share information about their experiences, lessons learned and successes in promoting preventive dental visits for pregnant women, children, and adolescents. The COHSII project team identified a set of [oral health quality indicators](#) (measures) for S/TOHP to monitor and improve the quality of oral health care for the MCH population. The related resources such as a readiness assessment, user guide,



technical specifications, and reporting template are available on the [project website](#). A webinar in November showcased how the states that piloted the indicators are using them.

## Healthy Aging Committee

Healthy Aging activities currently are supported through a three-year 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. A partnership assessment was used to determine the extent to which the state agencies were working together on older adult oral health and informed the decision about which states would be invited to join a Healthy Aging Project Workgroup. Six state oral health programs and state units on aging from Alabama, Iowa, Missouri, Nebraska, and Virginia and Wisconsin joined.

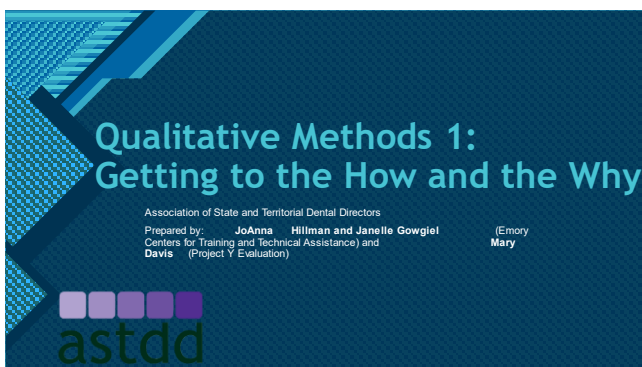
## Opioid Guidelines for Managing Acute Dental Pain Project

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 new ways to manage acute dental pain. Through a contract, ASTDD is providing dental public health expertise to the interdisciplinary team, helping develop and deploy dissemination and implementation strategies and ultimately evaluate the effectiveness of those strategies in changing provider prescribing behavior.

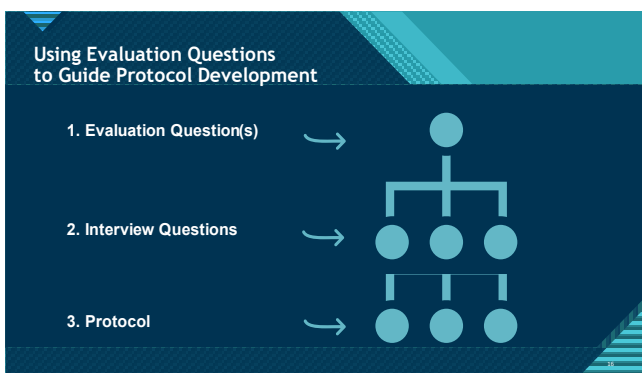


State dental directors are contributing valuable feedback about state networks and regulations. Expected outcomes are: 1) guidelines for an established standard of care, 2) patients will receive safe and effective relief from acute dental pain, and 3) the risk of opioid diversion, opioid use disorder, and overdose will be reduced.

## Evaluation and Continuous Quality Improvement



JoAnna Hillman and Mary Davis reviewed 20 CDC-funded state evaluation progress updates and reports and provided feedback. They also held technical assistance sessions with three states on specific topics and reviewed state evaluation questions and qualitative thematic analysis to inform a webinar series. They conducted four webinars for 30-50 S/TOHP participants in addition to the two for the SME including topics such as survey design and evaluation of oral health surveillance. To help committees apply principles learned from the survey webinars, they assisted with the design, formatting and compilation of information for multiple assessments. They also provided guidance to ASTDD to assure that we meet our grant objectives and fulfill our commitment to continuous quality improvement.



Some outcomes from the TA included:

- Improved quality of questions on the survey tool
- Provided information related to evaluation report templates we were previously unaware of; also helpful in having initial high-level discussion on evaluation strategies and reports
- Better understanding of what is expected from an evaluation perspective during unprecedented times
- Helped improve one of our communication plans.

## Oral Health Progress and Equity Network (OPEN) Participation

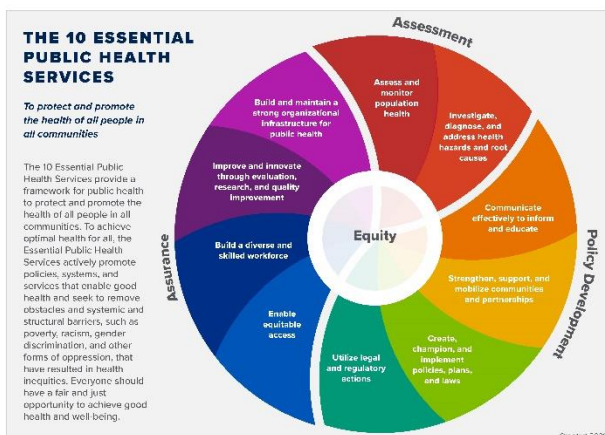
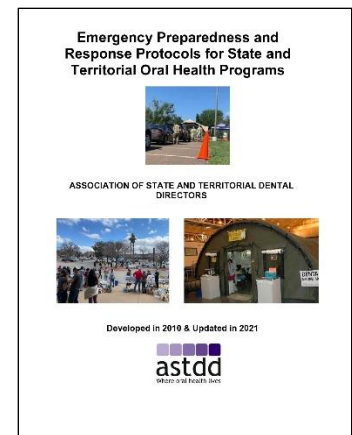
Chris Wood continues to be a member of the National Oral Health Connection Team; some of our SME are state reps; and numerous members and associate members are members of the Network. Currently OPEN is focused on establishing a 501-C-3 to serve as the fiscal agent for the Network.

## Other Projects Amost Completed

### Updates to Existing Documents That Will Be Available In 2021

#### Emergency Preparedness and Response Manual For S/TOHP

In 2010 ASTDD produced an *Emergency Preparedness Protocols Manual* in the wake of Hurrican Katrina to provide guidance to S/TOHP and 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. With the onset of the corononavirus pandemic we needed to update the manual to include infectious disease epidemics. 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.



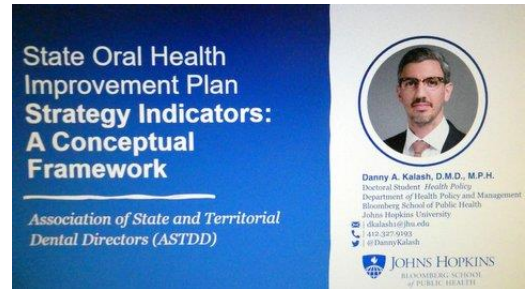
#### ASTDD Guidelines for State and Territorial Oral Health Programs

The Core Public Health Functions of assessment, policy development and assurance identified in the 1988 Institute of Medicine Report, *The Future of Public Health*, and *Ten Essential Public Health Services* (10 EPHS), were originally discussed in the 1994 document *Public Health in America*. ASTDD applied this same framework in the 1990s with its own *Ten Essential*

Services to Promote Oral Health in the US (10 EPHS-OH) that corresponded directly to the Public Health Essential Services. The *ASTDD Guidelines* were built on the framework of the core functions and the 10 EPHS-OH and have been revised multiple times in the past three decades. In the fall of 2020 the de Beaumont Foundation, Public Health National Center for Innovations (PHNCI), and a task force of public health experts slightly revised the 10 EPHS to reflect current and future public health practice. This necessitated updates and revisions to the *ASTDD Guidelines* and the 10 EPHS-OH, as well as other ASTDD documents based on the *Guidelines*. The new version will include S/TOHP roles and examples of activities in the main document, with links to helpful resources in an appendix.

## State Oral Health Improvement Plan Comparison Tool

The Children’s Dental Health Project (CDHP) originally created this tool to document information from 43 states with specific state oral health plans. The plans ranged in adoption date from 2002 to updates in 2015. To better analyze the oral health plans, 24 categories were created. When CDHP disbanded in 2019, ASTDD offered to provide ongoing updates. Dr. Danny Kalash began this update during his DPH residency, collecting new information from all the states and revisiting the categories. He presented a webinar and is also submitting a manuscript on his research. We encountered an unnerving glitch in the process when the 10 EPHS changed in the process of building his framework for the tool around the original ones. He is in the process of rearranging the categories to fit with the updated 10 EPHS-OH.



## Closing Thoughts

As we end 2020 with lots of stories, lots of stress but lots of successes, let’s look forward to a smoother road ahead and the opportunity to look at ASTDD’s vision, mission and key directions with new eyes and a slightly different perspective. To do that, all of us should make sure we are taking care of ourselves to increase our own resilience and well-being.

