

Facilitating Partnerships and Collaborations between State Oral Health Programs and Primary Care Associations

Final Project Report

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Overview

The Association of State and Territorial Dental Directors (ASTDD), in partnership with the National Network for Oral Health Access (NNOHA), the Health Resources and Services Administration (HRSA), Delta Dental of Colorado, and the DentaQuest Foundation joined together to create the “Facilitating Partnerships and Collaborations Between State Oral Health Programs and Primary Care Associations Project” for professionals who work in state oral health programs and state primary care associations. The project provided an opportunity for State Oral Health Program Directors and PCA Directors and/or PCA Oral Health Managers to engage in a process designed to deepen their understanding of each other’s current and potential capacities, enabling both to identify complementary activities that could then form the basis of an ongoing, substantive working relationship.

The “Facilitating Partnerships and Collaborations Project” involved the following:

- Submission of a joint application;
- Participation in a “Launch” webcast to outline the Project’s key activities, intended results, and highlight current PCA/State Oral Health Program collaboration success stories;
- A face to face meeting to better understand each other’s program capacities, partners, and collective competencies;
- One or two face-to-face meetings to identify collaborative activities;
- A face to face meeting to initiate development of a joint Project Plan;
- A Mid-project Community Learning Event (webcast or conference call) for all the project participants to share their initial progress, challenges, and lessons learned with the Project Team and Project Coaches;
- A face to face meeting to finalize the Project Plan and plan a joint presentation;
- A joint presentation about the Project Plan at the 2014 National Oral Health Conference (NOHC) in Fort Worth, TX in April 2014.

Application

In the application states were asked how long the State Dental Director and the Primary Care Association lead had each been in their positions. They were also asked to describe the current relationship and activities between the State Oral Health Program, Primary Care Association, and Community Health Centers in their state and to describe how this project would positively impact challenges and opportunities currently experienced in their state. The applications were reviewed and scored by representatives from ASTDD, NNOHA, and HRSA. Thirteen states submitted applications; those from Colorado, Hawaii, Illinois, Kentucky, Ohio, and Oklahoma were accepted.

Coaches and Resource Materials

ASTDD consultants Dr. Jay Balzer, Dr. Reg Louie, and Ms. Kathy Mangskau served as coaches and provided guidance to help identify and plan a collaborative project to improve the oral health of the residents of each state.

The Project Planning Team and coaches developed or utilized a number of resources to assist with the familiarization and planning processes. These included:

- A meeting 1 Worksheet
- The ASTDD Competencies for State Oral Health Programs
- A Collaboration Matrix
- A Work Plan template

Launch Webcast

A launch webcast included welcomes from ASTDD (Christine Wood, Executive Director) , NNOHA (Annette Zacharias, who is now NNOHA's former Executive Director), HRSA (Renée Joskow, Senior Dental Advisor and Angel Rodriguez-Espada, Chief Dental Officer, Bureau of Primary Health Care), and the Centers for Disease Control and Prevention (Bill Bailey, Acting Chief of the Division of Oral Health). Christine Wood then provided the conceptual background for the project, reviewed the project materials, introduced the coaches and reviewed the coach's tasks. Existing successful collaborations were then provided by representatives from the Michigan, New Mexico, and Arizona State Oral Health Programs and Primary Care Associations. The session ended with Q and A. A recording of the webcast is available at <http://astdd.adobeconnect.com/p832c05zkot/>

Team Work Plans

Over the course of the next seven months, the coaches and state teams met regularly to review and complete the various documents and to finalize their project work plans.

On March 4, 2014, the project planning team, coaches, and state team members held a call to discuss the presentations each state team would be making about their work plans at the National Oral Health Conference. The *State Oral Health Program/Primary Care Association Collaboration Pilot Project* culminated with these presentations.

The team presentations highlighted the variability of the team Project Plans. They included: development of a data collection system to track quality improvement; coordination around a Patient Centered Dental Home initiative; funding for a PCA Oral Health Coordinator; collaboration on a dental sealant model project; development of a structure to help provide an educational umbrella for a continuum of oral health education with health professionals, babies, and mothers; earlier entry into preventive care via physician services; improved access to follow-up dental care for children participating in school-based sealant programs; and fostering medical/dental inter-professional collaboration.

Colorado's work plan focused on four initiatives. The Colorado team decided to develop a form to be used for annual site visits to community health centers (CHC). The Annual Site Visit Form will provide a standardized data collection mechanism as well as a gap analysis for each CHC in Colorado. It will also provide a comprehensive analysis of the capabilities and progress of each dental program. The CHCs will identify and collect quality measures with the guidance of the

Primary Care Association Oral Health Coordinator. The quality measures selected will align with the initiatives of the State Oral Health Unit and other oral health organizations and facilitate a culture of data in CHC dental clinics. The second focus area was on partnerships and communication between the Oral Health Unit, the Primary Care Association and other stakeholders in the state. The third initiative was development of a Primary Care Dental Home Best Practices and Integration Manual. Their final initiative was to collaborate to secure funding for a permanent PCA Oral Health Coordinator.

Hawaii 's work plan focused on development of a Hawaii-based school dental sealant model through assessment of existing local and nationally-based school dental sealant programs. They intend to conduct assessments to determine project sites; develop a program documentation tool to assess existing school-based dental sealant programs; conduct interviews with Federally Qualified Health Centers (FQHC) and populate the assessment tools; and evaluate local and national programs and assessment data to develop recommendations.

Illinois plans to develop and implement a Prenatal Oral Health Partnership. The Oral Health Partnership will work with physicians and dentists to ensure that all pregnant women have access to needed dental care. It will launch with a demonstration project in five community health centers throughout the state.

Kentucky will focus on increasing medical dental collaboration to improve oral health in Kentucky. They will gather baseline data for the project; train pilot sites in use of Smiles for Life modules through TRAIN (KY.train.org); implement Smiles for Life in 2-4 sites at Kentucky Community Health Centers; and evaluate implementation of the Smiles for Life training at pilot sites.

Ohio will improve access to follow-up dental care for children participating in the Ohio school-based sealant program. This will be achieved by conducting an assessment to determine pilot project sites; developing a program implementation plan/protocol for the Care to Kids model; implementing the pilot project for the Care to Kids model in the school setting in 1-2 communities in Ohio; implementing the pilot project for Kids to Care model in FQHC dental clinics in 3-5 communities in Ohio; and evaluating the pilot project models.

Oklahoma focused on three initiatives. They will conduct a feasibility study of methods that may be used to foster inter-professional collaboration between medical and oral health providers at community health centers; collect and use dental patient/provider stories from CHC sites; and assess the feasibility of incorporating an orientation to community health centers and public health into dental school curriculum.

Although the national pilot did not provide funding to implement the projects, every state team has been able to at least initiate work on the project, and several have already identified funding to fully implement their projects.

Evaluation Findings

After the project ended, State Team members were asked to respond to an evaluation survey. The results are presented in Appendix 1 - Table 1. Overarching findings were that:

- The project information enabled them to understand the purpose of the Project, clearly identified what their organization was expected to contribute, and enabled them to define what constituted a joint Project Plan.
- The initial meeting with their counterpart fulfilled the intended purpose to better understand each other's programs
- The meeting(s) to review the "Collaboration Matrix" fulfilled the intended purpose of reviewing programmatic materials to identify activities for team collaboration for purposes of developing a joint Project Plan.
- The team coaches clarified issues and questions that arose during the course of the meetings, functioned as a sounding board to explore ideas and potential projects, and generally contributed to constructive interactions that enabled the teams to work together collaboratively.
- The joint Project Plans that the teams developed contain important activities that maximize their collaborative efforts, are feasible given existing levels of staff and resources, and enabled the teams to identify complementary activities that will form the basis of an ongoing, substantive working relationship.

Recommendations

Recommendations that emerged from the evaluation survey are to:

- 1) Provide funding to compensate team members for participating in the project;
- 2) Provide funding to support implementation of the work plans.

Summary

In summary, the *State Oral Health Program/Primary Care Association Collaboration Pilot Project* was a resounding success that can serve as a model to establish state-level partnerships to improve the oral health of our nation.