



RHIP Oral Health Workgroup
Deschutes County Health Services—Stan Owen Room
2577 NE Courtney Drive, Bend
January 16, 2018 from 11:00am – 12:00pm
Dial-in – 866-740-1260 3063523#

CLINICAL GOAL: Improve oral health for pre-and post-natal women.

PREVENTION GOAL: Keep children cavity free.

- 11:00-11:05** Introductions – MaryAnn
- 11:05-11:15** Oregon Oral Health Coalition ask – MaryAnn/All
 - Attachment: MOU
- 11:15-11:30** VIM Experience with Geriatric Oral Health – Kat Mastrangelo
- 11:30-11:55** Continue on A3/Box 6 – MaryAnn/Heather Simmons
 - Create subgroup
- 11:55-12:00** Next steps

Next meeting: February 20th

Memorandum of Understanding

This Memorandum of Understanding (MOU) is between the Oregon Oral Health Coalition (OrOHC), an Oregon 501 (c) 3 nonprofit organization located in Wilsonville, Oregon, and (Local Coalition), a consortium of stakeholders, operating under an adopted charter, to address local oral health issues in the local communities where they work or live.

The purpose for this Memorandum of Understanding (MOU) is to clarify roles and responsibilities of the parties engaged jointly in the mission of improving the general health of all Oregonians through integrated oral health and primary care.

OrOHC is engaged in developing, strengthening, and coordinating a network of Local Oral Health Coalition chapters around the state. It is through this network of oral health advocates that strategies, initiatives and projects will be planned, designed and implemented in local communities to eradicate the burden of dental diseases and institute a broad array of preventive measures for the health of the population. The collective voice of this partnership of OrOHC and the network of Local Oral Health Coalition Chapters will serve as a central source of advocacy for advancing policy and practice that will impact the health and well-being of all Oregonians.

Local Oral Health Coalition Chapters will align local needs, data and resources and create replicable approaches improving general health through oral health. The Local Oral Health Coalition approach allows the local community stakeholders to find solutions to health problems and be the driver for solutions that will work best in their communities.

Neither party assumes responsibility or liability for the other, either legally or materially.

OrOHC assumes the following role:

1. Dedicate staff, time, and travel to work directly with oral health champions in community to identify and engage community stakeholders to form a diverse coalition base.
2. Permitting available funds, support Local Oral Health Coalition Chapters with financial and technical assistance.
3. Incorporate Local Oral Health Coalitions Chapters into the larger oral health network to offer support with best-practices, provide an environment for sharing processes, and develop common positions for oral health messaging.
4. Support coalition building strategies by conducting site visits and providing infrastructure with hands-on support, leadership training, facilitation and other relevant learning opportunities.
5. May act as a fiscal agent for Local Oral Health Coalition Chapters, to be used as a depository for funds raised locally, and to distribute funds as requested.
6. To provide representative leadership through the OrOHC Local Oral Coalitions Action Committee which will gather resources, hold trainings, and convene workshops and annual meetings for the network.
7. Provide support/training in developing coalition strategies that improve planning, decision-making, and resource allocation leading to more equitable, diverse, and inclusive practices.

Local Oral Health Coalition Chapter assumes the following role:

1. Create and maintain a charter document that addresses health equity and community empowerment and outlines the vision, purpose, and function of the coalition.
2. Establish a strong community base with broad local involvement; develop partnerships that are community-based, cross-disciplinary, and culturally competent.
3. Identify and maintain coalition leaders who have commitment to the coalition and bring skills to aid coalition building and strengthening.
4. Provide coalition member representation on the OrOHC Local Oral Health Coalitions Action Committee.
5. Create goals and objectives that carry coalition mission and align with the *Strategic Plan for Oral Health in Oregon: 2014-2020*.
6. Assess community oral health needs and identify existing resources within the coalition's footprint.
7. Provide Bi-Annual (June 30 & December 31) report evaluating coalition infrastructure/function, coalition activities, strategies, and outcomes.

Proactive Approach to Conflict Resolution:

The purpose of establishing a process for resolving issues of conflict is to provide a mutually acceptable method of open communication and early resolution of issues either within Local Coalitions or between the parties of this MOU. Parties should have equal interest in reaching resolution in a timely and efficient manner. Designating a system of standardized processes for resolution tends to create more consistency and objectivity.

An approach to addressing disputes will be characterized by the following terms defining a proactive resolution approach:

- Practical — Saves all parties time, effort, and energy that can be re-directed toward accomplishing the mission of the organization.
- Hands-on — Early intervention leads to smaller problems, and is best implemented by a 'hands-on' approach. It is important to address problems at the lowest level in order to keep perspective.
- Down to business — This approach requires the right mix of sharpness and clarity with tact and diplomacy. Important issues come to the table quickly, and do so while reinforcing understanding of the concerns and viewpoints of both parties.
- Positive and Upbeat — The approach is positive and upbeat with each party conveying a sincere desire for a more positive future relationship in which both parties benefit from one another.

Conflict Resolution Process

Step 1

Request a face to face meeting for discussing the identified issue/question. Either partner may request a meeting with the other partner and raise the issue/question(s). The question/issue is

presented in written form; resolution is documented at close of meeting. By sitting down and talking, a resolution can be reached and no further action needs to be taken.

*If resolution is not reached, proceed to Step 2.

Step 2

When a resolution is not reached in Step 1, move to this step. Ask for a meeting with the OrOHC Local Oral Health Coalitions Action Committee, which represents a broad group of stakeholders, to review concerns and determine resolution. Parties to the question/issue will be invited to respond to questions or clarification by the OrOHC Committee. After careful review, the Committee shall determine resolution.

The persons signing below certify by their signatures that they are authorized to sign this Memorandum of Understanding on behalf of the party they represent, and that this Memorandum of Understanding has been authorized by said party.

IN WITNESS WHEREOF, the parties hereto have executed this Memorandum of Understanding as of the day and year written below.

Signed on behalf of:

[Local Oral Health Coalition]

[Name]

Date

Signed on behalf of:

Oregon Oral Health Coalition

Tony Finch

Executive Director

Date