



TASK FORCE ON CHILDREN’S PREVENTIVE ORAL HEALTH SERVICES
Friday, January 25, 2013
North Carolina Institute of Medicine, Morrisville
10:00-3:00
Meeting Summary

Attendees

Members: Mark Casey (co-chair), Frank Courts (co-chair), Marian Earls (co-chair), Jim Bader, Chris Collins, Sam Bowman Fuhrmann, Susan Shumaker, Brian Harris, Linwood Hollowell, Thomas Koinis, Alec Parker, Connie Parker, Rafael Rivera, Caroline Rodier, Michael Scholtz, Tom Vitaglione

Steering Committee and NCIOM Staff: Kimberly Alexander-Bratcher, Katie Eyes, Pam Silberman, Anne Williams, Berkeley Yorkery, Adam Zolotor

Other Interested people: Shawn Henderson, William Lawrence, Leslie Starson

WELCOME AND INTRODUCTIONS

Mark Casey, DDS, MPH
Dental Director, Division of Medical Assistance
North Carolina Department of Human Services

Frank Courts, DDS
Chair, Physicians Advisory Group Dental Committee

Marian Earls, MD
Lead Pediatric Consultant
Community Care of North Carolina

The co-chairs welcomed everyone to the meeting and announced revisions to the days’ agenda in order to try to finish early due to the winter weather.

SUMMARY OF KEY DATA FINDINGS & ROOT CAUSE ANALYSIS

Adam J. Zolotor, MD, DrPH, Berkeley Yorkery, MPP, Kimberly Alexander-Bratcher, MPH, and Anne Williams
North Carolina Institute of Medicine

Dr. Zolotor gave an overview of the key data findings related to the Task Force’s three goals and introduced the root cause analysis. A copy of Dr. Zolotor’s presentation is available here: [Reflecting the Data & Root Cause Analysis](#).

Goals:

- (1) Increase 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.
- (2) Increase 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.
- (3) 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.

The root cause analysis discussion made up the remainder of the meeting. The task force started with the problems identified in the goals and asked the question “why?” several times to explore the root causes. After beginning the discussion with Goal (1), the task force separated into three break out groups to discuss each of the goals in greater depth. To conclude the meeting the break out groups shared a summary of their findings with the group. After the meeting, the Task Force members were asked to complete a survey to prioritize the root causes they had brainstormed. A summary of the identified barriers and root causes that will be discussed can be found in the update here: [Barriers and Root Causes](#).