ORAL HEALTH STATE PLAN REVIEW INDEX

CENTERS FOR DISEASE CONTROL AND PREVENTION
NATIONAL CENTER FOR CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION
DIVISION OF ORAL HEALTH
(April 2003)

[STATE] State: Review Date: [REVM] [REVV]

[NAME] Name of Plan:

Publication Date: Development start date:
[ PUBM] [TIME]
[PUBYR]

_____ State oral health plan [StatePlan]
_____ 2010 plan [HPPlan]

Funding source: [Fund]

_____ On state-DOH website [web]

NGA Academy: [nga] [NGAYR]

ASTDD Program Report: Y/ N [ASTDDrep]

Reviewer: ____________
SECTION I. Stakeholder Involvement

1. Key stakeholders were involved throughout the plan development process: [Stake]

   a. NGA team [s_nga]
   b. Government [s_gov]
   c. Coalition [s_coal]
   d. Community [s_comm.]
   e. Education [s_edu]
   f. Providers [s_prov]
   g. Public [s_pub]
   h. Third-party payers (including Medicaid) [s_third]
   i. Higher-education [s_high]
   j. Other chronic disease representation [s_chronic]
   k. Drinking water/EPA/Fluoridation [s_drink]
   l. 2010 teams [s_hp]
   m. Not able to identify [s_not]
   n. State Department of Health and Human Services [s_doh]
   o. Others specify: ________________ [s_others]

NOTES:
SECTION II. Plan is Evidence Based

1. State-level burden of oral health disease describe and/or reference burden document [S2_1]
   (If referenced, include copy and source information with plan)

2. Priority populations based on epidemiologic data [S2_2]

3. Priorities based upon assessment of existing infrastructure, resources, and gaps [S2_3]

4. Healthy People 2010 objectives [S2_4]
   
   Oral Health Chapter
   21-1 Dental caries experience [HP21_1]
   21-2 Untreated dental decay [HP21_2]
   21-3 No permanent tooth loss [HP21_3]
   21-4 Complete tooth loss [HP21_4]
   21-5 Periodontal diseases [HP21_5]
   21-6 Early detection of oral and pharyngeal cancer [HP21_6]
   21-7 Annual examinations for oral and pharyngeal cancer [HP21_7]
   21-8 Dental sealants [HP21_8]
   21-9 Community water fluoridation [HP21_9]
   21-10 Use of oral health care system [HP21_10]
   21-11 Use of oral health care system by residents in long-term care facilities [HP21_11]
   21-12 Dental services for low-income children [HP21_12]
   21-13 School based health centers with oral health component [HP21_13]
   21-14 Health centers with oral health service components [HP21_14]
   21-15 Referral for cleft lip or palate [HP21_15]
   21-16 State-based surveillance system [HP21_16]
21-17 Tribal, state and local dental programs [HP21_17]

Oral Cancer Objective
3-6 Reduce the oropharyngeal cancer death rate [HP3_6]

Diabetes Chapter Objective
5-15 Increase the proportion of persons with diabetes who have at least an annual dental examination [HP5_15]

Public Health Infrastructure chapter
23-2 Made information available to public in the past year on leading health indicators [HP23_2]
23-4 Population-based HP 2010 objectives with national data for all population groups [HP23_4]
23-8 Specific competencies essential to public health services into personnel systems [HP23_8]
23-11 Meet national performance standards for public health services [HP23_11]
23-12 Local jurisdictions with health improvement plan linked to state plan [HP23_12]
23-14 Provide or assure comprehensive epidemiology services to support essential PHS [HP23_14]
23-15 Review and evaluate the extent to which statutes, ordinances, and bylaws assure deliver of essential PHS [HP23_15]
23-16 Documentation of public health expenditures, categorized by essential PHS [HP23_16]

5. Reference Surgeon General's report [SGRepor]

6. Address Core public health functions [S2_6]
   a. Assessment [Core_assess]
   b. Policy Development [Core_policy]
   c. Assurance [Core_assur]

7. Five-points of Call to Action [S2_7]
   a. Change perception of oral health [call_chg]
   b. Overcome barriers to implement what works [call_over]
   c. Build a balanced science base [call_build]
SECTION III Plan Framework

1. Plan is based on state-wide goals and objectives [S3_1]
2. Plan reflects a solid “call-to-action” [S3_2]
3. Plan includes a summary statement [S3_3]
4. Plan is well-organized [S3_4]
5. Plan is easy to read [S3_5]
6. Plan has identified clear, definable, goals [S3_6]
   a. Goals project for at least a 5 year time frame [S3_6A]
   b. Goals emphasize infrastructure development for sustained achievements [S3_6B]
   c. Goals address system changes [S3_6C]
   d. Goals are realistic for the environment [S3_6D]
   e. Strategies are based upon environmental assessment [S3_6E]
7. Plan has identified clear, definable, objectives or action steps [S3_7]
   a. Objectives/action steps are realistic towards the accomplishment of goals [S3_7A]
   b. Objectives/action steps include identification of person(s)/organization(s) [S3_7B] responsible for implementation
   c. Objectives/action steps include identification of resources needed to accomplish [S3_7C]
d. Objectives/action steps are defined in S.M.A.R.T. format [S3_7D]

i. Specific [S2_7D1]

ii. Measurable [S2_7D2]

iii. Attainable [S2_7D3]

iv. Results oriented [S2_7D4]

v. Time-phased [S2_7D5]

8. Plan goals and objectives integrate with other chronic disease areas including strategies to partner and leverage resources [S3_8]

9. Plan is published for public consumption [S3_9]

10. Plan is posted on state website [S3_10]

SECTION IV. Strategies and Programs

1. Plan addresses access [S4_1]

a. Provide approximate percentage of plan devoted to access issues [S4_1A]

Number of objectives or items discussed in plan ____________
Number of objectives or items devoted to access ____________
Number of objectives or items devoted to prevention ____________

b. Access for children [S4_1B]

c. Access for adults [S4_1C]

d. Access for seniors [S4_1D]

e. Access for populations experiencing disparity [S4_1E]

f. Access for low-income populations [S4_1F]

g. Increase number of dental schools [S4_1G]
h. Increase number of hygiene/technical schools [S4_1H]

i. Loan repayment program [S4_1I]

j. Increase workforce [S4_1J]

k. Identification of alternative providers [S4_1K]

l. Practice act/expanded duties [S4_1L]

m. Mandates and/or policy change [S4_1M]

n. Increase reimbursement issues (Medicaid/SCHIP) [S4_1N]

o. Equipment/buildings [S4_1O]

p. Increase public health in existing schools [S4_1P]

q. Increase pediatric dentistry and/or residency [S4_1Q]

r. Licensure issues [S4_1R]

s. Referral networks [S4_1S]

t. Safety nets [S4_1T]

u. Residency training, other training for working with high risk populations [S4_1U]

v. Coordinate management or system of care [S4_1V]

w. Private insurance [S4_1W]

x. Increase number of students in dental school [S4_1X]

y. Increase number of students in hygiene or technical school [S4_1Y]

NOTES:
2. Plan addresses proven prevention strategies [S4_2]
   a. Provide approximate percentage of plan devoted to prevention issues [S4_2A]
   b. Fluoridation [S4_2B]
      i. Water fluoridation [S4_2B1]
      ii. Mouthrinse and/or tablet program [S4_2B2]
      iii. Awareness campaigns [S4_2B3]
      iv. Legislative issues [S4_2B4]
      v. Varnish programs [S4_2B5]
      vi. Water testing [S4_2B6]
   c. School-based, school-linked sealant programs [S4_2C]
   d. Community-based sealant programs [S4_2D]

3. Plan addresses education and/or awareness programs [S4_3]
   a. Public awareness [S4_3A]
      i. Provide name of program
   b. Policy maker outreach [S4_3B]
   c. In non-traditional settings [S4_3C]
   d. Provider training and/or awareness programs [S4_3D]
   e. School-based education [S4_3E]

4. Plan addresses state-wide summit (explain if other type meeting) [S4_4]
5. Plan addresses caries [S4_5]
   a. Experience [S4_5A]
   b. Untreated decay [S4_5B]
   c. ECC [S4_5C]
   d. In children [S4_5D]
   e. In youth [S4_5E]
   f. In adults [S4_5F]
   g. In seniors [S4_5G]

6. Plan addresses periodontal disease [S4_6]

7. Plan addresses oral cancer [S4_7]
   a. Early detection [S4_7A]
   b. Awareness/education programs [S4_7B]
   c. Coordination with tobacco/cancer programs [S4_7C]

8. Plan addresses infection control issues [S4_8]

9. Plan addresses policy and systems change [S4_9]
   a. Practice act [S4_9A]
   b. General policy issues [S4_9B]
   c. Mandatory screening [S4_9C]
   d. Increase in Medicaid reimbursement [S4_9D]
   e. Change in Medicaid filing requirements [S4_9E]
10. Plan addresses surveillance [S4_10]
   a. Plan specifies state data sources [S4_10A]
   b. Plan addresses expansion of surveillance efforts [S4_10B]
   c. Plan addresses infrastructure needed to support surveillance [S4_10C]
   d. Plan addresses fluoridation surveillance [S4_10D]
   e. Program surveillance [S4_10E]
   f. School or state needs assessment [S4_10F]

11. Plan addresses issues related to the integration of oral health with overall health [S4_11]

12. Plan addresses infrastructure development [S4_12]

13. Plan addresses issues of sustainability of program and/or infrastructure [S4_13]

14. Oral and facial injuries [S4_14]
   a. Face masks [S4_14A]
   b. Mouth guards [S4_14B]
   c. Awareness [S4_14C]

NOTES:
SECTION V. Partnerships

1. Plan addresses partnerships with other chronic disease areas: [S5_1]
   a. Diabetes [S5_1A]
   b. Tobacco [S5_1B]
   c. Violence/Injury [S5_1C]
   d. Early childhood [S5_1D]
   e. Maternal and child health [S5_1E]
   f. Cancer [S5_1F]
   g. Cardiovascular [S5_1G]
   h. Health promotion [S5_1H]
   i. Coordinated school health [S5_1I]

2. Plan addresses partnerships with other department of health and/or government agencies [S5_2]
   a. Board of education [S5_2A]
   b. Department of education [S5_2B]
   c. Medicaid [S5_2C]
   d. WIC [S5_2D]
   e. Head Start [S5_2E]
   f. Drinking water [S5_2F]
   g. EPA [S5_2G]
   h. Schools in general [S5_2H]
   i. Dental schools, research, hygiene schools [S5_2I]
3. Plan describes technical assistance to be provided to partners to assist in the implementation of the plan [S5_3]

4. Business, local industry [S5_4]

SECTION VI. Implementation

1. Plan identifies person(s) and organization(s) responsible for implementation of objectives/action steps [S6_1]

2. Plan identifies technical assistance to be provided to partners to assist in the implementation of the plan [S6_2]

3. Plan addresses sustainability of programs and health achievements [S6_3]

4. Plan addresses resources needed to implement the plan [S6_4]

5. Plan describes strategies for obtaining needed resources [S6_5]

6. Plan describes clear, realistic dissemination plan [S6-6]

SECTION VII. Evaluation

1. Plan has identified evaluation strategies for goals and objectives [S7_1]

   a. Evaluation strategies include measurable markers [S7_1A]

2. Plan identifies evaluation of dissemination strategies [S7_2]

3. Plan includes logic model [S7_3]

4. Plan identifies potential outcomes and unintended effects [S7_4]

5. Plan includes system for using evaluation results to update plan strategies to promote great health gains [S7_5]

6. Plan identifies need for outside evaluation assistance [S7_6]

7. Describes need for monitoring implementation [S7_7]