Sonoma County Dental Health Network 1 June 2021 Three Year (2021-2023) Strategic Plan





Letter to The Community

Dear Community Members,

The Dental Health Network's Strategic Plan 2021-2023 brings together ambitious but attainable goals and strategies to improve the oral health of residents in Sonoma County. Beginning with a vision of a community in which all residents enjoy optimal health, to the selection of the four strategic goals listed below, the Dental Health Network's plan focuses on system level changes to achieve lasting change for the greatest number of people, and for those with the least access to care.

The plan draws on the structure of our initial 2016 strategic plan, maintaining an emphasis on the building blocks of a strong oral health continuum of care: diverse leadership, system integration, robust community engagement and education, and ensuring there is a way to measure success and determine where more attention is needed through data collection and evaluation. Lastly, there is a focus on maintaining the viability of this structure by including strategies that address long-term sustainability.

This plan articulates new steps towards realizing an effective oral health system in Sonoma County with a set of concrete sub-goals to guide the way.

Our Four Focus Areas:



Leadership and Sustainability: Build strong local political support and leadership for the Dental Health Network vision and the financial resources needed to support it by 2023

Community Education and Engagement: Increase community knowledge related to the importance of oral health literacy and utilization of services by 2023



Integrated Service Systems: Actively engage health clinics in the county in providing appropriate dental health preventative activities and education by 2023



Evaluation and Data: Ensure the availability of data to the community to identify system gaps, gauge effectiveness of interventions, and support continuous improvement by 2023

This strategic plan will help us leverage the significant expertise and capacity of our community partners to address the oral health needs of the residents of Sonoma County. It will strengthen the collective impact of participating organizations, improve services for community members, raise awareness of the overall health effects of dental disease, and help shift public perceptions about prevention.

We want to sincerely thank all our community partners, and to recognize the many members of the Dental Health Network who contributed tirelessly and generously of their time and talent to the development of this plan, and who have committed to implementing this new plan over the next three years.

Sincerely,

The Dental Health Network

Our Primary Goal

Improve the oral health of young children in Sonoma County, primarily focusing on those experiencing the most significant oral health disparities.

Poor dental health can threaten the health and development of young children and compromise the general health and wellbeing of adults. A growing body of research indicates that poor dental health is directly linked to a number of chronic medical conditions including cancer, diabetes, and heart disease/stroke. Untreated dental problems during pregnancy can contribute to poor birth outcomes and neonatal mortality. It can have devastating effects on the social functioning, self-esteem, productivity, and overall quality of life of young and old alike. Despite progress made expanding dental insurance coverage, Black, Indigenous, and other communities of color disproportionately face systemic barriers to good oral health and oral health care.

Vision for an effective dental health system

The Sonoma County Dental Health Network envisions a system that is comprehensive and holistic in its view of oral health. The components of this vision are:

- An Engaged Community of Practice: There exists a formal group of diverse stakeholders actively working towards improving the oral health system.
- Leadership and Sustainability: There exists local political support and leadership championing oral health in Sonoma County, and the financial resources needed to support its realization.
- Informed and Engaged Community Members: Community members have the education and resources needed to ensure quality dental health for themselves and their family; they understand why dental health is important to their overall health; and they routinely practice preventative behaviors. Businesses, community-based organizations, and schools acknowledge oral health as a priority, creating a community culture that consistently invests in improving dental health services.
- A Comprehensive Continuum of Services: There exists all needed dental health services, from preventative to full treatment, that are easily accessible to all members of the community from birth through older age in order to reach oral health equity.
- An Integrated Dental-Medical Health System: The medical health system provides dental health education and prevention activities and refers individuals needing treatment to appropriate services.
- Accessible Data: The community has readily available information needed to identify gaps, assess the effectiveness of strategies, and support continuous quality improvement of the oral health system.



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The Strategic Plan: Focus areas, goals, and strategies

The Goals and Strategies below are intended to help realize the Dental Health Network's vision over time. To help focus their work on the Dental Health System, the Dental Health Network has organized this plan in four Strategy Focus Areas:

- Leadership and Sustainability
- Community Education and Engagement
- Integrated Service Systems
- Evaluation

Leadership and Sustainability



Community Education and Engagement

Goal: By 2023, the community knowledge related to the importance of oral health literacy will Increase by
 10% leading to a higher utilization of services.

Strategies:

- Develop consistent culturally and linguistically appropriate educational messages on the impact of poor oral health and strategies to improve oral health
 - Partner with community organizations, government departments, and initiatives to integrate educational messages to improve community oral health

Integrated Service Systems



Evaluation

| ğ | Goal: By 2023, ensure the availability of data and information to the community necessary to identify gaps in the system, gauge the effectiveness of interventions to improve community dental health, and support continuous improvement. |
|----|---|
| ă١ | Strategies: Establish and maintain a county-wide surveillance system to monitor data and share key dental health indicators by 2023 |

• Support inclusion of oral health in community needs assessments

Putting the Plan into Action

This plan outlines the initial activities and timelines towards realizing the Dental Health Network's vision of an effective oral health system in the county. This will be an equitable system that improves dental health outcomes for all the county's citizens, while reducing the disparities that disproportionately affect certain populations. It also seeks to move the conversation about oral health from an individual to community-wide concern in which oral health is recognized as an integral part of the overall health of both individuals and the community at large. This plan is meant to be practical and achievable. For this reason, the Dental Health Network is establishing workgroups with members and other community stakeholders who are interested and have the availability to engage in the work needed to implement the plan's strategies.



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Needs assessment: Dental Disease in Sonoma County

Overall, children's oral health is improving, however racial and economic disparities persist.

Sonoma County Smile Survey data show that from 2009 to 2019, oral health is improving among kindergarten and third grade students. This includes reduced rates of decay experience (untreated or treated cavities), reduced rates of untreated decay, reduced need for urgent dental care, and increased use of sealants.

| | | 2009 | | 2019 | Healthy People 2030 Target |
|------------------------|-----|-----------------------|-----|-----------------------|----------------------------|
| | К | 3 rd grade | К | 3 rd grade | |
| Dental decay | 46% | 58% | 41% | 44% | |
| Untreated dental decay | 16% | 17% | 16% | 15% | 10.2% ¹ |
| Urgent dental care | 5% | 4% | <1% | 2% | |
| Sealants | | 17% | | 31% | 42.5% ² |

While rates of oral health are improving overall, Smile Survey data show differences in by race/ethnicity and income. For example:

- In 2019, 58 percent of Latinx students had decay experience, which was significantly higher than the percent of White students (31%).
- Students in schools with the highest proportion of participants in the free or reduced-price meal program (FRPL) were almost two times as likely to have decay experience as students in schools with the lowest proportion of FRPL participation.
- In 2019 the percent of students with untreated dental decay was significantly higher for Latinx students than for White students (21% compared to 11%).

While these disparities exist, the gap has started to narrow. From 2009 to 2019, the percent of Latinx students and students in schools with a higher proportion of participants in the free or reduced-price meal program experienced significant decreases in tooth decay. They also experienced a significant decrease in the need for urgent dental care.

¹ Target is to reduce the proportion of children and adolescents with active and currently untreated tooth decay in their primary or permanent teeth. https://health.gov/healthypeople

² Increase the proportion of children and adolescents who have received dental sealants on 1 or more of their primary or permanent molar teeth. https://health.gov/healthypeople

In Sonoma County, more pregnant people received dental care during their pregnancy compared to the state.

In 2015, there were approximately 5,000 births in Sonoma County. Nearly half of the births were to pregnant people enrolled in Medi-Cal. According to the Maternal and Infant Health Assessment (MIHA) conducted by the California Department of Public Health, 67 percent of pregnant people in Sonoma County visited a dentist, dental clinic, or received dental care at a health clinic during their pregnancy compared to just 44 percent statewide. Reasons pregnant people did not receive care included not needing to go to the dentist (59%), too busy (44%), safety (30%), insurance (30%), and cost of care (29%).

Percent of pregnant people who received dental care during their last pregnancy



While some improvements have been made, the Medi-Cal eligible population in Sonoma County underutilizes dental health services.

In Sonoma County, there are 18 dental providers that accept Medi-Cal. These providers are located within 11 clinics across the county. They serve a population of approximately 118,000 Medi-Cal eligible residents, including 70,283 adults and 48,139 children.³ By this measure, the ratio of the Medi-Cal eligible population to dental providers that accept Medi-Cal is 6,579:1.

Medi-Cal eligible population

6,579 : 1

Dental providers that accept Medi-Cal

Comparatively, the ratio of the general population of the county to all dental providers is 1,070:1.⁴ The nearly six-fold disparity in available providers for low-income individuals is a significant challenge to accessing oral health care.

Access to Care for Children with Special Needs

Children with developmental disabilities may require additional care to achieve and maintain oral health. In a survey of children with special needs across California:

- 10% did not need preventative dental care
- 80% received all needed preventative dental care
- 10% had unmet preventative dental care needs

In Sonoma County, 18 providers accept Medi-Cal and can accommodate patients with special needs. Ensuring that families can access care with providers who can meet the needs of their children is crucial to the Dental Health Network's vision for health equity.

³118,422 is the Medi-Cal eligible pop. https://sonomacounty.ca.gov/Health/Dental-Health/Accessing-Dental-Care/

These clinics, as of May 2021, were: St. Joseph Dental Clinic, Santa Rosa Community Health Dental Campus, Sonoma County Indian Health Dental Clinic, Russian River Dental Clinic, Petaluma Health Center Dental Office, Rohnert Park Dental Center, Alliance Medical Center Dental Clinic, Sonoma Valley Community Dental Center, Alexander Valley Dental Center, WIC Dental Days, PDI Surgery Center

⁴ https://www.countyhealthrankings.org/app/california/2021/measure/factors/88/data

Overall, data⁵ show that the Medi-Cal eligible population in Sonoma County underutilizes dental health services. In 2019, only 31 percent of the population received a preventive dental service and 19 percent received a treatment for caries. The Healthy People 2030 initiative⁶ envisions 45 percent of the population will receive an annual dental health visit. While gains have been made in improving the percent of Sonoma County's Medi-Cal eligible population who access preventative dental services over the past six years, there is still a significant gap to address in ensuring low-income families have access to preventive care.



Proposition 56, the 2016 California Healthcare, Research and Prevention Tobacco Tax Act, provided a new revenue source, with a portion dedicated to improving access to oral health across the state. This legislation increased the excise tax rate on cigarettes, electronic cigarettes, and other tobacco products, and directed revenue to draw down federal matching funds for Medi-Cal health care expenditures through payments to providers. Over the last four years, these funds have been used to increase the base payments to Medi-Cal providers, including dentists and dental health specialists. Funding has also been used by Local Oral Health Departments to support ongoing systems change efforts. The notable increase in annual dental visits may be partially explained by this legislation and the increased availability of services for low-income families.⁷

Next Steps for the Dental Health Network:

The Dental Health Network will now move from planning to action with the Strategic Plan as the guiding document. Dental Health Network members will begin to gather in July to use their professional skills and community connections to move strategies forward. With the understanding that some of our goals will take the full length of our implementation period to accomplish, some of our goals and strategies can and should be moved forward first. Our goal surrounding Community Engagement and Education will be the first goal we implement with strategies around a Communication Plan and surveys to support the development of culturally and linguistic appropriate messaging foundational for our progress forward.

It is also part of the next steps for the Dental Health Network to identify key community partners who are not yet a part of the network and encourage participation during this implementation of our Strategic Plan. We will begin by informing our own agencies, sharing our new Strategic Plan and the importance and alignment with each of our partner organizations. We will then look for connections to like-minded and diverse partners who can help us further the strategies we wish to accomplish by 2023. Building a stronger and well-connected Dental Health Network will broaden our reach and increase our accomplishments.

⁵ California DHSC, CHHS Open Data Portal. Accessed March 25th, 2021. https://www.dhcs.ca.gov/dataandstats

⁶ Healthy People 2030, an initiative of the US Department of Health and Human Services, sets data-driven national objectives to improve health and wellbeing over the next decade.

⁷ https://www.childrennow.org/blog/how-prop-56-funds-support-kids/

Appendix A: DHN Membership

The following individuals and organizations participated in the development of this Strategic Plan:

| Name | Organization |
|--------------------|--|
| Nicholo Atup | Santa Rosa City Schools, School Nurse, Integrated Wellness Center |
| Suzette Beloberk | 4Cs Sonoma County, Child Health & Nutrition Director |
| Kim Caldewey | Sonoma County Public Health Section Manager |
| Ed Chio | Russian River Dental Clinic, Dental Director |
| Jeannette Engel | Sonoma County Human Services Foster Care, Public Health Nurse |
| Ramona English | Petaluma Health Center, Dental Director |
| Andrea Garfia | Sutter Health, Community Health Programs Coordinator |
| Susan Garritson | Cotati Rohnert Park USD, School Nurse |
| Brittany Gonzales | Alliance Medical Center, Dental Director |
| Mayra Gudino | Community Action Partnership, Health Services |
| Samantha Guthman | Alexander Valley Healthcare, Practice Manager |
| Momoko Ito | Cotati Rohnert Park USD, School Nurse |
| Kathy Kane | Community Action Partnership, Assistant Director |
| Marci LaGrande | Santa Rosa Community Dental Center, Dental Operations Manager |
| Cindi Lands | Alexander Valley Healthcare, Office Manager, Dental Clinic |
| Jennifer Law | Sonoma County Family Youth & Children, Public Health Nurse |
| Arturo Martinez | St. Joseph Health, Dental Programs Manager |
| Jeff Miller | Maternal, Child and Adolescent Health Advisory Board Member |
| Andrea Pickett | Sonoma County Dental Health Program, Health Information Specialist II |
| Jen Stasch | PDI Surgery Center, Executive Director |
| Sandra Uribe | First 5 Sonoma County |
| Martin Van Tassell | Redwood Empire Dental Society, Executive Director |
| Terese Voge | Sonoma County Dental Health & Tobacco Prevention, Health Program Manager |
| Sangmo Witzman | Santa Rosa City Schools, School Nurse |
| Sally Yates | Bellevue Union School District Nurse |

Appendix B: Action Plan

| | | | | Fise | cal Ye | ear 2 | 021 | Fis | cal Y | ear 2 | 022 | Fis | cal Ye | ar 20 | 23 |
|------------|----------------------|--|--|------|--------|-------|-----|-----|-------|-------|-----|-----|--------|-------|----|
| Goal # | Strategy # | Strategy | Activity | Q1 | Q2 | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 |
| Goal 1: Bu | ild strong local pol | itical support and leadership for the Dental Health Netwo | k vision and the financial resources needed to support it by 2023. | | | | | | | | | | | | |
| Goal 1 | Strategy 1 | Embed dental health in existing high-profile community health initiatives (e.g., school readiness) | Conduct a scan of high-profile community health initiatives | | | | | | | | | | | | |
| | | | Hold panel meetings and make recommendations about where to embed dental health in community health initiatives | | | | | | | | | | | | |
| | | | Present recommendations to DHN | | | | | | | | | | | | |
| Goal 1 | Strategy 2 | Use local oral health data to drive policy decisions | Identify common indicators and data definitions | | | | | | | | | | | | |
| | | | Identify available data, gaps in data currently collected, and opportunities to develop partnerships to expand data collection efforts | | | | | | | | | | | | |
| | | | Develop data sharing agreements with key partners | | | | | | | | | | | | |
| | | | Calculate oral health cost savings data with key policymakers | | | | | | | | | | | | |
| | | | Share key findings (including cost-savings data) | | | | | | | | | | | | |

| | | | | Fis | cal Ye | ear 20 |)21 | Fis | cal Y | ear 2 | 022 | Fis | Fiscal Year 20 | | |
|--------------|-------------------|---|--|-----|--------|--------|-----|-----|-------|-------|-----|-----|----------------|----|----|
| Goal # | Strategy # | Strategy | Activity | Q1 | Q2 | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 |
| Goal 1 | Strategy 3 | Conduct outreach to policy makers to influence dental health policies | Gather information and prioritize local and state policies | | | | | | | | | | | | |
| | | | Train local partners about state policy and advocacy | | | | | | | | | | | | |
| | | | Meet with statewide advocates | | | | | | | | | | | | |
| Goal 2: Inci | rease community l | knowledge related to the importance of oral health and ut | lization of services. | | | l | | 1 | ľ | | | | | | |
| Goal 2 | Strategy 1 | Develop consistent culturally and linguistically appropriate educational messages on the impact of poor oral health and strategies to improve oral health | Identify what materials already exist and gaps to fill | | | | | | | | | | | | |
| | | | Gather information from families about gaps in information, language, and cultural needs | | | | | | | | | | | | |
| | | | Gather information from school nurses to inform communications plan | | | | | | | | | | | | |
| | | | Develop high quality educational materials and trainings for key stakeholders (health care providers, parents, etc.) | | | | | | | | | | | | |
| | | | Partner with and train organizations to distribute materials | | | | | | | | | | | | |
| | | | Survey partners to improve materials and inform additional trainings | | | | | | | | | | | | |
| Goal 2 | Strategy 2 | Partner with community organizations, government departments, and initiatives to integrate educational messages to improve community oral health | Develop a list of partners willing to embed oral health messages in educational materials | | | | | | | | | | | | |
| | | | Develop a communications plan | | | | | | | | | | | | |
| | | | Develop and conduct oral health messaging trainings for partners | | | | | | | | | | | | |
| | | | Develop data sharing agreements with key partners | | | | | | | | | | | | |
| Goal 3: Act | ively engage heal | th clinics in the county in providing appropriate dental hea | Ith preventative activities and education | | | | | | | | | | | | |
| Goal 3 | Strategy 1 | Promote the integration of oral health care into primary care and other community-based settings, with a focus | Identify primary care providers and other champions | | | | | | | | | | | | |

| Goal # | Strategy # | rategy # Strategy | | Fis | cal Ye | ear 20 | 021 | Fiscal Year 2022 | | | | Fiscal Year 2023 | | | | | |
|--------------------------|------------|--|--|-----|--------|--------|-----|------------------|----|----|----------|------------------|----|----|----|--|--|
| | | | Activity | Q1 | Q2 | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 | | |
| | | on those serving low-income children and children with special needs | | | | | | | | | | | | | | | |
| | | | Educate and engage providers and champions to promote oral health | | | | | | | | | | | | | | |
| Goal 3 | Strategy 2 | Create a referral manual or referral process between the medical and dental systems for both acute and routine care | Develop partnerships with medical providers and administrators, including understanding their systems and referral pathways | | | | | | | | | | | | | | |
| | | | Develop and administer a survey to medical providers to understand who is addressing oral health and making referrals | | | | | | | | | | | | | | |
| | | | Develop and administer a survey to dental providers to understand capacity and need post-COVID | | | | | | | | | | | | | | |
| Goal 3 | Strategy 3 | Increase access to employment and advanced training/education among diverse populations currently underrepresented in the oral health care workforce | Establish partnership with SRJC/SSU and economic development stakeholders to increase job training and outreach to diversify workforce | | | | | | | | <u>.</u> | | | | | | |
| | | | Advocate for funding for colleges to increase employment pathways | | | | | | | | | | | | | | |
| | | | Advocate for legislation to open pathways to dental care | | | | | | | | | | | | | | |
| Goal 4: Ens improveme | | y of data to the community to identify system gaps, gauge | effectiveness of interventions, and support continuous | | | | | | | | | | | | | | |
| Goal 4 | Strategy 1 | Establish and maintain a county-wide surveillance system to monitor data and share key dental health indicators | Research data collection tools and technology used by other counties | | | | | | | | | | | | | | |
| | | | Identify and gather data already collected | | | | | | | | | | | | | | |
| | | | Develop data sharing MOUs | | | | | | | | | | | | | | |
| | | | Develop standard data collection tools | | | | | | | | | | | | | | |
| | | | Development of data dashboard | | | | | | | | | | | | | | |
| Goal 4 | Strategy 2 | Support inclusion of oral health in community needs assessments | Identify needs assessments that are conducted in Sonoma County | | | | | | | | | | | | | | |
| | | | Attend and engage in community health needs assessment meetings/efforts | | | | | | | | | | | | | | |