Supplemental Documentation Checklist

DUE	DUE BY 5:00pm on Wednesday, October 4, 2017					
DATE OF SUBMISSION	28 September 2017					
ORGANIZATION NAME	Mendocino County Health and Human Services Agency, Public Health					
Application Contact Name: Ruth Lincoln, PHN, MA Phone Number: 707-472-2709						
E-mail Address: lincolnr@mendocinocounty.org						

The following documents must be completed and submitted with this Supplemental Documentation Checklist by 5:00 pm on October 4, 2017, in hard copy and by E-mail.

Please Check
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One copy must be mailed to:

Regular Mail	Express Delivery
Oral Health Program California Department of Public Health P.O. Box 997377, MS 7208 Sacramento, CA 95899-7377	Oral Health Program California Department of Public Health 1616 Capitol Avenue, Suite 74.420 MS-7208 Sacramento, CA 95814 (916) 552-9900

Also e-mail the documents to: <u>DentalDirector@cdph.ca.gov</u>

Grantee Name: Mendocino County Health and Human Services Agency Grant #

Work Plan FY 2017-2022

DELIVERABLES/OUTCOME MEASURES: Local Health Departments (LHJs) shall implement selected strategies outlined in the California Oral Health Plan and make progress toward achieving the California Oral Health Plan's goals and objectives. The activities may include convening, coordination, and collaboration to support planning, disease prevention, surveillance, education, and linkage to treatment programs.

Objective 1: By December 31, 2018, build capacity and engage community stakeholders to provide qualified professional expertise in dental public health for program direction, coordination, and collaboration.

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
1.1	Identify existing staff support and a structure	01/01/18- 01/31/18	Deputy Director, Public Health (DD)	Program structure in place
1.2	Create a coordinator position and other positions as needed	01/01/18- 01/31/18	DD	List of positions established; vacancies filled
1.3	Write job descriptions/ duty statements	01/01/18- 01/31/18	DD	Job descriptions/duty statements developed
1.4	Recruit and hire staff to fill vacancies	01/01/18- 02/28/18	DD	List of Staff hired, provide number of vacancies
1.5	Participate in trainings offered via meetings, webinars, workshops, conferences, etc.	01/01/18- 12/31/18	DD and Project Coordinator (PC)	List of trainings, meetings, webinars, workshops, conference attended
1.6	Develop Advisory Committee/Coalition/Partnership/Task Force (AC) and recruit key organizations/members representing diverse stakeholders.	01/01/18- 03/31/18	DD PC	Membership list
1.7	Convene first meeting and agenda; set schedule of meetings, develop evaluation for meetings.	03/01/18- 03/31/18	PC	First meeting agenda; schedule of meetings; number of meetings held. List of participants, participant evaluations
1.8	Identify Mission, Vision, shared values, and structure of AC.	03/01/18- 03/31/18	PC	Mission, vision, values, AC structure
1.9	Conduct key informant interviews (KI), focus groups, or Knowledge, Attitude and Belief (KAB) surveys of key stakeholders and organizations to determine understanding and priority of addressing oral health.	03/01/18- 05/31/18	PC	Summary of KI interviews, focus groups and/or KAB surveys to address common themes, challenges, and support of mission, vision, and values

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#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
1.10	Identify goals and objectives for improving oral health.	04/01/18- 04/30/18	PC	Document defining goals and objectives
1.11	Establish communication methods with local partners and stakeholders.	04/01/18- 12/31/18	PC and Project Assistant (PA)	List of meetings, webinars; conference calls; list serve developed; mailings, etc.
1.12	Convene advisory group/task force per schedule. Submit new schedule for the rest of the grant term with revised work plan.	03/01/18- 12/31/18	PC and PA	Minutes; other documentation from meetings/webinars/calls/mailings
1.E.1	Conduct qualitative analysis to determine effectiveness of trainings and community organizing approaches to capacity building.	12/01/18- 12/31/18	PC	Summary of analysis
1.E.2	Conduct satisfaction survey of AC membership to determine AC progress, recommendations and future direction of the LOHP and strategies to address challenges.	12/01/18- 12/31/18	PC and PA	Analysis of satisfaction survey, to include quantitative measures to assess network density or involvement and recommendations for improvement

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Objective 2: By December 31, 2018, assess and monitor social and other determinants of health, health status, health needs, and health care services available to California communities, with a special focus underserved areas and vulnerable population groups.

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
2.1	Identify staff, consultant or work group from Advisory Committee to develop Needs Assessment.	03/01/18- 05/31/18	DD and PC	List of work group members
2.2	Conduct an assessment of available data to determine LHJs health status, oral health status, needs, and available dental and health care services to resources to support underserved areas and vulnerable population groups.	05/01/18- 10/31/18	PC	Summary of resources and needs assessment
2.3	Identify and plan the needs assessment strategy based on available resources. Develop needs assessment instrument.	05/01/18- 10/31/18	PC	Needs assessment instrument
2.4	Conduct inventory of available primary and secondary data.	05/01/18- 10/31/18	PC and PA	Data gathered and inventoried
2.5	Determine the need for primary data	05/01/18- 10/31/18	PC	Analysis conducted and data gaps identified
2.6	Identify resources	05/01/18- 10/31/18	PC	Data resources identified to fill gaps
2.7	Select methods	05/01/18- 10/31/18	PC	Methods selected
2.8	Conduct Needs Assessment	05/01/18- 10/31/18	PC	Work plan developed to collect missing data
2.9	Collect data	05/01/18- 10/31/18	PC and PA	Data collected
2.E.1	Analyze data and prepare summary analysis.	11/01/18- 12/31/18	PC	Summary Report

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Objective 3: By December 31, 2018, identify assets and resources that will help to address the oral health needs of the community with an emphasis on underserved areas and vulnerable population groups within the jurisdiction.

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
3.1	Take an inventory of all the groups (associations, organizations, and institutions) that exist in within the jurisdiction's communities. Identify existing groups, organizations, etc. that serve underserved and vulnerable populations in the community.	03/01/18- 05/31/18	PC and PA	Inventory of existing assets/resources
3.2	Conduct interviews/surveys.	04/01/18- 08/31/18	PC and PA	Survey instrument; interviews and/or surveys conducted
3.3	Create a map of assets/resources within jurisdiction and Identify gaps.	05/01/18- 08/31/18	PC and PA	Map of assets/resources (geo mapping) within jurisdiction/List of gaps within LHJ
3.4	Publish the assets/resources/gaps identified.	09/01/18- 10/31/18	PC	Identified assets/resources and identified gaps published on website or in newsletter or as part of Summary Analysis

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Objective 4: By December 31, 2018, develop a community health improvement plan (CHIP) and an action plan to address the oral health needs of underserved areas and vulnerable population groups for the implementation phase and to achieve the state oral health objectives.

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
4.1	Identify a key staff person or consultant to guide the community health improvement plan process.	03/01/18- 05/31/18	DD and PC	Key staff member/consultant identified
4.2	Develop a time frame for the community health improvement plan.	03/01/18- 05/31/18	OC	Timeframe developed
4.3	Identify objectives and strategies to achieve that objective.	04/01/18- 05/31/18	PC	Summary of objectives and strategies
4.4	Determine which people and sectors of the community should be changed and involved in implementing the strategies.	04/01/18- 05/31/18	PC	List of partners/stakeholders/ participants representative of the various sectors of the LHJ that participated in the process
4.5	Engage a workgroup to design the Action Plan.	05/01/18- 07/31/18	PC	List of work group meetings and minutes from meetings
4.6	 Identify action steps: What action or change will occur Who will carry it out When, and for how long What resources (i.e., money, staff) are needed to carry out the change Communication (who should know what) 	05/01/18- 07/31/18	PC	Action Plan developed by workgroup that identifies the "what, who, when, how long, resources, and communication" aspects of the Action Plan
4.E.1	Identify how the Action Plan addresses the priorities identified in the Community Health Improvement Plan; provide a summary of key strategies to address vulnerable populations and how they will help to achieve local and state oral health objectives. Describe impact objectives and key indicators that will be used to determine progress.	05/01/18- 07/31/18	PC	Summary Report-Identify flow of information between organization, community and other stakeholders; identify how organizational procedures facilitate participation; and identifies the strengths, weaknesses, challenges and opportunities that exist in the community to improve the health status of the community

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Objective 5: By December 31, 2018, develop an Evaluation Plan to monitor and assess the progress and success of the Local Oral Health Program.

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
5.1	Engage stakeholders in the Evaluation Plan process, including those involved, those affected, and the primary intended users.	08/01/18- 10/31/18	PC	List of stakeholders engaged in this process
5.2	Develop the Program Logic Model, which will become a common reference point for staff, stakeholders, constituents and CDPH/OHP.	08/01/18- 10/31/18	PC	Program Logic Model, depicts program outcomes, how the program will accomplish outcomes and basis (logic) for these expectations
5.3	Identify program outcome objectives and indicators.	08/01/18- 10/31/18	PC	Document the indicators, sources, quality, quantity, and logistics
5.4	Focus the evaluation design based on selected Objectives and justify conclusions based on data analysis.	08/01/18- 10/31/18	PC	Document the purpose, methods, standards, analyses, interpretation, and timeline for the evaluation
5.5	Submit Evaluation Work Plan for Implementation Objectives.	11/01/18- 11/30/18	PC	Provide comprehensive Evaluation Plan of Required and selected Implementation Objectives
5.6	Submit progress reports.	01/01/18- 12/31/18	PC	Summary of successes, challenges, and lessons learned
5.E.1	Coordinate with CDPH to conduct surveillance to determine the status of children's oral health.	01/01/18- 12/31/18	PC	List of schools identified, number of children to be screened, coordination activities conducted

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Objective 6: By June 30, 2022, implement evidence-based programs to achieve California Oral Health Plan Objectives.

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
School Based- School Linked 6.1.0	Annually identify children in grades K-6 to receive dental sealants. Children receiving sealants must also receive a retention check-up. List number of children to be served.	01/01/19- 06/30/22	PC Subcontractor (SC)	List of participating schools, identify the number of children to be served
6.1.1	Provide dental sealant services by providing a referral list for dental sealant providers.	01/01/19- 06/30/22	PC and SC	List of number of referrals, number of children receiving sealants, number of sealants placed
6.1.2	Obtain input from school administrator, lead teacher, school nurse, or oral health contact at identified schools to schedule activities.	01/01/19- 06/30/22	SC	Summary of input, schedule of activities
6.1.3	Annually, develop or adapt sealant educational materials and/or educational sessions for teachers, parents, and students.	01/01/19- 06/30/22	SC	Sealant educational materials
6.1.4	Annually distribute sealant educational materials and/or deliver educational sessions to teachers, parents, and students, and send educational sealant information home with sealant consent form (if referral provider will provide services on-site at the school).	01/01/19- 06/30/22	SC and PA	List of sealant educational materials provided; copy of consent form (if applicable).
6.1.5	Conduct a basic dental screening of students to determine dental status with parental permission. (optional)	01/01/19- 06/30/22	SC	Signed consent forms, summary of survey results
6.1.6	Schedule time at school site to conduct screening with those children who submitted signed consent forms.	01/01/19- 06/30/22	SC	Correspondence with school
6.1.7	Conduct screening event with teachers, site personnel, and volunteers.	01/01/19- 06/30/22	SC	Number of children screened,

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#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
6.1.8	Determine number of children that need dental sealants and the number of sealants per child. Follow-up with teachers to ensure notices were sent home.	01/01/19- 06/30/22	SC	Data captured in report to CDPH
6.1.9	Annually, facilitate dental sealant placement by a dentist, registered dental hygienist in alternative practice or registered dental hygienist at provider site, or will place sealants on a minimum of 5% of targeted children with signed parental consent form at a coordinated sealant event with teachers, site personnel, and volunteers.	01/01/19- 06/30/22	SC	Schedule of events, number of children served, number of sealants provided
6.1.10	Annually, complete sealant retention checks on a minimum of 10% of the children who received sealants during the school year.	01/01/19- 06/30/22	SC	Summary of follow-up activities, number children who received checks, screening forms on file
6.1.11	 Annually, identify students in grades K-6 that will receive at least one instructional visit on oral health, lasting at least 20 minutes, using appropriate scope and sequence principles. Multiple educational visits are encouraged if possible. The following subject areas may be included: causes, processes, and effects of oral diseases; plaque control; nutrition and healthy snacks, sugar sweetened beverages; use of preventive dental agents, including fluorides and sealants; the need for regular dental care and preparation for visiting the dentist; physical activity; tobacco cessation; and 	01/01/19- 06/30/22	SC	List of schools identified to participate, number of children receiving education, list of materials provided, training schedule, list of training topics

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#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
Fluoride 6.2.0	Annually, identify children in grades K-6 to receive fluoride supplements. Facilitate fluoride supplements by a dental provider or school-based clinic, Federally Qualified Health Center, Community Health Center or identify if an on-site event is will be conducted at the school. Identify volunteers or organizations that provide fluoride varnish and work with teachers, school administrators, site personnel, and volunteers to coordinate the event. For on- site events, provide and collect permission slips for participating children. Children may receive fluoride rinse, fluoride varnish, or fluoride tablets.	01/01/19- 06/30/22	SC	List of participating schools, identify if children will be referred or identify the number of on-site events will be planned to provide fluoride varnish
6.2.1	Determine course of action for identified schools in collaboration with AC.	01/01/19- 06/30/22	SC	AC meeting minutes
6.2.2	For identified school sites, develop or adapt general oral health and hygiene educational materials that are culturally competent and use appropriate health literacy level.	01/01/19- 06/30/22	SC	List of culturally appropriate oral health materials provided
6.2.3	Develop or adapt fluoride educational materials and/or educational sessions for teachers, parents, and students.	01/01/19- 06/30/22	SC	List of fluoride educational materials provided
6.2.4	Distribute fluoride educational materials and/or deliver educational sessions to teachers, parents, and students, and send educational fluoride information home with fluoride consent form.	01/01/19- 06/30/22	SC	Distribution list, signed consent forms (on file, if applicable)
6.2.5	Assess number of children eligible to receive fluoride supplement per identified school.	01/01/19- 06/30/22	SC	List of classrooms and number of children to receive fluoride supplement

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#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
6.2.6	Facilitate referral for fluoride supplements or schedule time at school site to provide fluoride supplements with local providers to children who submitted signed consent forms.	01/01/19- 06/30/22	SC	List of schools, number of children referred for fluoride supplements or number of children receiving fluoride supplements on-site
6.2.7	Conduct fluoride varnish event at school with teachers, site personnel, and volunteers. (number) children that will receive fluoride supplement.	01/01/19- 06/30/22	SC	Number of children receiving fluoride supplement, identify type of supplement provided, flyer to promote event if conducted on-site. Permission slips maintained by LHJ, if applicable
6.2.8	Send notice home with students to inform parents of any relevant information.	01/01/19- 06/30/22	SC	Data captured in report to CDPH; correspondence with teachers
6.2.9	Determine total number of children who received fluoride treatment. Follow-up with teachers to ensure notices were sent home.	01/01/19- 06/30/22	SC	Provide documentation in progress reports. Provide a summary of clinical linkage efforts and on-site events
6.3.1	Conduct training for community members/partners/stakeholders who desire to learn about the safety, benefits and cost effectiveness of community water fluoridation and its role in preventing dental disease.	01/01/19- 06/30/22	PC and SC	Agenda/Training Materials/Talking Points/List of Participants
6.3.2	Conduct Regional Water District engineer/operator training on the safety, benefits of fluoridation and the important role water engineers/operators have in preventing dental disease.	01/01/19- 06/30/22	PC and SC	Agenda/ Training Materials, Talking Points/List of Participants
6.3.3	Adapt materials on fluoridation to meet community literacy levels/ languages/cultures or create new fluoridation education materials	01/01/19- 06/30/22	PC and SC	Community-specific fluoridation Education Materials

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#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
6.3.4	Conduct a community public awareness campaign on fluoridation and its effectiveness in preventing dental caries.	01/01/19- 06/30/22	PC, PA, and SC	Marketing Materials, such as Public Service Announcements, Radio Ads, Letters to the Editor, etc.
6.3.5	Create LHJ specific webpage on fluoridation and its effectiveness in preventing dental caries.	01/01/19- 06/30/22	PC, PA, and SC	Webpage URL
6.E.1	Identify process and qualitative indicators for school-based or school linked programs and determine if progress on evaluation objectives/indicators.	01/01/19- 06/30/22	PC and SC	Evaluation Report – identify if target participation rate was met
6.E.2	Identify Success Stories to share with local programs, policymakers, stakeholders, and the general public to help sustain program efforts.	01/01/19- 06/30/22	PC, PA, and SC	Success stories (qualitative case study) and dissemination plan

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Objective 7: By June 30, 2022, work with partners to promote oral health by developing and implementing prevention and healthcare policies and guidelines for programs, health care providers, and institutional settings (e.g., schools) including integration of oral health care and overall health care.

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
Kinder- Assess ment 7.1	Convene meetings of local programs (First 5, Maternal, Child and Adolescent Health (MCAH), Denti-Cal, Child Health and Disability Prevention (CHDP), Women, Infants, and Children (WIC), Black Infant Health (BIH), Early Head Start, Head Start, schools, and Home Visiting etc.) and discuss prevention and access to care issues.	01/01/19- 06/30/22	PC and PA	Schedule of meetings
7.2	Identify the role of partners – outreach, education, assessment, linkage, case management, delivery of services and follow up.	01/01/19- 06/30/19	PC	Role of partners identified
7.3	Identify facilitators and barriers to care, and gaps.	01/01/19- 06/30/19	PC	Facilitators and barriers assessed
7.4	Determine the activities for addressing barriers to care	01/01/19- 06/30/19	PC	Activities identified
7.5	Assess the number of schools currently not reporting Kindergarten assessments to the System for California Oral Health Reporting (SCOHR).	01/01/19- 06/30/19	PC and PA	Non participating schools identified
7.6	Identify current processes neighboring schools and identify best practices.	01/01/19- 06/30/19	PC	Best practices identified
7.7	Identify target schools for intervention.	07/01/19- 07/31/29	PC	List of target schools identified
7.8	Recruit champions.	07/01/19- 06/30/22	PC	List of champions recruited

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#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
7.9	Provide tools and training to make presentations and write letters for educating school board members to pass supporting resolutions.	07/01/19- 06/30/22	PC and PA	Tool kit prepared; list of presentations made; copy of letters written
7.10	Provide guidance for implementation.	07/01/19- 06/30/22	PC	Guidance documents distributed to schools
7.11	Conduct meetings of key partners, mobilize the community, and set targets.	07/01/19- 06/30/22	PC	List of key partners; schedule of meetings held; targets identified
7.E.1	Identify successful strategies to increase the number of Kindergarten Assessments, barriers and challenges to progress. Identify if any new policies were developed as a result of efforts. Communicate results of efforts to partners.	07/01/19- 06/30/22	PC	Provide summary in progress reports of successes, challenges, lessons learned, and recommendations. Identify if any policies were revised or new policies developed
7.E.2	Identify Success Stories to share with local programs, policymakers, stakeholders, and the general public to help sustain program efforts.	07/01/19- 06/30/22	PC and PA	Success Stories (qualitative case study) and dissemination plan

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Objective 11: By June 30, 2022, create or expand existing local oral health networks to achieve oral health improvements through policy, financing, education, dental care, and community engagement strategies.

#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
11.1	Convene a core group or identify a workgroup from existing AC.	01/01/19- 02/28/19	PC	List of work group members
11.2	Identify and recruit key groups/organizations and non-traditional partners to participate in the expanded network to develop strategies to improve oral health.	01/01/19- 06/30/22	PC	Key organizations recruited
11.3	Establish a schedule of meetings.	01/01/19- 02/28/19	PC and PA	Schedule of meetings, agendas, and meeting minutes
11.4	Identify priority issues identified in the Community Action plan to start the process of addressing issues or problems.	01/01/19- 02/28/19	PC	List of priorities
11.5	Develop communication plan to identify key messages to communicate priorities and strategies to achieve improved oral health for underserved and vulnerable populations.	01/01/19- 02/28/19	PC and PA	Communication plan
11.6	Discuss the structure of the work group and determine if the work group needs to be broadened to address the priorities. Recruit additional members and non-traditional members.	01/01/19- 02/28/19	PC	Organizational structure
11.7	Create a common vision and agree on shared values about the direction.	01/01/19- 02/28/19	PC	Vision and values
11.8	Develop an action plan; identify short, medium, long-term objectives.	02/01/19- 03/31/19	PC	Action plan developed
11.E.1	Identify the number of priorities that were addressed, success, challenges, lessons learned and recommendations in an evaluation report.	03/01/19- 06/30/22	PC	Provide summary in progress reports of successes, challenges, lessons learned, and recommendations

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#	Activity Description	Time Frame	Responsible Party	Evaluation/Deliverable/ Performance Measure
11.E.2	Identify Success Stories to share with local programs, policymakers, stakeholders, and the general public to help sustain program efforts.	01/01/19- 06/30/22	PC and PA	Success stories (qualitative case study) and dissemination plan