Oral Health Coalition Framework

Members to Include

GOVERNMENT
State/Local Health Department
Interagency and/or Interdepartmental Steering Committee,
Environmental Health, Dept of Education, Dept of Social Services

COMMUNITY
Local Community Health Depts,
Community-based Clinics,
Community Water Supervisors/managers
Business leaders Faith-based orgs Foundations

EDUCATION
Local School Administrator,
PTA, School Nurse
Association, Dept of Education,
Dept of Higher Education Regional Staff

PROVIDERS
Dentists, Dental hygienists,
Physicians, Hospitals and their Respective Associations

PUBLIC
Foundations, Consumer Advocates,
Patient Care Advocates, Organizations
that promote oral health,
Organizations that promote improved QOL John Q Public

THIRD-PARTY PAYERS
Managed care, Insurance, Medicaid

POLICY
State and Federal:
Legislators, Policy Advocates,
Local and Community Policy Makers

HIGHER/PROFESSIONAL EDUCATION
PRC, Universities, Dental and Dental Hygiene Schools,
Nursing Schools, Medical Schools and Allied Health Schools

Working Groups – Areas to Address:
ASSESSMENT POLICY PROGRAMS FUNDING COMMUNICATIONS/MARKETING INFANTS CHILDREN ADULTS AGING POPULATION EDUCATION SURVEILLANCE CARIES PERIODONTAL DISEASE ORAL CANCER INFECTION CONTROL POPULATION-BASED, EVIDENCE-BASED PREVENTION PROGRAMS ACCESS WATER FLUORIDATION SEALANT PROGRAMS EVALUATION INFRASTRUCTURE DEVELOPMENT INJURY

Considered an Active Coalition if these outputs are identified

- WRITTEN VISION/MISSION STATEMENTS
- WRITTEN PRIORITIES/PLANS/STRATEGIES
- IDENTIFIED STAKEHOLDERS
- IDENTIFIED RESPONSIBILITY FOR IMPLEMENTATION
- SUSTAINABILITY (funding and institutionalization)
- COMMUNICATION

- VISABILIT Y
- EVALUATION
- LEGISLATIVE ACTIVITY
- PRODUCTS & IMPACT
- S.M.A.R.T. ACTION PLANS
- MAINTENANCE OF MEMBERSHIP