



Annual General Membership Meeting Minutes Delaware Oral Health Coalition

September 12, 2014

I want to thank everyone for taking time out of your busy schedules to participate in our Annual General Membership meeting on September 12, 2014. The goal for the day was to launch the Delaware Oral Health Coalition Action Groups. The work that was completed during the DOHC meeting on June 6 was compiled, and a content analysis was implemented that yielded four overarching Goals. These goals are long term and represent the path that the members identified as important. Each goal was assigned to an Action Group. The members broke into groups and each Action Group was requested to conduct the following:

1. For a selected Goal, identify strategies that are positive and probable to accomplish within a five-year period.
2. Generate ideas on how the collection of strategies as a whole will demonstrate improvement toward each Goal.
3. Review the Goals and decide if they represent the appropriate categories and identify any additional Goals, if needed.

DOHC Plan/Vision: All members of the Delaware population, regardless of age, ability, or financial status, will achieve optimal oral health through an integrated system which includes prevention, education, and appropriate treatment.

Domains/Areas:

- I. **Community outreach** includes oral health literacy and disease prevention efforts to create a shared public value around oral health. The focus of this work is to associate oral health with general health, as well as basic oral health education targeted at diverse population segments throughout the lifespan (e.g., school-based and early-childhood programs, home visiting, train-the-trainer resources, volunteer programs, etc.).
- II. **Access to care** encompasses universal barriers to care experienced statewide as well as particular demographic, geographic, or age-related barriers to care that prevent individuals from accessing dental treatment and achieving good oral health (e.g., adult Medicaid, case management, dental/medical integration, insurance promotion, etc.).
- III. **Financing for initiatives** looks at challenges and opportunities in the arena of public and private funding needed for outreach, infrastructure, educational resources and other



elements to advance oral health in Delaware (e.g., financing greater community health center capacity, etc.).

- IV. Policy needs** begins to define those policies at the state, county, city, agency and organizational levels that would make a difference in oral health for the greatest number of residents. This includes legislative advocacy and issue-focused, clinical policy (e.g., dental/medical integration, hygienist co-location, etc.).

Goal #1: Improve access to oral health care and disease prevention for aging adults and persons with disabilities.

Chair: Chris Oakes

Co-chair: TBD

Committee Members: Margaret Bailey, Nancy Brohawn, Jae Chul Lee, Pat Maichle, Eileen Sparling

Highlights:

- Refined goal to look at only adults with disabilities, children would be integrated into Goal 2. Improve access to oral health care and disease prevention for vulnerable adults (aged 18 & older), including the following at-risk adult populations:
 - Adults with disabilities &/or chronic conditions
 - Older adults (aged 60 & older), especially those most at-risk for nursing home placement
 - Pregnant women
 - Adults who are homeless
 - Adults in correctional facilities (incarcerated men & women)
 - Veterans
- Why does oral healthcare drop off for adults without insurance?
- Elevate oral health as a part of overall health: oral health is a necessary medical benefit.
- Need more surveillance on oral health—what kind of data for changes; take advantage of available data. Expand use of dental van. Use teledentistry to extend provider reach. Look at other states' best practices.
- Regular health assessments: look at those, assure oral health is included.
- Identified partners: DHSS/Division of Services for Aging and Adults with Physical Disabilities, Division of Long Term Care Residents Protection, Division of Substance Abuse and Mental Health; UD-CDS, Practice without Pressure, Medical Society of Delaware, Centers for Independent Living, AARP, Easter Seals.



Follow up: Meetings will be once monthly through March, 2015. Two face-to-face meetings and four teleconferences are planned.

Goal #2: Improve access to oral health care and disease prevention for children.

Chair: Dr. Gary Colangelo

Co-chair: TBD

Committee Members: Dr. Gary Colangelo, Nancy Brohawn, Gena Potts, Melissa Lesniczak, Denicia Youmens, Daphne Evans, Linda C. Wolfe, Kathy Collison, Aguida Atkinson, Renee Kottenhahn, Christal Corson, Krisie A. Winters

Highlights:

- Year 1 Dental Exam as prevention; barriers-train/sensitize dentists; physician disconnect—referrers need to develop relationships with dentists who will accept new kids/infants into practice. Training and promotion is needed for general practicing dentists.
- Pediatric oral health assessments/sealants; messaging regarding reimbursement, training-needs consistency. Insurance organizations that serve kids need to get out correct, consistent information.
- Mandatory oral health exams to start by grade 1; resistance to “mandatory” has come from fear parent can’t find a dentist or afford. Why wait for grade 1? Make mandatory for early child care; raise parent awareness of importance of exam. Barriers that prevent children from receiving a school/early childhood program dental examination must be identified (i.e. cost, transportation, lack of dental awareness, lack of access to dental office). Develop strategies to reduce barriers.
- Develop consist oral health information that is cultural and age sensitive, particularly for early child care programs.
- Develop outreach programs (from health care centers, schools, public health care facilities) that locate and place children into a dental facility. Follow up coordination of treatment will be needed.
- Leverage technology.
 - **Home Access Center** “allows parents and students to view student registration, scheduling, attendance, classwork assignments and grade information.”
 - **Delaware Health Information Network (DHIN)** - “DHIN creates efficiencies for doctors, practices, and those who send them clinical information.”



Follow up: The group will meet by conference call, with a schedule to be decided. Next steps: overview and update by BOHDS staff on what plans and resources are available, and work these ideas into the group's plan.

Goal #3: Increase the oral health literacy of all Delaware residents.

Chair: Dr. Greg McClure, DPH/BOHDS

Co-chair: Vivian Rizzo, Del-Tech Oral Hygiene Dept. Chair

Committee Members: Denese Bell, Lisl Phelps, Cassandra Codes-Johnson, April Hill-Addison

Highlights:

- The group noted that materials produced for clients need to be geared towards a general literacy level of Grade 4; Nemours Health Literacy Initiative.
- Integrate Oral Health Literacy into tobacco efforts.
- Find or develop training for health care profession students enrolled at Delaware Technical and Community College (DTCC).
- The need for a comprehensive educational campaign around the importance of oral health for a healthy pregnancy and baby's health.
- The need to make pre-service training around the importance of oral health an agenda item for the Home Visiting Advisory Committee.
- Possibly partnering with childhood service and learning organizations (Boy and Girl Scout organizations, 4-H, Future Farmers of America (FFA), and others) to create a badge or other certificate in recognition of mastery of oral health prevention information and techniques.
- Possibly adding Oral Health to the Child Development Watch First Year calendar.

Follow up: The group agreed to meet every other week at first. A conference call will occur at the end of September/beginning of October. Following that, the next meeting will be a face-to-face meeting at DTCC/Terry Campus in Dover, or in a meeting room near Legislative Hall.



Goal #4: Increase partnerships and collaborations to build and maintain a coordinated advocacy initiative to improve oral health systems in Delaware.

Chair: Ted Becker

Co-chair: Melissa Jones

Committee Members: Wendy Strauss, Kris Bennett, Peggy Geisler, Tom Stephens, Sybil White, Helen Arthur

Highlights:

- Need to develop standardized messages from all the groups (possibly via a template).
- Develop funding resources.
- Develop a Facebook page.
- Recognize existing resources at Legislative Hall to build grassroots momentum for funding an Adult Medicaid dental benefit (for example).
- Develop a list of partners for advocacy and enlist their assistance in getting the message broadly disseminated.

Follow up: Group will share meeting dates and invites representatives from each of the other groups to participate.

Respectfully Submitted,

Jennifer Ulizio
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Delaware Division of Public Health,
Bureau of Oral Health and Dental Services
September 24, 2014