

**Oral Health System: Pandemic Response Workgroup
Virtual Meeting XXIII
February 16, 2022**

4:00-5:00pm EDT

**Group Memory
DRAFT**

Convenor:
Michael Monopoli, Vice President, Grants Strategy
CareQuest Institute for Oral Health

Facilitator:
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I. Key Agreements

During the meeting, the group agreed on the following:

- There will be time in future meetings for participants to share legislative and policy updates, as well as other updates, announcements, and questions for each other.

II. Participants

The following members were present at the meeting:

Name	Organization
Ann Lynch	American Dental Hygienist Association
Barbie Vartanian	Executive Director, Project Accessible Oral Health
Chelsea Fosse, DMD, MPH	Senior Health Policy Analyst, American Dental Association Health Policy Institute
Colin Reusch	Senior Advisor, Oral Health Policy, Dental Access Project Community Catalyst
Don Weaver, MD	National Association of Community Health Centers
Ifetayo Johnson	Executive Director, Oral Health Progress & Equity Network
Jane Grover, DDS, MPH	Director, Council on Advocacy for Access and Prevention, American Dental Association
Keith Perry	Executive Director, National Dental Association
LaVette Henderson, CMP, HMCC, FACD	President, Diverse Dental Society

Manuel A. Cordero, DDS, CPH, MAGD	Executive Director & Chief Executive Officer, Hispanic Dental Association
Mike Monopoli, DMD, MPH, MS	VP, Grants Strategy, CareQuest Institute for Oral Health
Terri Dolan, DDS. MPH	President-Elect, Santa Fe Group
Tonia Socha-Mower, MBA, EdD	Executive Director, American Association of Dental Boards
Vanetta Abdellatif, MPH	President and CEO, Arcora Foundation

The following members were unable to attend the meeting:

Name	Organization
Alan Morgan, MPA	Chief Executive Officer, National Rural Health Association
Ann Battrell, MDSH	Chief Executive Officer, American Dental Hygienist Association
Brett Weber	Public Health Policy & Programs Manager, National Indian Health Board
Carolina Valle	Policy Director, California Pan-Ethnic Health Network
Cheryl Lee, DDS	President, National Dental Association
Diane Oakes, MSW, MPH	Chief Mission Officer, Delta Dental of Washington
Edwin A. del Valle-Sepulveda, DMD, JD	President, Hispanic Dental Association

Emily Stewart	Executive Director, Community Catalyst
Emmet Scott	President, Association of Dental Service Organizations
Gregory Chavez	Chief Executive Officer, Dental Trade Alliance
Hazel Harper, DDS, MPH	Past President, National Dental Association
James Sparks, DDS	President, American Association of Dental Boards
Latisha Canty, RDH, MS	President-Elect, National Dental Hygienist Association
Marko Vujicic, PhD	Chief Economist and VP, American Dental Association
Mitch Goldman, JD, MBA	Executive Committee, Association of Dental Services Organizations, and CEO, Mid-Atlantic Dental Partners
Myechia Minter-Jordan, MD, MBA	President and CEO, CareQuest Institute for Oral Health
RADM Tim Ricks, DMD, MPH, FICD	Chief Professional Officer, USPHS, OHCC, IHS
Sarah Miller, MPA	Director of Philanthropy and Foundation Operations, Dental Trade Alliance
Steve Kess, MBA	VP, Global Professional Relations, Henry Schein

B. Staff

- Kim Delus, Administrative Coordinator, CareQuest Institute for Oral Health
- Kristin LaRoche, Vice President, Public Relations, CareQuest Institute for Oral Health
- Bianca Rogers, CareQuest Institute for Oral Health

C. Guests

- Liesl Sheehan, Tremont Strategies Group

III. Meeting Overview

A. Meeting Purpose and Desired Outcomes

Meeting Purpose: To begin operationalizing our work for 2022, to understand current Congressional legislation, its impact on oral health, and upcoming issues and strengthen relationships.

Desired Outcomes: By the end of this meeting, we hope to have:

- A shared understanding of our work for 2022 and opportunities to begin operationalizing it
- An update on recent congressional activities impacting oral health and what to watch for in 2022
- An awareness of participants' organizational updates and/or queries for other PRW participants

B. Agenda Overview

The following agenda was presented at the start of the meeting, with adjustments made during the meeting as needed:

What	When
Start Ups: <ul style="list-style-type: none"> • Welcome • Purpose of the Meeting • Desired Outcomes 	4:00-4:05
Purpose of the Effort 2022 <ul style="list-style-type: none"> • Recap from January Meeting • Review 2022 Focus Areas • Apply SMARTIE Equity Framework 	4:05-4:45
Policy Updates <ul style="list-style-type: none"> • Congressional Updates 	4:45-4:50

Close and Next Steps	4:50-5:00
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IV. Agenda Items

A. Welcome, Check-ins, and Agenda Review

Mike welcomed participants and began the meeting.

Mike: We sent out a survey about when to meet. We heard that people prefer one hour instead of 90 minutes. A lot has happened since we last met. I did put a covid update in the pre-reading, and we will continue to do that going forward. We will also give time for people to give any responses or updates. Omicron seems to be waning, and we are seeing lots of activity around mitigation mandates.

I wanted to introduce Maureen White who will be doing our group memories from now on, taking over from Sara. I also wanted to introduce Carrie Y. Hepburn-Brown, our new facilitator. She brings a wealth of expertise in this area, especially around equity and making sure that our meetings work well. We are looking forward to a new direction with Carrie.

Carrie: Thank you. As Mike mentioned, we are going to jump right into things.

The group reviewed the desired outcomes for the meeting.

I'll add that we are creating an opportunity in the agenda for general announcements. If you can stay for the duration of the meeting, we'd appreciate it. We'd like everyone to engage in that.

B. Purpose of the Effort 2022

Carrie: Hopefully you noticed in the agenda that we refined our purpose. A lot of that came from the survey results. Thanks to all of you who completed it. 75% of the Pandemic Response Workgroup members completed it. We analyzed the data, and 81% of respondents wanted to continue the meeting. The other 19% indicated that at this time, they did not feel they wanted to continue. Based on that majority, we are continuing to meet and will refine the structure of the meeting.

We are going to jump in to the chance to operationalize the focus areas that were identified:

Our overall purpose is to contribute our collective voice and influence toward making oral health more affordable and accessible to all. In 2022, we will:

1. Continue to monitor and respond, as appropriate, to the impacts of COVID-19 in the oral health field (integral to workforce)

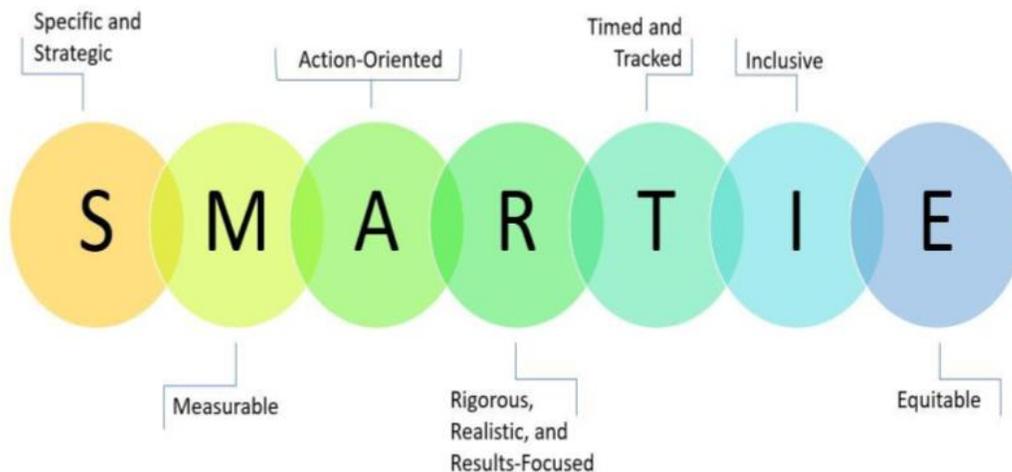
2. Leverage the Oral Health in America: Advances & Challenges report to raise the importance of oral health to overall health among key stakeholders
3. Discuss oral health inequities and explore how to work together to achieve/advance health equity
4. Promote multi-directional integration of oral health and overall health

I'll show a brief presentation on how we can develop SMARTIE goals related to these.

C. Applying the SMARTIE Equity Framework

Carrie: You may have had a chance to look at the pre-reading about moving from SMART to SMARTIE goals. It's an opportunity to incorporate an equity lens.

What is SMARTIE?



Graphic Source: Massachusetts Department of Elementary and Secondary Education

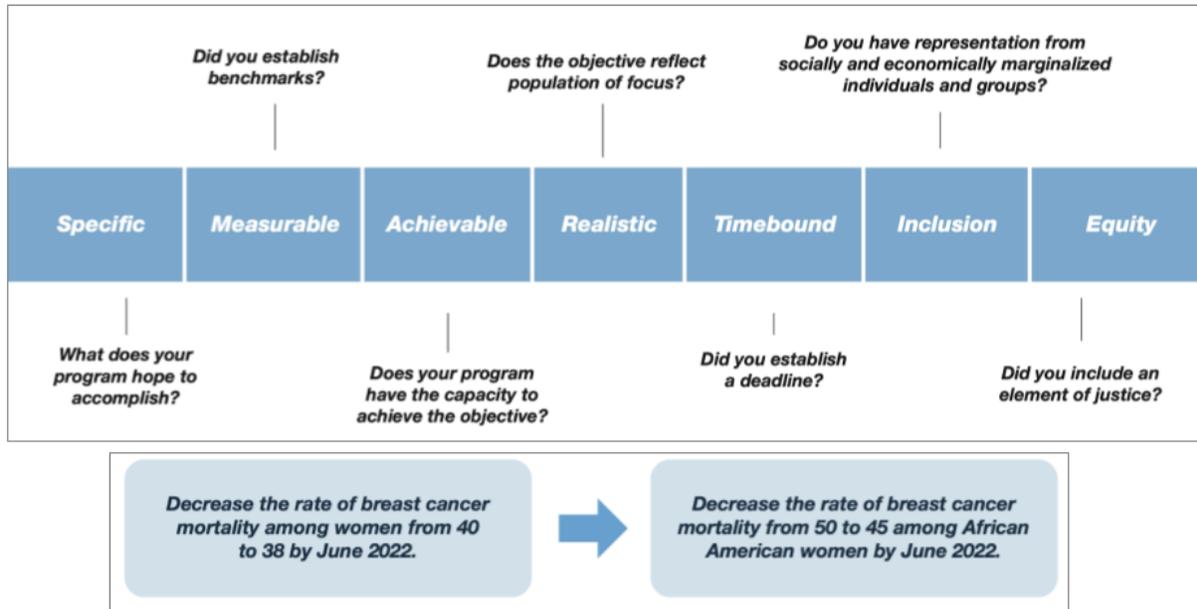


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When we start to think about goals in that way, we proactively think about how there might be disparate impacts on historically marginalized or under-resourced communities.

The CDC also uses a similar process to develop their objectives. Here are some questions to consider as you think about how to make your program SMARTIE.

Tips for Writing SMARTIE Goals (Objectives)



Source: CDC at <https://www.cdc.gov/cancer/dcpc/about/foa-dp22-2202/pdf/smartie-objectives-508.pdf>



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An example of how they utilized this was by saying they wanted to reduce the breast cancer mortality rate among women from 40% to 38% by June 2022, and to reduce the rate among African American women from 50% to 45%. By being more specific, they are acknowledging the disparity.

Here are some additional examples from the Management Center:

Examples

SMART	SMARTIE
Expand youth mentorship program into three new counties by the end of June	Expand youth mentorship program into three new counties by the end of June, with volunteer task forces that are representative of the community (by age, gender, race and other characteristics) advising the expansion
Hire a Chief Development Officer by May 2021	Hire a Chief Development Officer by May 2021, seeking out 1-2 networks of diverse fundraising professionals to identify 4-6 candidates of color/diverse backgrounds to include in the candidate interview pool
Build a volunteer team of 100 door-to-door canvassers by Maywith at least 10 people of color recruited as volunteer leaders first, so that they can help shape the way we run canvasses.

Source: The Management Center at <https://www.managementcenter.org> and The Alford Group at <https://alford.com>



Another resource we have is this goal template, with some questions to consider as you utilize that equity and inclusion lens. This is the premise of the work we will do together.

SMARTIE Goals Template

Time Bound: My goals between (<i>start date</i>) and (<i>end date</i>) are to achieve this Strategic and Ambitious outcome:	
I will know success when I see it using these Measurable standards:	
<ul style="list-style-type: none"> • 	
A Realistic plan to achieve this goal includes these tactics/activities (consider time, resources, capacity):	
	By (date)
	By (date)
Thinking about Equity and Inclusion: Can you imagine there being any unintentional <i>disparate impact</i> along lines of power and identity? How might inequity or exclusion show up? For whom?	
How could you <i>change the goal</i> to either mitigate that disparate impact or make Equity and Inclusion more explicit?	

Source: The Management Center at <https://www.managementcenter.org>



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Part of what we heard from you all is you want to be more action-oriented. This is our first attempt to do that. We will let you pick breakout groups based on the focus areas. I know you are a high-functioning group of strategic thinkers; and also, 15 minutes is not a lot of time. So if you can't answer all the questions, that's okay. We'd like you to think about, how can you start to take that focus area and create a goal around it to help us track progress throughout the year?

Breakout Group Discussion

- We strive to accomplish this **Strategic** and **Ambitious** outcome:
- I will know success when I see it using these **Measurable** standards:
- A **Realistic** plan to achieve this goal includes these tactics/activities (consider time, resources, capacity)
- Thinking about **Equity and Inclusion**: Can you imagine there being any unintentional *disparate impact* along lines of power and identity? How might inequity or exclusion show up? For whom?



Self-Select Your Group:

1. COVID-19
2. Health Equity
3. Integration
4. OHA Report



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Participants worked in breakout groups to fill in the template for goals between February 2022 and December 2022. The groups then shared the results of their conversations.

Group 1: Covid-19

- Chelsea: We were the Covid-19 group, and our specific goal was around vaccination of the dental team. Our group was influenced by the group participants. We spoke about the need to increase vaccination rates among dental team members. One aspect that might need improvement is to address hesitancy concerns, specifically the need to address myths around vaccination within the dental hygiene and dental assisting populations within the workforce. The idea is to use some existing CDC materials, but we recognize there is only English and Spanish available. So there is a shortcoming there, where we are not able to educate some members of the workforce. It plays into the equity and inclusion piece. We need to make sure there is more language accessibility with some of this critical information. In terms of it being measurable, we do have good data about the vaccine acceptance rates among dentists and dental hygienists. We have some targets around increasing it based on the latest data, which was around 90% for dentists, and 78% for hygienists.

Carrie: I'm curious if the data you have available breaks out rates by race and ethnicity? That might be an opportunity to do some additional focus.

Group 2: Equity

- Jane: Our discussion focused on a few things, and we touched on some key themes. It was pointed out that we need to ask “what” and “why.” Why are there inequities? How are we going to address racism through the conversation on inequity? And will we address it from a group perspective, or from a larger, 30,000-foot system of equity perspective that might focus on outcomes? The challenge is also about finding providers. We also know that different groups need different things; some groups need more than others. There was also a discussion about pillars, about going upstream with policy solutions including the consumer standpoint, the voice of the patient, and then professional training. These are three pillars that could be focal points for addressing health equity. It was a lively discussion but we need more time.

Group 3: Integration

- Colin: We started with re-grounding ourselves in recent efforts this group has taken on, namely the letters that went to the national coordinator and assistant secretary for health. Both of which are certainly relevant for integration- the interoperability of health records, and broadly integrating oral health into all of HHS's health initiatives. But it also struck us that this group is largely exclusively dental focused, and when we talk about integration, there are lots of other interest groups that need to be playing a role. The goal we set is getting more non-dental health professionals and organizations actively discussing and engaging on oral health and some of our shared goals, including those represented in those letters. In terms of actualizing that over the next 10 months, we thought it would make sense to take advantage of the current membership of the PRW to do outreach to a number of those groups in our respective networks, with an eye towards organizations closest to or representing underserved or marginalized communities. We want to make sure those interests are communicated upwards through our efforts. One potential idea for building off of that outreach is to invite one or more of those organizations to participate in discussions with us, perhaps every other month. We could also create opportunities separate from the PRW meetings to engage with and discuss these priorities, and to understand where they are in their work and how we can support them.

Group 4: Oral Health in America Report

- Christine: Some of our group was on a call recently talking about this specifically. One thing we talked about is, who is really promoting it? It looks like CareQuest and the Santa Fe group are really taking the lead on promoting it, and there may be others we

are not aware of. In terms of knowing when we've achieved success, it will be when folks outside of the oral health community, and even outside of just the health community in general, are aware of the report and the implications of it. We thought the first thing we need to do is to find out what NIDCR's communication plan is, and who is in charge of implementing and tracking it. We thought it would be very effective to develop a speaker's bureau of folks who could be ready at a moment's notice to come on a podcast or TV show to talk about the report. We need to identify organizations whose missions align with promoting health equity and eliminating disparities. That's one of most significant messages that we think will get people's attention: that while there is some part of the population that has access to oral health care, and is without barriers to accessing it, there is a significant segment for whom oral health is very elusive and difficult to attain. We need to pound that message home that not everyone has access to the same things and it's resulting in some serious disparities.

Carrie: Thank you all so much. You were up for the challenge of this discussion. I want to make sure we are doing congressional updates; I'll turn it over to Lisa to tell us what's been happening in Congress.

C. Policy Updates

- Lisa: Not too much is happening in Congress in terms of movement; Build Back Better still remains stuck and on life support. We are seeing the Senate put together their last big packages of the session to hold hearings and try to move some of those through the spring and into lame duck. The Senate Finance Committee is concentrating on a mental health package that will have a telehealth component to it, and to try to make sure that mental health is treated the same as physical health. That will be their big piece. If Build Back Better moves, that will be their other big piece, but that's a big "if" at this point.

The other bill that may be of interest to this group is that the Senate Health Committee has a working discussion draft out now for a pandemic preparedness bill, it's going to be called the PREVENT Act. That will look at how to better prepare- from PPE to vaccine dissemination to research to funding- for a future pandemic. That discussion draft was put together by Chairwoman Murray and Ranking Member Burr. We expect that to have some momentum moving into the spring.

The House hasn't really done anything of interest. Energy and Commerce has been focused on some FDA reauthorizations; we expect them to look at the Cares 2.0 package in the spring, but that does not have a Senate component yet, so it remains to be seen what will happen.

Carrie: I did want to offer one thought we had had on how to make sure you all feel engaged and feel some ownership over the group. We were wondering if other organizations who have

lobbyists or legislative aides, or folks who are following legislation, would like to also offer similar updates. How do folks feel about that as a suggestion?

The group indicated agreement with the suggestion.

Carrie: Okay, we will cue that up for the next meeting. It's not that we don't appreciate your updates Lisa, but it's just that we know there are a lot of things happening and it's fun to hear from other folks as well.

D. Other Updates and Announcements

Carrie: It's our pleasure now to try something we've been wanting to try, which is to open up the floor for updates, announcements, and/or queries for each other.

- Bianca: Two of the members of PRW reached out with some upcoming events. There is a webinar coming up on Feb. 22 looking at National Children's Dental Health Month and the Oral Health in America report. That's something we've continued to talk about in this group. We are hoping to create a bank or inventory of upcoming activities and webinars that are focusing on the report, so if you could send those my way then we can continue to share those with this group and also figure out where we can fill the gaps so that there is visibility on the report throughout the rest of the year. ADHA and ADA are also hosting webinars on the same date on some new research on Covid-19 and the dental hygienist. Be sure to check those out.

Bianca shared the webinar links in the chat:

- NYU Webinar on Feb. 22: Highlighting Children's Dental Health Month and findings in the Oral Health in America Report: <https://web.cvent.com/event/dd566230-f113-4ae5-9ae0-24d5c74f54ef/summary>
- ADHA/ADA Webinar on Feb. 22: New Research Release: COVID-19 and the Dental Hygienist: https://zoom.us/webinar/register/WN_oDr4QzhYTLa_30wEhvY7IA
- Jane: The ADA is also hosting a webinar on the 22nd about dental sealants. We'll be having a new one-pager to be posted on that. We are also having a one-day health equity discussion in Chicago, a week from this Saturday. Our new executive director and our president-elect will both be part of that. We are looking forward to providing the details of our health equity action plan soon to this group. We have a lot coming up. It is still National Children's Dental Health Month; we have posters and activity sheets we can ship out to you. We really need to move "sealants make sense," which is the theme of the poster this year.

Christine added a link to the National Oral Health Conference in the chat:

- National Oral Health Conference website. It's in April.
<https://www.eventscribe.net/2022/2022NOHC/index.asp?launcher=1>

Carrie: Any questions or queries for one another? Anything you are wondering?

- Terri: Who does own dissemination responsibilities for the Oral Health in America Report? I'm assuming they are open for partnership so we can amplify. It's one thing to launch that report, which was a significant amount of work from many people, now we want to make sure it reaches as many people as possible.
- Mike: There is a marketing plan, they say, but it's been elusive. We are trying to get that.
- Terri: I haven't seen it either.
- Kristin: I think the discussion for the PRW is that with this transition from what we thought was going to be a surgeon general's report to an NIDCR report, there is just a different reach and level of exposure it will get coming from one group vs. the other. So what can we do as our group, as advocates, to help amplify the awareness of its existence? We know it won't have the long legs it would have had as a surgeon general's report. Also NIDCR has a specific research point of view. How can we expand that point of view and make it more relevant to more audiences? If it were a surgeon general's report it would have a broad appeal. We are certainly not trying to take over the dissemination of it, but how can we add to and expand the reach NIDCR will have with their approach? Understanding what their approach is would be very helpful to that conversation. There is a subgroup of us meeting to think that through; if anyone wants to join us let us know.
- Ann: Dr. Renee Joskow had indicated she was the key spokesperson for the report, so she might be a good point of inquiry on that question of dissemination.

Carrie: Any additional announcements or questions?

- Latisha: I am from the National Dental Hygienists' Association. We are having a webinar on Feb. 27th from 6-8pm, it's a review on nitrous oxide. I can send you all the flyer.

Carrie: If you send that to Bianca we'll make sure it gets out to the whole group.

V. Close

A. Meeting Evaluation

Carrie: I'd like to know if this new format works for you, and feels like a useful time for you?

Participants indicated a positive response.

Carrie: Okay, we will keep some opportunity for you to engage with one another, keep updates and announcements as part of it, and send some other stuff in an email.

Thank you so much for your time.