

Oral Health Advisory Committee

DRAFT Report of Meeting

May 19, 2006
Medical Care Development, Augusta, Maine



Good Group Decisions

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Opening

Craig Freshley welcomed the group asked each person present to introduce themselves and their organization. Objectives, ground rules and the agenda were reviewed with the group. The focus of the meeting was to discuss and revise the Oral Health Improvement Plan. A new version of the Plan, dated May 19, 2006, has been drafted in light of the discussion and should be viewed as a companion to this meeting report.

Attendance

Jack Fuller	Maine Oral Health Solutions Inc.
Kate Perkins	Medical Care Development/Watch Your Mouth Campaign
Bev Litchfield	Prevention Partners
Charles Dwyer	Maine Office of Rural Health & Primary Care
David Rappoport	Maine Health Access Foundation
DeEtte Hall	Maine Department of Education
Doreen McDaniel	Office of Elder Services/DHHS
Frances Miliano	Maine Dental Association
Martha Lawrence	Private Practice – Dentistry
Kathleen Walker	Northeast Delta Dental
Liz Rogers	Oral Health America
Valerie Heal	Penquis CAP & Maine HeadStart Health Coordinators Group
Linda Capone-Newton	Consultant, Maine Office of Child Care & HeadStart
Brenda McCormick	DHHS, Office of MaineCare Services
Shawn Yardley	City of Bangor
Judy Feinstein	Maine Oral Health Program
Craig Freshley	Good Group Decisions
Jessica Dafni	Good Group Decisions

Objectives

Craig reviewed the following meeting objectives with the group:

- Consensus on the objectives and general nature of the Plan
- Discuss and make suggestions for specific changes to the Plan

- Decide how stakeholders will be represented in the written Plan and in the Plan's implementation
- Discuss and make some decisions about the format, roll-out, and distribution of the published Plan

Ground Rules

The following ground rules were reviewed with and agreed to by the group:

- All views heard
 - Hands to speak
- We all help group efficiency
 - Minimize repeats
 - Raise questions and concerns in the moment
- Share ideas and information
 - No bad ideas
 - Website
- Constituent representation and education
- Facilitator serves the group
- Smiles are good!

Agenda

Craig reviewed the Agenda with the group as follows:

- 11:00 **Opening**
 Welcome and introductions
 Objectives, agenda, and ground rules for today's meeting
- 11:10 **Objectives and Nature of the Plan**
 After a quick overview of the Plan and a few questions, let's discuss the fundamental nature and philosophy of the plan and make sure we have shared understanding. Further, let's discuss and make sure that we are comfortable with the objectives as stated in the Plan.

- 11:40 **Specifics to be Addressed**
 We'll focus on some specific parts of the Plan that need some discussion and clarity.
- 12:00 **Lunch**
- 12:30 **More specifics to be Addressed?**
 A continuation of the before-lunch discussion
- 1:00 **Stakeholder Involvement**
 Let's consider including stakeholder commitment pledges right in the Plan. This is not a new idea but needs more discussion. Let's also discuss stakeholder involvement in the implementation. Let's consider an ongoing role for some sort of committee charged with implementation oversight.
- 1:50 **Break**
- 2:00 **Format, Roll Out and Distribution**
 Let's discuss what the plan should ultimately look like. In what format should it be published? Further, how will we "roll out" the plan and how should it be distributed and publicized?
- 2:40 **Review Next Steps and Closing Comments**
- 3:00 **Adjourn**

Objectives and Nature of the Plan

Craig explained to the group that before discussing specific aspects of the Plan, the group should confirm shared understanding of the fundamental nature and philosophy of the Plan. In order to do so, the group discussed the Plan's goals and objectives.

Goals and Objectives

The following are the goals of the Plan, in **bold**, with each goal's objectives listed below. These goals and objectives come from the most recent version of the Plan and were discussed by the group:

A. Change Perception and Increase Awareness

- 1 – Inform and Educate Policy Makers and Elected Officials

2 - Increase general public awareness

B. Expand Access and Increase Prevention

- 3 - Expand Prevention Programs in Schools and Communities
- 4 - Ensure Early Childhood Preventive Care
- 5 - Promote MaineCare Coverage for Pregnant Women
- 6 - Use Nontraditional Settings to Reach Underserved

C. Improve Service Delivery

- 7 - Improve Current System Infrastructure
- 8 - Increase Oral Health Knowledge Base
- 9 - Provide Evidence-Based Evaluation
- 10 - Increase Partnerships

D. Expand Dental Workforce

- 11 - Shift Roles to Improve Capacity and Productivity
- 12 - Recruit and Retain Dental Professionals
- 13 - Expand Education of Oral Health Professionals

Comments and Discussion

The following are key points from the discussion the group had on the objectives and nature of the plan:

- The Plan is very strong and I was delighted to see how good it is
- We need a better focus on patient/consumer-centric services and concerns
 - This should be philosophically embedded in the plan
 - This means improving systems of care from the perspective of patients
- We need to focus on oral health as a part of overall health and as an ongoing part of people's lives
 - We need to focus on prevention and educating people before they need care
- We want to focus on the long term economic value of preventive care
 - We need to have hard data and information on the value of preventive care and make it available
- We want to reach people who don't think of themselves as being oral health consumers
- We should have a glossary of terms somewhere in the plan
 - Possibly after the vision statement so people reading the plan will be familiar with our definition of terms from the beginning
- We should think about an Executive Summary with the goals and objectives stated
- Our vision statement needs to be a concise and marketable phrase – fits on a bumper sticker

- Not all of our goals and particularly our objectives are measurable
- It's easier to get broad support and buy-in of the Plan without specifically measurable objectives – agencies and providers can sharpen objectives and determine their own individual actions
 - This lays out a vision to aspire to and is general enough to allow for creativity
- We could consider changing the names: Goals could be visions, the objectives could be goals
 - If we're not going to have specifically measurable targets, we should consider new language

Decision: The group agreed that the “goals” of the Plan would become “principles” and the “objectives” would become “goals” while the vision and strategies would stay the same.

Specifics to be Addressed

The group reviewed and discussed revisions for the following sections of the Plan, in listed order, keeping in mind that some of the narrative sections are still in progress:

- Introduction
- Goal A – Background and Challenges
- Goal B – Introduction
- Objectives 6
- Goal D
- Objective 12
- Objective 10
- Objective 11
- Objective 8

Craig also reminded the group that additional comments are welcomed and encouraged until the end of May. Email Craig with comments at Craig@Freshley.com.

Stakeholder Involvement

The group considered and discussed how to develop support and buy-in for both the Plan itself and the implementation of the Plan. In addition, suggestions for the ongoing monitoring and support of the plan were reviewed.

Commitment Pledges

The group further discussed the idea of including pledges of commitment as an appendix of the Plan and a list of all organizations who had contributed to the development of the Plan as well as those who signed commitments to its implementation, as done with the State of New Hampshire Oral Health Plan. After discussion, the group agreed to bring the following statement of commitment to their boards for approval and that the blank commitment form would be included in the Plan:

“The Maine Oral Health Advisory Committee has worked collaboratively on the development of the Maine Oral Health Plan. Implementation of the plan will require continued management and collaboration among the stakeholders. To ensure that the work of the Committee moves forward to achieve its goals, the members hereby affirm that they will agree to use best efforts to work toward a shared vision and principles embodied in the Oral Health Plan.”

Ongoing Monitoring and Support

The following idea was suggested and agreed to by the group in regard to ongoing monitoring and support of the Plan. Because several members of the Oral Health Advisory Committee are members of the Maine Dental Access Coalition, it was suggested that the two groups merge to oversee plan implementation as follows:

1. Maine Dental Access Coalition endorses the plan
2. People from this group join the Dental Access Coalition
3. Committee of the Dental Access Coalition is established to monitor implementation of the plan
4. Small groups will be established to actually do the work

The following individuals who were present at this meeting are dual members of the Oral Health Advisory Committee and the Maine Dental Access Coalition and will ensure the above plan is proposed to the Coalition:

- Bev Litchfield – will take the lead and make a motion at a future meeting (expected to be at the June 2nd meeting)
- Valerie Heal

- Kate Perkins
- Kathleen Walker

Format, Roll Out, and Distribution

The group discussed how the plan should look and be distributed to stakeholders and the public.

Format and Distribution

The group discussed the following ideas for format and distribution of the Plan:

- The Plan should be available in hard copy and online
- The Plan should be in four-color, with photos and spiral bound
 - Send photos of Mainers to Judy (to minimize use of stock photos)
- The group generally agreed that the money should be spent more on design than on many copies for distribution
- The Burden document should complement the Plan when it is published
- The group generally agreed to match the style of the Plan with the style of the Watch Your Mouth campaign materials
- A PDF of the Plan should be linked to every newsletter of every association and agency

Roll Out

The group discussed the following ideas about roll out of the Plan:

- We could do a Listening Tour: Regional meetings of interested stakeholders to talk about the Plan
- We need to find people to talk, present the plan to Rotaries, Chambers, etc.
- There should be a Press Conference with the Governor (or someone equivalent) at a minimum
- We should think about tying the release of the Plan in with another event
 - The Oral Health Conference this Fall (October 20th)
 - Child survey data and other data pieces
- We want media attention
- Healthy Maine Partnerships could promote the Plan
- We should consider an advance campaign with two or three partners who can be present at the roll out

- We should acknowledge the lifespan implications of this Plan and get everyone signed on, even those not in the dental field
 - We can highlight how the Plan can help other groups reach their goals
 - Ideas for people and groups we should work with:
 - Peggy Haynes and the Partnership for Health Aging
 - Wellness Councils held by Chambers
 - Insurers
 - AARP
 - Other organizations and foundations
 - Legislators

Closing

At the close of the meeting, Craig and the group discussed Next Steps and made Closing Comments.

Next Steps

The group discussed and agreed to the following next steps:

- Meeting Notes will be sent to the group
- Good Group Decisions will revise the Plan based on comments received at the meeting and comments made via email
- The Plan will be sent out to the group by email with a memo asking for final approval and surveying the group on the necessity of another meeting
- After the Plan is as final as possible, it will be presented up the DHHS “chain of command” with a cover memo saying the group has complete buy-in
- A PowerPoint presentation will be developed to assist stakeholders in promoting and talking about the plan
 - To be unveiled at a celebration event in September, before the Plan is presented to the media

Closing Comments

The following closing comments were made:

- Evaluation forms are included with each participant’s handouts; they are useful and shared with Judy

- Liz Rogers announced that Judy received the President's Award from the Association of State & Territorial Dental Directors at the recent National Oral Health Conference. This award recognized her work at the state and national levels, noting in particular her contributions to ASTDD as the chairperson of the ASTDD Fluorides Committee. The presentation also pointed out that she is the only state Dental Director without a clinical dental degree and this is "a model that works." Liz added that people look to Maine and Judy as a leader.
- Really impressed with the work that's been done – great plan, simple. Hope for a bumper sticker vision statement.
- Facilitation, participation, energy outstanding
- Collaboration has been wonderful, terrific experience – well organized, positive view about how this can work. Very impressed. Can support the plan. Congrats.
- Thank you for the opportunity to participate and include MaineCare in initiatives
- Great having the opportunity to be at the table and hear from others
- Felt connected and have learned a lot, thanks
- Ditto
- Look forward to sharing the plan with Aging network and others
- Really enjoyed the process – very effective, good to be in a diverse group
- Very good process, glad to be here
- Appreciate invitation, can tell process was good from reading the plan
- Impressed with how well people work together, even with diverse opinions – refreshing
- A lot of work went into the Plan, always impressed with fruition from groups – exciting
- This have been a great process, Good Group Decisions has been great
- Judy is a fountain of good ideas
- Ditto to positive comments already made
- Request no toothbrush, dental chair in the published Plan
- Take Watch Your Mouth stuff
- This Plan is like a grant application; we've got the grant and now we have to do it; this is very exciting and scary too.
- Commitment to process, results and diverse opinions have made it what it is
- We chose the right facilitator – great process in this way
- Food has been excellent
- Bumper sticker idea is important, but how close or far do you want to be to the car?