

ASTDD Annual Business Meeting Minutes

April 30, 2005- Pittsburgh, Pennsylvania

Meeting was called to order at 2:00 pm.

I. Roll Call

Present at the meeting were the dental directors from 31 states and the District of Columbia -

Alabama	Alaska	Arizona
Arkansas	Colorado	District of Columbia
Georgia	Illinois	Indiana
Iowa	Kansas	Kentucky
Louisiana	Maine	Massachusetts
Mississippi	Montana	Nevada
New Hampshire	New Jersey	New Mexico
New York	North Carolina	North Dakota
Ohio	Oregon	South Dakota
Texas	Utah	Washington
Wisconsin	Wyoming	

Associate Members present were:

Joe Alderman	Don Altman	Steve Geiermann
Kathy Geurink	Beth Hines	Bev Isman
Julie Janssen	Ray Lala	Julie Tang
Linda Koskela	LeeAnn Cooper	

New Members and Associate Members were introduced. New State Dental Directors were: Joseli Alves-Dunkerson (WA), Rebecca King (NC), Gordon Empey (OR), Bob Russell (IA), Joyce Flieger (AZ)

II. ASTDD Financial Report (Dean Perkins): Dean presented a profit/loss summary for ASTDD for calendar year 2004 and noted that the association is financially sound. Budget detail is available to the membership upon request.

III. Cooperative Agreements (CAs) Report (Bev Isman): Bev highlighted committee activities and consultant work under the CAs:

- Bev mentioned the work on the State Synopsis Survey and the State Onsite Reviews. Bev noted the state program review process had been revised and was less burdensome for the programs.
- Bev mentioned the materials that were distributed at the meeting related to oral health activities for Children with Special Health Care Needs (CSHCN). The information was prepared by Jay Balzer and included information compiled by



ASTDD Board of Directors. Cheri Seed, Lynn Mouden, Stuart Lockwood, Christine Forsch, Lewis Lampiris, Steven Steed, Margaret Snow, Brad Whistler.

ASTDD on state activities related to this population. Bev noted CSHCN is funded under MCH Block Grant activities.

- Bev mentioned the Medicaid/SCHIP Dental Consultants Association had officially formed. The HRSA CA provided travel assistance for many of the consultants to travel to the Medicaid related meetings held in conjunction with the NOHC. It is hoped to have joint activities with the new association.
- The American Association of Community Dental Health Programs is becoming more active in the NOHC program and will be represented on the Program/Planning Committee for the 2006 NOHC. Bev mentioned the association's work on development of community/local guidelines for dental public health programs.
- Bev noted the Professional Development and Leadership Committee will be providing opportunities for membership training/leadership development. Bev also noted the mentoring program and that several states with new state dental directors had requested mentoring. Don Marianos and Don Altman were recognized as the lead consultants for their respective roles in leadership and mentoring activities. Four state mentoring projects and two local mentoring projects were done this past year. The Mississippi site review piloted the new process – states were encouraged to talk to Nick Mosca about the on-site review process. Dawn McGlasson is considering requesting an on-site review this year.
- CDC plans to continue web-casts to offer training opportunities to ASTDD members. MCHB will also be doing some training-related audio conferences.
- Head Start Oral Health Work Group: Kathy Geurink was introduced. Kathy noted the hand-out provided on the activities of the work group and that 48 states had conducted Head Start Oral Health Forums. Kathy has 42 of the action plans from the forums and will be requesting the remaining action plans in the near future. It was noted some states will be contacted to conduct evaluation activities on the forums and follow-up meetings.
- Nationally the work has been recognized as being valuable to Head Start Programs and activities will continue through the regional Head Start Dental Consultants and state programs. There are plans to bring AAPD and ADEA together to improve advocacy for Head Start oral health activities.
- Best Practices: Julie Tang was recognized for the work on Best Practices.
- National MCH Oral Health Resource Center: Katrina Holt was recognized and it was noted the center provides resource support nationally in relation to MCH oral health.

- Nick Mosca and Warren LeMay were recognized as the ASTDD newsletter, *Oral Health Matters*, editor and associate editor respectively.
- Mike Manz was recognized as a "Basic Screening Survey" (BSS) consultant. Mike and Kathy Phipps provide support in sample design, data collection methods and data analysis for states undertaking the BSS. Bev noted there will be a round-table luncheon presentation related to the BSS.

IV. Committee Reports:

Dean and Bev noted that reports from all the ASTDD committees are available to the members through request to Dean. Reports from the Committees at the Business Meeting were as follows:

- Nominating Committee: Lynn Mouden reported for the committee. The committee was composed of Lynn (as Past-President), Ron Romero and Jim Cecil. The only nomination was for a director to fill-in for Warren LeMay who was the outgoing Director. It was noted that Warren stepped in to fill out the term when Ray Lala vacated the Director position due to a new federal assignment (from the South Carolina Dental Director to Washington, DC as the Chief of the Bureau of Health Professions. The Director position is for an east coast dental director and the Nominating Committee is putting forth Peg Snow as the nominee.
- Governance Committee: Lynn noted he filled in on the Governance Committee when Ray had to leave the committee. The Governance Committee made a recommendation to ASTDD membership to add a voting Associate Member position to the Executive Committee. It was noted this would require a by-law change and would bring the total Executive Committee members to nine (removing the need for the President to serve as a tie-breaker). Individuals at the meeting were supportive of the idea. Dean will move forward with a proposed by-law amendment. The process for the Associate Members to select the Executive Committee representative needs to be defined (the Governance Committee will work with Associate Members to develop the process).
- Fluorides Committee (Judy Feinstein): Judy highlighted the following activities of the committee:
 - ◆ Working with CDC on the development of the water fluoridation poster;
 - ◆ Working with CDC on the method for updating the fluoridation census;
 - ◆ Working on a request from Bev for development of a fact sheet on fluoride varnish;
 - ◆ Discussing the role of the committee in the development of fluoride-related position

statements (providing a review of scientific issues for membership);

- Discussing the committee actively developing resolutions for ASTDD, rather than waiting for members to introduce resolutions;
- Hope to involve Julie Tang or someone from the Best Practices Committee for the activities around science issues and development of resolutions; and
- Judy noted the committee membership is on the web site and committee reports have been available for membership at the meeting.

- School and Adolescent Health Committee (Cheri Seed): Cheri noted the work of the committee since it was first discussed at the Milwaukee meeting. The committee has worked on a survey to capture information on state oral health program activities with school health and adolescent health (Julie Tang has assisted with the survey). The committee has developed a mission statement and wants to be purposeful about what they are trying to accomplish with the survey and other activities. The committee's focus is to improve the health and well being of school-aged children and adolescents. Twenty states have been contacted for information on their activities and committee members will be contacting additional states this year. The committee is currently compiling and summarizing the information from state programs and hopes to highlight best practices.

- V. President's Report (Lew Lampiris): Lew highlighted that since becoming President of ASTDD he has become more aware of the increased role and expectations of ASTDD in dental public health by external partners and other organizations. Examples have included the ASTDD role on dental workforce and expectations around federal legislation. With that the Executive Committee has spent some time revisiting the ASTDD strategic plan and developing leadership skills on the Executive Committee. Lew noted ASTDD has begun maturing as an organization and with that comes the need for new skills and/or staffing of the organization.

Lew acknowledged the HRSA and CDC Cooperative Agreements, Don Marionos and Don Altman for their roles with ASTDD including recent activities on leadership within ASTDD and the Executive Committee. Lew noted ASTDD is heading into the second year of the 2nd CDC CA and is applying with HRSA for a 2nd 5-year CA.

NOHC is a reflection of the increased role of ASTDD and collaboration with AAPHD and other partners, noting NOHC attendance in Los Angeles at 700 indi-

viduals and pre-registration for the 2005 NOHC at 650. Lew thanked Chris Forsch and Maija Beyer for their work in planning the 2005 NOHC.

Lew discussed activities around development of a communications plan for ASTDD. The web site was noted as one aspect of the communications plan but Lew indicated the need for higher profile communication to encourage support of state oral health programs. Lew talked about the attempts to outreach to organizations like ADEA to make them aware of how state oral health programs interact and collaborate with their membership (in this case dental academic institutions).

Lew mentioned the Tuesday morning NOHC plenary will focus on the roles and activities of state oral health programs to further educate partners and those in attendance at the NOHC on the importance of states having vibrant, functioning state oral health programs. Lew will recognize state dental directors and staff at the plenary.

Lew discussed the need to diversify funding of ASTDD. He noted current funding is primarily dependent on the CA's, NOHC proceeds and membership. Lew noted some uncertainties about the future of federal CAs with organizations like ASTDD (an ASTHO concern), the NOHC dependence on CAs for a substantial amount of support and the limits of membership fees for running ASTDD activities. Lew noted ASTHO is looking at foundation and private support for public health activities and ASTDD is looking into these same avenues for future funding support. Lew noted ASTDD increasing funding support and capacity through the addition of Associate Members.

In highlighting the role of ASTDD in meeting member needs, Lew mentioned the Sealant Expert Panel that has been convened to update and re-state issues around sealant programs. Lew noted some states were experiencing problems with sealant programs from criticisms of private dentists and/or their professional organizations. The activities to provide training to improve member competencies and leadership skills were another example of ASTDD's attempts to meet member needs.

The ADA celebration on the 60th anniversary of water fluoridation was noted. The celebration will occur in Chicago at Millennium Park followed by a two-day symposium and training seminar.

Lew noted the opportunity for a 2nd annual membership meeting if members would like to hold a second meeting in conjunction with the HRSA SOHCS grant workshops. Plans for this year are focused around

advocacy skills and capacity development for state oral health programs.

Finally, Lew recognized the current Executive Committee members, ASTDD Committee Chairs and Committee members. Lew also recognized Ray Lala who left the Executive Committee with his change in federal assignment.

VI. CDC Presentation (Bill Maas): Bill indicated the need to celebrate the activities and accomplishments through CDC's partnership and CA with ASTDD. Bill wasn't sure he could have predicted the outcomes of the CDC CA but he had the notion there was a common vision regarding the increased role of ASTDD in dental public health activities.

Bill let members know the CDC Program Review was not out yet, but would be in May. Bill highlighted CDC CA activities, CDC Division of Oral Health activities and CDC support of state programs. Highlights included:

- NOHSS (hosting child BSS data for 10 ten states and that will soon be increasing to 24 states);
- The work of Kathy Phipps and Mike Manz in assisting state surveillance activities through CA funding;
- ASTDD Best Practices Project (Bill noticed the project is being referred to for individuals to get information on several list-serve topics), although Bill noted the future need to tighten criteria around "best practices";
- The state program presentations in Chicago to partner organizations on the state program interactions with their membership, the role/importance of state oral health programs and the need for such programs/activities in all the states;
- The reputation of the NOHC is positive as the major nation dental public health meeting and CDC's role in underwriting parts of the meeting under the CA;
- The increased attendance at the NOHC has resulted in profits for ASTDD and AAPHD to support their other organization activities;
- The ASTDD Executive Director, Dean Perkins, will be chairing the meeting of the Transitional Steering Committee at the NOHC on the Surgeon General's "Call to Action";
- The new 5-year CA with Oral Health America and CDC expectations for that CA to provide some assistance to state oral health programs;
- Announcement that Eugenio Beltran as the new Epidemiology, Surveillance and Investigations Team Leader;
- CDC DOH hopes to do research to support state program services – to fulfill research needs for practice issues faced by state programs;
- NHANES data will be coming out in a May MMWR;
- NIDCR backing off support for NHANES so CDC is taking an increased role in support of that survey;
- Bill mentioned the new CDC DOH program staff and recognized those at the ASTDD Business Meeting;
- Bill noted work with AWWA to build stronger associations with drinking water programs and that states will likely see the results of these activities in the near future;
- CDC DOH support of the Water Fluoridation Reporting System (WFRS) including planned software enhancements and a user help desk;
- CDC DOH activities with the American Academy of Periodontology and testing of survey questions for inclusion on BRFSS to collect information on periodontal disease (plans to pilot test questions in 2006 with use of NHANES for validation);
- Bill noted the overall modest efforts to address adult dental issues and the work of Susan Griffith in recent articles that highlighted three-times the caries rate in elderly adults than seen in children;
- Bill noted the grants to Rhode Island, Arizona and North Carolina in relation to prevention research to address dental needs in the elderly (and the current lack of evidence-based approaches to address elder dental needs);
- CDC DOH convening the Expert Sealant Panel to update, revise and/or restate information related to the effectiveness of dental sealant programs in the face of criticism by some private dental providers and/or their professional associations (Bill noted Diane Brunson's role in highlighting the need for this activity);
- Bill noted the work being done with Mark Nehring/HRSA to have a shared manual and messages regarding dental sealant program effectiveness and as an evidence-based practice;
- Quarterly web conferences will continue to provide expert presentations for all interested state oral health programs;
- CDC DOH is organizing a new ASTDD member orientation to CDC workshop – plans are to have up to 12 new/newer state dental directors come to Atlanta for the orientation workshop (September 2005);
- Bill noted the CDC funding of 12 states and one territory, that grantees are learning from each other through the CA process and workshops, that all programs remain at the capacity-building level at this time and his hope to begin moving some states to the basic implementation level (\$1.0 – 1.2 million in funding required);
- Bill noted his desire to expand the cooperative agreements to more states, however it will require increased funding to CDC DOH and that has not been forthcoming;
- Preventive Health Services Block Grant was zeroed out in the President's budget – noted about

\$3.6 million of that funding source goes to state oral health programs (22 state oral health programs have some funding from this source);

- Judy Sherman (ADA) thought half of the Preventive Health Services Block Grant might be preserved, however it has been noted there is no assurance any of the remaining funds will go to oral health (hope is for Congressional language to direct some of the funding to state oral health programs);
- Bill noted the activities around reorganization at CDC, however the Division of Oral Health will remain a division – Bill did note there are some areas he would like to see future growth in at CDC DOH;
- ASTDD recommendations on the CDC research agenda were received and are being considered;
- Bill noted the CDC “Futures Initiative” may require program growth focused on goals outlined in that initiative but he believes DOH and DOH staff are well positioned to work within this framework;
- Cheri Seed noted the difficulties with getting public support for oral health activities and/or programs to address oral health issues in meth-users and asked if CDC might have a role assisting states in framing the issues (e.g., highlighting clinical sequella). Bill noted the same problem federally in support in addressing these issues but he could contact the Federal Bureau of Prisons to see what activities they have undertaken.
- Ron Romero noted some states, like New Mexico, have developed oral health surveillance systems and disease burden documents. Can CDC provide technical assistance for other states in development of these activities. Ron noted the need for a minimum set of data that all states are collecting and standards in relation to data collection and reporting. Ron asked CDC to post tools, guides and/or templates on the CDC web site to assist in these efforts. Bill noted a template for burden documents has been developed and a template for state oral health surveillance systems should be available by September 2005.

VII. HRSA/MCHB Presentation (Mark Nehring): Mark indicated he sees states as program implementers for the federal programs. States are where program goals are addressed and he sees his role as a coordinating role for states. Mark stated he has also enjoyed the HRSA CA with ASTDD and is pleased with the activities from that CA. Mark noted the current CA will end in September and ASTDD will be applying for the new competitive 5-year CA and he is hopeful the association with ASTDD through the CA will continue.

Mark also mentioned the relationship with state oral health programs through the SOHCS grants. Mark’s

hope is the SOHCS grants are addressing state oral health program needs and filling in the funding gaps. Mark’s hope is such funding will strengthen and sustain state oral health programs. The grants also support the states getting together in relation to technical assistance and training around the grants and acknowledged ASTDD plans to use the meeting as an opportunity for additional ASTDD membership activities. The next SOHCS grantee meeting is being planned for the 1st week in December in Washington, DC. Mark introduced Pam Vodeska and her role in the SOHCS grant activities. Pam assisted in preparation of summaries of state program activities in relation to the grant and is working on a template for future reporting. Mark indicated the SOHCS grant is funded through a \$5.0 million earmark with broad language for state oral health activities – Mark hopes this flexibility has been reflected in the grant process.

VIII. Center for Health Care Strategies (Carolyn Ballard):

Carolyn discussed the Robert Wood Johnson Foundation funding that had gone to Arizona, Oregon, Pennsylvania, Rhode Island, South Carolina and Vermont to state actions to address Medicaid dental access. With remaining funding the Center for Health Care Strategies wants to share information with other states and encourage further action in other state programs. States may apply for participation in a “Purchasing Institute”. If selected (funding for 15 states), states must bring three member teams to the training. The notice is going to state Medicaid Directors and requests the team be led by the Medicaid Director with the other team members from public health and the dental community. The goal is to get states to recognize the importance of oral health and note that Medicaid dental access is still a problem (currently about one in four children enrolled in Medicaid with any annual dental service). The activities include development of a dental action plan with a six-month follow-up to assess progress on the plans/activities. Possible activities are to demonstrate how to work collaboratively to expand dental workforce and to decrease the administrative burden on dentists that participate in Medicaid. Carolyn also mentioned activities to develop innovative programs to address the oral health issues of Children with Special Health Care Needs. Carolyn made handouts on the September 28-30th training available to membership at the meeting.

The notice of the institute will go out to State Medicaid Directors on May 16th.

Members noted the institute sounds similar to the approach used in NGA Policy Academies. Members also noted that while the desire may be to have teams composed of the Medicaid Director, Dental Director and representative of the state dental association the

wording may not make that clear. Examples were provided where Medicaid Directors may invite other groups in lieu of the dental associations and/or state oral health programs. Carolyn indicated she will work with her staff to clarify this information in the letters.

IX. Old Business:

ASTDD Terms of Directors and/or Officers on the Executive Committee: Mark Mallatt raise the issue of terms of directors and/or officers on the Executive Committee at the 2004 ASTDD Business Meeting and it was noted further action and/or information on this item has not been provided. Mark noted the turn-over in ASTDD membership meeting to meeting and difficulties faced with the current process that could take up to a 7-9 year commitment to serve on the Executive Committee and as the organization President. Mark feels this process preempts members from becoming President-elect/President and could discourage younger members of the organization. Mark also noted the long terms may prevent getting new ideas and perspectives to the Executive Committee. It was also mentioned if the organization had a President that was difficult or causing problems for the organization and/or membership, the one-year term would be beneficial as it would be easier for the organization to move past the situation. Other comments and discussion included:

- Committee involvement is another way for members to move into leadership positions;
- One year is too short for a President to make and/or accomplish their agenda/direction for the organization;
- It takes several years on the Executive Committee to understand the activities under the Cooperative Agreements, budget, and other ASTDD roles;
- Could reduce Director positions terms from three to two years;

- It was noted the plans to bring an Associate Member to the Executive Committee;
- Questions was raised why ASTDD would open another Executive Committee position for an Associate Member and not an additional position for another Member;
- The Associate Member position and/or change in terms for officers and/or Directors on the Executive Committee will require changes in the by-laws

A motion was made and seconded to end debate. Motion passed without objection.

Reg Louie/Chris Forsch made a motion to table the issue. Motion passed with 17 in favor and 8 opposed.

Governance Committee will take up this issue and report back to membership at least 30 days prior to the annual meeting. This allows it to come back to the meeting as a motion/proposed by-law change. The task is defined as addressing the rotation and terms of officers and directors on the Executive Committee.

- X. Election of Director: The floor was opened for nominations. No nominations were received – nominations were closed. A motion and second were received to elect Peg Snow as a 3-year Director (east coast director) for the ASTDD Executive Committee. The motion passed unanimously.
- XI. Corrections to the Program: Mark Siegal noted the program omitted an ASTDD awardee and this was the second year of the omission. Dean Perkins indicated he would consult with Mark to get the correction and work with MRSI to ensure the information was correct in next year's program.
- XII. Adjournment: Meeting adjourned at 4:00 pm.