

Appendix 1: Action Group Plans

I. Vulnerable Adult Action Group

Vulnerable Adults Group Action Plan 2016

This Action Group proposes to meet quarterly in 2016 to work on the Action Plan below. Facilitation and logistics for these meetings would likely be required to be completed by a contractor or other designated person.

Objective #1: Expand Medicaid Oral Health Coverage for Adults

Overall Goal: All Medicaid enrollees have oral health coverage for necessary services.

Measurable Outcome: Eight or more partners or partner organizations are engaged and are given educational, research and/or data materials as requested.

Strategy 1A: Stakeholder engagement and education

Activities/Tasks:

- Identify, share or create materials, approved by DPH, to distribute to partner groups and stakeholder organizations (for them to distribute to legislators, decision makers):
 - Resources which highlight the number of adults who would be affected by expanded coverage, as well as health disparities and higher risk of chronic disease associated with poor oral health.
 - Data on the financial impact of the lack of coverage for adults (as available).
 - Stories of the impact of the lack of coverage – from individual committee members.
 - One-page *Issue Brief* or *At-a-Glance* document w/ standard talking points for consistent messaging.
 - Share articles about strategies and tools from other states who have successfully expanded coverage and link to their websites and resources.

Group Members Engaged: All active action group members will be engaged with these efforts. Heidi Mizell to lead.

Timeline: 1st and 2nd Quarters of 2016

Additional Resources Needed: None

Objective #2: Provide additional outreach to and care for vulnerable adult populations.

Overall Goal: Adults without oral health coverage receive needed oral health care services.

Measurable Outcomes:

- Two or more existing programs have expanded access to oral health care services for adults without oral health coverage.
- Two or more programs have integrated additional oral health services information into program literature.

Strategy 2A: Promotion of existing services - DE Dental Health Resource Guide, dental clinics including those in state facilities, in FOHC's, what dental services MCO's are already covering, etc.

Activities/Tasks:

- Disseminate information regarding all existing dental services and plans listed via the *Choose Health Delaware*/Health Marketplace to Navigators, Medicaid enrollment reps, Care Coordinators, libraries, applicable websites (e.g., DPH-BOHDS, DOHC, Delaware 2-1-1, Delaware ADRC, Family SHADE, others).
- Promote programs and resources that link individuals in need to existing OH services (e.g. Delaware ADRC, Family SHADE, Delaware 2-1-1, etc.). Create new tools/materials as necessary.
- Disseminate information available to Medicaid beneficiaries before individual's transition from child/youth to adult Medicaid. Partner with DMMA to get Medicaid Care Organizations (MCO's) involved.
- Explore expansion of DHCI use of non-Medicaid funds for oral health services.

Strategy 2B: Explore potential opportunities to expand and improve oral health including through use of the DPH Dental Van, state facility clinics and teledentistry to reach vulnerable adult populations

Activities/Tasks:

- Explore use of the Stockley dental facility for vulnerable populations.
- Expand DHSS' telehealth program to include dental services and professional education to meet community needs and address gaps in care.
- Explore expanded use of dental van.
- Explore opportunities provided by additional mobile companies coming to the state.
- Explore additional ways to provide fluoride varnish for adults, including in long term care (LTC) (expanded role of hygienists in LTC facilities and schools) .

Group Members Engaged: Chris Oakes and Margaret Bailey to lead and execute in collaboration with members of Partnerships Action Group.

Timeline: On-going throughout the year.

Additional Resources Needed: None identified at this time.

Objective #3: Develop oral health surveillance system screenings and data gathering for complete system of care.

Overall Goal: Gather basic data about access to care and utilize it to expand coverage for vulnerable adults.

Measurable Outcome: Two data sets have been created and shared.

Strategy 3A: Identify existing Oral Health Surveillance System or data gathering for oral health in Delaware

Activities/Tasks:

- Identify & review available data sources &/or systems for collecting OH data. (e.g., BRFSS, MDS 3.0, HPSA, others?)
- Identify # of individuals enrolled in Medicaid and the # of beneficiaries who receive dental services through existing Medicaid plans in collaboration with DMMA.
- Review and complete DE dental survey(s) conducted by DHSS national/state partners (e.g. NASUAD) and disseminate the follow-up reports.

Strategy 3B: Identify & review other states' Oral Health surveillance systems and plans (e.g. Rhode Island)

Activities/Tasks:

- Review available sources
- Attend available webinars

Strategy 3C: Raise the awareness of Oral Health among organizations planning for statewide health outcomes and quality improvement for vulnerable adults.

Activities/Tasks:

- Include OH questions in ALL health/social service surveys and assessments; and ensure inclusion of Oral Health in all state health-related plans (e.g., DE Plan to Achieve Health Equity for Persons with Disabilities).
- Reach out to appropriate contacts to share collected data.

Group Members Engaged: Jae Chul Lee to take lead on this. Work will be performed in collaboration with Healthy Delawareans with Disabilities data work group.

Timeline: Throughout 2016, with initial data being gathered in 1st quarter for legislative education efforts.

Additional Resources Needed: Additional funding to support the researchers' work.

Objective 4: Research and Share Best Practices for Oral Health Promotion and Delivery for Vulnerable Adults

Overall Goal: Dissemination of best practices for oral health promotion and delivery for vulnerable adults to interested organizations and stakeholder groups.

Measurable Outcome: Two or more research efforts will be completed and disseminated to partners and stakeholder groups.

Strategy 4A: Research other states' oral health models & best practices for targeting vulnerable populations.

Activities/Tasks:

- Engage university health promotion/policy or dental hygiene students at UDel/DelTech to research evidence-based programs and policies in other states.
- Attend webinars and perform additional research.
- Create and execute a campaign to share identified best practices.

Group Members Engaged: Not yet determined. The lead on this effort, group member or contractor, would be the liaison with Dr. Renee Kottenham who will serve as the representative to the Regional Oral Health Coalition.

Timeline: Throughout year.

Additional Resources Needed: Staff or personnel to reach out to Dr. Kottenham and universities/students to preform additional research and to share with agencies/stakeholders.

2017 and Beyond

Some of the following efforts were identified during the Action Plan meetings as efforts to be pursued in future years. However, some of these efforts may still be introduced or explored in 2016, but because of external agendas or internal resources they may not be fully implemented in the near term.

- 1) Add completion of fluoride varnish training to medical professions' license requirements.
- 2) Pursue policy changes to include oral health in Medicaid coverage for eligible adults through SIM/DCHI framework

Activities/Tasks:

- Provide the one-page *Issue Brief* or *At-a-Glance* document with talking points for DOHC members to use to promote inclusion of oral health in SIM work/outcomes.
- Provide data and tools for appropriate stakeholders to advocate or educate for expanded coverage as part of SIM.
- Develop a list of SIM subcommittees with meeting schedules and promote attendance by DOHC members.

- 3) Integrate dental providers with other healthcare providers (e.g., Medical Homes) so a patient can receive comprehensive, integrated healthcare, including oral healthcare.

Activities/Tasks:

- Educate professionals on how preventive and expedient dental care decreases poor health outcomes.
- Promote a referral network between physical and oral health providers.

- 4) Expand use of the DPH Dental Van, state facility clinics and teledentistry to reach vulnerable adult populations.

Activities/Tasks:

- Expand use of the Stockley dental facility for vulnerable populations.
- Expand DHSS' telehealth program to include dental services and professional education to meet community needs and address gaps in care.
- Expand use of dental van.
- Expand opportunities provided by additional companies coming to the state.
- Expand additional ways to provide fluoride varnish for adults, including in long term care.

- 5) Examine successful strategies used by DOHC to improve oral health for Delaware children and identify strategies that can be adapted to improve oral health for vulnerable adults.

Activities/Tasks:

- Ask DOHC to articulate successful strategies and improvement accomplishments related to care for children; identify parallels that could be used to support vulnerable populations.
- Explore the application of fluoride varnish for young adults with disabilities before they age-out of the education system.

II. Children Action Group

Children Group Action Plan 2016

This Action Group will meet on an as needed basis to create and execute events/efforts. One to one and small group meetings will also be incorporated.

Objective #1: Promote oral health assessment and preventive care by pediatricians or family physicians for children by age 1.

Overall Goal: Primary care providers are trained and have appropriate tools to provide oral health care.

Measurable Outcomes:

- Fifty or more primary care providers are trained and have appropriate tools to provide fluoride varnish for children under age 5.
- Fifty or more Fluoride varnish applications were billed for and paid by Medicaid.

Strategy 1A: Support, promote and expand physician trainings.

Activities/Tasks:

- Arrange and host three county wide fluoride varnish CME educational events for primary care providers and dentists.
- Support on-going training efforts by sharing information and offering networking opportunities.

Strategy 1B: Have resources/technical assistance available with billing tips, IT support for EMR oral health assessment forms, and patient education tools for primary care offices.

Activities/Tasks:

- Identify existing and/or create necessary resources
- Support dissemination efforts

Strategy 1C: Create evaluation mechanisms to measure impact of yearlong intervention efforts.

Activities/Tasks:

- Collaborate with DMMA, CCHS, Nemours, FQHC's, MSD, AAP and DAFP to measure effectiveness of efforts.

Group Members Engaged: All members engaged in this effort.

Timeline: Throughout the year.

Additional Resources Needed: Independent facilitator/contractor/someone to arrange logistics likely required for this group as most members are practicing clinicians.

Objective #2: Ensure children have a dental home.

Overall Goal: All children have a dental home.

Measurable Outcome: Fifty or more children have a new dental home and are seen by a dentist within a month of their well-child visit.

Strategy 2A: Ensure primary care provider oral health care concludes with referral to dental home.

Activities/Tasks:

- Provide networking opportunities for medical and dental providers/staff to increase awareness.
- Build referral relationships between family medicine practitioners/pediatricians and their own dental referral networks.

Strategy 2B: Develop outreach programs from health care centers, schools, and public health care facilities that locate and place children into a dental facility.

Activities/Tasks:

- Oral health care coordinators hired at FQHC's to coordinate referrals from primary to dental provider. Explore the potential to connect them with other community organizations.
- Work with social services – 211, WIC.
- Outreach to home visiting associations.
- Collaborate with Oral Health Literacy Action Group and DelTech leaders.

Strategy 2C: Training and promotion needed for general practicing dentists to assure adequate availability of dentists providing year 1 dental examinations.

Activities/Tasks:

- Outreach to dentists at primary care/dentists networking events to determine gaps and need for additional resources/training.

Group Members Engaged: All committee members.

Timeline: Throughout the year.

Additional Resources Needed: Independent facilitator/contractor/someone to arrange logistics likely required for this group as most members are practicing clinicians.

Objective #3: Disseminate consistent oral health information that is culturally and age sensitive, particularly for early child care programs.

Overall Goal: Increase awareness, behavior change, knowledge, and disease prevention, and improve school and quality of life.

Measurable Outcome: Twenty or more key partners have been contacted regarding incorporating new oral health literacy tools into their programs/practices/workflows.

Strategy 3A: Coordinate with Oral Health Literacy Group to identify “the” message/best educational materials to educate families with children.

Activities/Tasks:

- Utilize First Smile Delaware materials.
- Invigorate Tooth Troop.

Strategy 3B: Disseminate materials.

Activities/Tasks:

- Participate in promotion of social media campaign.
- Include materials as part of oral health tools shared with primary care providers.
- Integrate oral health literacy into Home Visiting Nurse programs.
- Share Oral Health information texting.
- Connect with key partners.

Strategy 3C: Coordinate with new FQHC dental managers to disseminate message and materials.

Activities/Tasks:

- Collaborate with all action group partners including FQHC’s, CCHS, Nemours, DAFP and AAP.

Group Members Engaged: All committee members.

Timeline: Throughout the year.

Additional Resources Needed: Independent facilitator/contractor/someone to arrange logistics likely required for this group as most members are practicing clinicians.

2017-2018: Expand existing programs and explore additional opportunities.

1) Expand existing programs.

Activities/Tasks:

- Dental examination for school - Move back entry requirement to early child care programs and/or explore recommended versus required exam. Collaborate with DIDER on this.
- Advocate for improved staffing for the DPH school-based oral health programs.

2) Research additional opportunities to expand oral health care for children.

Activities/Tasks:

- Identify and address barriers that prevent children from receiving a school/early childhood program dental examination – cost, transportation, lack of access to a dental office.
- Leverage technology:
 - Home Access Center (schools), DHIN (for creating efficiencies b/w doctors and dental clinics/offices), Oral health information texting.
- Implement Head Start children’s oral health case management program.
- Integrate oral health screening and preventive care into child care programs.

III. Oral Health Literacy Action Group

Oral Health Literacy Group Action Plan 2016

This Action Group proposes to meet on a Friday, every other month, in 2016 to work on the Action Plan below. Many of the activities in this plan have already begun and fall under different organizations. Many of the group members are already engaged through other projects/organizations/initiatives. This group sees that its primary role is to connect the dots of all the work that is going on and facilitate alignment of the activities. They can also address identified gaps.

Facilitation and logistics for these meetings would likely be required to be completed by a contractor or other designated person. However, it is a strong, committed and engaged group of members.

Objective #1: Develop/Select a united message for all stakeholders to use.

Overall Goal: Have the right materials and campaigns to increase awareness and knowledge for behavior change, disease prevention and improved quality of life.

Measurable Outcome: Five or more key partners/stakeholders will be able to identify and have access to the united message and desired educational materials.

Strategy 1A: Develop and execute an Information Campaign for Age 1 children and their parents.

Activities/Tasks:

- Share and promote Age 1 campaign efforts.
- Promote First Smile Resource Guide and website.
- Add oral health to the Child Development Watch First Year calendar.
- Text4baby.
- Provide fluoride Varnish and dental home education materials for Delaware Oral Health Coalition (DOHC) Children's Action Group and other partners.
- Find, develop or expand a comprehensive educational campaign around the importance of oral health for a healthy pregnancy and baby's health.
- Incorporate DelTech student presentations including "Have One" and "A Successful Visit" (Explore if there is Maternal and Child Health Bureau (MCHB) grant money for this).
- Explore if MCHB grant money could get materials for pregnant women (from programs in NY and CA).
- YouTube video about Age 1 program from PA / "Connect the Dots" – next stage Train the Trainers (dentists and hygienists for care under age 5) with support of the Dental Society.

Strategy 1B: Promote the usage of the "Oral Health 2014: Delaware, An Oral Health Literacy Strategic Communications Plan" to DOHC stakeholders and partners.

Activities/Tasks (just a few pulled from the report):

- Perform a baseline survey.
- Utilize/disseminate messaging and toolkit already developed – continue with existing activities.
- Identify key local conferences, events and organizations for speaking engagements.
- Identify media partners.
- Three pronged focus of Issue-Focused Advocacy, Public Awareness and Professional Integration.
- Emphasize link between oral health and overall health; consequences of poor oral health; and providing the “how to” basics for desired oral care behavior.
- Develop strong brand strategy.
- Work with trusted messengers:
 - Medical Teams
 - Educators
 - Early childhood care
 - Faith-based
 - Community and social service organizations
 - Other business and civic groups
- Community Health action group members to help with testing this in the community and then disseminating it to daycare providers, schools, and community groups.

Strategy 1C: Develop a high school Navigation guide - Powerpoint and book.

Activities/Tasks:

- Del Tech Action Group members to lead this project.

Strategy 1D: Develop an innovative electronic teaching program.

Activities/Tasks:

- DentaQuest grant to develop a game or app for this.

Group Members Engaged: All Members engaged. Many of the tasks and activities will be part of existing projects or come from contractors’ deliverables.

Timeline: Throughout the year.

Additional Resources Needed: None identified at this time.

Objective #2: Create and execute a grassroots campaign to promote oral health for policy makers, stakeholders, and consumers of health care.

Overall Goal: Disseminated materials and campaign increase awareness and knowledge for behavior change, disease prevention and improved quality of life.

Measurable Outcome: Five or more key partners/stakeholders will have distributed grassroots campaign materials, hosted information sessions or sponsored activities.

Strategy 2A: Coordinate with Vulnerable Adults and Partnerships Action Groups to determine materials most needed for policymakers.

Activities/Tasks:

- Review current legislative agenda and activities.
- Identify active partners, what materials they are already using, what additional materials are needed. Collaborate with Vulnerable Adults Action Group.

Strategy 2B: Create a Toolkit for a grassroots campaign, based on slides 13-18 of “Healthy Smiles Healthy You” powerpoint and incorporate the “Evaluation and Oral Health Referral Worksheet”.

Activities/Tasks:

- Share and promote developed tools, powerpoints, and brochures for this. New “Ah” campaign.
- Community Health to share with health educators and other public health personnel.
- Provide toolkit to schools, daycares, Grade 3 programs, summer programs, DTCC students (nursing in Stanton).
- Fact Sheets housed on DE Thrives (MCHB).

Strategy 2C: Integrate Oral Health Literacy into tobacco efforts

Activities/Tasks:

- Share new materials with Department of Public Health Tobacco Cessation and Prevention program coordinators.

Strategy 2D: Provide information for state initiatives.

Activities/Tasks:

- Share materials with Affordable Care Act team.
- Share toolkit with Delaware Center for Health Innovation (DCHI) community health workers and care coordinators.

Strategy 2E: Create a goal of school wide use of materials or curriculum.

Activities/Tasks:

- Incorporate “Understanding by Design” and ADA tools.
- Building on what Nemours is already doing in the schools (Adolescent Health).
- Ensure programs at every stage.
- Continue drawing contest.

Strategy 2F: Outreach activities via professional organizations – chapter newsletter and other outreach to AARP, AAP, DAFP, DAPA

Activities/Tasks:

- Continued dissemination of Impressions Newsletter.
- Provide materials for Children’s Action Group county wide primary/dentist education/networking events.

Strategy 2G: Evaluate dissemination of materials at end of the year.

Activities/Tasks:

- Create and execute evaluation plan.

Group Members Engaged: All Members engaged. Many of the tasks and activities will be part of existing projects or come from contractors’ deliverables.

Timeline: Throughout the year.

Additional Resources Needed: None identified at this time.

Objective #3: Disseminate consistent oral health information that is culturally and age sensitive, particularly for early child care programs.

Overall Goal: Increase awareness and knowledge for behavior change, disease prevention and improved quality of life through materials inclusive of, designed for and delivered to the diverse population of Delaware.

Measurable Outcomes:

- Three or more of the grassroots campaign materials are available in Spanish or developed for children.
- Three or more of the grassroots campaign hosted information sessions or sponsored activities will be for an organization whose target audience is children or Hispanic.

Strategy 3A: Promote various populations in materials as well as making them bilingual.

Activities/Tasks:

- Refine and solidify the definition of Delaware's at-risk oral health populations and geographic areas.
- Create materials (videos) in English and Spanish.
- Collaborate with Westside and LaRed FQHC dental/medical care coordinators.
- Include agricultural workers in promotions.

Strategy 3B: Coordinate with DOHC Children's Action Group to see what materials are needed for their efforts.

Activities/Tasks:

- Share FirstSmile Delaware.
- Invigorate Tooth Troop.
- Connect the Dots.

Strategy 3C: Disseminate materials.

Activities/Tasks:

- Include bilingual materials as part of oral health toolkit for PCP's as applicable.
- Preschools and daycares beg for presentations. How to do this most effectively? DTCC only has 15 students. Coordinate w/Nemours daycare licensing process (5-star rating). Offer credit? Train the trainers (staff and parents). Tooth Troop – add to websites.
- Ensure access of Age 1-5 materials for FQHC dental managers.

Group Members Engaged: All Members engaged. Many of the tasks and activities will be part of existing projects or come from contractors' deliverables. DelTech Action Group members engaged in many of these tasks.

Timeline: Throughout the year.

Additional Resources Needed: None identified at this time.

Objective 4: Expand existing programs and explore additional opportunities.

Overall Goal: Increase awareness and knowledge for behavior change, disease prevention and improved quality of life.

Measurable Outcome: One or more additional oral health literacy programs will be expanded or researched during 2016.

Strategy 4A: Expand the oral health training for health care profession DTCC students.

Activities/Tasks:

- Explore possibilities for, or initiate expansion of, program for Stanton nursing students.

Strategy 4B: Expand efforts of oral health pre-service training for Home Visiting.

Activities/Tasks:

- Explore on-line option for this training.
- Collaborate with Advisory Committee.
- Include home visitor ambassadors.

Strategy 4C: DTCC host a SuperSealant Saturday.

Activities/Tasks:

- Implement, promote and expand these events.

Strategy 4D: Partner with childhood service and learning.

Activities/Tasks:

- Contact Boy and Girl Scout organizations, 4-H (Health Rocks curriculum), FFA, FHA and others to create an OH literacy badge or other certification in recognition of mastery of oral health prevention information and techniques.

Group Members Engaged: All Members engaged. Many of the tasks and activities will be part of existing projects or come from contractors' deliverables.

Timeline: Throughout the year.

Additional Resources Needed: None identified at this time.

IV. Partnership Action Group

Partnerships Group Action Plan 2016

This Action Group will meet quarterly to create and support events/efforts. One to one and small group meetings may also be incorporated.

The overall goal of the Partnerships group will work to support programs and events of the three other Action Groups.

Children Action Group Primary Objectives:

- **Promote oral health assessment and preventive care by pediatricians or family physicians for children by age 1.**
- **Ensure children have a dental home.**

Overall Goal: DOHC partners will support the Children's Action Group in achieving these objectives.

Measurable Outcomes: Five or more DOHC partners will support and disseminate information about county wide pediatrician/family physician/dentist fluoride varnish education/dental home networking events.

Strategy 1A: Promote fluoride varnish physician trainings and networking events in their communities.

Activities/Tasks:

- Share information.

Strategy 1B: Consult with Vulnerable Adults event organizers/refer possible funding resources to support these efforts.

Activities/Tasks:

- Identify and share known funding resources.

Strategy 1C: After events, share available services (fluoride varnish and dental homes) with their communities.

Activities/Tasks:

- Promote with constituents/community members fluoride varnish by age 1 with primary care provider and dental home concepts after the networking events.

Group Members Engaged: All members engaged in this effort.

Timeline: Throughout the year.

Additional Resources Needed: Independent facilitator/contractor/someone to arrange logistics likely required for this group as the group does not have a chair (or DOHC board needs to identify a willing chairperson).

Vulnerable Adults Action Group Priority Objectives:

- **Expand Medicaid Oral Health Coverage for Adults.**
- **Provide additional outreach to and care for vulnerable adult populations.**

Overall Goal: DOHC partners will support the Vulnerable Adults Action Group in achieving these objectives.

Measurable Outcomes:

- One or more partners will reach out to their legislators regarding additional oral health coverage.
- Twenty or more vulnerable adults will be referred to an existing service for an oral healthcare need.

Strategy 2A: Participate in advocating for Medicaid Oral Health Coverage for Adults if appropriate.**Activities/Tasks:**

- Contact legislators with support for expanded coverage. Share stories from their community.
- Share information with clients/colleagues about these efforts.

Strategy 2B: Refer clients in need of services to existing services.**Activities/Tasks:**

- Partners share the DE Dental Health Resource Guide with community/clients.
- Partners consider possibilities for state dental van and/or connecting adults with the state facilities dental clinics – explore partnerships.

Group Members Engaged: All committee members.

Timeline: Throughout the year.

Additional Resources Needed: Independent facilitator/contractor/someone to arrange logistics likely required for this group as the group does not have a chair (or DOHC board needs to identify a willing chairperson).

Oral Health Literacy Action Group Priority Objectives:

- **Develop and execute an Information Campaign for Age 1 children and their parents.**
- **Create and execute a grassroots campaign to promote oral health for policy makers, stakeholders, and consumers of health care.**
- **Disseminate consistent oral health information that is culturally and age sensitive, particularly for early child care programs.**

Overall Goal: DOHC partners will support the Oral Health Literacy Action Group in achieving these objectives.

Measurable Outcome: Ten or more partners have been given access to new oral health literacy tools to incorporate into their programs.

Strategy 3A: Coordinate with Oral Health Literacy Group to identify “the” message/best educational materials to educate families with children.

Activities/Tasks:

- Utilize FirstSmile Delaware materials.
- Invigorate Tooth Troop.

Strategy 3B: Coordinate with Oral Health Literacy Group to identify additional materials/promotions to to disseminate and share with their communities/clients.

Activities/Tasks:

- Include materials/promotions developed by others as part of on-going community health programs.
- Share Oral Health information texting.

Group Members Engaged: All committee members.

Timeline: Throughout the year.

Additional Resources Needed: Independent facilitator/contractor/someone to arrange logistics likely required for this group as the group does not have a chair (or DOHC board needs to identify a willing chairperson).