What is a promising or evidence-based practice (PEP)?

There is no uniform definition for PEP, but the term is used by many organizations to refer to programs or practices that have demonstrated some kind of effectiveness through outcomes.

Organizations that make recommendations from intervention research findings generally use a review panel of experts (internal, external, or both). These panels review research using specific criteria to evaluate for effectiveness. Organizations use different terms for programs or practices supported by data. It is important to note the key organizations in specific areas of prevention and what terms they use to refer to PEP, such as:

- Promising practice
- Evidence-informed practice
- Evidence-based practice
- Best practice
- Research-based practice
- Science-based practice
- Potentially effective practice
Purpose of this Guide

Cook Children’s Promise:
Knowing that every child’s life is sacred, it is the promise of Cook Children’s to improve the health of every child in our region through the prevention and treatment of illness, disease and injury.

Overview

To help fulfill this promise, Cook Children’s Health Care System began implementing assessment strategies in 2008 to determine the status of children’s health within our service region, identify health priorities for action, and support additional community collaborations to implement solutions. The first step in this process was conducting the Community-wide Children’s Health Assessment and Planning Survey (CCHAPS), covering a six-county service region which includes Denton, Hood, Johnson, Parker, Tarrant and Wise counties. CCHAPS helped to fill many gaps in child health data for children ages 0-14 in North Texas, and CCHAPS was re-administered in 2012.

Cook Children’s confirmed that a common denominator among communities successful in creating sustainable improvements in children’s health was community-based, collaborative approaches based on evidence-based practices. Cook Children’s Community Health Outreach department (CHO) was already working collaboratively to provide health and safety information and practices to help prevent oral health disease and to help prevent injury to children in our community. Those efforts expanded to include fostering new community-based coalitions throughout the region.

In 2010-2011, Cook Children’s worked to engage communities by hosting child health summits to unveil children’s health data. CHO formed community groups to review the data, choose priorities for action, and facilitate new coalitions in five counties by providing coalition coordinators and serving as the lead organization.

Evaluate community solutions in light of your resources

A helpful way to review suggested promising and evidence-based practices (PEP) is to assess community resources and assets. This can provide a road map for potentially effective interventions for the community, as the community resources and assets are an existing infrastructure around which an intervention can be implemented. For example, access to a local, national advocacy group, university research program, and local health organizations can provide a pre-set group of stakeholders that can guide and lead the implementation of best practice in the community.
Benefits of this Guide

This PEP guide was created to support coalitions and communities in choosing promising/evidence informed or evidence-based strategies as they developed specific strategic action plans for their priority issues. This resource is available for asthma, child maltreatment prevention, childhood obesity, oral health, mental health and preventable injuries.

It will become clear in the next section that varying definitions of “best,” “promising,” and “evidence-based” practices exist. For the purposes of this resource, we refer to them collectively as “promising and evidence-based practices” or PEP. However, when other sources are quoted we use the term(s) exactly as they are used by those sources.

Most publications on dental health use the words “best practices,” “demonstrated,” and “effective.” However, systematic review groups that have evaluated intervention outcomes also use terms such as “innovative program” and “recommended program.” Any of these terms may be used to refer to a promising or evidence-based practice.

Additional Information

Most organizations conduct research according to their own standards of practice and design (in addition to any preset standards by a licensing or credentialing body). Some experts suggest that locating a uniform definition for PEP with the Centers for Disease Control (CDC) or any other national entity is a problem because one uniform definition or model does not or should not exist. Many organizations adhere to methodology structured by a higher authority, e.g. Prevention Research Coordinating Committee at National Institutes of Health (NIH). Research findings are disseminated through publication or by the organization, and some organizations draft policy and guideline statements based on their own research findings or those of others.

An example of an organization that has defined PEP for their interest area is The Association of State and Territorial Dental Directors (ASTDD). They developed a method for reviewing suggested programs and practices to help disseminate effective practices to dental health professionals. The organization has devoted considerable effort to “Best Practices Projects” and has become a leader in educating other organizations. A link to their “Introduction to Best Practices” presentation may be found at: ASTDD Introduction to Best Practices

The ASTDD Best Practice Concepts, which can apply to any interest area, are:

- A best practice is a methodology that, through experience and research, has proven to reliably lead to a desired result.
- Using best practices is a commitment to using all the knowledge and technology at one’s disposal to ensure success.
- Best practices do not have one template or form for everyone to follow.
- “Best practice” does not commit people or organizations to one inflexible, unchanging practice.
• Best practices is a philosophical approach based around continuous learning and continual improvement.

• Learning and transfer of best practices is an interactive, ongoing and dynamic process that cannot rest on a static body of knowledge.

(Source: ASTDD website, accessed June 9, 2011 from www.astdd.org.)

Where are PEP found?

It can be overwhelming to search through the large pool of potential programs and practices for a specific area of prevention. Fortunately, several key organizations work toward locating and evaluating PEP for many areas of community health. Narrowing the search by topic and knowing where to search can help reduce the amount of information to sort through.

Internet research should start with the major database websites for PEP by health topic. The databases below contain analyses of community health intervention methods (either one study or many studies grouped by intervention method) and provide recommendations on their effectiveness.

We have linked to relevant oral health prevention areas in the databases below to get you started; however, there is much more you can explore.

<table>
<thead>
<tr>
<th>Database Websites with Community-Based Oral Health Links</th>
<th>Link(s)</th>
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</thead>
<tbody>
<tr>
<td>Agency for Healthcare Research and Quality (AHRQ) Innovations Exchange</td>
<td>AHRQ Innovation Profiles</td>
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<tr>
<td>Association of Maternal and Child Health Programs (AMCHP) – Best Practices Review Panel</td>
<td>AMCHP Best Practices</td>
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<tr>
<td>Association of State and Territorial Dental Directors (ASTDD) Best Practice Approaches</td>
<td>ASTDD</td>
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<tr>
<td>Cochrane Collaboration Reviews</td>
<td>Cochrane Collaboration Reviews</td>
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<tr>
<td>Evidence for Policy and Practice Information (EPPI) and Coordinating Center</td>
<td>EPPI Center</td>
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Database Websites with Community-Based Oral Health Links

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<tr>
<td>Healthy North Texas Promising Practices</td>
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<tr>
<td>The Canadian Best Practices Portal for Health Promotion and Chronic Disease Prevention</td>
<td>Canadian Best Practices Portal for Health Promotion and Chronic Disease • Oral health</td>
</tr>
<tr>
<td>The Community Guide</td>
<td>The Community Guide • Community water fluoridation • Statewide or community-wide sealant program • School-based or linked sealant delivery program</td>
</tr>
<tr>
<td>Using What Works for Health</td>
<td>County Health Rankings and Roadmaps • Community water fluoridation • School dental programs</td>
</tr>
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</table>

The Centers for Disease Control (CDC) website (www.cdc.gov) can also be searched by Disease/Condition for additional resources and publications. The CDC site serves as a good overview of the other federal agencies/offices that are studying or researching the health topic and links are provided through the Disease/Condition pages.

An academic literature search can build the “big picture” of what programs and practices have been published as well as provide citation information for future reference. This search will include most of the studies and recommendations that are found on the big database websites, and may include new studies that will compliment previous research findings.

Another method for researching PEP is to search by the topic name in an internet search engine, i.e. “community oral health interventions” in Google or in Google Scholar. This usually serves to reinforce what has already been located elsewhere; however, sometimes there are coalitions, groups and foundations that will be discovered using this method that haven’t been recognized or studied as widely that can provide useful tools for community partners.

After becoming acquainted with the wide offering of research and recommendations, you should consider contacting field experts for confirmation and guidance on the findings and other suggestions. These may include authors on research studies, academic and governmental institutions centered on the research topic, and professionals in the community.
How do you review/investigate PEP?

You should begin by looking for common themes and phrases. It will save time in organizing findings and composing a later summary if themes or common phrases are recorded from the beginning of the research process. Another helpful approach is to print pages or copy the website addresses from the internet sites and academic studies. Sort print pages by intervention theme or method such as the themes or common phrases – this forms the basis of a research outline and summary. This can serve as a roadmap for others without this knowledge to be able to understand and replicate these findings in their community.

Lessons learned

The Community Health Outreach Department at Cook Children’s has researched and used some promising and evidence-based programs. We have learned that:

- Some evidence-based programs cannot be replicated “in the whole” because of factors such as differences in available resources to implement a program, community differences, differences in target population, etc.

- Programs can be developed by following the research as much as possible, by making adjustments to meet the needs and resources of the local community.

- Benefits of maintaining a continual study of PEP include development of more robust and effective strategies and interventions and the continual professional development of staff and community volunteers who use these resources and approaches.

- Because it can take years to gain evidence behind a program, some evidence-based programs may contain graphics and a presentation style that does not necessarily fit with modern communication styles. The programs may be more instructive as opposed to interactive, and may not address a social media campaign.
Sample community approaches using PEP

Background

For many years, oral health professionals in both clinical and community settings have strived to make a positive impact in the oral health of their communities. The importance and impact of oral health came to the public forefront in the year 2000 due to a report composed by the Surgeon General, Dr. David Satcher, entitled “Oral Health in America.” Dr. Satcher issued a call to action to policy makers and community leaders by highlighting alarming data regarding the oral health of citizens and its impact on the economy and overall health of the populace. At the same time, the US Department of Health and Human Services published Healthy People 2010, a comprehensive overview of public health priorities for national action. Healthy People 2010 was the first occasion oral health had been integrated into a national public health call to action published by a federal agency.

As a result, new collaborations between public and private organizations and individuals were forged in order to make positive community impact on oral health. These collaborations fostered the development of many new public health programs aimed at improving oral health. In an effort to unify these programs, the American Dental Association published “State Innovations to Improve Dental Access for Low-Income Children: A Compendium” (2003) that called for collaborations to strategically work together to maximize their effectiveness and provide for focus on specific populations, such as low-income children. Subsequently, several national organizations began the review of these public health programs and collaborations in order to disseminate information on effective and innovative practices. Their findings continue to be shared through publication, virtual databases with searchable listings of practices across the country, and educational settings. The organizations listed in this document are leaders in providing comprehensive reviews of community oral health programs.

Throughout this development, clinical and community providers alike have acknowledged that oral health is a broad public health challenge that requires a diverse group of passionate stakeholders to be involved. Maximum positive impact can be achieved through the involvement of many different community components.

The significant relationship between oral health and physical health highlights the importance of collaboration to make a lasting change.

“Each passing year, science uncovers more evidence of the critical importance of oral health to overall health…dentists alone cannot bring about the profound change needed to correct the gross disparities in access to oral health care.”

Sample PEP Community Approaches from Selected ASTDD Best Practice Reports

<table>
<thead>
<tr>
<th>Perinatal Oral Health</th>
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<tbody>
<tr>
<td>During the perinatal period, women experience complex physiological changes that can adversely affect their oral health. Pregnancy is an opportune time for oral health interventions and promotion. The ASTDD Best Practices Committee evaluation found multiple authoritative sources supporting this practice, most recently working together to increase this message across the medical and dental communities. Link: Perinatal Oral Health</td>
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<tr>
<th>Prevention and Control of Early Childhood Tooth Decay</th>
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<tr>
<td>The prevention and control of early childhood tooth decay is important for the lifelong health of children. Strategies to prevent and control early childhood tooth decay should address the dental disease, systems of care that support children during their early developmental years, and public health practices. The ASTDD Best Practices Committee evaluation found multiple authoritative sources supporting this practice and a strong causal link to improving the oral health and total well-being of priority populations. Link: Prevention and Control of Early Childhood Tooth Decay</td>
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<tr>
<th>School Based Dental Sealant Programs</th>
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<tr>
<td>Dental sealants are clinically effective at preventing tooth decay. School-based dental sealant programs provide access to sealants for vulnerable populations less likely to receive private dental care. The ASTDD Best Practices Committee evaluation found a large body of scientific literature supporting its effectiveness, multiple authoritative sources supporting the practice, and a strong causal link to improving the oral health and total well-being of priority populations. Link: School-based Dental Sealant Programs</td>
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<tr>
<th>State Oral Health Coalitions and Collaborative Partnerships</th>
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<tr>
<td>A state oral health coalition or other forms of collaborative partnerships can provide guidance and recommend directions for a state oral health program. The ASTDD Best Practices Committee evaluation found multiple authoritative sources supporting this practice and a strong causal link to improving the oral health and total well-being of priority populations. Link: State Oral Health Coalitions and Collaborative Partnerships</td>
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<th>Use of Fluoride: Community Water Fluoridation</th>
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<tr>
<td>Community water fluoridation is the use of fluoride in community drinking water to help prevent tooth decay. The use of fluoride has been demonstrated to significantly decrease dental caries and is a cost-effective intervention. The ASTDD Best Practices Committee evaluation found a large body of scientific literature supporting its effectiveness, multiple authoritative sources supporting the practice, and a strong causal link to improving the oral health and total well-being of priority populations. Link: Use of Fluoride: Community Water Fluoridation</td>
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Key organizations – Provide prominent, fundamental research and information on oral health prevention

**American Academy of Pediatrics**

The American Academy of Pediatrics (AAP) is an advocacy and research organization whose goal is the attainment of optimal physical, mental, and social health and well-being for all infants, children, adolescents, and young adults. Link: American Academy of Pediatrics

**American Academy of Pediatric Dentistry**

The American Academy of Pediatric Dentistry (AAPD) develops policies and guidelines, and advocates for programs that promote optimal oral health and health care for infants, children and adolescents. AAPD provides education and clinical guidelines for professionals. Link: American Academy of Pediatric Dentistry

**American Dental Association**

The American Dental Association (ADA) is a national dental society who serves as the leading source of oral health related information for dentists and patients. ADA provides education to professionals and consumers, conducts research, and advocates on behalf of oral health causes. ADA houses the Center for Evidence-Based Dentistry which provides a systematic review database, clinical recommendations, and evidence-based resources for professionals. Link: American Dental Association

**Association of Maternal and Child Health Programs**

The Association of Maternal and Child Health Programs (AMCHP) is a national resource, partner and advocate for state public health leaders and others working to improve the health of women, children, youth, and families, including those with special health care needs. AMCHP hosts a Best Practices Review Panel that provides systematic review of interventions and includes their findings in their Innovation Station database. Link: Association of Maternal and Child Oral Health Programs

**Association of State and Territorial Dental Directors**

The Association of State and Territorial Dental Directors (ASTDD) is a national non-profit organization representing the directors and staff of state public health agency programs for oral health. The ASTDD provides leadership to promote a governmental oral health presence in each state and territory, to formulate and promote sound oral health policy, to prevention and control of disease. ASTDD houses the Best Practices Project, a resource providing information and systematic reviews on best practices for state, territorial and community oral health programs. Link: Association of State and Territorial Dental Directors
Centers for Disease Control and Prevention

The Centers for Disease Control and Prevention (CDC), a component of the US Department of Health and Human Services, works to provide the expertise, information, and tools that people and communities need to protect their health through health promotion, prevention of disease, injury, and disability, and preparedness for new health threats. Link: Centers for Disease Control

Healthy People 2020

Healthy People 2020 provides science-based, 10-year national objectives for improving the health of all Americans. For 3 decades, Healthy People has established benchmarks and monitored progress over time in order to encourage collaborations across communities and sectors, empower individuals toward making informed health decisions, and measure the impact of prevention activities. Link: Healthy People

National Institute of Dental and Craniofacial Research

The National Institute of Dental and Craniofacial Research (NIDCR), a sector of the National Institutes of Health, works to improve oral, dental and craniofacial health through research, research training, and the dissemination of health information. NIDCR supports efforts of teachers, dental educators, and public health professionals to educate others about the science of oral health. Link: National Institute of Dental and Craniofacial Research

National Maternal and Child Oral Health Resource Center

The National Maternal and Child Oral Health Resource Center is under the umbrella of the US Department of Health and Human Services. The purpose of the (OHRC) is to respond to the needs of states and communities in addressing current and emerging public oral health issues. Link: National Maternal and Child Oral Health Resource Center

US Department of Health and Human Services

The Department of Health and Human Services (HHS) is the government’s principal agency for protecting the health of all Americans and providing essential human services. HHS works closely with state and local governments, and many HHS-funded services are provided at the local level by state or county agencies, or through private sector grantees. Link: Department of Health and Human Services
Additional Resources: Local, State, National Organizations and Relevant Reports

A sample of additional resources that highlight community-based, evidence-informed practices:

Local (led by Cook Children’s)

1) Children’s Oral Health Coalition led by Cook Children’s (COHC)
   The Children’s Oral Health Coalition (COHC) seeks to improve the oral health of children in Tarrant County with a key focus on underserved children. The coalition is a diverse, county-wide collaboration made up of over 30 organizations and meets bi-monthly. The COHC follows a strategic plan to guide their work in the community. Link: Children’s Oral Health Coalition

State

2) Oral Health in Texas 2008 Report
   The Texas Department of State Health Services released Oral Health in Texas 2008, which represents the most comprehensive source of information regarding the oral health status of Texans. This document presents a “snapshot” of oral health and the distribution of oral health problems among Texas residents. Link: Oral Health in Texas 2008 Report

3) Texas Dental Association
   The Texas Dental Association (TDA) is part of a tri-partite affiliation with the American Dental Association as its national representative and its component societies at the local level. TDA’s 20 councils and committees serve as policy recommending agencies. Each of these is assigned to study issues relating to its special area of interest and to make recommendations on these matters to the Board of Directors and the House of Delegates. Link: Texas Dental Association

4) Texas Oral Health Coalition
   The Texas Oral Health Coalition (TxOHC) is a nonpartisan, nonprofit state level oral health coalition that was formed in November, 2004. Members work collaboratively as an active organization that advocates for improved access to oral health services in Texas. The purpose of the coalition is to promote optimal oral health throughout the lifespan for all Texans through a statewide partnership. Link: Texas Oral Health Coalition
5) **American Dental Hygienists’ Association**

The American Dental Hygienists’ Association (ADHA) is a national organization that represents the interests of dental hygienists across the nation. The ADHA works to improve public health by advancing the art and science of dental hygiene by ensuring access to quality oral health care; increasing awareness of the cost-effective benefits of prevention; promoting the highest standards of dental hygiene education, licensure, practice and research; and representing and promoting the interests of dental hygienists. Link: [American Dental Hygienists’ Association](https://www.adha.org/)

6) **Children’s Dental Health Project**

The Children's Dental Health Project (CDHP) works with policymakers and oral health advocates to strengthen prevention and help identify the cost savings and other benefits that result from tested prevention strategies. CDHP monitors the impact of public and private dental coverage and offer recommendations for strengthening families' options while minimizing out-of-pocket costs, as well as increasing oral health awareness and providing resources and tools for oral health advocates. Link: [Children's Dental Health Project](https://www.childrensdentalhealth.org/)

7) **DentaQuest Foundation: Oral Health 2020**

Since launching a national systems-change strategy in 2010, DentaQuest Foundation investments have helped to build a large, interconnected network of national, state, and community-based change agents dedicated to improving the oral health of all. Today, this network is transforming the national dialogue and re-shaping the landscape of action on behalf of oral health. Oral Health 2020 is a multi-year effort to strengthen and unify the network, build upon current initiative strategies, and expand impact. The time is right to bring about lasting systems change through the power of collective action. DentaQuest Foundation is engaging grantees and partners around a set of bold, shared goals with specific targets to be achieved by 2020. Link: [DentaQuest Foundation: Oral Health 2020](https://www.dentaquest.com/)


A National Consensus statement was developed to help health professionals, program administrators and staff, policy makers, advocates and other stake holders respond to the needs for improvements in the provision of oral health services to women during pregnancy. This consensus statement resulted from the Oral Health Care During Pregnancy Consensus Development Expert Workgroup Meeting convened by the Health Resources and Services Administration’s Maternal and Child Health Bureau in Collaboration with the American College of Obstetricians and Gynecologists and the American Dental Association and coordinated by the National Maternal and Child Oral Health Resource Center in October 2011. Link: [A National Consensus Statement](https://www.nmchoh.org/)
9) National Network for Oral Health Access

The National Network for Oral Health Access (NNOHA) envisions a future in which individuals and communities are aware of the importance of oral health to overall health, engage in recommended oral health practices, and receive affordable, high quality oral health services. The NNOHA seeks to improve the oral health of underserved populations and contribute to overall health leadership, advocacy, and support to oral health providers in safety net systems. Link: National Network for Oral Health Access

10) Oral Health America

After the release, in 2000, of the first ever U.S. Surgeon General’s report on oral health in America, Oral Health America (OHA) redoubled its efforts to raise public awareness of oral health’s importance to overall health. Over the last fifteen years, OHA has launched and supported numerous programs focused on improving the oral health of Americans, especially the most vulnerable members of the population, and on increasing awareness of oral health’s significance to overall health. Link: Oral Health America

11) Robert Wood Johnson Foundation – Workforce Innovations in Oral Health: Addressing Barriers to Preventive Dental Care

This report focuses on nine oral health innovations that integrate service delivery and workforce models in order to reduce or eliminate socioeconomic, geographic, and cultural barriers to care. Link: Addressing Barriers to Preventive Dental Care

12) Robert Wood Johnson Foundation – Workforce Innovations in Oral Health: Dental Care for Infants and Young Children

This report focuses on seven oral health programs that provide preventive oral health care to young children (infants, toddlers, and children up to 5 years old) in Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), Early Head Start (EHS), and primary care settings. Link: Dental Care for Infants and Young Children


This report focuses on nine oral health innovations seeking to increase access to preventive oral health care in non-dental settings. The nine innovations described here integrate service delivery and workforce models in order to reduce or eliminate socioeconomic, geographic, and cultural barriers to care. Link: Expanding Oral Health Care in Non-Dental Settings
14) **The Campaign for Dental Health**

The Campaign for Dental Health (CDH) was created to ensure every American has access to the most affordable and most effective way to protect teeth—water fluoridation. The CDH is a network of local children’s and oral health advocates, health professionals, and scientists who are working together to preserve our nation’s gains in oral health. We believe, quite simply, that life is better with teeth. Link: [The Campaign for Dental Health](#)

15) **The Community Toolbox**

The mission of the Community Toolbox is to promote community health and development by connecting people, ideas and resources. This is a global resource for free information on essential skills for building healthy communities. It offers more than 7,000 pages of practical guidance in creating change and improvement. Link: [The Community Toolbox](#)
Prepared by Community Health Outreach
Center for Children’s Health

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Provided for the benefit of the children in the community by:

Cook Children’s

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