

# SF Dental Transformation Initiative

Local Dental Pilot Project



## Annual Report Program Year 2018 January-December



San Francisco  
Health Network

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH



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### San Francisco Dental Transformation Initiative Local Dental Pilot Project

San Francisco Department of Public Health

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## San Francisco Dental Transformation Initiative Local Dental Pilot Project Overview

San Francisco Dental Transformation Initiative Local Dental Pilot Project (SF DTI LDPP) is funded by the California Department of Health Care Services from July 2017 through December 2020 to increase preventive dental services utilization for Medi-Cal beneficiaries 0-5 years old in San Francisco.

The San Francisco Department of Public Health leads the SF DTI LDPP. In partnership with AFL Enterprises, UCSF, The SF Community Clinic Consortium, CavityFree SF, The SF Dental Society, The SF Unified School District, and community-based organizations, the SF DTI LDPP is implementing five pilot projects based upon [San Francisco Children's Oral Health Strategic Plan](#) to improve and increase access to oral health among children 0-5 years in San Francisco.

### Summary of Five Pilots

**Pilot 1 Dental Access Collaborative** provides trainings and technical assistance to dental practices using the Breakthrough Series methodology developed by Institute of Healthcare Improvement. Dental providers learn the science and methodology of Quality Improvement and evidenced-based best practices to more effectively and efficiently serve Medi-Cal beneficiaries 0-5 years old.

**Pilot 2 Care Coordination** provide dental care coordination and case management at the San Francisco Department of Public Health and the San Francisco Unified School District (SFUSD) to parents and caregivers of managed care Medi-Cal beneficiaries 0-5 years old in San Francisco to help connect children to preventive and urgent dental services.

**Pilot 3 Health Promotion Messaging** collaborates with community children's oral health taskforces in three San Francisco neighborhoods with the highest rates of childhood cavities to conduct community based focus groups for the development of culturally and linguistically responsive oral health promotion messages to encourage parents and caregivers to take their children to the dentists.

**Pilot 4 Interprofessional Collaborative Practice** provides trainings and technical assistance to Primary Care providers to train them in oral health clinical competencies, including dental care coordination referral methods and equip Primary Care providers to become oral health champions.

**Pilot 5 Incentivization of FQHC Dual-users** provides financial incentives for Federally Qualified Health Centers in San Francisco with co-located Primary Care and Dental services to encourage an increase in dual-users of both Primary Care and Dental services within the same health center.

## Summary of Progress

In Program Year 2018, SF DTI LDPP focused on the development of key project infrastructure including the development of the core DTI team staff within the San Francisco Department of Public Health, developing contracts with all key contractors, and establishing effective partnerships with oral health stakeholders both within the Department of Public Health and beyond. Most importantly, SFDTI LDPP began the rolling out of implementation for the five pilots. Outcomes of each of the pilots are shared below.

### Pilot 1 Dental Access Collaborative

#### Challenges and Obstacles

Due to contracting process delays, the timeline for the Dental Access Collaborative was pushed back so that the first Dental Access Collaborative originally planned for 2018 had to be moved to early 2019. SF DTI LDPP was not able to successfully certify a contract with AFL Enterprises, the key contractor and lead for this pilot project until fall of 2018.

#### Achievements

Despite the delay, the SF DTI LDPP team in collaboration with AFL Enterprises was able to accomplish the following in Program Year 2018:

- Recruited key personnel for the Dental Access Collaborative including the Improvement Advisor, and Faculty members to lead Collaborative
- Developed outreach and recruitment materials for the Dental Access Collaborative
- Organized an Expert meeting to determine the aims, goals, measures and curriculum of the first Dental Access Collaborative on December 21, 2018

#### Progress Towards Self-Monitoring Metrics

In 2017, there were no self-monitoring metric deliverables. In 2018, SF DTI LDPP successfully recruited five dental practices to participate in the first Dental Access Collaborative meeting the pilot's self-monitoring metric as indicated in the table below. Even though the SF DTI LDPP team has recruited the five practices as planned in 2018 we have not met the metrics of having the practices participate in the three learning sessions, which will take place in 2019.

Table 4. PERFORMANCE METRICS									
Pilot	Goals	Outcomes	Performance Metric	Annual Target Benchmarks				Frequency	Data Source
				Yr 1	Yr 2	Yr 3	Yr 4		
1: Access Collaborative	<ul style="list-style-type: none"> <li>Teach dental practices QI</li> <li>Increase number of evidence-based preventive procedures performed</li> <li>Increase number of children receiving preventive services</li> </ul>	<ul style="list-style-type: none"> <li>Practices participate in Access Collaborative</li> <li>Practices sustainably provide evidence-based preventive procedures</li> </ul>	Number of dental practices that participate in Access Collaborative (total)	-	5	20	35	Weekly calls during period of Access Collaborative recruitment	<ul style="list-style-type: none"> <li>Learning Session attendance sheets</li> </ul>
			Number of participating dental practices with attendance at all Learning Sessions (yearly)	-	5	15	15	After each learning session	<ul style="list-style-type: none"> <li>Learning Session attendance sheets</li> <li>PDSA logs</li> </ul>
		<ul style="list-style-type: none"> <li>Increase number of evidence-based preventive procedures performed</li> </ul>	<i>Participating dental practices measure set:</i> <ul style="list-style-type: none"> <li>% children 0-5 receiving preventive service</li> </ul>	-	90%	90%	90%	Monthly	<ul style="list-style-type: none"> <li>Collaborative measure set</li> </ul>
		<ul style="list-style-type: none"> <li>Increase number of children receiving preventive services</li> </ul>	<ul style="list-style-type: none"> <li>% increase in children receiving preventive service from baseline</li> </ul>	-	10%	10%	10%	Monthly	<ul style="list-style-type: none"> <li>Collaborative measure set</li> </ul>

### Pilot 2 Care Coordination

Care coordination within the San Francisco Department of Public Health (SFDPH), Department of Maternal, Child and Adolescent Health began in January of 2018. Referrals for care coordination at SFDPH come from medical providers both from within and outside of the San Francisco Health Network clinics, as well as from the Medi-Cal and Cal Works programs at Human Services Agency. Care coordination within the San Francisco Unified School District (SFUSD) began in August of 2018. Referrals from SFUSD come from oral health screenings for children 0-5 in SFUSD pre-schools and kindergartens.

### Challenges and Obstacles

#### SFDPH

A challenge in Program Year 2018 for SFDPH dental care coordination was the unexpected announcement of the phasing out of the PM160 forms used by the statewide Children Health and Disability Prevention (CHDP) program. Prior to the announcement, the DTI Dental Care coordination team through a partnership with the San Francisco CHDP program had planned to use the PM160 form as a method of referral for dental care coordination. With the unexpected announcement, many medical providers were thrown into confusion by the change. Despite the development of and outreach efforts to promote the use of a new referral form for DTI dental care coordination, many referrals were lost due to confusion caused by the change.

Another challenge in 2018, was that the SF DTI LDPP care coordination team lost its Spanish speaking Health Worker in March of 2018, as a result, Spanish cases could not be care

coordinated for most of 2018, causing a backlog of more than 1300 Spanish speaking cases, and this continues to be a challenge into 2019 as the SFDTI LDPP team works to bring on a Spanish speaking Health Worker.

## SFUSD

Due to contracting process delays, the dental care coordination work at the San Francisco Unified School District (SFUSD) was unable to begin as anticipated. SFDTI LDPP successfully certified contact with the San Francisco Unified School District in late 2018. Because of contracting delays, the SF DTI LDPP was not able to arrange a Motivational Interviewing (MI) training for Program Year 2018.

In addition, SFUSD Health Workers had not previously care coordinated dental care for SFUSD students, so the dental care coordination work was new for the team. The SFDTI LDPP needed to work collaboratively with SFUSD to create a unique workflow for SFUSD Health Workers that would be effective with their work environment and processes. For example, SFUSD Health Workers did not have set work stations with phones and computer set-up but worked out of school offices. The SFDTI LDPP team helped with the option of setting up Google voice lines for doing dental care coordination work, and created paper tracking forms for documenting dental care coordination. Despite the challenges, SFUSD was able to begin dental care coordination on a small number of students. The School District was able to make 278 contacts for 228 unduplicated clients in 2018.

## Achievements

In Program Year 2018, through Pilot 2, the SFDTI LDPP accomplished the following:

- Received a total of 3,109 referrals
- Contacted a total of 2,519 clients
- Assisted 2,287 clients to make dental appointments
- 2,236 children attended a dental appointment as a result of care coordination
- Organized Motivational Interview training in both Program Year 2017 (with mean score on evaluations being 4.48 out of a scale of 5, where 5 = most positive) attended by both SFDPH and SFUSD Health Workers, and 2018 (with mean score on evaluations being 4.3 out of a scale of 5, where 5 =most positive) for SFDPH Health Workers meeting the pilot's self-monitoring metric as indicated in the table below. Detailed evaluation reports are available for viewing online for [2017](#) and [2018](#).
- Developed care coordination data tracking and collection tool for SFUSD
- Developed work flow, protocols, and care coordination tools both within SFDPH and SFUSD
- Health Workers at SFDPH also received training on Motivational Interviewing and applied MI skills in their care coordination work

## Progress Towards Self-Monitoring Metrics

- Because of contracting issues, SF DTI LDPP was unable to provide any care coordination in 2017 in SFUSD
- Due to SFDPH budget issues, the SF DTI LDPP was unable to hire Health Workers to join the care coordination team in 2017, as a result, care coordination at SFDPH began in 2018
- In 2018, SF DTI LDPP team met deliverable for scoring of MI training evaluation
- Even with challenge from both SFUSD and SFDPH and being under-staffed, the SFDTI LDPP came very close to meeting the 2018 goal of number of clients (2,236 children attended a dental appointment out of 2,310 listed in our DTI LDPP metric goal for Year 2 or 97%)

2: Care Coordination	<ul style="list-style-type: none"> <li>• Increase access to dental care for Denti-cal beneficiaries 0-5</li> </ul>	<ul style="list-style-type: none"> <li>• Children are care coordinated into dental care</li> </ul>	<ul style="list-style-type: none"> <li>• Applicability of MI training</li> </ul>	-	4.25 out of 5	4.25 out of 5	4.25 out of 5	Yearly at minimum Monthly	<ul style="list-style-type: none"> <li>• Post-training evaluation survey</li> </ul>
			<ul style="list-style-type: none"> <li>• Care coordination database client metrics:</li> </ul>	4500	4500	4500	4500		<ul style="list-style-type: none"> <li>• Care coordination database</li> </ul>
			<ul style="list-style-type: none"> <li>• # clients referred to case management</li> </ul>	1133	3400	3400	3400		<ul style="list-style-type: none"> <li>• Care coordination database</li> </ul>
			<ul style="list-style-type: none"> <li>• # clients contacted</li> </ul>	933	3080	3176	3288		<ul style="list-style-type: none"> <li>• Care coordination database</li> </ul>
			<ul style="list-style-type: none"> <li>• # clients appointed</li> </ul>	700	2310	2541	2795		<ul style="list-style-type: none"> <li>• Care coordination database</li> </ul>

## Pilot 3 Health Promotion Messaging

### Challenges and Obstacles

As a result of delayed contracting processes with the community based organizations, the focus groups planned for Pilot 3 Health Promotion Messaging could not begin as originally scheduled in Program Year 2017. Contract with the three community based organizations representing the community children's oral health taskforces in the three high cavities-risk neighborhoods of San Francisco were finalized in early summer of 2018.

### Achievements

In Program Year 2018, through Pilot 3, the SFDTI LDPP accomplished the following:

- Conducted three focus groups in three neighborhoods of San Francisco with the highest risk for childhood cavities to learn community and cultural specific barriers to accessing preventive dental services for parents and caregivers of children 0-5 years in San Francisco
- Analyzed focus group transcripts for overall themes and messaging ideas, as well as community specific messaging and intervention ideas to encourage parents and caregivers of children to take their children to the dentists
- Began the development of training curriculum for Health Workers and Integration Technical Advisor based on focus group findings



- Created one-page focus group findings fact-sheets for easy dissemination within the communities and with oral health stakeholders, linked [here](https://sfdti.weebly.com/2018-focus-group-findings.html) (https://sfdti.weebly.com/2018-focus-group-findings.html).
- Focus Group findings training for Health Workers planned for early 2019. Focus Group findings are available for [viewing online here](https://sfdti.weebly.com/2018-focus-group-findings.html) (https://sfdti.weebly.com/2018-focus-group-findings.html).

Two focus groups are planned for 2019 to replace the missing focus group in Program Year 2017 lost due to contracting delays.

### Progress Towards Self-Monitoring Metrics

SFDTI LDPP was not able to organize the oral health messaging trainings in 2017 and 2018 as a result of contracting delays. Despite this, the community oral health taskforces have successfully developed oral health promotion outreach messages, strategies, and materials through partnership and leveraging funds from San Francisco Prop 56 activities that are informed by the focus groups held through SF DTI LDPP Pilot 3.

<b>3: Health Promotion Messaging</b>	<ul style="list-style-type: none"> <li>• Develop culturally appropriate COH promotion messages including appointment compliance</li> <li>• Health workers &amp; ITA trained in culturally appropriate COH promotion messages including appointment compliance</li> </ul>	<ul style="list-style-type: none"> <li>• Content is developed</li> <li>• HW receive training on health promotion messaging</li> </ul>	Training evaluations for COH Taskforce on culturally appropriate messaging	8.5 out of 10	8.5 out of 10	8.5 out of 10	8.5 out of 10	Yearly at minimum	<ul style="list-style-type: none"> <li>• Training evaluations</li> </ul>
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### Pilot 4 Interprofessional Collaborative Practice

#### Challenges and Obstacles

SF DTI LDDP Pilot 4 is fortunate to have the support of two pediatric oral health champions to provide their expertise and perspectives around engaging Primary Care providers. However, as both champions have very limited time, scheduling the Pilot 4 team meetings has been challenging.

Another challenge the SF DTI LDPP team has experienced for this pilot is that medical and primary care teams have very limited schedules to attend trainings. The SF DTI LDPP team tries to take a flexible approach to meet clinics where they are at in terms of the amount of time they can dedicate to trainings, and has developed both full-length and condensed training curricula. Despite this, finding a time when all members of the primary care team can be present to attend a 30-minute training is still very challenging.



Finally, the SF DTI LDPP team has found it challenging to engage and outreach with two of the primary care practices in San Francisco that see the largest number of Medi-Cal beneficiaries 0-5 years old—Kaiser Permanente and UCSF. Together these two healthcare system’s 0-5 Medi-Cal patient population make up about 20% of the now approximate 15,000 beneficiaries in San Francisco. The SF DTI LDPP has been working since pilot activities began in 2017 to build relationships and engage with these two large healthcare delivery systems in training and dental care coordination referral collaborations, but due to different systemic challenges, progress has been slow. The SF DTI LDPP will continue our engagement efforts in 2019.

### Achievements

In Program Year 2018, the SF DTI LDPP Integration Technical Advisor and team of oral health champions accomplished the following:

- Developed a curriculum for Primary Care Providers on oral health competencies and dental and dental care coordination referral.
- Trained 59 Primary Care Providers across 11 clinics in San Francisco using the developed curriculum
- Received positive evaluations of the training from participating Primary Care Providers with 97% stating that they felt confident and would use the information learned to refer patients to dental providers (mean score of 4.44 out of a scale of 5, where 5=most positive) meeting the pilot’s self-monitoring metric as indicated in the table below. Detailed evaluation report available for viewing online for [2018](#)
- Throughout 2018, have been connecting with a San Francisco Kaiser Pediatric oral health champion to work through challenges of instituting dental care coordination referral for Kaiser Medi-Cal patients
- In last quarter of 2018, reached out to regional Kaiser Permanente oral health champions to find a way forward for Kaiser Permanente San Francisco to begin to refer Kaiser Medi-Cal patients 0-5 years for dental care coordination

### Progress Towards Self-Monitoring Metrics

- Met our self-monitoring metric in 2018, with evaluated scoring of 4.44 out of 5 in 2018

4: Increase Interprofessional Collaborative Practice	• Primary care practices refer clients to dental care	• Primary care practices receive training on Interprofessional Collaboration & referring	Training evaluations on Interprofessional Collaboration	4 out of 5	4 out of 5	4 out of 5	4 out of 5	After each training session	• Training evaluations
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### Pilot 5 Incentivization of FQHC Dual-Users

#### Challenges and Obstacles

Due to contracting delays, in Program Year 2018, one FQHC instead of the two as originally planned participated in Pilot 5. In 2018, Silver Avenue Family Health Center, a Federally Qualified Health Center within the San Francisco Department of Public Health, San Francisco



Health Network participated in the pilot. The community FQHC, Mission Neighborhood Health Center, scheduled to participate in Pilot 5 had their contract executed too late in the year and had limited time to implement any pilot strategies to increase their dual user rates.

### Achievements

Silver Avenue Family Health Center accomplished the following:

- Developed and piloted warm handover procedures from Primary Care to Dental services within the health center
- Increased their dual user rate from 2016 baseline of 38% to 51% in 2018, achieving their target 20% Relative Improvement goal and the full financial incentives allocated to the health center for 2018. This increase meets the pilot’s self-monitoring metric as indicated in the table below
- Set up data report system within the SFDPH to identify patients 0-5 years at SAFHC who have not had a dual visit for both Primary Care and Dental for targeted outreach

### Progress Towards Self-Monitoring Metrics

- Participating FQHC, Silver Avenue Family Health Center, met self-monitoring metric of Relative Improvement goal of 20%. Their dual user rate increased from the 2016 baseline of 38% to 51% at the end of calendar year 2018.

5: Incentivizing FQHC Dual Users	<ul style="list-style-type: none"> <li>• Increase collaboration and infrastructure between PC-dental in FQHC</li> </ul>	<ul style="list-style-type: none"> <li>• Increase proportion of dual PC-dental users 0-5 in FQHC</li> </ul>	Percentage increase in FQHC Dual primary care-dental users from baseline year	-	10%	20%	30%	Quarterly	<ul style="list-style-type: none"> <li>• EHR /registration data from FQHCs</li> </ul>
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### Data and Evaluation

In Program Year 2018, the SF DTI LDPP data team also focused on the creation of data collection infrastructure for the pilot projects. Some highlights in 2018 in the area of data and evaluation team are:

- Creation of data tracking and collection tools for Pilot 2 Care Coordination both at the San Francisco Department of Public Health and at the San Francisco Unified School District
- The UCSF data evaluation and monitoring team also created evaluation tools for trainings in Pilot 2 and Pilot 4
- Submitted and received approval for IRB application through UCSF for the planned evaluation work of the project
- Requested and received the necessary data set and data mechanism for the San Francisco Health Network clinics’ primary care and dental visit for tracking of Pilot 5 Incentivization of FQHC Dual-user outcomes

- Developed a Tableau dashboard to display Denti-Cal utilization rate for San Francisco children 0-20 years old. The tableau dashboard is made publicly accessible via the [SF DTI LDPP website's data page \(https://sfdti.weebly.com/data.html\)](https://sfdti.weebly.com/data.html)
- Set secured methods of data sharing both internally within SFDPH and externally with our evaluation and monitoring partner UCSF through protected SharePoint sites
- Developed data sharing protocol to ensure secure and protected procedures for data sharing both internally and externally with our UCSF evaluation and monitoring partner

### Summary of Challenges and Achievements

The biggest challenge in Program Year 2018 was the delay in contracting processes with the SF DTI LDPP contractors due to a new financial and procurement system adopted by the city of San Francisco in July of 2017. A typical SFDPH contract start-up period is 3-9 months, however, with the new procurement system, timeline for new contracts were extended considerably. Despite this delay, the SFDTI LDPP mitigated this setback to the extent possible by working with our subcontracts to adapt their work plans and budgets to compressed timelines for the same scope of work, and through the patience and flexibility of our subcontractors and partners, were able to invest significant time and effort in the latter half of 2018 to get program activities started and up to speed.

The combined effects of the SFDPH hiring bureaucratic processes, standards and policies, the SFDPH contracting department staffing changes and the financial procurement system all led to an unexpectedly long lead time for contract certification. This meant that many of the SF DTI LDPP pilot activities could not begin as planned. This led to lost time for many of the pilots.

In Program Year 2018, some of the achievements that the SFDTI LDPP team is proud of include the significant number of children and families reached through care coordination. The DTI Care Coordination team felt that they were making a difference in the health and lives of individual young children and their families in San Francisco. DTI Case Manager, Rose Clifford, said this of the DTI Health Workers:

*“From reviewing all of the care coordination case notes, I can see that the Health Workers are true advocates of children’s oral health and that they really care about the children and the families that they serve. To the Health Workers, it is more than just reaching numbers, they truly care about each child’s well-being.”*

The SF DTI LDPP is also proud of the partnerships built with Primary Care providers through Pilot 4 and 5 in 2018. Primary Care providers indicated that they appreciated the dental referral and dental care coordination training as it would lead to better health outcomes for their patients. In particular, through the pilot activities in Pilot 5, the SFDTI LDPP team is pleased to support the development of new working relationships and warm handover procedures established jointly by both Primary Care and Dental services at Silver Avenue Family Health Center, the participating FQHC. Indicative of the partnership between Primary Care and

Dental services was the fact that when Silver Avenue Family Health Center reached their 20% Relative Improvement for the full financial incentives of \$31,000, the team elected to split the incentives three ways equally among the Primary Care services, the Dental services, and for joint Health Center purchases.

In addition to the partnership with Primary Care providers, the SF DTI LDPP team is also proud of the work and accomplishments of our community partners through the work of the community oral health taskforces in the three high-risk and high needs neighborhoods in San Francisco. The taskforces have used the findings from the SF DTI LDPP focus groups and leveraged support from other funding streams to create culturally responsive targeted oral health outreach for each of their communities. Some of their campaign materials included radio ads, street banners along key commercial corridors, and oral health education through Promotora networks.

## Summary of Stakeholder Communications

In 2018, the SFDTI LDPP team developed key communication infrastructures to ensure timely and effective communications with project staff and wider oral health stakeholders. These infrastructures include:

- The creation of a dedicated public facing [SFDTI LDPP project website](http://www.sfdti.weebly.com) (www.sfdti.weebly.com) to explain the goals and ongoing activities of the SFDTI LDPP as well to share project updates and resources
- The development of a SF DTI LDPP quarterly newsletter to keep project staff, partners and stakeholders updated on pilot progress and to share relevant updates. In 2018, three newsletters were published and disseminated
  - [SF DTI Spring 2018 Newsletter](#)
  - [SF DTI Summer 2018 Newsletter](#)
  - [SF DTI Fall 2018 Newsletter](#)

DTI newsletters are available online at: <https://sfdti.weebly.com/newsletter-archive.html>

- The creation of project outreach materials including a [project flyer](#) and [Frequently Asked Questions](#).
- The establishment of monthly DTI Coordination Committee teleconferences to bring together the pilot staff and partners from all five pilots to discuss ongoing progress and challenges (01/08, 02/05, 03/05, 04/02, 05/07, 06/04, 07/02, 08/06, 09/10, 10/01, 11/05, 12/03)
- Participation in the quarterly Cavity Free SF coalition Implementation Coordination Committee meetings. The CavityFree SF Implementation Coordination Committee also serves as the advisory committee for the SF DTI LDPP (02/06, 03/14, 08/27)
- Organization of Annual DTI Convenings for in-person interaction for DTI pilot staff and wider collaborative partners in both [2017](#) (11/02) (<https://sfdti.weebly.com/2017-dti->



[annual-convening.html](#)) and [2018 \(12/20\) \(https://sfdti.weebly.com/2018-dti-annual-convening.html\)](#)

Meeting agendas and minutes to the above mentioned meetings are available online at: <https://sfdti.weebly.com/meeting-materials.html>

Other stakeholder communication activities during 2017 and 2018 included the following:

#### Presentations

- San Francisco Community Clinic Consortium 7/5/2017
- San Francisco Health Network Dental Staff Meetings 10/26/2017, 01/25/2018, 04/26/2018, 07/26/2018, 10/25/2018
- DHCS conference call 12/20/2017
- San Mateo Oral Health Coalition 2/20/2018
- San Francisco Health Network Pediatrics Quality Improvement Meeting 6/29/2018
- San Francisco Department of Public Health Ambulatory Care Executive Leadership Meeting 8/15/2018
- Sacramento county 9/7/2018
- SFDPH Chronic Disease Prevention Integration Meeting 9/12/2018

#### Conferences

- [The CPEHN Oral Health Convening in the Bay Area](#) 2/22/2018
- [Annual Children's Oral Health Leadership Forum](#) 04/03/18

#### Articles

- [SF Children Health and Disability Prevention Provider Newsletter Fall 2017](#)
- [SF Children Health and Disability Prevention Provider Newsletter Winter 2017](#)
- [San Francisco Department of Public Health Director's Report February 6, 2018](#)
- [San Francisco Health Plan Providers March 2018 Update](#)
- [SF Children's Health and Disability Prevention Provider Newsletter Spring 2018](#)
- [San Francisco Dental Hygiene Society Spring 2018 Newsletter](#)
- [SF Children's Health and Disability Prevention Provider Newsletter Fall 2018](#)
- [SF Children's Health and Disability Prevention Provider Newsletter Winter 2018](#)



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## Expenditure Report

San Francisco Department of Public Health (SFDPH) Dental Transformation Initiative LDPP  
EXPENDITURE REPORT  
LDPP YR 2 - PROJECT REPORT 1/1/18 - 12/31/18

	PROJECT BUDGET	COSTS TO DATE 01/01/18-12/31/2018	VARIANCE	ENCUMBRANCES YTD	UNENCUMBERED	2018 ANNUAL COST 01/01/18-12/31/2018
<b>INCOME</b>						
<b>Grant &amp; Contract Income</b>						
State DHCS LDPP DTI Project	\$2,060,690.20	\$320,395.47	\$1,740,294.73	\$543,524.84	\$1,196,769.89	\$863,920.31
Total Grant & Contract Income	\$2,060,690.20	\$320,395.47	\$1,740,294.73	\$543,524.84	\$1,196,769.89	\$863,920.31
<b>Total Income</b>	<b>\$2,060,690.20</b>	<b>\$320,395.47</b>	<b>\$1,740,294.73</b>	<b>\$543,524.84</b>	<b>\$1,196,769.89</b>	<b>\$863,920.31</b>
						<i>(Note: anticipated Q4 payment)</i>
<b>EXPENDITURES</b>						
<b>Payroll Expense</b>						
Salary & Wage Expense	\$358,604.00	\$287,444.15	\$71,159.85	\$0.00	\$71,159.85	\$287,444.15
Taxes & Benefits	\$125,511.40	\$100,605.46	\$24,905.94	\$0.00	\$24,905.94	\$100,605.46
Total Payroll Expense	\$484,115.40	\$388,049.61	\$96,065.79	\$0.00	\$96,065.79	\$388,049.61
<b>Supply Expense</b>						
SFDPH FQHC # 1 Incentive for Dual Users	\$31,320.00	\$0.00	\$31,320.00	\$0.00	\$31,320.00	\$0.00
Total Supply Expense	\$31,320.00	\$0.00	\$31,320.00	\$0.00	\$31,320.00	\$0.00
						<i>(Note: full incentive earned in late Dec. 2018, spending will be carried onto 2019 budget)</i>
<b>Contractual Service Expense</b>						
UCSF School of Dentistry	\$240,769.00	\$192,042.52	\$48,726.48	\$48,726.48	\$0.00	\$192,042.52
San Francisco Unified School District	\$128,440.00	\$98,484.53	\$29,955.47	\$29,955.47	\$0.00	\$98,484.53
AFL Collaborative Administration	\$516,780.00	\$97,854.82	\$418,925.18	\$418,925.18	\$0.00	\$97,854.82
Com. Task Force - NICOS	\$10,000.00	\$10,000.00	\$0.00	\$0.00	\$0.00	\$10,000.00
Com. Task Force - CARECEN	\$10,000.00	\$10,000.00	\$0.00	\$0.00	\$0.00	\$10,000.00
Com. Task Force - APA FSS	\$10,000.00	\$10,000.00	\$0.00	\$0.00	\$0.00	\$10,000.00
Com. FQHC #1 - Mission Neighborhood HC	\$72,000.00	\$0.00	\$72,000.00	\$0.00	\$72,000.00	\$0.00
Total Contractual Service Expense	\$987,989.00	\$418,381.87	\$569,607.13	\$497,607.13	\$0.00	\$418,381.87
<b>Other Costs</b>						
Other Costs (carried forward from 2017)	\$485,545.00	\$0.00	\$485,545.00	\$0.00	\$485,545.00	\$0.00
Total Other Costs	\$485,545.00	\$0.00	\$485,545.00	\$0.00	\$485,545.00	\$0.00
<b>Indirect Expense</b>						
Indirect Cost of 20% for SFDPH Salaries	\$71,720.80	\$57,488.83	\$14,231.97	\$0.00	\$14,231.97	\$57,488.83
Total Indirect Cost	\$71,720.80	\$57,488.83	\$14,231.97	\$0.00	\$14,231.97	\$57,488.83
<b>Total Expenditures</b>	<b>\$2,060,690.20</b>	<b>\$863,920.31</b>	<b>\$1,196,769.89</b>	<b>\$497,607.13</b>	<b>\$627,162.76</b>	<b>\$863,920.31</b>

Note: "Other Costs" and encumbered balances from Contractual Services Expenses are included in 2019 and 2020 subcontract deliverables due to local SFDPH contracting delays that are now resolved



## Additional Resources

San Francisco Dental Transformation Initiative Local Dental Pilot Project Website  
<https://sfdti.weebly.com/>

SF DTI Newsletter Archive  
<https://sfdti.weebly.com/newsletter-archive.html>

SF DTI Meeting Minutes  
<https://sfdti.weebly.com/meeting-materials.html>

CavityFree SF Website  
<http://www.cavityfreesf.org/>

San Francisco Department of Public Health Website  
<https://www.sfdph.org/dph/default.asp>

Department of Health Care Services Dental Transformation Initiative Website  
<https://www.dhcs.ca.gov/provgovpart/pages/dti.aspx>



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Transformation  
Initiative  
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San Francisco Department of Public Health

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