Oral Health Florida Data Action Team
<mark>**Minutes: November 12, 2015 Conference Call**</mark>
3:15 p.m. – 4:15 p.m. EST

Agenda

1. Welcome/Introductions
    Meeting called to order at 3:17 p.m. EST

2. Attendees Self Announce
    Members in attendance: Lilli Copp, Judith Corbin, Jill Herndon, Abigail Holicky, Darlene Pourcillie, Scott Tomar, Christina Vracar

3. Approval of minutes: August 21st, 2015 in person meeting at OHF Conference
    Moved (Copp) and seconded (Holicky) to approve minutes. Approved.

4. OHF Data Reporting (Herndon)
    A. Road Map Indicators
    B. Repository – "Associated" Data

    - Discussion about whether OHF should be a repository for data and how to incorporate relative to Roadmap indicators. There is an option to include related data as "associated data" within the Roadmap reporting.
    - There was interest in having county-level ED data available.
    - Other recommendations included providing links to county-level fluoridation through the CHARTS data and linking to the Sealant Action Team's sealant data.

5. Head Start (Copp)
    A. Data Update
    B. Technical Assistance Possibilities
    - Copp indicated that the Head Start data just recently were provided. Oral health measures for 3-5 year olds include: (1) dental home, (2) preschool preventive care, (3) preschool completed dental exam, (4) preschool needed treatment, and (5) preschool received treatment.
    - Early Head Start data (0-36 months) include: (1) up to date on EPSDT schedule – had a dental visit by 12 months and (2) pregnant women with a completed dental exam.
    - This report indicates improvement overall relative to prior year: (1) "Needed treatment" appears to be lower, (2) "received treatment" is higher.
    - There are still some programs that are not doing well. Perhaps the DAT could help provide assistance to those programs to help them identify strategies to get children into care.
    - There are some data "red flags" that raise potential questions about data accuracy:

- o Programs with dental home rates of 100% (especially if dental exam and preventive care are much lower)
- o Programs that have very low "needed treatment" percentages.
  May want to ask these programs about how they are interpreting the questions.
- Vracar suggested considering standardized screening with a basic screening survey manual to help ensure that everyone is reporting information in the same manner.
- The group discussed the possibility of hosting a webinar to provide TA to the Head Start grantees. Holicky suggested selecting a few sites that are doing particularly well and some that are not doing as well to focus on.

6. County Level Summaries (Group Discussion)
   - Tomar indicated that the UF IRB protocol allows for aggregated ED data to be reported.

7. Other Updates/Announcements
   A. FL DOH AMCHP Grant (Holicky and Vracar)
      - Holicky reported that they are working with the FL DOH data staff and outside partners, including some of the OHF DAT members to conduct an ROI analysis on prevention (sealants and fluoride) for children receiving services at county health departments. They will be reporting at the AMCHP annual conference in January, and they will develop a data brief/infographic that can be shared with stakeholders.

   B. Burden of Oral Disease report (Holicky)
      - Holicky reported that FL DOH has been working on Florida's first Burden of Oral Disease report, using the CDC template as a basis. The report is almost completed. Data from this report could also be included on the OHF website.

   C. Federal Reporting on Sealants and Technical Assistance (Herndon)
      - CHIPRA Child Core Set Measures: Sealants for 6-9 Year Olds
        a) CMS Webinar 11/12, 2-3 p.m.
        b) CMS Quality Conference, Dec 1-3, 2015; Baltimore MD
      - UDS Reporting: Sealants for 6-9 Year Olds
        a) NNOHA Conference, November 15-18, 2015; Indianapolis IN
        b) HRSA/NNOHA Webinar – December 7, 2015
      - Herndon noted the above webinars and conferences providing technical assistance related to Dental Quality Alliance measures adopted by CMS for Medicaid reporting and HRSA for health center reporting.

Meeting adjourned at 4:20 p.m. EST