

**State Maternal and Child Health (MCH) Targeted Oral Health Services Systems (TOHSS)  
Grant Program**

Florida Department of Health

**Final Project Narrative**

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## I. Introduction

In 2007 the Florida Department of Health's Public Health Dental Program was awarded a four year grant through the Maternal and Child Health (MCH) Targeted Oral Health Services Systems (TOHSS) grant program. The purpose of the grant, which is funded by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), was to develop and implement changes in the oral health service system in order to reduce oral health disparities for children and their families. The program focus areas for the grant are: 1) increase age one dental visits for children most at risk for disease, and 2) improve access to oral health services for children with special health care needs. The Public Health Dental Program has addressed these focus areas by developing a statewide coalition, *Oral Health Florida*, and continuing to develop the State Oral Health Improvement Plan (SOHIP).

*Oral Health Florida* is the statewide coalition that was initiated, developed, and supported through the department's TOHSS grant. The goal of *Oral Health Florida* is to advance general oral health and well-being by increasing critical partnerships, coordination and collaboration in an effort to reduce oral health disparities. *Oral Health Florida* developed a State Oral Health Improvement Plan (SOHIP), which consists of a formal plan with goals, implementation steps, and evaluation components. The purpose of the SOHIP is to serve as a blueprint for public and private partners to efficiently collaborate on addressing the oral health needs in Florida.

## II. Project Narrative

### a. Significant Changes

#### Key Personnel:

At the onset of the TOHSS grant, the *Oral Health Florida*/SOHIP Coordinator transitioned into the TOHSS Project Coordinator position following the end of the SOHIP grant in 2007. The TOHSS Project Coordinator position became vacant in July 2009 and was filled in March 2010. The Public Health Dental Director became vacant in May 2009 and remained vacant for nearly a year and a half. A new Public Health Dental Director was hired in May 2010, but left the position in October 2010. The position has remained vacant since that time. In addition, there have been other staff reductions and vacancies in the Public Health Dental Program, resulting in a delay of focused efforts and TOHSS grant funds being expended. Despite the staffing changes affecting the TOHSS Project coordination and overall Public Health Dental Program, the TOHSS Project Coordinator has had the support of Department of Health leadership to facilitate activities with current internal staff and state partners to establish a transition plan ensuring that *Oral Health Florida* would continue beyond the TOHSS grant conclusion.

### b. Experience to Date

**Program Goal:** A state oral health system that is sustainable and is built on the management of oral diseases through prevention and early intervention programs to reduce oral health disparities.

**Project Goal 1.** Implementation of the State Oral Health Improvement Plan (SOHIP) through workgroups and partner organizations

*Oral Health Florida* produced a SOHIP in 2004 that continues to be revised and implemented. The purpose of the SOHIP is to serve as a blueprint for public and private partners to efficiently

collaborate on addressing the oral health burden in Florida. Seven broad recommendations with associated strategies were adopted in order to guide public and private initiatives addressing oral health. The SOHIP can be viewed at: <http://www.doh.state.fl.us/family/dental/sohip/index.html>. Core documents of the SOHIP consist of a PowerPoint overview, executive summary, recommendations report with strategies, action plan, and background information on state oral health issues. At the Oral Health Florida Conference held August 2 – 3, 2011, the Leadership Council discussed plans to update. The current SOHIP includes the following recommendations and strategies:

1. Improve access to community and school-based prevention programs for all ages.

Strategies:

- a) Increase access to fluoridation.
- b) Advocate for improved diet and nutrition in schools.
- c) Expand school-based and school-linked dental sealant programs.
- d) Expand school-based fluoride mouth rinse programs.
- e) Develop school-based fluoride varnish programs.

2. Improve access to community and school-based education programs for children and adults.

Strategies:

- a) Enlist support from and train school health providers and educators on oral health issues.
- b) Provide appropriate grade-level oral health education curricula in both public and private schools.
- c) Provide community-based oral health education presentations at school fairs, community centers, community events, nursing homes, and faith-based centers.
- d) Advocate for increased funding for community and school-based oral health education programs.

3. Increase public and governmental awareness of oral health issues.

Strategies:

- a) Educate lawmakers and policymakers about the importance of oral health.
- b) Educate the public about the importance of oral health and the connection between oral health and general health.
- c) Educate non-dental health care providers on the importance of oral health.
- d) Conduct specific work groups, forums, or summits to develop strategies, objectives, and action steps for specific disadvantaged population groups.
- e) Utilize Internet resources for oral health information and education.

4. Improve state and county-based oral health data collection and research.

Strategies:

- a) Develop an outcome/disease-based data collection system and develop and maintain state and county-specific profiles.
- b) Develop a systematic, annual analysis of the Medicaid and KidCare programs.
- c) Advocate for a statewide oral health research agenda.

5. Improve access to care by assuring a highly trained, diverse, appropriately allocated dental Workforce.

Strategies:

- a) Assure that an adequate number of appropriate dental care provider types exist and increase the diversity of dental care providers.

- b) Expand professional training opportunities regarding care for special needs populations.
- c) Expand volunteer incentives.
- d) Consider reforms.

6. Improve access to care by assuring adequate statewide, publicly focused infrastructure and support programs.

Strategies:

- a) Promote improvement of the Medicaid Dental program.
- b) Expand community-based safety-net fixed clinics and mobile units.
- c) Promote school oral health screenings at periodic intervals with appropriate referrals.
- d) Improve dental services through the State Children's Health Insurance Program (SCHIP).
- e) Expand centers that specialize in care for special needs populations.
- f) Promote continuity of care through targeted case management and patient education.
- g) Establish a county-specific, statewide resource guide of dental care programs that provide care for disadvantaged populations.
- h) Develop resources to facilitate organizations applying for grants.
- i) Advocate for better compensation for safety-net dental providers to improve quantity and quality of providers.
- j) Explore teledentistry opportunities to increase access to care for underserved populations.
- k) Co-locate dental services with other health care services.

7. Improve the integration of oral health prevention and education into general health.

Strategies:

- a) Develop protocols to integrate oral health into all appropriate DOH programs.
- b) Utilize existing community networks to identify patients with systemic diseases that relate to oral health.
- c) Advocate for oral health screenings to become a standard of care in medical examinations.
- d) Advocate for increased oral health training for medical professionals.

Implementing the SOHIP recommendations and strategies through multiple partners, at both state and community level, continues as a priority. A carry forward of funds from the 2009-2010 budget year was requested and approved in 2010 to enhance local oral health coalition building and to ensure that the SOHIP is sustained after the final year of funding was completed. The Dental Basic Screening Survey (BSS) Project promotes a recommendation in the SOHIP which identifies the importance of data collection through a recommendation to improve state and county-based oral health data collection and research.

During June, July, and August 2011 the Dental BSS Project was implemented through the Florida Public Health Institute (FPHI). The *Florida Dental BSS Guidebook* was developed which included translating consent forms, questionnaires, and survey result forms into Spanish and Creole for each age group. It was created to assist any group conducting oral health surveillance in an effort to encourage standardization of data collection in Florida. FPHI shared the translated documents with the Association of State and Territorial Dental Directors (ASTDD). The ASTDD sample training presentations were customized for Florida. ASTDD provided technical assistance to revise the database software to include the newly launched older adult indicators and electronic template for direct data entry into the EpiInfo software.

A survey was emailed to all known active local oral health coalitions to determine the level of interest in participating in the Dental BSS Project within the specified timeframe. Follow up emails and telephone calls were conducted to secure commitments, recruit dental hygienists, and establish a lead in each county to arrange the associated screenings.

During the planning phase, FPHI decided to select one or two of the local oral health coalitions for the Dental BSS Project, however, after reviewing the positive responses the decision was made to provide the training to all of those that were interested ( See attachment: Local Oral Health Coalition Map). Five BSS training sessions were conducted to include all interested local oral health coalitions from Friday, July 22, 2011 through Wednesday, August 31, 2011. Seventeen registered dental hygienists completed the BSS training representing six counties.

The Dental BSS Project can serve as an opportunity to assist and enhance local oral health coalition building by incorporating surveillance into local action items. Implementing surveillance requires partnering with many groups in the community which can assist in establishing a broad based group participating with the local oral health coalitions. The developed *Florida Dental BSS Guidebook* will provide local oral health coalitions, county health departments, federally qualified health centers, head start centers and other interested groups a guide to follow when implementing Basic Screening Surveys in their geographic areas. The Coalition further promotes the Dental BSS as another unified statewide oral health project that quantifies the need for prevention and treatment programs. (See attachment: Dental Basic Screening Survey Project Final Report).

**Objective 1.** Support the Maternal and Child Oral Health (MCOH) Workgroup, previously known as the Early Childhood Caries (ECC) Workgroup, in the implementation of the SOHIP ECC Prevention Plan with special emphasis on establishing fluoride varnish programs.

Summary of Accomplishments/Outcomes:

The following activities relate to the recommendation by the MCOH Workgroup in their oral health improvement plan for ECC.

- From 2008 until 2011, the Public Health Dental Program, with the Education and Prevention Coordinator serving as the lead, provided direction for and facilitated the efforts of the ECC Workgroup, also referred to as the Maternal and Child Oral Health (MCOH) Workgroup. The MCOH Workgroup initially met every other month via conference call and during 2010 spent time developing oral health materials and updating the MCH work plan. This Workgroup has not met since August 2010 due to limited staff.
- The DOH Public Health Dental Program provided ongoing facilitative support of the MCOH Workgroup throughout the project. The Head Start Collaboration Office Director began facilitating a subgroup of the MCOH Workgroup to develop action steps for reaching migrant farm worker children with ECC prevention strategies. A DOH staff dentist, the Workgroup leader, facilitated a face-to-face Workgroup meeting in November 2008 and another meeting in August 2009. Monthly conference calls were held in the time interval between face-to-face meetings.
- As a cornerstone of the ECC action plan and the TOHSS grant's MCH focus on physician referral to a dental home by age one, a statewide comprehensive fluoride varnish program for children at risk for early childhood caries was a primary focus of

the first project year and has continued throughout the grant funding period. This began with the ECC Prevention Forum in 2006 and was followed by a fluoride varnish (FV) replication project grant from the Health Resources and Services Administration (HRSA) to the University of Florida College of Dentistry (UFCD), and a FV protocol developed by the DOH Public Health Dental Program. A SOHIP partner, the Health Foundation of South Florida, also provided financial support for the FV Program physician training.

- During the last quarter of the third year, the TOHSS Project Coordinator established a contract with the University of Florida College of Dentistry (UFCD) using funds from the TOHSS grant to expand an early childhood caries (ECC) prevention program for health care professionals. The ECC prevention program, entitled “Gator Kids Healthy Smiles”, was used to provide in-office training for physicians, advanced registered nurse practitioners and physician assistants on ECC preventive procedures.
- The Public Health Dental Program contracted with the UFCD to implement the "Gator Kids Healthy Smiles" in-office trainings on ECC preventive procedures. The training covered five (5) major topics including:
  - 1) Etiology and clinical aspects of Early Childhood Caries (ECC),
  - 2) Performance of an oral screening examination for ECC,
  - 3) Risk assessment for ECC,
  - 4) Application of Fluoride Varnish, and
  - 5) Anticipatory guidance for parents/caregivers and referral to a dental home.

Trainings were provided by a specially trained dental hygienist employed by the University of Florida. From July until August 2010, a total of nine (9) trainings were conducted for seventy-five health care professionals. An evaluation plan of the ECC preventive procedures trainings was submitted to the Public Health Dental Program documenting that the health care providers felt, as a result of the training, they would be able to recognize early childhood caries, incorporate dental varnish procedures into well child visits, educate young children, caregivers, and understand the Medicaid reimbursement process. The Gator Kids Healthy Smiles program has been sustained beyond the TOHSS Grant for another three (3) years utilizing funds from a HRSA Oral Health Workforce grant.

- The *Oral Health Florida* website was used to promote the training provided through the UFCD FV grant. Training for physician groups and nurses through a continuing medical education (CME) presentation covering screening, risk assessment, anticipatory guidance, fluoride varnish application, oral hygiene instruction, and referral to a dental home was provided during the Spring of 2008. DOH has an agreement with UF to train Children’s Medical Services contract physicians. The program has been offered at Florida Academy of Pediatrics meetings, at medical schools, and nurses meetings. UF reports training over 100 physicians at their offices and over 300 physicians at larger training venues. UF provided the training in August 2009 at the Oral Health Florida Conference.
- Training for DOH county health department (CHD) to implement FV programs was delayed initially. Originally, the DOH Prevention and Education Coordinator was identified to train CHD medical staff on the FV/ECC prevention program. The position, however, was eliminated due to statewide budget shortfalls. Instead, a staff dentist

was appointed in May 2008 to develop and implement a FV training plan for CHD medical staff and some training was provided through the UF FV project. UF provided the training and CMEs at no charge to CHDs, community health centers (CHC) and private medical staff attending the Oral Health Florida conference.

- Establishing links to fluoride varnish training alternatives on the Florida DOH Public Health Dental Program website was implemented beginning in January 2008. Information about obtaining online training was also included in the DOH protocol and posted on the DOH internal website as of January, 2008. Contact information to arrange for the UF FV program physician training was posted on the Oral Health Florida/SOHIP ECC Workgroup web page and distributed to SOHIP partners in February 2008. Additional DOH and Oral Health Florida SOHIP website development and training linkages were delayed due to staff shortages as a result of vacancies and position losses, as well as, turnover among information technology staff for the Public Health Dental Program and the division.
- During the first year of the project, in order to annually emphasize the importance of training for physicians on the early intervention possibilities of fluoride varnish programs to prevent early childhood caries and to increase age one dental visits, SOHIP partners promoted and developed CME (continuing medical education) opportunities that are available through coalition partnerships. These opportunities are available to the Florida Medical Association, the Florida Academy of Pediatrics, the Florida Association of Public Health Nurses and the DOH CHD Medical Directors. DOH Children's Medical Services entered into an agreement to train the CMS physician network regarding oral health and fluoride varnish application. In August 2009, the Oral Health Florida Conference provided two days of continuing education credit presentations for physicians, nurses, dentists, dental hygienists, social workers, and educators.

#### Impact on the System of Care:

- As a result of collaborative efforts by the UFCD, DOH, and the Florida Academy of Pediatrics, Medicaid reimbursement to physicians who provide fluoride varnish applications, screenings and dental referrals at well child check-ups was implemented in May 2008. Preliminary data has shown steady increases in the number of children receiving the service and the number of physicians billing Medicaid. Currently over 85,000 children have received services. Coalition partners have worked steadily to promote the program.
- During 2007-08 the Public Health Dental Program worked with the Office of Women's Health to integrate oral health into its program activities that impact women, including risk assessment, screening, and oral health education. Head Start has a strong parent education component and its state collaboration office worked with the UF FV program and planned a joint advocacy/educational event in June 2009. The DOH Minority Health Office focused on Oral Health during their National Minority Health Month activities in 2009 which included screenings and educational activities organized by CHDs statewide. A diabetes and oral health workgroup was started in 2007; however, it was suspended when the Dental program hygienist position was vacated. The Public Health Dental Program has worked with the Office of Women's Health to integrate oral health into their physician information packets and the Oral Health Coalition Coordinator promoted the SOHIP on a Women's Health statewide

conference call. The HRSA Bureau of Maternal and Child Health's March 2009 web conference on oral health collaboration through the Women, Infant and Children (WIC) nutrition food program was promoted statewide. Some of the local CHDs have actually developed dental program collaborations with WIC.

- To develop programs that improve the oral health of pregnant women, the DOH Public Health Dental Program collaborated with the DOH Healthy Start Initiative to include oral health messages into their Every Woman Every Time educational effort. The purpose of this project was to provide health educational resources in the Spring of 2008 for physicians treating women during the preconception and interconception periods.
- A subcommittee of the Oral Health Florida Special Needs Workgroup began meeting to discuss solutions to address anesthesia and Medicaid billing issues that may be roadblocks to care. The Workgroup met in June 2009 and again at the Coalition meeting in August 2009.
- Researching new and/or expanded utilization of allied personnel (both dental and medical) to improve access to oral health care services, especially for young children, by amending the Dental Practice Act, resulted in the creation of a white paper on work force issues. Rulings by the Florida Board of Medicine were that physicians could apply fluoride varnish and a Medicaid billing code for use by physicians was established. Legislative action to expand the scope of practice for dental hygienists in health access settings was successful in May 2011.
- The Florida DOH Oral Healthcare Workforce Health Practitioner Ad Hoc Committee Report was released in April 2009. The report was developed by a broad based group of stakeholders. The Public Health Dental Program staff provided support to facilitate the meetings and production of the report. The report may be reviewed at the following link:  
[http://doh.state.fl.us/Family/dental/OralHealthcareWorkforce/200903Dental\\_Workforce\\_Report.pdf](http://doh.state.fl.us/Family/dental/OralHealthcareWorkforce/200903Dental_Workforce_Report.pdf).

**Objective 2.** Support the Special Needs Workgroup in the implementation of the SOHIP Special Needs Strategic Plan. This workgroup was established through an Association of State and Territorial Dental Directors (ASTDD) special needs oral health grant and focuses on infrastructure changes that have the potential to increase oral health services for special needs children.

Summary of Accomplishments/Outcomes:

- A dentist with the Public Health Dental Health Program facilitated the Special Needs Workgroup which met every other month. Workgroup initiatives listed below will be addressed whenever the State Oral Health Improvement Plan is updated.
  - Access to Anesthesia and Sedation: The Agency for Persons with Disabilities and the Agency for Healthcare Administration, two of the group members of *Oral Health Florida*, worked together to move a proposal forward that would waive the

- prior authorization requirement related to anesthesia/sedation services for many common restorative services.
- Special Needs Provider Directory: The workgroup established a plan to develop a special needs resource directory during year four. Funding to create this directory was secured through the HRSA Oral Health Workforce grant obtained in September 2010.
- The DOH Public Health Dental Program worked with Children’s Medical Services (CMS) as a Maternal and Child Health Bureau (MCHB) funded collaborative partner to promote the acceptance of fluoride varnish programs by CMS physicians. UF has trained CMS nurses and contracted physicians in the comprehensive ECC prevention protocol. The training was also offered to physicians in August 2009 at the Oral Health Florida Conference.
- Facilitating collaborations between dentists and physicians (as well as other health care providers) and educating medical providers as to the relationship between oral health and systemic health is an action step in the general SOHIP and an ongoing effort of the DOH Public Health Dental Program. This includes practitioners that treat special needs patients. Training of physicians on systemic disease connections was part of the Oral Health Florida Conference. Conditions specific to special needs patients were included in Special Needs workgroup discussions.
- Providing effective oral health educational and training programs in the care of individuals with special health care needs for all oral health professionals was also a part of the Coalition’s overall plan. A three hour training that focused on treating special needs patients as part of a general practice was provided through the TOHSS grant in collaboration with the Florida Dental Association in June 2009. This was a free continuing education session that was open to the public, as well as, dentists attending the Florida National Dental Convention.
- The DOH Public Health Dental Program has provided oral health training programs to childcare professionals who regularly attend to children with special health care needs (CSHCN). The Special Needs Workgroup will continue to provide oral health information to the special needs community through existing venues that address professionals that work with the CSHCN population.
- The Family CAFÉ, which is an annual conference for families of children with special health care needs, and five additional CSHCN state or local venues each year has been utilized to increase the awareness of the importance of oral health and its relationship to overall health among parents, health care, and social service professionals within the CSHCN network. The Special Needs Workgroup utilized its coordinator and some members to increase awareness of oral health issues at events held by Family Café, Special Olympics Florida, and The Arc of Florida in 2007.

**Objective 3.** Support the implementation of the oral health improvement plans developed by the additional *Oral Health Florida* workgroups: 1) Senior Oral Health, 2) Community Water Fluoridation, 3) Teledentistry, and 4) SOHIP Coalition Sustainability and others that may be added in the implementation of their respective action plans.

Summary of Accomplishments/Outcomes:

- The Florida Dental Association has led the Senior Oral Health Workgroup and adopted senior oral health and community water fluoridation as two of their focus areas. The DOH Water Fluoridation Program Coordinator is leader of the Community Water Fluoridation workgroup, which has had success in water fluoridation initiatives.
- The SOHIP Coalition Sustainability Workgroup initially struggled with changes in leadership due to restructuring of the Public Health Dental Program. New administrative oversight and guidance from the DOH Division of Family Health Services has resulted in progress toward establishing *Oral Health Florida* as an independent, sustainable entity.
- The Workforce Workgroup, which was established through DOH in January 2009, is now funded by a new federal grant. The Workgroup developed a subcommittee to make recommendations for systems change to increase the number of dental Medicaid providers.
- The Maternal and Child Oral Health (MCOH) and Community Water Fluoridation Workgroups have both developed their own strategic plans.
- During the third year of the TOHSS grant the Fluoridation Workgroup played a significant role in facilitating the discussion for communities that reaffirmed and retained their community fluoridation programs or that explored the feasibility for obtaining a new system. These discussions mostly were held through 11 conference calls and one (1) face-to-face meeting. Nine local coalitions varying in size were able to obtain valuable technical assistance, information and education and assess their community's need and ability to get or keep water fluoridation. In many cases this support allowed communities to retain community water fluoridation systems that were going to be discontinued.

Impact on System of Care:

- The Workforce Workgroup is the successor to the former Ad Hoc Committee Workforce Workgroup and the former HRSA Workforce Workgroup. The new Workgroup has continued the work of the preceding workgroups through their efforts to implement select goals, recommendations, and strategies developed by the previous two workgroups. The reports and strategic plan of the previous two workgroups may be viewed at the following link:  
<http://www.doh.state.fl.us/Family/dental/OralHealthcareWorkforce/index.html>.

**Project Goal 2.** A well-facilitated oral health coalition that is equipped to develop and be part of the infrastructure to make system changes that employ early intervention methods and contribute to oral health system sustainability.

*Oral Health Florida* is Florida's statewide coalition whose establishment was supported through the Maternal and Child Health TOHSS grant program. The goal of *Oral Health Florida* is to advance general oral health and well being by increasing critical partnerships,

coordination and collaboration in efforts to reduce oral health disparities. *Oral Health Florida* developed a State Oral Health Improvement Plan (SOHIP) that consists of a formal plan with goals, implementation steps, and evaluation components.

**Objective 1.** Establish logistical support staff for the project.

Summary of Accomplishments/Outcomes:

- As noted in earlier the report, logistical support was a challenge throughout the grant cycle. Although the Public Health Dental Program planned to hire support staff by September 1, 2007, the Program underwent a restructuring that left the Program with limited administrative support staff for much of the 2007-2008 grant year. In August 2008, a new administrative assistant was hired and assisted the project coordinator as part of the Public Health Dental Program's commitment to the project. The existing *Oral Health Florida* Coordinator was hired as the TOHSS Project Coordinator at the start of the grant in 2007. This allowed for continuity with the work of the Coalition during statewide budget reductions and restructuring. During the second year of the grant the TOHSS Project Coordinator position became vacant in July 2009 and remained so until the Spring of 2010. This resulted in some delay in the plan to accomplish website improvements and the development of effective oral health messages. On March 26, 2010 a new TOHSS Project Coordinator was hired.
- The aforementioned staffing issues hindered the development of SOHIP operational guidelines. However, systems were developed for maintaining the mail and workgroup lists, arranging meetings and conference calls, authorizing and reimbursing for travel, and establishing local community coalitions. A calendar was established for meetings, conference calls, oral health forums and other related events.
- Activities addressing the operations and sustainability of *Oral Health Florida* were the primary focus of the fourth and final year of the TOHSS Grant. The TOHSS Project Coordinator worked with Department of Health leadership to transfer the administrative functioning of *Oral Health Florida* to the Florida Public Health Institute (FPHI). The FPHI is a non-profit public health entity that works with various local, state and national leaders to develop public-private partnerships which provide recommendations and solutions to health-related matters for the citizens of Florida. During the Summer of 2011 the transfer of *Oral Health Florida* was made official at the Oral Health Florida Conference.
- The Florida Public Health Institute (FPHI), acting as a neutral party, facilitated a series of meetings with various key partners to finalize operating principles for *Oral Health Florida*. The process of developing these operating principles has served to clarify the purpose of *Oral Health Florida*, delineate its basic structure and provide the cornerstone for building an effective and sustainable Coalition. The operating principles will allow members and potential members to have a better understanding of the Coalition's objectives, how it functions and opportunities for involvement. A copy of the *Oral Health Florida* Operating Principles is attached.

**Objective 2.** Continue the support of existing collaborative workgroups throughout the project period and add additional workgroups as needed.

Summary of Accomplishments/Outcomes:

- The first face-to-face meetings for workgroups were held in November 2008 and the second was in August 2009. Conference calls were held monthly when there was not a face-to-face meeting.
- Although there was not a project coordinator on staff during year three of the grant, the workgroups continued to meet and address their perspective plans. The workgroups met either monthly or bi-monthly by conference call or face-to-face and have been the primary source for advancing strategies within the Coalition.
- During the first year of the TOHSS grant project, the goal was to facilitate nine (9) county coalition meetings. That goal was reduced in the second year to four (4) meetings, the same as actually accomplished in the first year. However, there were no requests for community meeting facilitation during 2008; therefore, the goal for 2009-2010 was reduced further to two community meetings. To better encourage local coalition growth, the TOHSS Project Coordinator and the Community Water Fluoridation Coordinator worked together to persuade those communities experiencing water fluoridation challenges to develop local community oral health coalitions and local oral health improvement plans.
- The Project Coordinator, a project director representative of the PHDP, and a local coalition coordinator attended the national TOHSS grantee meeting in May 2008 and has attended the grantee meetings each year of the grant.
- The Oral Health Florida Conference took place in Palm Beach Gardens at the PGA National Resort on August 3-4, 2009 in conjunction with the Florida Dental Association's Florida National Dental Convention. The speaker presented on building a dental practice through treating special needs patients and targeted the MCH goal to increase access to dental care for children with special needs. The Florida Department of Health was responsible for two round table sessions. Attendance of three dental program staff and two Coalition partners were supported by the TOHSS grant.
- Coalition partners from two of Florida's colleges of dentistry presented a forum at the Family Café conference for an audience of parents and caretakers on preventive procedures and hygiene for special needs patients, during June 2009. During July 2009, The University of Florida College of Dentistry (UFCD) presented an ECC prevention forum at the Healthy Start Directors Conference in St. Petersburg. The Florida Public Health Association provided space, audio visual equipment and registration support; the Florida Dental Hygiene Association coordinated vendor sales and sponsors; the Florida Dental Association coordinated a poster session for oral health safety-net providers and provided oral health training for nursing home staff; UFCD provided ECC prevention training for physicians; and the Florida Public Health Institute, along with Amerigroup, Inc. and the Indian River CHD Community Program Coordinator coordinated a community networking activity.
- During the last quarter of year three, the TOHSS Project Coordinator developed and convened a steering committee to begin the process of developing the operating

principles for *Oral Health Florida* and a plan for updating the State Oral Health Improvement Plan.

**Objective 3.** Improving communication efforts throughout the project period.

Summary of Accomplishments/Outcomes:

- A masthead was created and newsletters were distributed to Coalition members in December 2008, February 2008, July 2008, October 2008, January 2009 and March 2009. Content included meeting agendas and notes, a message from the Project Coordinator, resource announcements, and Coalition partner announcements. Improvements to the newsletter were discussed by the Coalition members and in April of 2009 the Michigan Oral Health Coalition's newsletter was chosen as the model to be followed for the Oral Health Florida newsletter.
- *Oral Health Florida* is now part of the world of social networking. The Florida Public Health Institute (FPHI) is facilitating outreach communication for *Oral Health Florida* and as a part of this effort has created Facebook and Twitter pages for *Oral Health Florida*. The purpose of these new media outreach efforts is to spread the oral health message in real time, provide a space for each coalition to interact by posting events and other happenings in their local area, as well as, keep the public informed of the latest news regarding oral health in the State of Florida.

**Project Goal 3.** An understanding of the impact of the project on oral health system improvement.

**Objective 1.** Implement a professionally designed evaluation, data management and analysis.

Summary of Accomplishments/Outcomes:

- During the third year of the grant a survey of the Coalition membership was conducted by Tom Wolff & Associates, led by Dr. Tom Wolff, Director of Community Development. The results of the survey were used by the Leadership Council for *Oral Health Florida* to guide Coalition operations.

**Project Goal 4.** Develop effective oral health messages for Florida, including African American and Hispanic cultures.

**Objective 1.** Utilization of a communication specialist to research and develop oral health messages based upon research and cultural appropriateness.

Summary of Accomplishments/Outcomes:

- The MCH workgroup, led by the Public Health Dental Program's Prevention and Education Coordinator, worked with a communication specialist to develop an assortment of oral health messages. These messages educate the health care professional and consumer on overall oral health and specifically on the transmission and prevention of the bacteria that causes dental caries. Oral health messages were

developed in English, Spanish and Creole. The messages were made into posters and approximately 3,500 posters were sent out in March 2010 to child care facilities around the state. The Department of Children and Families paid for the postage. These messages may be viewed at the following link:  
<http://www.doh.state.fl.us/family/dental/materials/index.html>.

**Objective 2.** Develop web-based promotional materials based upon outcome of Objective 1.

Summary of Accomplishments/Outcomes:

- During the third year of the grant the Public Health Dental Program partnered with the FPHI to develop a web-based oral health tool-box which can be found at:  
<http://flphi.org/OralHealthFlorida/Home/tabid/188/Default.aspx>.
- The *Oral Health Florida* website is also now administered by the FPHI. The website address is: <http://www.floridaoralhealth.com/index.cfm?fuseaction=pages.oral-health-florida&>. The current *Oral Health Florida* website is a newly designed version of the previous website developed and managed by the DOH Public Health Dental Program. The newly designed website has a new look which is more reflective of *Oral Health Florida*. The *Oral Health Florida* website has also been expanded to include the use of geographic information system (GIS) technology in order to capture, store and manage data related to local oral health coalitions and available resources.

### **c. Collaborations**

#### **External**

*Oral Health Florida* has a multitude of partners, both internal and external, which have the resources, experience and abilities to fulfill the recommendations and strategies listed in the SOHIP. Presently, members that have had an active role with the continued development and implementation of the SOHIP are the Florida Dental Association, Florida Dental Hygiene Association, Florida Academy of Pediatric Dentistry, University of Florida College of Dentistry, Florida Association of Directors of Nursing Administration in Long Term Care, Florida Head Start and the Florida Public Health Institute. Other organizations that have also been involved are the Agency for Healthcare Administration (AHCA) Medicaid program, Florida Department of Elder Affairs, Health Foundation of South Florida, DentaQuest Foundation, Florida Dental Health Foundation, The TRECS Institute, OnSite HealthCareServices, Nova Southeastern University College of Dental Medicine and the Florida Dental Assistants Association.

#### **Internal**

Aside from the Public Health Dental Program, a number of programs within the Department of Health include oral health components. For example, the Division of Children's Medical Services is the State's Title V agency responsible for the provision of services to children from birth to age 21 with special health care needs. The Infant, Maternal and Reproductive Health (IMRH) Unit contracts with county health departments and with the Health Resource Alliance to provided dental services to non-Medicaid eligible Healthy Start women and children (ages 0-3). The Child and Adolescent Health Unit within the Division of Family Health Services oversees county school health services. Other programs, such as the Women, Infants, and Children (WIC) food nutrition program, the Office of Women's Health, the Men's Health Initiative, Bureau of Chronic Disease

Prevention and Health Promotion, Division of Disease Control (specifically the Bureau of HIV/AIDS) and the Office of Minority Health have been involved in promoting oral health linkages to systemic health. Moreover, the Diabetes Control and Prevention Program located within the Bureau of Chronic Disease Prevention and Health Promotion promotes oral health counseling with self-management programs. WIC also provides counseling in nutrition and oral hygiene to its clients. The department's Tobacco Prevention Program includes oral health messaging with its tobacco cessation classes. Additionally, the Volunteer Health Care Provider Program arranges partnerships, recruits, trains, and coordinates volunteer programs which provide donated dental services to Florida residents that are uninsured and have a gross income below 150 percent of the Federal Poverty Level (FPL).

Other successful collaborations include the following:

- A significant collaborative effort between the University of Florida College of Dentistry, the Florida Academy of Pediatrics, the Agency for Health Care Administration, the Office of the Governor and the Department of Health resulted in Medicaid reimbursement to physicians for fluoride varnish applications at well child check-ups (ESPDT) beginning July 2008. This success will allow for the sustainability of a statewide fluoride varnish program and has the potential to influence ECC prevention and early referral of children to a dental home. It also shows leadership for fluoride varnish programs nationwide.
- In 2009, the UFCD Gator Kids Smiles Program reported providing in-office training to 100 physicians on the comprehensive ECC prevention and referral protocol and trained approximately 300 physicians in large group presentations, grand rounds, etc.
- Palm Beach and Broward County established local oral health coalitions in 2008-2009. Both have local action plans to motivate community partners as active participants in oral health improvement.
- The Brooksville City Council voted 3 to 2 to retain water fluoridation for its residents. The Oral Health Florida Water Fluoridation Workgroup assisted in the development of a local coalition to counter attempts by the City to discontinue fluoridation as a budget reduction measure. The local coalition took the lead on the issue and successfully addressed the Brooksville City Council expressing their desire for the city to keep the community water fluoridation system. The coalition also created some momentum to address fluoridation in other parts of Hernando County.
- The Seminole County community water fluoridation system was also saved from discontinuation by a local oral health coalition. The Seminole County community water fluoridation system was slated to be cut from the county's budget for the 2009 fiscal year due to budget constraints. The Oral Health Florida Coalition notified local health providers and other citizens of the decision by the county. Their efforts resulted in the County restoring community water fluoridation to the budget. The local Coalition worked closely with the statewide Coalition for support, ideas, and direction to make sure the community water fluoridation was retained.
- The 2008 Oral Health Workforce Ad Hoc Advisory Committee was established by the Department to begin study and dialogue in order to make recommendations to the State Surgeon General and to share opinions on addressing Florida's oral health

workforce issues. The final report of the Ad Hoc Advisory Committee was published in February 2009. A copy of the report may be viewed at:  
[http://www.doh.state.fl.us/family/dental/OralHealthcareWorkforce/200903Dental\\_Workforce\\_Report.pdf](http://www.doh.state.fl.us/family/dental/OralHealthcareWorkforce/200903Dental_Workforce_Report.pdf).

#### **d. Sustainability**

The awarding of the HRSA MCH Targeted Oral Health Services Systems grant provided the Public Health Dental Program with the resources to develop and strengthen *Oral Health Florida*. Florida's statewide Oral Health Coalition continues to have broad-based membership of private and public stakeholders that consisting of about 300 participating organizations and individuals. *Oral Health Florida* includes such organizations as the Florida Dental Association, Florida Dental Hygiene Association, University of Florida College of Dentistry, Nova Southeastern University College of Dental Medicine, the Health Foundation of South Florida, the Florida Public Health Institute, Blue Foundation, numerous government agencies, and many other dental and non-dental agencies from across the state.

In the final year of project funding, activities were implemented to ensure that *Oral Health Florida* continues to function and be sustained as the state's leader for addressing oral health. This was accomplished by transferring the administrative functioning of *Oral Health Florida* to the Florida Public Health Institute, the development and ratification of *Oral Health Florida's* operating principles, establishment of the *Oral Health Florida* Leadership Council, and updating the *Oral Health Florida* website to be more informative and user friendly for state and local partners and consumers. The last year of the TOHSS Grant also included *Oral Health Florida* taking the leadership as the statewide coalition to educate and train local coalitions to effectively address the SOHIP in their perspective communities through the implementation of science based interventions that address oral health.

In summary, while budget and staffing reductions slowed and reduced the progress of some TOHSS grant activities, there were numerous accomplishments and successes over the four-year funding period of the grant, as described above. Furthermore, the Florida Department of Health continues to support the *Oral Health Florida/SOHIP* collaborative process and the achievement of the outlined infrastructure changes will help to improve oral health and to ensure its ability to be self-sustaining.

#### III. Listing of Publications and Other Materials

- Local Oral Health Coalition Map
- Dental Basic Screening Survey Project Final Report, August 2011
- Oral Health Florida Operating Principles