



S . M . I . L . E . S

DENTAL PROJECT®

Spanning Miles in Linking Everyone to Services

PROJECT PLANNING TOOLKIT

This workbook is a tool designed to guide the planning phase of your project. As a part of planning, communities need to refine their model, develop an operational plan and budget, as well as develop and strengthen community partnerships in order to achieve successful project implementation.

General Instructions

There are three different themes to accommodate the different stages in your planning:

SYSTEM ROLES

System roles helps clarify specific roles in the SMILES Dental Project model and internal factors to establish a solid foundation for moving forward with the project. This section will help you identify ways in which your current system will need to change in order to adopt this new system of care.

Community Characterist ics

Community Characteristics focuses on data gathering and determining your community's needs.

Functional Assessment

Functional assessment focuses on the functional and practical components of the project: identifying training needs, drafting an operational plan, and developing a budget.

SYSTEM ROLES

SMILES relies on a hub-and-spoke model to integrate Registered Dental Hygienists (RDHs) into community sites or “spokes” and creates local systems change. This means each project will be defined by the resources and needs in your community.

HOME ORGANIZATION

The leader and “command center” of the system. Although there may be several organizations involved in each community, one entity will be established as the home organization for this project.

Responsibilities:

- Manage training, evaluation, business operations, contracts, staffing, billing, equipment maintenance, technical assistance
- Outreach and enrollment
- Community connections
- Parental permissions

DENTAL HUBS

Houses the dentists who will partner with an RDH, using telehealth technology for patient assessments, treatment planning, and to facilitate treatment for patients identified with more complex dental health needs. May be the same as the home organization, or partner organization(s).

Responsibilities:

- Holds patients medical record
- Holds liability for: FTCA/professional liability insurance, occupational safety and health administration (OSHA), etc.
- Support or conducts outreach and enrollment
- Responsible for communication to all sites
- Site leadership
- Provides treatment when indicated or ensures patient is connected to necessary resources to receive necessary care
- Employs the care team (RDH, DDS, navigator, etc.)

COMMUNITY SITES OR SPOKES

The community setting where the Care Team (RDH, Assistant/Navigator) will provide routine, preventative dental services, and Interim Therapeutic Restorations.

Responsibilities:

- Provides a place for patients to receive preventative care in their community
- Communications to the community about the new model of care
- Provides the facility for care team to work
- Works with Home Organization to develop onsite policies and procedures
- Create access to services where people eat, work, and play

HOME ORGANIZATION

Name:					
Address:					
Telephone:					
Website:					
Project Director:					
Current Dental Capacity/Utilization (if applicable):	0-5	6-12	13-19	19-64	64+
# Dental Users					
Available Capacity					
Name of Electronic Medical Record (EMR) or Electronic Health Record (EHR):					
Name of Electronic Dental Record (EDR):					
What Imaging Software are you using:					
Medical Director:					
Dental Director:					
Dental Team Includes (number of staff, roles, etc.):					
Describe how the work fits in with your Mission and Strategic Plan.					
Is your organization part of a RCCO? If so, which one?					
Briefly describe the Institutional Commitment.					

ASSESSING LEADERSHIP CAPACITY/ENGAGEMENT IN THE HOME ORGANIZATION

Receiving support from the people in leadership positions is an important part of successful programs. Not having leaders on board does not necessarily mean a project will fail, but it may present barriers. Conversely, supportive leaders do not guarantee success but can certainly help. Having your leaders on board makes it easier and more efficient to make structural and financial changes that impact the way your organization runs. Savvy project teams will identify and address as many barriers to success as early as possible.

Rank the following Organizational Leadership scenarios to determine areas that need further attention:

CURRENT STRENGTH OF FACTOR: - (weak) 0 (neutral) + (strong) N/A (not applicable)

Factor	-	0	+	N/A
The organization's Administrative Leadership values oral health				
The organization's leaders are aware of the detrimental aspects of poor oral health				
The organization's leadership is influential in the community				
The organization has strong partnerships established in the community				
Oral Health is directly represented in Administrative Leadership				
Employees feel that there is organizational support for their projects and interests				
There is regular, quality exchange between oral health employees and the organization's Administrative Leadership				
The Administrative Leadership is currently involved in Quality Improvement activities				
Organizational Leadership is stable (i.e. no frequent turnover in staff)				
The organization is able to collect and track oral health data				
There is accurate, specific data available related to oral health				

PARTNERS

A successful project is dependent upon partnerships. Communities must consider all of the available partnerships and assess potential collaborations. To start, we recommend you identify at least ten community partnership possibilities. You don't have to decide if these are feasible partnerships yet, just list any organization or group that you think that may have potential. Consider Health Centers, schools, Head-Start programs, private practice providers, community centers, faith-based organizations, and groups that represent individuals with specific health-care needs such as senior organizations, county programs, and medical centers, etc.

Community Partnerships	
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	

Consider the following questions regarding your potential partners:

Who is seen as an expert in your community (related to the health of your target population)?	
Where might you encounter challenges with developing these partnerships?	
What might be some barriers to joining that potential partners could be concerned about?	
What approaches or strategies could you use	

to address these barriers?	
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Select three of the most likely candidates, identify what their role in the SMILES Project model would be, and compile the key information about this partner.

PARTNER #1	
Organization	
Address	
Phone	
Key Contact	
Role (Home, Hub, Spoke, other partner):	
Reasons to partner with this person or entity:	
Potential Challenges:	

PARTNER #2	
Organization	
Address	
Phone	
Key Contact	
Role (Home, Hub, Spoke, other partner):	
Reasons to partner with this person or entity:	
Potential Challenges:	

PARTNER #3	
Organization	
Address	
Phone	
Key Contact	
Role (Home, Hub, Spoke, other partner):	

Reasons to partner with this person or entity:	
Potential Challenges:	

COMMUNITY SITES/SPOKES

List your potential community sites and then evaluate them based on the factors listed below.

Site #1	
Site #2	
Site #3	
Site #4	
Site #5	

CURRENT STRENGTH OF FACTOR: - (weak) 0 (neutral) + (strong) N/A (not apply)

Factor	Site #1	Site #2	Site #3	Site #4	Site #5
Institutional commitment and buy-in to SMILES Dental Project (cultural commitment to innovation)					
Willingness to work as a team					
Administrative enthusiasm and support					
Point person with available time/time commitment					
Willingness to collect data					
Commitment to staff training					
Experience with health/dental programs					
Facilities – Is there a place to work with privacy, a sink, and storage? What is the relative distance to your target patient population?					
Infrastructure to support enrollment?					
Other:					

COMMUNITY CHARACTERISTICS

Use the next few charts to collect data for your project and to determine the needs of your community. The answers can be a basis for identifying areas to focus your team’s efforts or to develop strategies for implementation.

COMMUNITY CHARACTERISTICS AND DEMOGRAPHICS

Describe your target population for this project (e.g. seniors, individuals with disabilities, kids 0-3, etc.):	
# of Medicaid Adults Enrolled:	
# of Medicaid Children Enrolled:	
# of Medicaid Providers:	
% of Medicaid adults who are receiving a dental visit in a year:	
% of Medicaid children who are receiving one or more dental visits in a year:	
# of CHP+ Enrolled:	
# of people enrolled in private insurance:	
# of people <200% FPL:	
% of kids on free and reduced lunch program:	
Estimate of # of adults eligible, but not enrolled in Medicaid:	
Estimate of # of children eligible, but not enrolled in Medicaid:	
Estimate of # of children eligible, but not enrolled in CHP+:	
Estimate of people with insurance in your community:	
Other pertinent data to verify the community need:	

CURRENT ORAL HEALTH MEASURES

What oral health measures are you currently using and what measures do you want to implement through this project?

Title	Definition	Current Data

COMMUNITY EFFORTS

What efforts and programs are available in your community to address oral health?	
Are the current efforts accessible to all segments of the community?	
Who is left out?	
What are the strengths of current efforts?	
What are the weaknesses of current efforts?	
Will any existing efforts need to phase out for this program to be successful?	

COMMUNITY READINESS

Indicate the extent to which you agree or disagree with each statement by typing the appropriate response (1-5). Areas marked with 0 or 1 should be further investigated.

	Totally Agree	4	Neither Agree Nor Disagree	2	Totally Disagree	Don't Know N/A
Factor	5	4	3	2	1	0
Community members know about local oral health efforts and their effectiveness						
Community members know about the causes of dental disease, its consequences, and how it impacts their lives and the community						

Appointed leaders and influential community members are supportive of efforts to improve oral health access.						
Local resources – people, time, money, space, etc. – are available to support oral health efforts						
Valid, specific, and relevant data are available to demonstrate the causes and consequences of the issue or access to care challenges						

FUNCTIONAL ASSESSMENT

TRAINING NEEDS

Using telehealth-connected teams to provide dental care to communities with limited dental access, is an evolving model. For optimal delivery, and to meet your state’s legislative requirements, consider additional training. Below is a general summary of trainings and this list will not fit every state or community. Use this tool to begin the discussion with your team.

Consider the type of training these members will need and list the team members that will need to be involved:

Type of Training	Team Members
Communication in a telehealth connected team	
Use of telehealth technology	
Motivational interviewing	
Placing Interim Therapeutic Restoration (ITR)	
Caries management science	
Measurement and testing for quality improvement	
Patient navigation	
Nutrition education	
Nomad training	
Data uploading	
Intraoral Photography	

BUDGET

Reference the SMILES Budget template as a guide and consider the following questions:

1. Who is your target population?	
a. Will you be working in a school environment?	
b. How many days will your SMILES Dental Hygiene team work in the community?	
2. What is your average Medicaid reimbursement?	
3. Payor mix – think about Line 17 – sliding fee scale –	
a. What % of the population is enrolled in Medicaid?	
b. How will your program verify Medicaid? Enroll new patients?	
4. Equipment: what is your model? How often will equipment need to be moved? How portable do we need our equipment to be? Consider – sealants – what equipment will you need?	
5. Consider administrative expenses such as OSHA requirements, and State certification of radiographic equipment.	