

Yolo County Oral Health Program

Evaluation Plan for FY2018-2022

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1. Introduction

Evaluation Purpose and Evaluation Team:

The Yolo County Oral Health Program evaluation plan purpose is to determine the impact of the Oral Health Program initiatives on increasing utilization of preventative dental services among the community, particularly those eligible for MediCal Dental, as well as to raise community literacy of oral health, and finally to reduce the rate of oral health decay among school-aged children. The evaluation plan contains both process and outcome evaluation measures in order to determine both the effectiveness of the strategies chosen to address the strategic goals, and the overall outcome of the efforts in making changes in oral health status among residents.

The evaluation team is comprised of the Yolo County Oral Health (OH) Program Coordinator, the Health Officer of Yolo County, the OH Outreach Specialist, the Yolo County Health and Human Services Agency Performance Management Coordinator, and the Yolo County Oral Health Program Advisory Board. The needs assessment, which informed both the strategic plan and the evaluation plan was conducted by the Pacific Health Consulting Group. Their findings and recommendations are also reflected in this plan, though they are no longer contracted to continue helping with the Oral Health Program.

Stakeholder Engagement

The evaluation plan laid out here is an assimilation of feedback, data, input and discussion from a number of sources. The original needs assessment, which identified the key areas of work included input from five community leaders (including three elected officials), 39 private dentists, Yolo County Health and Human Services Agency leadership, and several non-profit groups. These stakeholders were also present for a stakeholder input meeting in April 2017 that included additional stakeholders from the Yolo County Health and Human Services Agency programs (Tobacco Prevention, WIC, SNAP-Ed, CalFresh), several Federally Qualified Healthcare Centers (FQHCs) and the Woodland Joint Unified School District. The feedback from this meeting resulted in the final strategic map and strategic goals, which are a cornerstone to the evaluation plan here.

From 2018-2019 the Oral Health Advisory Board expanded to include representation from Delta Dental, The Child Health and Disability Prevention Program (CHDP), Winters Health Care (FQHC), Elica Healthcare (FQHC), The Healthy Aging Alliance, and additional private dentist from the community who accept MediCal Dental. The Advisory board is directed by the Oral Health Program Coordinator, who is also the author of this plan. These members have been involved in developing the process and outcome measures identified here.

The stakeholders who have offered input on the evaluation measures to be collected and tracked fall into the following three categories:

Stakeholders involved in program operations	Stakeholders served or affected by the program	The primary users of the evaluation
Yolo County Oral Health Staff Yolo County HHSA leadership	Yolo County Children’s Alliance CommuniCare Health Centers Northern Valley Indian Health (NVIH) Yolo County WIC Winter’s Health Care Various Private Dentists Yolo County CHDP program Yolo Alliance on Aging	Healthy Yolo Yolo County Board of Supervisors Yolo County HHSA leadership SmileSaver’s Program NVIH Screening program Woodland Joint Unified School District

Intended Use and Users

The evaluation data collected between 2018 and 2022 will be shared and used in the following way:

- Yolo County HHSA performance measure tracking: Every HHSA program has affiliated performance measures tied to the program budget. Selected outcome measures from the evaluation plan are included in the HHSA Oral Health performance measure portfolio, meeting the county requirements. Annually, these data are reported to the Executive Leadership and fiscal managers for the agency, as well as reported to the Board of Supervisors
- Healthy Yolo and the Yolo County Community Health Improvement Plan (CHIP): Yolo County facilitates “Healthy Yolo”, which includes tracking various outcome measures for chronic disease prevention between 2016-2019. Oral health has two measures being tracked annually in the current CHIP. These data are shared with the community in an annual report that is released to stakeholders, and also housed on the Healthy Yolo website. Further, these data are available on the County’s CHIP dashboard, which is public facing and can be accessed to look at progress on the CHIP goals. www.healthyyolo.org

- Data will be shared with the Oral Health Advisory Committee annually, including an email report to the Advisory Committee email list, which includes 32 individuals, many of whom do not attend the meetings but stay involved via email.
- Data will be shared through an annual update to Health Council, an appointed body of the Yolo County Board of Supervisors comprised of representatives from the health care systems in Yolo County
- The public, schools, and providers will have access to oral health data via the Oral Health Program website: www.yolocountyhealthymouth.org. A page will be allocated to sharing relevant data annually. Relevant data, such as screening data outcomes will also be sent to district leadership at the respective school districts.

Evaluation Resources and Budget

The Yolo County Oral Health Program budget includes \$4474 for staff time of the Yolo County HHSA Epidemiologist. No additional funds have been allocated for evaluation, aside from staff time included in the Oral Health Program Coordinator's FTE and in-kind time from the Yolo County Health Officer.

2. Background of the Yolo County Oral Health Program

Program Overview and Need

A needs assessment conducted in 2016 and published in 2017 identified several unmet needs in the community's access to oral health care and utilization of oral health services and resources in the county. The needs assessment included key informant interviews with 5 community leaders, a survey completed by 39 private dentists, several stakeholder meetings, secondary data gathering, and a community survey which garnered 507 responses. Once the data was compiled, the oral health steering committee (now the Oral Health Advisory Committee) helped develop the strategic plan that included five outcome measures in four goal areas. The group began work on these outcome measures prior to Yolo County's receipt of Prop 56 oral health funds.

In February 2018, when the Proposition 56 Oral Health Program began at Yolo County, the needs assessment and strategic goals were expanded to include activities prescribed in the Oral Health work plan. Additional evaluation measures were identified and performance measures, meeting the Yolo County Health and Human Services Agency requirements were created. The Advisory Committee was actively involved in this process.

The 2017 Needs Assessment identified the following as oral health priorities for Yolo County:

- Increasing access to dental services for Adults (including seniors and pregnant women)
- Expanding dental screenings and prevention services for children
- Community water fluoridation, particularly Davis and Woodland
- Increasing access to dental services for MediCal Dental recipients
- Integrating oral health care with primary care
- Increasing oral health literacy among providers and the community

Context

There is a strong interest in prioritize oral health in Yolo County at this time. Water fluoridation in two of the largest cities has been an ongoing initiative for several years, and rising decay rates in children are sparking more interest by community leaders in resolving this issue. Further, the lack of access to MediCal Dental services, particularly specialty providers, and low-cost dental service providers is a major concern in the community. Thus there is an interest in helping residents establish a dental home early to receive preventative care, and to increase oral health literacy. The hope is that by increasing access to care, literacy, and focusing on prevention, the county can see a reducing in the number Emergency Department (ED visits) related to oral health, the decay rates in children, and a drop in the number of residents who are experiencing long wait times for dental care.

Target Population

The needs assessment revealed that those who are under-insured or receive MediCal Dental have reduced access to ongoing dental care due to lack of providers, extreme wait times for care, or cost. Thus, the MediCal eligible residents, including adults, seniors, pregnant women, and children) and those who are under-insured and low income are the priority population of the program. Further, data shows that decay rates in elementary school children has increased since 2011-21, and that MediCal Dental child beneficiaries utilize services less than California children, overall, an emphasis will be placed on increasing access to screenings, oral health literacy, and access to care for children. The Yolo County Oral Health program anticipates reaching 1000 people/year with community events, approximately 20,000/year with paid media, and establish relationships with at least 4 out of 5 school districts to provide screenings or link to services over the 5-year program.

Currently the Oral Health Program is in the implementation phase, with work being done in each of the 4 goal areas. Please see Appendix I for the logic model.

3. Evaluation Focus Areas

Stakeholder Needs

The findings from the evaluation activities will be used in several ways. First, process measures will help determine whether or not our efforts are reaching the intended audience and if the correct partners have been involved and engaged. Outcome measures, reviewed annually, will help the Oral Health Advisory Committee make decisions about the direction of staff time/resources and about the role of the committee in helping move forward various initiatives (example: community water fluoridation). Further, the Yolo County HHSA requires performance measures to be reported annually, both for reporting to Yolo County Board of Supervisors, and also for contribution to the Yolo County Community Health Improvement Plan (CHIP). CHIP measures include oral health as part of the broader Chronic Disease Prevention goals set forth in the 2014 Community Health Assessment. These data are publically available.

A priority of all stakeholders is to determine whether or not the Oral Health Program is having a positive impact on utilization of MediCal Dental services, the Class II/III decay rates in elementary school children, and reduced ED visits related to oral health. Further, evaluation data will demonstrate the program's effectiveness in developing community or institutional policies that support oral health goals.

Evaluation Questions

The following are key questions posed by stakeholders and HHSA staff in developing the Oral Health Strategic Plan, as informed by the Needs Assessment and Stakeholder input:

- Did we raise community awareness about Rethink Your Drink (sugary beverage reduction), tobacco cessation, water fluoridation, and Medi-Cal Dental services?
- Did we increase oral health literacy among elementary school students?
- Did we increase the number of Kindergarten and third grade elementary school students screened?
- Did we increase the number of schools that enter Kindergarten enrollment oral health data into the SCOHRS database?
- Did we successfully engage city council, institutional leaders, and key community decision makers to support community water fluoridation and other oral health policies?
- Did we increase the number of Medi-Cal Dental recipients who utilized preventative dental services in order to decrease the number of emergency department visits with a dental diagnosis?

- Have we successfully engaged stakeholders in the Oral Health Advisory Committee as measured by their satisfaction and participation in the Advisory Committee?

Indicators

The Oral Health Strategic Plan identified five key indicators (outcome measures) that will be used to determine the program's success. These indicators are:

- The percentage of child (1-20 years old) MediCal Dental beneficiaries in Yolo County that receive any dental service, as compared to the overall percentage for California children
- The rate of ED visits with a dental diagnosis, as compared to 2016 rates for Yolo County and the state
- The number of elementary school students who receive oral health screenings in school or community settings
- The percentage of students screened who show Class II/III decay at the time of screening
- The number of elementary schools utilizing with oral health literacy curriculum
- The number of cities with fluoridated water by 2022
- The number of oral health policies passed by 2022
- The annual average satisfaction score for stakeholders participating in the Advisory Committee

Evaluation Methods and Evaluation Standards

The data for the indicators above, as well as other process measures for the Oral Health program will be gathered and analyzed in a number of ways.

Data regarding MediCal Dental utilization and Emergency Department (ED) visits with a dental diagnosis will be gathered from the following data source:

<https://www.dhcs.ca.gov/services/Pages/DentalReports.aspx>, which may be compiled by the bay area non-profit, Children Now, for Yolo County. Data will be reviewed annually, or as frequently as it is updated in the system (if less than annually), and comparisons will be made to 2016 rates for Yolo County, as well as state utilization rates.

Screening data will be provided to the Yolo County Oral Health program by participating partners, with a uniform reporting method established. Longitudinal data on decay rates, as well as the number of students screened will be assessed from the raw data provided by the screening partners.

The Yolo County Oral Health Program Coordinator will obtain data on the rate of Kindergarten entry dental screening reporting from the System for California Oral Health Reporting (SCOHR) database online annually.

Data on the annual average satisfaction score of Advisory Committee stakeholders will be collected through a SurveyMonkey survey that will be sent out electronically and administered at the November Advisory Committee meeting.

Further, process data, including documentation of participation in classes/events as well as evaluation of quality of training and education provided will be collected internally by Oral Health staff via an activity tracking document and SurveyMonkey (www.surveymonkey.com).

4. Gathering Credible Evidence: Data Collection

Please refer to the Evaluation Plan Grid (Appendix II) for a complete overview of all indicators and performance measures associated with the evaluation questions listed above. Data collection and documentation will be the responsibility of the Oral Health Program staff, with partnership with the agencies performing oral health screenings at schools. Data will be tracked and documented in the program’s Activity Tracking Form (ATF), in the Yolo County HHS performance measure tracking forms, the Yolo County CHIP dashboard, and will be house on a shared drive internal to the Yolo County HHS.

The Yolo County HHS Epidemiologist will be involved in helping to ensure that data collection and evaluation ids

Data will be reviewed, analyzed and shared annually (August) or bi-annually (August and January), depending upon the measure. Please refer to the Evaluation Plan Grid (Appendix II) for reporting frequency.

5. Reporting, Interpretation, and Dissemination of Data and Lessons Learned

The data is reporting and disseminated in a variety of ways, depending upon the measure and the utility of the information for the audience. Below is a table that indicates the plan for sharing and disseminating data and lessons learned.

Data measures	Audience shared with	Purpose/Discussion
Social media, media campaign impact, outreach event reach	-Oral Health Staff -Oral Health Advisory Committee (AC) - HHS Branch Leadership team	- determine utility of media and outreach -demonstrate breadth of reach -analyze which campaigns/messages were most effective -determine gaps in outreach/public dissemination of information

School OH curriculum utilization data	<ul style="list-style-type: none"> - School district leadership - AC - Healthy Yolo (includes BOS, WIC, MCAH, and many stakeholders) - Press release to local community 	<ul style="list-style-type: none"> -highlight successes/wins - encourage other districts to onboard and use curriculum - to link education and changes in decay rates at schools over time - address challenges/barriers in getting OH curriculum into schools -support relationships with schools
School Screening Data	<ul style="list-style-type: none"> -AC) -School leaders -Public (press releases, media) -Screening partners 	<ul style="list-style-type: none"> - celebrate successes and positive trends in data -look for gaps in schools screened and create a plan to fill gaps -identify schools with high decay rates for intervention support -educate decision makers about the need for early oral health intervention
SCOHRS data	<ul style="list-style-type: none"> -AC -County office of education -School Districts -School nurses 	<ul style="list-style-type: none"> - identify gaps in schools not entering data and work with them to enter data -work with schools to understand the messaging to parents regarding the screening and help them become 'pro' screening
Medi-Cal Dental and ED visits with an oral health diagnosis data	<ul style="list-style-type: none"> -AC -Healthy Yolo Stakeholders -Hospital Medical Directors -Medi-Cal Dental providers in Yolo County -Sacramento District Dental Society (SDDS) 	<ul style="list-style-type: none"> -look at trends in data to determine if upstream prevention efforts are having an impact -help increase the number of youth receiving preventative care to be at least at the state average -advocate for more Medi-Cal dental providers in the County
Meetings with elected officials, decision makers, institutional leaders to discuss OH policies (include meeting outcome data)	<ul style="list-style-type: none"> - HHSa leadership - AC - Community members/champions - OH stakeholders 	<ul style="list-style-type: none"> - Keep County leadership informed and garner support for discussions around fluoridation - Engage champion residents when needed to advocate for policies - Inform OH stakeholders, including AC, of progress on policy work (particularly water fluoridation) - Adjust strategies if we experience roadblocks
Med-iCal Dental office use of	<ul style="list-style-type: none"> - Medi-Cal Dental offices 	<ul style="list-style-type: none"> - Identify challenges in discussing these topics

Tobacco Cessation/RXD materials	<ul style="list-style-type: none"> - AC - -SDDS - Smile CA staff 	<ul style="list-style-type: none"> - Identify creative ways to encourage discussion of these topics in dental settings - Understand dental patient receptivity to information - Compare our program to other programs in the region
Advisory Committee Participation satisfaction	<ul style="list-style-type: none"> -OH Staff - HHSA leadership -AC 	<ul style="list-style-type: none"> - improve satisfaction of scores are low - understand the needs of the AC and how the OH program can support that -Celebrate success if scores are high -look at how satisfaction compares with overall success of the OH program and address negative trends/gaps

Additionally, the Healthy Yolo initiative, which is comprised of stakeholders such as WIC, MCAH, The Board of Supervisors (BOS), community residents, Mental Health Services Act, various HHSA programs, First 5, and other non-profits, maintains a public facing data dashboard on the Yolo County website (www.healthyyolo.org). Data on several oral health metrics is included there, and is available for anybody to look at. Data is updated annually.

Further, the Yolo County Oral Health website (yolocountyhealthymouth.com) will have a dedicated page for sharing all data with the public in a user-friendly way. This website will be up and running by fall of 2019.

Lessons learned will be shared on an ongoing basis with the Oral Health Advisory Committee, community partners and dentists, and others who can share in improving the program delivery.

The Oral Health Program Staff, the Yolo County Health Officer, The Yolo County HHSA Epidemiologist and the Oral Health Advisory Board members will be involved with data interpretation to varying degrees, depending upon the type of data being collected. The program will aim to allocate a small portion of the annual Oral Health Program budget to fund the Epidemiologist's time for consultation on data collection and reporting as appropriate.

Inputs	Outputs		Outcomes -- Impact		
	Activities	Participation	Short	Medium	Long
<p>Staffing Health Officer</p> <p>Oral Health Program Staff (1.65 FTE)</p> <p>Dental expertise and dental advisors Denti-Cal/Low-cost dental providers, Safety Net clinics</p> <p>Oral health advisory committee</p> <p>Community agency partnerships Community Partners (RISE, FRCs, First5, etc.)</p> <p>HHSA Partners (WIC, MCAH, CHDP)</p> <p>Collaboration with schools Yolo County Office of Ed. School Districts Head Start</p>	<p>Coordinate and collaboration data collection, convene advisory groups, provide resources/education, media campaigns</p> <p>Provide expertise on dental needs; relationships with dental community, weigh in on program decisions, promote oral health prevention messages among their patients</p> <p>Host promotion events and classes; encourage oral health prevention behaviors among clients, connect clients to services and understanding of the importance of oral health; promote oral health messages</p> <p>Facilitate screenings; encourage screening participation, engage in oral health education throughout the year for elementary schools; promote oral health behaviors in school</p>	<p>Dental and community partners; CDPH, residents (through media and events); elementary schools and school district nurses</p> <p>Fellow dentists/dental clinics; dental patients; residents with dental messages; decision makers about oral health policies</p> <p>DentiCal eligible clients, stakeholders who can promote the importance of oral health; decision makers, schools/low-income residents; other community-based organizations</p> <p>Students, School nurses, teachers/para-educators, parents of elementary students; student clubs, after school programs; pre-schools, decision makers</p>	<p>Results in terms of learning or doing Increased collaboration among partners to improve oral health literacy and access to oral health services by the community</p> <p>Increase promotion of oral health prevention messages among providers and via media, support for oral health policies that improve oral health outcomes, increased literacy of oral health needs among partners</p> <p>Promote oral health prevention messages among clients and partners; improve access to screenings and care for DentiCal recipients, improve oral health education</p> <p>Increase the number of elementary school kids who receive oral health screenings; Improve oral health literacy among staff and students</p>	<p>Results in terms of changing action Improve timely access to oral health services for DentiCal recipients; integrate oral health into health discussions/policy development</p> <p>Increase community oral health literacy and utilization of oral health services; Increase community engagement to support water fluoridation or other oral health policies</p> <p>Increase use of preventative oral health services use among HHSA clients; improve community oral health habits</p> <p>Increase the number of kids who receive annual dental visits; Decrease the number of kids and adults with Class II or greater decay</p>	<p>Results in terms of change to the conditions Reduce the number of ED visits associated with oral health issues</p> <p>Improve utilization of oral health data to form health policies and promote access to oral health care</p> <p>Increase the number of cities with water fluoridation</p> <p>Reduce the rate of dental decay in kindergarten students, as well as adults; reduce the severity of dental decay in kids and adults</p> <p>Improve health outcomes associated with oral health, such as heart disease, obesity, diabetes, birth outcomes.</p>

Appendix II: Evaluation Plan Grid

Evaluation Question 1A: Did we raise community awareness about Rethink Your Drink (RYD, sugary beverage reduction), tobacco cessation, water fluoridation, and Medi-Cal Dental services?

Evaluation Question 1B: Did we increase oral health literacy among elementary school students?

Intended Outcomes	Methodology			
	Indicators or Performance measure	Data Source & Reporting Frequency	Type of Data	Who is responsible for Data collection and analysis?
Increase community literacy about Oral Health	# of Oral Health Social Media posts and page “likes” on the Community Health Facebook Page	Community Health Facebook page Annually	Quantitative	Oral Health Program Staff will collect, analyze and prepare data
	# of “Hits” to the Oral Health website, including “Hits” on information about RYD, tobacco cessation, water fluoridation and Medi-Cal Dental	Web designer, Angry Sam productions Annually	Quantitative	
	# of community events where Oral Health information and MediCal Dental information is shared	Activity Tracking Form (ATF) Bi-annually	Quantitative	
	# of community presentations to adults about oral health and access to oral health care services	Activity Tracking Form (ATF)	Quantitative and Qualitative for the delivery of the presentation	
	# of dental providers with Rethink Your Drink and/or tobacco cessation materials in waiting areas or available for distribution to patients	Activity Tracking Form (ATF)	Quantitative	
	# of media campaigns or social posts educating the community about water fluoridation	Activity Tracking Form (ATF)	Quantitative	
Improve access to information about low/now-cost dental services	# of partners& schools who receive information about MediCal Dental/Smile California	Oral Health staff email to partners with resources Annually	Quantitative	

	# of presentations to stakeholders/decision makers about oral health	Number of presentations and audience reported in ATF Annually	Quantitative and qualitative evaluation of the topic and information delivery Annually	
	# of media campaigns (bus ads, movie theatre ads, newspaper ads) that promote MediCal Dental/Smile CA and/or the Oral Health website for low cost provider information	Media source reach information, ATF for number of ads and timing of the ads Annually	Quantitative	
Increase oral health literacy among elementary school students	# of elementary school classrooms that receive oral health education annually	School District nurses; tracked in the ATF	Quantitative	Yolo County Oral Health Staff
Increase the percentage of MediCal Dental Child beneficiaries that receive any dental service	# of Yolo County MediCal-Dental child beneficiaries who receive an oral health service	Department of Health Care Services online data portal for MediCal Dental utilization Annually	Quantitative	Yolo County Oral Health program staff and Advisory Committee members

Evaluation Question 2A: Did we increase the number of Kindergarten and third grade elementary school students screened for decay and who receive follow up treatment (sealants, fluoride) in the school setting?

Evaluation Question 2B: Did we increase the number of schools that enter Kindergarten enrollment oral health data into the SCOHRs database?

Intended Outcomes	Methodology			
	Indicator or Performance Measures	Data Source & Reporting Frequency	Type of Data	Who is responsible for reporting and analyzing?
Increase the number of Kindergarten and third (3 rd) grade students screened at school annually	# and % of Kindergarten students screened annually # and % of 3 rd grade students screened	Community partners- Northern Valley Indian Health and CommuniCare Smile Saver program staff Annually	Quantitative	Reporting: Community partners providing screenings- using a standardized screening reporting form

Reduce the number of elementary school students who demonstrate Class II/III decay at the time of screening	# and % of screened kindergarten and 3 rd grade students who show Class II/III decay and a history of restorations	Community partners- Northern Valley Indian Health and CommuniCare Smile Saver program staff Annually		Analyzing: Yolo County oral health staff in partnership with community partners who perform screenings
Increase the number of screened students who receive fluoride varnish or sealants (3 rd grade only) in a school setting	# and % of screened students who receive fluoride in a school setting after being screened # and % of screened 3 rd grade students who receive sealants in a school setting			
Increase the number of schools and school districts who have oral health screenings at their schools to 100%	# elementary school and school districts that have annual oral health screenings for Kindergarten and 3 rd grade students	Community partners- Northern Valley Indian Health and CommuniCare Smile Saver program staff Annually		
Increase the % of Elementary Schools that report Kindergarten oral health assessment data in SCOHRS to the 75-100% category	# of Elementary Schools that report Kindergarten oral health assessment data in SCOHRS	SCOHRS database; Oral Health Program Coordinator will access the data Annually		Reporting: school district staff report the data in SCOHRS; Oral Health program staff will access and analyze the data in SCOHRS

Evaluation Question 3: Did we successfully engage city council, institutional leaders, and key community decision makers to support community water fluoridation and other oral health policies?

Intended Outcomes	Methodology			
	Indicator or performance measures	Data Source & Reporting Frequency	Type of Data	Who is responsible for reporting and analyzing?
Meet with local elected officials or decision makers to discuss water fluoridation	Number of meetings with elected officials or decision makers to discuss water fluoridation	Oral Health ATF Annually	Qualitative- meeting agendas/notes/emails and quantitative – number of meetings	Oral Health Program staff and Health Officer

Community Engagement: involving local oral health champions involved in policy discussions	# of local or institutional champions involved in policy discussions	Oral Health Program ATF, emails, Oral Health Advisory Committee listserv	Qualitative- list of champions, frequency and type of meetings attended, training provided	Oral Health Program staff and Oral Health Advisory Committee
Passing of oral health policies at the institution or community level	# of oral health policies passed	Copy of policy or ordinance from institution or city/county Annually	Qualitative- policy details Quantitative- number of policies	Oral Health Program staff

Evaluation Question 4: Did we increase the number of Medi-Cal Dental recipients who utilized preventative dental services in order to decrease the number of emergency department visits with a dental diagnosis?

Intended Outcomes	Methodology			
	Indicators or Performance Measures	Data Source & Reporting Frequency	Type of Data	Who is responsible for reporting and analyzing?
Increase the percentage of Yolo County dentists accepting MediCal dental	# and % of private dentists and dental clinics that accept new MediCal dental patients annually	Sacramento District Dental Society (SDDS), Smile California website Annually	Quantitative – number and % of dentists Qualitative- prohibitive reasons to accepting MediCal dental reported by dentists	Yolo County Oral Health program staff, with partnership with the SDDS and the Oral Health Advisory Committee
Reduce the frequency of ED visits with a dental diagnosis	# of ED visits with a dental diagnosis	Department of Healthcare Services MediCal dental data (maybe gathered by Kids Now non-profit or Oral Health Program staff) Annually	Quantitative	Yolo County Oral Health Program staff, Kids Now Non-profit
Increase the number of CHDP providers who apply fluoride to children 6 and under	# of CHDP providers who apply fluoride varnish at visits with children 6 and under	CHDP program staff Annually	Quantitative- number of providers Qualitative- barriers to getting providers to apply varnish	CHDP program data shared with Oral Health Program staff

Evaluation Question 5: Have we successfully engaged stakeholders in the Oral Health Advisory Committee as measured by their satisfaction and participation in the Advisory Committee?

Intended Outcomes	Methodology			
	Indicators or Performance Measures	Data Source & Reporting Frequency	Type of Data	Who is responsible for reporting and analyzing?
Attendance rate at 75% of meetings for monthly Advisory Committee members (stakeholders)	# of stakeholders who attend monthly advisory committee meetings	Monthly meeting sign-in sheets Bi-Annually	Quantitative	Yolo County Oral Health program staff,
At least 75% of surveyed members indicate that participation in the committee has increased their understanding of the oral health needs in the community	# and % of stakeholders who rate satisfaction at a 4 or 5 out of 5 on an annual survey	Oral Health Surveymonkey survey Annually	Quantitative	
Number of HHSA programs/Community partners engaged in Oral Health activities through the advisory committee and/or the email listserv	# of organizations on the Advisory Committee master list/email list	Advisory Committee contact list Advisory Committee email list Annually	Quantitative	