



# NCIOM Task Force on Children's Preventive Oral Health Services

## Overview of the Task Force Process

Kimberly M. Alexander-Bratcher, MPH

Project Director

North Carolina Institute of Medicine

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# Overview

- Background on the North Carolina Institute of Medicine
- Typical Task Force Process
- Background Leading Up to This Task Force
- Current Task Force Process



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# NC Institute of Medicine

- Quasi-state agency chartered in 1983 by the NC General Assembly to:
  - Be concerned with the health of the people of North Carolina
  - Monitor and study health matters
  - Respond authoritatively when found advisable
  - Respond to requests from outside sources for analysis and advice when this will aid in forming a basis for health policy decisions

*NCGS §90-470*



# NCIOM Membership

- Members appointed by the Governor for 5-year terms
  - Includes representatives from government; the health professions; business and industry; the hospital, nursing facility, and insurance industries; the voluntary sector; faith communities; and the public at-large
- Governed by 28 member board
  - Includes representatives from the health professions; academic health centers; NC AHEC Program; NC Hospital Association; NC Medical Society; NC Health Care Facilities Association; BCBSNC; NC Department of Health and Human Services; and other community and business organizations



# NCIOM Studies

- NCIOM studies issues at the request of:
  - North Carolina General Assembly
  - North Carolina state agencies
  - Health professional organizations
  - NCIOM Board of Directors
- Often work in partnership with other organizations to study health issues



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# ● ● ● | Typical Task Force Process

- NCIOM creates broad-based task forces to study health issues facing the state
  - Task Forces generally comprised of between 20-60 people
  - Task Forces are guided by co-chairs who run the meetings
  - Task Force members typically include representatives of state and local policy makers and agency officials, health professionals, insurers, business and community leaders, consumers and other interested individuals
  - Meetings are open to the public



# Typical Task Force Process

(cont'd)

- Task Force work guided by a smaller steering committee
  - People with expertise or knowledge of the issue
  - Help shape the agenda and identify potential speakers
- Presentations
  - May include research summaries and/or statistics, descriptions of programs, challenges or barriers to best practices, national developments
  - Presenters may include task force members, researchers, national or state leaders, state health care professionals, consumers, or NCIOM staff



# Typical Task Force Process

(cont'd)

- NCIOM staff

- NCIOM staff will prepare agendas, invite speakers, gather information, and identify evidence-based studies (when available) to inform the Task Force's work
- Staff write first draft of the report



# Typical Task Force Process

(cont'd)

- Task Forces generally run from 6-18 months
  - Approximately first two-thirds of meetings are for fact-finding, to identify the problem and identify potential solutions
  - Last third of meetings are to discuss and refine recommendations, review draft copies of the report
  - ***Task Force and Steering Committee members are encouraged to comment on written materials and recommendations throughout the process***

# Typical Task Force Process

(cont'd)

- Task Force report
  - Report is circulated several times before being finalized
  - Task Force members may be asked to prioritize recommendations
  - Task Force members will take final vote on the recommendations and report
- NCIOM Board of Directors
  - Board members must review and approve the report before finalized
- Reports distributed widely



# NCMJ

- NCIOM also publishes the *NCMJ*
  - Each issue contains a special focus area with articles and commentaries discussing specific health issues
  - One of the issues of the *NCMJ* will include an issue brief (7-10 pages) about the Task Force's work and recommendations
    - *NC Medical Journal* circulated to more than 30,000 people across the state



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# NCIOM Task Force on Dental Care Access (1999)

- The NCIOM last worked on dental issues in 1999, with the most recent update in 2005.
- There were positive actions taken to implement 18 of the 23 original recommendations as well as the new recommendation in 2005 (a success rate of approximately 80%).

# North Carolina Oral Health Summit: Building a Collaborative for Action (2005)

- Participants at this one-day summit reviewed the findings and recommendations from the 1999 Task Force on Dental Care Access report.
- The Summit Proceedings and Action plan outlines summit participants' suggested changes to the original recommendations.
- The goal of the Summit was to identify potential strategies to improve dental care access - whether by further implementation of the original 1999 NCIOM Task Force recommendations - or through new strategies.





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# NCIOM Task Force on Children's Preventive Oral Health Services

The Task Force is charged to help DMA develop its required dental action plan to improve access to preventive oral health services for all children by:

- Increasing the proportion of children ages 1-20 enrolled in Medicaid or CHIP who received any preventive dental services by 10 percentage points over a five-year period.
- Increasing the proportion of children ages 6-9 enrolled in Medicaid or CHIP who receive a dental sealant on a permanent molar tooth by 10 percentage points over a five-year period.
- In addition to these goals set by CMS, the expanded North Carolina plan will include a goal to raise utilization of preventive oral health care at the county level, including in the medical environment, by 10 percentage points over a five-year period.



# NCIOM Task Force on Children's Preventive Oral Health Services

The NCIOM Task Force on Children's Preventive Oral Health Services will be a collaborative effort between:

- the BCBSNC Foundation,
- the North Carolina Division of Medical Assistance (DMA), and
- the Oral Health Section (OHS) within the North Carolina Division of Public Health.

# NCIOM Task Force on Children's Preventive Oral Health Services

- Task Force comprised of ~35 members
- Task Force will meet 6 times:
  - Friday, December 14<sup>th</sup> from 10-3 at the NCIOM
  - Friday, January 25<sup>th</sup> from 10-3 at the NCIOM
  - Friday, February 22<sup>th</sup> from 10-3 at the NCIOM
  - Friday, March 22<sup>th</sup> from 10-3 at the NCIOM
  - Friday, April 26<sup>th</sup> from 10-3 at the NCIOM
  - Friday May 31<sup>st</sup> from 10-3 at the NCIOM

# Meeting Materials on NCIOM Website

- We know that Task Force members may have conflicts for some of the meetings
  - We host webinars and conference calls for each meeting so that you can follow online or participate over the phone
  - We post meeting summaries and all meeting presentations on our website:  
<http://www.nciom.org/task-forces-and-projects/?task-force-on-childrens-preventive-oral-health-services>
  - Calendar and directions also available on the NCIOM website



# For More Information

- Websites: [www.nciom.org](http://www.nciom.org)  
[www.ncmedicaljournal.com](http://www.ncmedicaljournal.com)
- Key Contacts
  - Kimberly Alexander-Bratcher, MPH, Project Director  
919-401-6599 ext. 26 or [kabratcher@nciom.org](mailto:kabratcher@nciom.org)
  - Adam Zolotor, MD, DrPH, Vice President  
919-401-6599 ext. 24 or [adam\\_zolotor@nciom.org](mailto:adam_zolotor@nciom.org)
  - Berkeley Yorkery, MPP, Project Director  
919-401-6599 ext. 30 or [berkeley\\_yorkery@nciom.org](mailto:berkeley_yorkery@nciom.org)