

**THE ASTDD  
MANUAL FOR  
STATE ORAL  
HEALTH  
PROGRAM  
REVIEW**

**2015 REVISION**



**The Association of State and Territorial Dental Directors**

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- ASTDD State Self-Study for Oral Health Programs
- ASTDD Public Health Leadership Self-Assessment has now been replaced with the SOHP Competency Assessment Tools
- ASTDD Guidelines for State and Territorial Oral Health Programs were most recently revised in 2015
- ASTDD Annual State Synopsis of State and Territorial Dental Public Health Programs
- ASTDD State Oral Health Infrastructure and Capacity: Reflecting on Progress and Charting the Future

\*\* Findings and recommendations from the *Review of the ASTDD State Oral Health Program Evaluation Project Final Report*, supported by HRSA MCHB, and follow up surveys from recent program reviews were used to improve the State Oral Health Program Review process.

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## INTRODUCTION

### Overview of the ASTDD State Oral Health Program Review

The Association of State and Territorial Dental Directors (ASTDD) launched the State Oral Health Program Review (SOHPR) efforts in 1986. A number of different levels of technical assistance (TA) are available through ASTDD, ranging from assistance by a consultant on a specific programmatic question, to the comprehensive program review outlined in this manual. As of 2015, 25 states have requested and participated in self- studies and/or onsite program review visits. To view all of the TA options, access the Technical Assistance Request Form at <http://www.astdd.org/a-z-topics/>.

Program reviews are designed to assist state health department oral health programs in assessing their current program goals, objectives and key program activities and building their capacity to promote and maintain oral health in the state. The program involves a self-study process and then brings a team of oral health and public health experts into a state for a site visit. During the visit, the SOHPR team interviews the oral health program staff, other health department staff and key stakeholders. The team then produces a report that describes the status of the program and makes recommendations for its advancement.

The primary audience for *The ASTDD Manual for State Oral Health Program Review* is oral health program directors and staff in state health departments. This manual can help the oral health program explore the appropriateness and value of requesting an ASTDD program review. Additionally, this manual identifies specific steps in: 1) the application process, 2) preparation for a site visit, including developing an agenda, 3) logistics during the visit, including interviews, reading the draft report, and debriefing, 4) follow-up on recommendations, and 5) evaluating outcomes from the program review.

*ASTDD Guidelines for State and Territorial Oral Health Programs* is the document that provides the background for a program review. It can be downloaded at <http://www.astdd.org/state-guidelines/>. This document, first published in 1985 and recently revised in 2015, has been approved by the Association of State and Territorial Health Officers (ASTHO). The framework for the Guidelines was revised in 1997 to reflect the Institute of Medicine's core functions of public health: assessment, policy development and assurance, and also to include the 10 Essential Services to Promote Oral Health in the United States, an adaptation of the 10 Essential Public Health Services now used in the U.S. to evaluate state public health programs through the National Public Health Performance Standards Program.. ASTDD uses the 10 Essential Services Framework in the Self-Study that is a required part of the application for a State Oral Health Program Review. The SOHPR planning and site review process, however, collapses the 10 essential services into five core components to facilitate collection of documents and to focus interview questions. The five components are:

- 1) infrastructure;
- 2) data collection, analysis, and dissemination;
- 3) intervention design, implementation, and evaluation;
- 4) technical support and training; and,
- 5) public policy and advocacy.

The SOHPR process often serves to refocus oral health program efforts by requiring participating states to reflect on their strengths, weaknesses, opportunities, and potential barriers to success. To accomplish this, the oral health program completes a number of forms and questionnaires that are submitted during the

application process or prior to the site visit as part of a Briefing Book. The SOHPR process brings together different members of the community and allows individuals to share ideas for program development or enhancement. The process provides participating states with different perspectives and important information that is often critical to moving a state agenda forward. Also, the SOHPR process provides the site visit team with the opportunity to gain an in-depth view of a state’s program and to share lessons learned and successful strategies used by other state programs.

It is important to underscore that the SOHPR is an assessment process with recommendations, not an evaluation. The SOHPR team describes the status of a program, taking into account its complexity and uniqueness. It reveals the program’s assets and identifies ways in which the program can focus efforts to strengthen its core capacity to promote and maintain oral health in the state. ASTDD encourages states to seek additional technical assistance resources if needed *following* a SOHPR to facilitate implementation of the report’s recommendations.

### **Potential Benefits and Outcomes of State Oral Health Program Review and Technical Assistance Site Visits**

States that have participated in program reviews have noted many reasons for requesting a comprehensive review and also noted subsequent outcomes after the onsite review.

- Increase funding for staff and programs – both internal and external
- Increase program visibility within the state health department
- Create new policies
- “Legitimize” oral health program
- Assist vision and planning
- Improve networking/collaboration
- Improve data access, quality and analysis
- Increase allocation of funds for program evaluation
- Highlight program successes and accomplishments
- Identify technical assistance needs
- Provide information for submitting grants
- Increase fluoridation of public water supplies
- Expand evidence-based strategies
- Develop promising and best practices within the context and environment of the state/program

The onsite visit by the ASTDD team is a critically important component of the review. If the team was only to perform a review by reading documents and doing telephone interviews, many of the observations of the political, interpersonal and environmental issues that create the context for the oral health program and staff would be lost.

### **Potential Expectations and Commitments**

A comprehensive SOHPR requires a significant commitment of time and effort on the part of the oral health program director and staff as well as stakeholders. Although all states that have participated in program reviews feel that the benefits and outcomes justify the efforts required, programs should

assure that all participants and relevant administrators are committed upfront to making the process successful.

## **REQUESTING A STATE ORAL HEALTH PROGRAM REVIEW (SOHPR)**

ASTDD would like to make program reviews available to as many states as possible, yet resources are limited. Program reviews are supported by funds from a number of sources. The number of requests approved is dependent on the extent of financial support available through ASTDD and cost-sharing by the states.

State oral health programs that are interested in receiving a comprehensive state oral health program review (SOHPR) should do the following to apply:

### **Step 1: Submit a letter of intent to ASTDD**

States must submit a letter of intent prior to submitting a formal request for a SOHPR site visit. This letter may be brief. The letter should include: 1) the state name, 2) the official name of the oral health program /agency requesting the program review, 3) information for a program contact, and 4) what they hope to achieve from the program review. The letter of intent from the state oral health program should be submitted to ASTDD and may be done so electronically to [cwood@astdd.org](mailto:cwood@astdd.org).

### **Step 2: Participate in a phone consultation with the ASTDD SOHPR coordinator**

The ASTDD State Development and Enhancement Committee (SDEC) and a consultant Coordinator work together to respond to program requests in an appropriate, timely and effective manner. Upon receiving a state's letter of intent, the Coordinator schedules a phone consultation with the state contact person to review the request and determine if a SOHPR site visit is the best model for the state at that time. If so, the Coordinator will recommend to the Committee that the state be given approval to move forward with a formal application (see Step 3). If another option seems more feasible, then the Coordinator will make that recommendation to the Committee. After Committee deliberation, the Coordinator will follow-up with the state contact to present the Committee's recommendation.

### **Step 3: Submit the application for a SOHPR site visit**

Upon approval for a SOHPR site visit, the state oral health program must submit an application to ASTDD. See Appendix A for the application checklist to assure that the following information is included.

#### *Letter of Invitation from the State Health Officer or a Designee.*

The letter should demonstrate the presence of high-level support for the SOHPR site visit. The letter should also indicate that the State Health Officer or a senior Department official, i.e., an official that is organizationally above the most senior person in the oral health program, will be interviewed and attend a report-read out session on the last day if the state receives a SOHPR site visit.

#### *Oral Health Program Description*

Provide a brief overview (1-2 pages) of the oral health program, including location of the program organizationally within the Department of Health (attach an organizational chart to the application if available), number of staff members and their positions, total annual budget and major funding sources, the program's major activities, and if appropriate, its legislative authority.

#### SWOT-Self Study

Complete the ASTDD SOHPR-SWOT (Strengths, Weaknesses, Opportunities, Threats/Barriers) Self-study Form (Appendix B). If you haven't ever done a SWOT analysis or haven't done one recently, convene a small group of people to do this brainstorming activity. The categories on the form and the *ASTDD Guidelines for State and Territorial Oral Health Programs* can be used to stimulate thinking about gaps in the oral health program's infrastructure or activities, areas of strength within the program, factors that facilitate the program's capacity to improve oral health, and barriers (now or in the future) to program development. Summarize your analysis under each essential service section in the ASTDD SOHPR-SWOT Self-study Form for Oral Health Programs; the last page asks you to list overall priorities based on your SWOT analysis.

#### ASTDD SOHP Competencies Assessment Tools

Complete the ASTDD SOHP Competencies Assessment Tools and directions are found in Appendix C. They are also available on the ASTDD website at <http://www.astdd.org/state-oral-health-program-competencies-and-competency-tools/>. This is a different type of SWOT analysis that is useful in identifying gaps and overlaps in expertise. Include members of the team even if they are part-time or contractors. The process is useful in assigning work responsibilities, planning professional development opportunities or leveraging resources from other areas.

#### ASTDD State Synopsis Questionnaire

Attach a copy of the most recent State Synopsis questionnaire that was submitted to ASTDD for inclusion in the summary document and the website. This information will be valuable for orienting team members to your state and program.

#### Plans for Using the State Oral Health Program Review and Report

Describe in more detail than in your letter of intent what you hope to achieve from the site visit, i.e., what outcomes would you like to see. This should include a description of the program's intentions to use the recommendations from the site visit report.

#### Suggestions or Requests for Team Members

Site visit teams usually consist of 3-5 reviewers and a team leader. Team members might include another state dental director, a Medicaid/CHIP dental consultant, a representative of CDC and/or HRSA, or experts on a particular subject, e.g., coalitions, oral health surveillance, program evaluation, prevention strategies, working with tribal programs. If there are specific persons or particular skills or focus areas you would like to see represented in members on your site visit team, indicate such in the application.

#### Timing of the State Oral Health Program Review

Address the timing of a program review, answering the following questions: Why is this a particularly good time for the program to receive a program review? Is the program at a pivotal point, e.g., new state

dental director? New funding? How is the program in a position to use information from a site visit? What might be a good month to schedule the site visit?

### Cost Sharing

ASTDD is interested in knowing the program's ability to cost share. While cost sharing is not a requirement, it does demonstrate commitment to the process. It also helps to extend ASTDD's resources so more states can be served. Cost sharing can include transportation, honoraria, meals and/or accommodations for the SOHPR team.

### **Step 4: Receive a response from ASTDD**

Upon receipt of the written application and supporting documents, the ASTDD State Development and Enhancement Committee will review all requests and either 1) approve with funding, 2) approve, but hold until funding is available, or 3) hold for more information or clarifications. The Committee will notify applicants of a decision within a month of their request. While ASTDD will make every effort to accommodate the state's first choice of site visit dates as requested in the application, team member availability and other factors may influence the final dates. ASTDD will assign a team leader, with whom you will work in planning the site visit and identifying appropriate and desired characteristics for the site visit team. The ASTDD SOHPR Coordinator will share the application materials with the team leader and the other team members when assigned.

## **Initial Planning**

### **Initial phone call with team leader**

The purpose of this call is to discuss the next steps in planning and to select the site visit team. The team leader will go over the SOHPR Site Visit Preparation Checklist (Appendix D) as an overview of the various steps and timelines. The team leader will then discuss the composition of the team with the State Dental Director. Composition of the team will be a collaborative process and will depend in great part on the findings of the SWOT analysis, state priorities, and the preferences of the state program.

### **Review process for developing a site visit agenda**

The state is responsible for organizing the SOHPR site visit agenda in consultation with the team leader and arranging participation of interviewees. ASTDD has developed a suggested agenda for program review site visits (Appendix E) Review the sequence of events and use it later to develop your own agenda with the specific times and details.

### **Scheduling meetings between program staff and SOHPR team**

The meetings between state oral health program staff and the team are very important. All staff members should understand the purpose of the SOHPR process and site visit. The team is there to be supportive; sharing information about the program's assets *and* challenges will help team members provide an accurate statement about the program's status and develop useful recommendations.

A summary meeting between program staff and the site visit team will occur on the third day of the site visit. During this time, team members will ask questions about any issues that are still unclear. Oral



health program staff can ask question or raise issues that they feel may not have been addressed sufficiently during the interviews. On the last day a read-out of the preliminary report will occur and participants will have an opportunity to ask brief questions and correct any factual errors. A debriefing session with the state oral health staff and the team will occur at the end of the last day to plan next steps and discuss any need for technical assistance.

### **Compiling the SOHPR Briefing Book**

The purpose of the SOHPR briefing book is to familiarize the program review team members with the state and its programs prior to arriving for the review. This allows the team to concentrate on particular state priorities and issues of concern during the visit rather than spending time on becoming oriented to the state's programs and history. The clarity and relevance of information in the briefing book directly affects how useful the SOHPR visit will be to the state. The briefing book is structured around the five core components discussed in the overview. It is also anticipated that the briefing book will be of value to the program after the program review has been completed. It can serve as a ready reference for significant information about the program and is useful as an orientation tool, program overview and marketing document for the oral health program. Appendix F shows how these core components and their subitems are linked to the ASTDD Guidelines. The next section discusses steps to completing and sending the briefing book.

## **SOHPR BRIEFING BOOK: STEPS TO COMPLETION**

### **Step 1: Use the *Briefing Book Checklist***

A tool (See Appendix G) has been developed to help state oral health programs collect documents for the briefing book. Notice that the first section of the briefing book should contain introductory materials. Think about the kinds of information that would help the team obtain a basic understanding of your program and its unique situation. Do not feel limited by the list provided, nor are you expected to have all of the items listed.

For the most part, the briefing book should consist of materials that already exist in the state, although it is sometimes more efficient to compose a new document that summarizes relevant information. Include a table of contents or checklist and page numbers if at all possible. Include the Competencies Detailed Program Assessment Tool and Individual Assessment Tool found in Appendix C. Appendix H: State Oral Health Program Budget Worksheet and Appendix I: Core Data Sets Checklist in this manual. Documents described in the briefing book checklist should be included (when possible) in the briefing book. If an item is too large to include, at least one copy should be provided on-site at the visit, with more copies available if an item relates to more than one program component. At the end of each section of the briefing book, please list all items being held on-site for review. Also, if multiple examples of documentation exist, chose a few relevant ones for the briefing book.

## Step 2: Compile and send the Briefing Book

At least 3-4 months prior to the scheduled site visit, make a list of items needed for the briefing book and assign responsibility for gathering or summarizing specific materials. Allow one of these months for actually putting the document together. No later than 6 weeks prior to the site visit, send an electronic copy to each team member and to the ASTDD National Office; email addresses will be provided to you. A complete hard copy briefing book should be provided on-site.

**Preparing for a site visit is a valuable experience for the state oral health program. Not only does this process provide a comprehensive overview of the oral health program for the visiting team, it also compiles important information about the oral health program in one place for future use and reference.**

Remember that the program review team’s final report only reflects the information that they were able to obtain through the briefing book, on-site documents, and on-site interviews, observations and discussions. If the team is not given information, it will not be included in the consensus deliberations. The more comprehensive and clear the written materials, the better prepared the team will be to make recommendations that are useful to the state oral health program. However, “comprehensive” does not mean “large quantity.” Simply make sure that all relevant issues are addressed in the briefing book and provide introductory narratives when documents are not self-explanatory.

## PLANNING SITE VISIT LOGISTICS AND INTERVIEWS

### Conference calls

Prior to the site visit, the state dental director is expected to participate in at least two conference calls, which will be scheduled by ASTDD using a conference bridgeline and chaired by the team leader.

Call	Participants	When	Purpose
1	<ul style="list-style-type: none"><li>• SOHPR Team Leader</li><li>• State Oral Health Program Director/Staff</li></ul>	5 weeks prior to the visit	To determine important issues and needs of state program from the site visit; who will be interviewed; determine site visit agenda; go over logistical issues.
2	<ul style="list-style-type: none"><li>• SOHPR team members</li><li>• State Oral Health Program Director/Staff</li></ul>	3 weeks prior to the visit	To review information presented in briefing book and to ask state program staff questions; finalize site visit agenda and logistics.

## **Hotel, Transportation, Meals**

It is the state's responsibility to coordinate most in-town logistical arrangements for the site visit by the team. This is to be done in coordination with the ASTDD team leader. Team members will pay for their hotel rooms and submit for travel reimbursement to ASTDD unless the state is paying for their lodging. The selected hotel should be convenient to the health department and preferably have an on-site or nearby restaurant. A block of single rooms should be set-up for team members and individuals will confirm reservations on their own. The team leader and members will arrange and pay for their individual airfares. Ground transportation issues should be discussed to determine if it is necessary for the group to rent one or more vehicles to travel to interviews. Location and timing of meals will depend on the negotiated agenda. Team members may receive per diem from ASTDD to cover meals not covered from other sources.

## **Conference room, equipment and supplies**

The SOHPR team will need a comfortable meeting room where members may leave their belongings, conduct interview sessions and review documents. Other meeting rooms may be needed, depending on how the team members divide to interview various people. The state should provide table tents and name tags for both the team members and each of the interviewees, and be prepared to provide additional support as requested by the team prior to the visit, e.g., flip chart and markers, access to photocopier and printer. Team members will be encouraged to bring a laptop computer. However, the state should have a computer available to the team if needed, as well as telephone and Internet access, if possible.

## **Cost-sharing**

If the state oral health program is able to cost share to offset some expenses of the visit, the terms of the cost sharing should be spelled out in writing and agreed upon prior to the visit. Cost sharing can include transportation, honoraria, meals and/or accommodations for the SOHPR team. This can be paid for directly or team members can be reimbursed after the site visit. The state oral health program should consult with their contracts and grants management/business office to determine the most appropriate mechanism for facilitating any cost sharing arrangement.

## **Planning for interviews**

Although you may want to involve as many individuals as possible in the visit, it becomes logistically impossible for the team to conduct useful interviews with more than 20 interviewees. Thus, individuals who meet with the team should be chosen carefully and span a variety of stakeholders so that each of the five core components is covered adequately.

## **Step 1: Make a list of potential people to interview**

The most important aspect of the selection process is to remember that the SOHPR process is not an evaluation per se; it should be used as a tool to help build the state oral health program. The interview process is an opportunity for the team to learn about collaboration between the oral health program and its partners (or potential partners) within and outside the health department. The program must be willing to show areas that need improvement as well as strengths. When planning the list of people to be interviewed, take into consideration the program's goals for the site visit. How can this process be used to showcase the importance of the core components of an oral health program? Which partners could help advocate for building the oral health program? Use this process to raise the awareness of potential partners about oral health and their potential role in collaboration with the state oral health program.

Let the team know what the oral health program wants to achieve with specific partners and why. This will aid in developing interview questions. There are some partners that ASTDD views as essential to the SOHPR interview process vs. others that can provide relevant information. See Appendix J for a prioritized list. For example, the team always wants to interview someone who has oversight and/or authority over the funding that supports the oral health program, e.g., MCH director, state health officer. Involving decision makers will help when recommendations are given.

Some of the categories to select partners from include:

- Partners that the program works well with
- Partners that the program wants to work with
- Partners that the program does not work well with (this is an opportunity to learn about how to improve the relationship)
- Partners that don't focus on oral health but potentially could
- Partners that work with programs that address the needs of populations at high risk for oral health problems (for example, services to the elderly, mental health, department of education, representative of AIAN populations)
- Partners with influence such as advocacy groups, legislators, universities, advisory committee or coalition chairs/members, state dental association and dental hygienists' association leaders or other professional associations such as American Academy of Pediatrics local/state chapters
- Partners in the media
- Partners that could provide funding, such as local foundations

## **Step 2: Discuss draft list of interviewees with the SOHPR team**

When you have a draft list of people, email it to the team leader for discussion on the conference call. The team may want the opportunity to interview individuals who are not on your list. If so, determine whether any individuals need to be deleted from the agenda due to time constraints. Discuss the potential length of each interview so that the schedule can be developed accordingly.

## **SCHEDULING INTERVIEWS**

### **Step 1: Invite people for the SOHPR interviews (4 weeks out)**

After you have finalized the list, email invitations. Make sure to let interviewees know that they will not be expected to give a prepared presentation. Clarify that they have been invited to help a team of professionals assess the status of the oral health program in relation to five components and which component(s) they will be expected to address during the interview. Note that they will be expected to comment on past experiences of collaboration with the oral health program, as well as ways in which the oral health program could be strengthened. Ensure they are available for the times you need them.

### **Step 2: Email letter to confirmed interviewees (3 weeks out)**

Send a confirmation letter or email to partners who are scheduled to participate in interviews. A template letter is in Appendix K. Include information on the team members, an agenda, and any other relevant information about the SOHPR site visit and report.

### **Step 3: Conduct follow-up calls or emails with confirmed interviewees (1 week out)**

Call or email invited interviewees to confirm that they have received the confirmation letter. Answer any remaining questions that they may have about the site visit or the interview process. Remind interviewees that they are not to do presentations, but rather to give a very brief introduction and answer questions posed by the team. Information provided by the interviewees should be to clarify the briefing materials or to provide new information requested by the team.

## **CONDUCTING THE SITE VISIT**

The ASTDD visit review process takes approximately four days. During the site visit, the SOHPR team leader is responsible for facilitating all interviews and keeping the meeting on schedule. The leader may request assistance from the state dental director.

### **Step 1: Meetings with state oral health program staff**

All state oral health program staff should attend the meetings with the Program Review team. At the first meeting with state staff, the team leader will facilitate introduction of the staff and team members and briefly review/clarify the ASTDD SOHPR process. This is a special time for the team members to get to know the state staff and for the staff to share their ideas, perspectives and concerns with the team. This information is important for the consensus discussion part of developing recommendations for the report. Thoughts should be expressed about how direct the recommendations can be and what recommendations may cause problems for the program. The intent of the SOHPR site visit is to be helpful to the program's growth. Politics and sensitive issues such as jurisdiction, power and advocacy must be taken into account.

Other times may be set aside for the team to meet with the state staff on an informal basis and to collect information that may not have been shared in the briefing book or during the first meeting but is pertinent to the tone of the report and its recommendations. However, these meetings will be scheduled as needed. Staff members are encouraged to be as candid as possible with the team. All information will be treated as confidential by the team, and any reference in the recommendations will not identify sources but only the issues.

### **Step 2: Meetings with state health department management and staff**

The SOHPR team and the state dental director will schedule meetings with as many relevant health department program staff as possible. The purposes of these meetings are to obtain a broad overview of the workings of the health department, the relationship of the oral health program to other programs in the department, and to assess current collaborations and future opportunities. The team will determine if all team members participate in all meetings or if the team will split up and have individual meetings with some programs. It is anticipated that meetings will be scheduled with the state health officer and the immediate supervisor of the dental director.

All interviewees should have received information about the ASTDD SOHPR program and team members prior to the meetings. The state dental director and the team leader will determine if it is beneficial for state oral health program staff to attend some or all of the meetings. ASTDD recognizes that no one model is appropriate for all situations and the state dental director should make recommendations based on an assessment of what is most appropriate.

In general, having the state health department meetings prior to the meetings with partners will provide the team with the best opportunity to assess the linkages between the oral health program and the partners.

### **Step 3: Meetings with Partners**

In some previous state visits, the state staff have chosen not to be present during the partner interviewing process, giving these individuals the freedom to be as candid as they choose with the team. In this case, any questions that the staff believe to be crucial should be brought to the team's attention during the meeting on the first afternoon. Whichever format is used, the partners should feel welcome and that their information is seen as very important to the overall success of improving oral health in the state.

The team leader will explain the SOHPR process briefly. The partners should have already received a list of team members in their letter of invitation, and each partner and team member will have a name tag and name tent on the table. The team leader may ask interviewees for a short summary of their role in the state, but the majority of time will be allotted for the team to pose questions to these partner representatives. All team members will participate in the questioning of interviewees on all of the components during the review, but the team member who is primarily responsible for a specific component will take the lead for those questions. Although state staff may want team members to share their experiences and give advice, *this is not a technical assistance visit*. The ASTDD will provide suggestions regarding follow-up technical assistance at the end of the visit.

### **Step 4: Summary session with state staff**

After all the interviews have occurred, the team will meet with the state staff to summarize and get clarification on any items before drafting the report.

### **Step 5: Developing the draft report**

The SOHPR team reads and listens to a great deal of information during a program review. It is in the best interest of the process and the state oral health program to have sufficient time for the team to draft a report while physically together, on site. The opportunity for this to occur onsite allows for a more timely report and one in which the state dental program can provide input to assure accuracy and that political sensitivities have been addressed.

The SOHPR report will use the *ASTDD Guidelines for State and Territorial Oral Health Programs* and the *ASTDD SOHP Competencies* as the point of reference for the review of state oral health programs. The report will be developed so the state can use it as a valuable tool for program planning and evaluation and to promote the interests of the oral health program as it strives to meet the oral health needs of the states' population groups.

The report will contain an Executive Summary that briefly summarizes the most significant findings of the review team. The body of the report will address the capacity and infrastructure of the state oral health program to meet the needs of the state. Recognized priority needs include an oral health surveillance system, leadership of a state dental director and adequate/competent staff, resources to build community capacity, and health systems interventions to facilitate quality dental care. The balance of the report will

review the findings of the team relative to the three core functions of public health: Assessment, Policy Development, and Assurance. Detailed descriptions of the components of these core functions and the 10 Essential Services as well as examples of the state roles in each are included in the *Guidelines for State and Territorial Oral Health Programs* document. Additional information is contained in the companion document, the *Competencies for State Oral Health Programs*, which will be reflected in the report as well. The report will strive to be concise and focused. It is intended to be useful to the state oral health program, not to be a detailed reference document describing all aspects of the state oral health program and the multiple programs it directs or participates in. Supporting documentation, such as individual reports from team members or other documents, can be included as appendices to the report.

### **Step 6: Reading the draft report and receiving the final report**

Prior to this session, inform invited participants what to expect from the report read-out. Please advise all participants that this is not a time to discuss next steps. Those present should have the opportunity to correct any factual errors or ask questions regarding the review process. It is anticipated that the final report will be released from the ASTDD team to the state dental director within the two weeks following the state review.

### **Step 7: Debriefing**

The SOHPR team will stay to debrief with the state oral health staff after the report reading is completed. At this time issues of additional technical assistance, planning, evaluation, follow-up, etc. can be discussed, as well as a brief discussion about how to use the information in the report. The debriefing session should be summarized by the SOHPR team on the SOHPR Debriefing Session Form (Appendix L), with the state dental director and the team leader retaining a copy. The state staff will also be asked to critique the SOHPR process and offer suggestions for improvement using the State Critique of SOHPR Process and Immediate Outcomes Form in Appendix M. This form should be emailed to the SOHPR Coordinator, Dr. Louie ([reglouie@sbcglobal.net](mailto:reglouie@sbcglobal.net)) within a week of the visit. Team members will also be providing feedback on the visit to Dr. Louie so that improvements in the process can be incorporated into future SOHPR visits.

## **AFTER THE VISIT**

### **Send thank you letters (1 week after the site visit)**

Don't forget to thank all those people who participated in the interviews and reiterate any next steps as a result of the program review.

### **Participate in ASTDD's evaluation process**

Approximately three months following the SOHPR site visit, the state dental director will receive a call from the SOHPR coordinator, Dr. Louie, scheduling a time to conduct an interview to discuss short-term outcomes from the process. As a guide for this interview, you can use Appendix O: ASTDD SOHPR 3-Month Evaluation Interview. Dr. Louie will review the recommendations from the report and ascertain the appropriateness of the recommendations in retrospect, the degree to which they have been acted upon, enablers and barriers to implementing recommendations, and modifications/additions to previous

recommendations, if indicated. Please be candid with your feedback. The information you provide will be used to improve the SOHPR program and process.

About six months following the site visit, the state dental director will receive another call, scheduling time for a follow-up interview to discuss more long-term outcomes, the results of any recommended technical assistance, and any continuing frustrations trying to implement recommendations from the program review.

### **Request technical assistance**

After the site visit, you may decide that you need advice on implementing recommendations or other types of technical assistance. It is anticipated that the review will help in identifying areas where such assistance will be valuable. To request technical assistance, contact the ASTDD Executive Director ([cwood@astdd.org](mailto:cwood@astdd.org)) to discuss your needs so that an appropriate consultant can be identified.

### **Use the information in the report**

Don't let the SOHPR report collect dust on a shelf. There are many ways that you can use the report. Here are some ideas:

- Schedule a staff retreat to develop an action plan to address areas needing improvement.
- Incorporate into revisions to state oral health plan.
- Incorporate the information into grant proposals or other attempts to leverage resources.
- Issue press releases or write newsletter articles on the SOHPR process and anticipated outcomes.
- Use the information to determine training needs and facilitate/provide professional development activities.
- Share information with community partners and coalitions to use in advocacy efforts.
- Use as baseline to compare progress at regular intervals.
- Use with other health department programs and administrators to foster collaboration.
- Create a communication plan to disseminate the information (resources available at <http://www.astdd.org/health-communications-committee/>).
- Advocate for support of technical assistance to implement the recommendations.

## **LIST OF APPENDICES**

- Appendix A: SOHPR Site Visit Application Checklist
- Appendix B: ASTDD SOHPR-SWOT Self-Study Form for Oral Health Programs
- Appendix C: SOHP Competencies Assessment Process and Tools
- Appendix D: SOHPR Site Visit Preparation Tasks Checklist



Appendix E: Suggested SOHPR Site Visit Agenda Template  
Appendix F: Categories and Principles Used to Guide ASTDD SOHPR Matched to  
ASTDD Essential Dental Public Health Services  
Appendix G: Briefing Book Documents Checklist  
Appendix H: State Oral Health Program Budget Worksheet  
Appendix I: Core Data Sets Checklist  
Appendix J: Potential Participants in SOHPR Site Visit Interviews Checklist  
Appendix K: Template Letter for Confirmed SOHPR Interviewees  
Appendix L: SOHPR Debriefing Session Form  
Appendix M: State Critique of SOHPR Process and Immediate Outcomes  
Appendix N: Request for ASTDD SOHPR Technical Assistance  
Appendix O: ASTDD SOHPR 3-Month Evaluation Interview