CSDH STRATEGIC PLAN

5 STAGES OF STRATEGY DEVELOPMENT









Action Plan



Resources & Timeline



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Barriers to Access to Care

Patient Barriers

- Not enough providers
- Provider location
- Unreliable Transportation
- Physical & functional access to offices & diagnostic equipment
- Lack of advocates
- Oral health not a priority for some

Systemic Barriers

- Insufficient funding
- Lack of relevant information
- Insufficient # of OR/GA facilities
- Inconsistent referral & transition practices
- Some SN agencies do not focus on oral health
- Gov't & some agencies lack of awareness of implications of neglecting oral health

Provider Barriers

- Lack of "soft skills" and specialized knowledge in treatment planning and appropriate provision of preventive and restorative care using interventive strategies (e.g, GA, conscious sedation, etc.)
- Self-imposed boundaries regarding expected outcomes
- Some not willing

Internal to CSDH

- Highly committed Board members
- Lack of formalized structure (e.g., bylaws, policies, goals & objectives, succession plan)
- Lots of work, but somewhat unfocused
- Insufficient resources

From October 2020



FUTURE STATE: VISION & MISSION



Vision: The ideal future state. Something to aim for that might never be achieved.

Highest quality oral health care for Canadians of all ages living with disabilities.

Mission: Why we exist. The actions we will take to achieve our vision.

Promoting CARE through Collaboration, Advocacy, Research, and Education.





LEADS TO STRATEGIC GOALS

- 1. Ensure sustainability of CSDH
- 2. Increase the number of ready, willing, and able oral health care providers
- 3. Reduce/eliminate systemic barriers to access to care
- 4. Reduce/eliminate patient specific barriers to access to care





LEADS TO KEY OBJECTIVES

 Ensure sustainability of CSDH

Build the Infrastructure
Build and Engage Membership

3. Reduce/eliminate systemic barriers to access to care

Cultivate Strategic Relationships

Develop an Advocacy Plan



Increase number of ready, willing, and able oral health care providers

Drive & Support SN Curriculum Development

Support Current & Future Oral Health Professionals

Establish CSDH Expert Reputation/Credibility

4. Reduce/eliminate patient specific barriers to access to care

Engage with Individuals, Families & Caregivers

1. ENSURE SUSTAINABILITY OF CSDH

Build the Infrastructure

- Finalize proposed bylaws to be ratified by members at the 2021 AGM.
- Develop policies and procedures to support the bylaws. Begin in 2021 to be completed by end of 2022.
- Fill positions on the Board by end of 2021, with each director assigned to an area of focus.
- Establish and fill executive positions by end of 2021.
- Get standing committees up and running by end of 2021 (terms of reference, roles filled, work in progress, annual report ready for 2021 AGM).
- Review Strat Plan by end of 2021 and update with 2022 objectives and actions.



Responsible: Board

1. ENSURE SUSTAINABILITY OF CSDH

Build and Engage Membership

- Define and communicate the benefits of membership by end of Q4 2021.
- Revamp the website by end of Q2 2022 to help attract and retain members (clear branding, user friendly interface, content and visuals that reflect who we are and what we stand for).
- Develop and implement an internal communication plan, integrated across social media platforms, including promoting the AGM.
- Engage members in committee work and implementation of strategic plan.
- Develop and launch the 2022 membership drive to increase membership, convert graduating students to professional members and attract more members from across disciplines.



Responsible: Board, plus
Membership & Communication
Committees

Drive and Support SN Curriculum Development

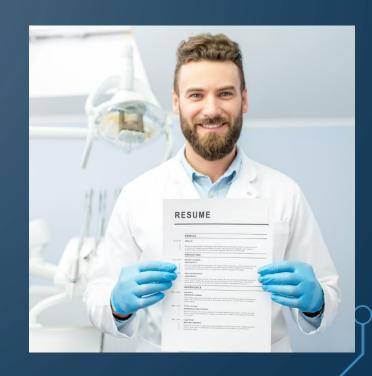
- Meet with Deans and Directors of professional programs to identify opportunities for CSDH to provide and/or support Special Needs curriculum for faculty and students. Through 2021 and on-going as needed.
- Extend offer to the Commission on Dental Accreditation of Canada and their partners and regulators (Colleges) to collaborate on defining the mandatory competencies/ experience/requirements of a curriculum that includes special care needs.



Responsible: Board & Advocacy Committee

Support Future Professionals (Students)

- Define the role of student chapters and establish the infrastructure and chapters across the country, and across oral health care disciplines, by end of Q3 2021.
- Fill positions on Student Representation Committee by end of Q3 2021.
- Identify SN Champions (faculty members or CSDH mentors) to guide each student chapter by end of Q3 2021.
- Identify students' learning goals and needs by end of Q1 2022.
- Develop educational processes to support student development.



Responsible: Student
Representation and Education
Committees

Support Current Professionals

- Present at least 3 professional development webinars for practitioners by end of 2021, and annually thereafter.
- Develop or acquire other educational materials and links to be posted on our website.
- Survey members to determine current and future educational needs/interests. Pilot with program leaders by Q4 2021.
- Design, develop and deliver at least one CE program in conjunction with the CDAA/CDA on a yearly basis beginning in 2022.
- Encourage members to augment their education in Special Needs oral health care through continuing education.
- Promote availability of the iADH fellowship in Special Needs oral health care once available.



Responsible: Scientific & Education Committee

Establish CSDH Expert Reputation/Credibility

- Identify and fulfill opportunities to reach a broader audience (e.g. CDHA's Niagara Fall conference) by end of Q4 2021 and on-going.
- Meet with leaders of other Canadian oral healthcare professional associations and regulators to establish CSDH as a collaborator by end of 2021 and on-going.
- Through meetings with deans, encourage universities to conduct research in the area of oral health care for people with disabilities/special needs. Identify and promote issues we feel are important (e.g., scoping the size of the issue, others TBD)
- Increase awareness of funding/grants available through Canadian Institutes of Health Research.



Responsible: Board & Scientific & Education Committee

3. REDUCE/ELIMINATE SYSTEMIC BARRIERS TO CARE

Cultivate Strategic Relationships

- Research, identify, and prioritize potential aligned organizations and define how we might be of benefit to each other. Continue to develop and expand relationships with other organizations (e.g., CASDA, About Face, AADMD, etc.) On-going:
- Distill a framework from current experiences for contacting and working with aligned organizations (e.g., how to contact, how to uncover opportunities of mutual benefit, approval procedure for making a formal commitment, success measures, etc.) First draft by end of 2022.
- Continue to develop relationships with national and provincial oral health professional bodies
 - Partner in advocacy to ensure they recognize CSDH as the authority and place to go for this population.
 - Partner in continuing education programs to help foster wider range of penetration.
- Cultivate continuing partnership with IADH, ISDH or other like societies









Responsible: Executive,
Advocacy Committee, Scientific
& Education Committee

3. REDUCE/ELIMINATE SYSTEMIC BARRIERS TO CARE

Develop an Advocacy Plan

- Develop an advocacy strategy by end of 2022
- Research (conduct literature review) the issues from multiple perspectives and prioritize/select issue(s) to "own/champion."
- Gain an understanding of processes (tools, tactics, etc.) that can be used to best influence change.
- Research, identify, and prioritize potential aligned organizations and define how we might be of benefit to each other.
- Identify an initiative to lobby the government or other relevant entity (e.g., regulators, insurance companies, etc.) and begin/oversee implementation of the plan (2023).



Responsible: Advocacy
Committee

4. REDUCE/ELIMINATE PATIENT BARRIERS TO CARE

Engage Individuals, Families & Caregivers

- Create opportunities for individuals with disabilities to share their personal stories and experiences with our members.
- Continue to develop and expand the relationship with Special Olympics Canada to help increase oral health awareness, knowledge and access to care for SO athletes.
- Collaborate/network with select social service/health care agencies
 to increase their knowledge/awareness/practical experiences to
 support caregiver training related to oral health care.



Responsible: Special Olympics
Committee, Scientific &
Education Committee

FOCUS ON ORAL HEALTH CARE PROVIDERS

Have we appropriately addressed these groups in our objectives & actions?

									_/
DEFINITION	Ready	✓	Ready	✓	Ready	X	Ready	✓	'
Ready = technically capable of completing oral health	Willing	✓	Willing	✓	Willing	✓	Willing	x	
procedures	Able	✓	Able	x	Able	x/√	Able	x	
Willing = interested in treating patients with special needs			1/1//		1//////		7000		
Able = possesses the "soft" skills to treat patients with special needs									
special fields									
WHO		11. 1	0	lile to our	I la de acces	///	0	dd. t	
WHO	Oral health teams already treating		Oral health teams interested in but		Undergrads interested in		Oral health teams not interested,		
		patients with		not currently		treating patients		and may never	
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					practice		1 / 1	<u> </u>	
CSDH STRATEGY RELATIVE THESE GROUPS	Engage &	support	Continuing education		Augment skills. Incl		Not a pr	iority	
			skills		courses in				
					university	·	7		
					curriculum	ı .			

MEMBERS' CALL TO ACTION



- Review the detailed plan (emailed/on website)
- Identify areas of particular interest
- Consider how you might get actively involved
- Contact the committee chair or email <u>csdhcanada@outlook.com</u> and we'll forward it on