

Continuing Education Information for AIDPH 2022 Colloquium: Transforming Veteran Oral Health

Session Time	10am-11am CT
Session Title	Oral Health in America: Advances and Challenges– a look at Veteran oral health care
Number of CEUs	1.0
Speaker(s)	Rena D'Souza and Renée Joskow
Speaker Biosketch(es)	<p>Dr. Rena D'Souza is the Director of the National Institute of Dental and Craniofacial Research, National Institutes of Health. She is deeply committed to the organization's mission — advance fundamental knowledge about dental, oral, and craniofacial health and disease and translate these findings into prevention, early detection, and treatment strategies that improve overall health for all individuals and communities across the lifespan. As the director of NIDCR, Dr. D'Souza oversees the institute's annual budget of approximately \$485 million, supporting basic, translational, and clinical research in areas of oral cancer, orofacial pain, tooth decay, periodontal disease, salivary gland dysfunction, and the craniofacial development and the oral complications of systemic diseases.</p> <p>Dr. Renée Joskow recently joined NIH's National Institute of Dental and Craniofacial Research as Senior Advisor to the Director and Director, Dental Public Health & Research Fellowship Program after a decade serving as HRSA's Chief Dental Officer. Dr. Joskow also serves as NIDCR's Acting Director of the Office of Science Policy and Analysis. She is a dentist and a medical epidemiologist, holding both a Doctor of Dental Surgery degree and Master of Public Health degrees from Columbia University. Dr. Joskow completed a hospital-based General Practice Residency before joining the faculty of Columbia University and maintained a private practice in New York City prior to embarking on an extensive career with the federal government. She served as an Epidemic Intelligence Service Officer at the CDC, as Senior Medical Epidemiologist for the Department of Homeland, and as Medical Readiness Manager and Director of Training and Education in the Office of the Surgeon General</p>
Abstract	<p>The NIDCR released Oral Health in America: Advances and Challenges report in December 2021, a culmination of two years of research and writing by over 400 contributors that explores the nation's oral health over the last 20 years. The report outlines interprofessional care delivery models, barriers to accessing care, and opportunities to advance innovative oral health for veterans. During this session, Dr. Rena D'Souza and Dr. Renée Joskow will present an overview of the report, highlighting the oral health landscape for veterans and their dental care. An overview of NIDCR's 2021-2026 strategic plan will also be presented. Attendees are encouraged to consider research paths toward improving the oral health and wellbeing of veterans through workforce, policy, infrastructure, and data collection.</p>
Learning Objectives	<ol style="list-style-type: none"> 1. Define the landscape of veteran oral health in the US over the past 20 years. 2. Identify social determinants of health that impact Veterans' oral health 3. Identify pathways to improve access to and quality of oral health care for veterans.

Session Time	11:30 am-12:15pm CT
Session Title	Improving Data Collection and Centralizing Reporting for Veteran Dental Care
Number of CEUs	.45
Speaker(s)	Rebekah Fiehn
Speaker Biosketch(es)	Rebekah Fiehn, MSPA, is the Manager of Care Coordination and Interoperability for the CareQuest Institute for Oral Health. Her work is focused on the design and development of technology and data protocols that support value-based care and interprofessional care initiatives. Rebekah has a background in quality improvement, community health, policy, and safety net dental clinics.
Abstract	With most veterans accessing dental care outside of a centralized VA structure, advancing health information technology and creating data-driven solutions will constitute significant steps toward improving oral health care for veterans. Traditional communications between primary care and dental providers have usually occurred through paper and email attachments, generating inefficiencies and a fragmented referral process. Dentistry and oral health providers have new opportunities to participate in health information exchange which can support interprofessional practice, population health management, and value-based care for veterans. Hear about the latest developments, projects, and initiatives underway to help strengthen and build a coordinated oral health infrastructure.
Learning Objectives	<ol style="list-style-type: none"> 1. Recognize the value of care coordination and the role of interoperability in oral health care delivery 2. Identify recent developments in oral health information exchange 3. Explore opportunities for participating in HIT-supported care coordination

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Session Time	11:30 am-12:15pm CT
Session Title	Exploring Value-Based Opportunities in Oral Health Care for Veterans
Number of CEUs	.45
Speaker(s)	Roshni Ghosh
Speaker Biosketch(es)	Roshni Ghosh, MD, MPH currently serves as the Executive Director for the Center for Care and Payment Innovation in the Office of Healthcare Innovation and Learning in the VHA Office of Discovery, Education and Affiliate Networks where she oversees the development and implementation of new and innovative care delivery and payment models. Dr. Ghosh is a graduate of The Rutgers University School of Medicine and received her Masters in Public Health from Columbia University's Mailman School of Public Health. Dr. Ghosh has also served as a Vice President and Chief Medical Information Officer at multiple healthcare consultancies, and currently sits on the Board of Directors for a non-profit healthcare organization and is an adjunct professor at George Washington University.
Abstract	<p>The Department of Veterans Affairs (VA) Center for Care and Payment Innovation (CCPI) is implementing value-based pilot initiatives focused on improving quality of care, health outcomes, and care models within VA to serve Veterans. As one of these pilots, CCPI launched VETSmile in July of 2021 to connect Veterans to low-cost dental care.</p> <p>Acknowledging the impact poor oral health has on whole health, VETSmile increases access to oral health care in the hopes of deterring comorbidities, thereby improving quality of life for Veterans and saving money for VA by preventing the need for more costly care. The program has served over 800 Veterans since its inception and is rapidly expanding into new service areas. VETSmile partners with nearly a third of US dental schools and is engaging FQHCs in rural areas. During this presentation, Dr. Roshni Ghosh will discuss the vulnerable population of Veterans unable to receive dental care at VA and provide a snapshot of how CCPI is transforming the approach to improve health equity and decrease the costs of neglected comorbidities and oral health ED visits.</p>
Learning Objectives	<ol style="list-style-type: none"> 1. Describe Department of Veterans Affairs (VA) Center for Care and Payment Innovation (CCPI) initiatives, including VETSmile, and how they are being designed to provide value-based care. 2. Describe the current challenges surrounding Veterans' limited access to oral health care and how VETSmile addresses this through partnering with dental schools and federally qualified health centers (FQHC) to offer low-cost dental care. 3. Identify value-based benefits of preventative oral health care offered through VETSmile, including improved quality of life and decreased healthcare costs for VA and Veterans

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Session Time	12:15pm-1pm CT
Session Title	Advancing Medical-Dental Integration for Veterans
Number of CEUs	.45
Speaker(s)	Tim Ricks, Sarah Holland, Hugh Silk, Michael Jacques
Speaker Biosketch(es)	<p>Rear Admiral Timothy L. Ricks, DMD, MPH, FICD currently serves as the 20th Chief Dental Officer of the U.S. Public Health Service as well as Assistant Surgeon General, a four-year term appointment he has held since September 2018. He serves as the Surgeon General's spokesperson on oral health and interacts with chief dental officers from other countries, with military chief dental officers, with leaders in organized dentistry and public health, with state oral health programs, and much more. Rear Adm. Ricks has served in the U.S. Public Health Service for over 22 years as a clinician (including being named Indian Health Service national clinical dentist of the year an unprecedented four times) and an administrator. Prior to this service, he was an associate dentist, independent contractor, and sole proprietor, and he also served as a military police officer in the Army National Guard.</p> <p>Sarah Holland is CEO of Virginia Health Catalyst, an alliance of individuals and organizations improving the health care system in Virginia to ensure all individuals have access to affordable, comprehensive health care inclusive of oral health. Sarah leads this charge by building strategic partnerships with health experts and thought leaders to address societal, environmental, clinical, and systemic needs to advance public health in the Commonwealth. In her nearly twenty years of effort to improve public health systems, she has gained expertise in state and federal policy, clinical care infrastructure, and how systems are affected by systemic racism and inequities. Notably, Sarah led a successful advocacy campaign to add an adult dental benefit to Virginia's Medicaid program – paving the way for nearly a million adults to access covered oral health services. She negotiated cost savings for the dental safety net valued at over half a million dollars. - See vahealthcatalyst.org for more.</p> <p>Dr. Michael Jacques grew up in Houston, Texas. He attended the University of Texas at Austin for undergraduate studies and then the University of Texas at School of Dentistry in Houston for dental school. While attending dental school, Dr. Jacques was awarded the United States Army Health Professions Scholarship. He proudly served in the Army for four years as a general dentist, which included a deployment to Baghdad, Iraq in 2005. In 2013, Dr. Jacques joined the US Navy Reserves as a dental officer and continues to serve with the reserves. He joined DentaQuest on February 17th, 2012, when the company first started in Texas. As the manager of clinical management, he oversees dental consultant staffing and operational processes to ensure accuracy and efficiency is met for client needs. Currently this includes 48 dental consultants.</p> <p>Dr. Hugh Silk serves as the Co-Principal Investigator (and Site PI). Dr. Silk is a family physician in the Department of Family Medicine and Community Health at the University of Massachusetts Medical School. His longstanding advocacy for integrating oral health into family medicine practice led to his work on From The First Tooth, responsible for the promotion of oral health into medical education curriculum and primary care practice. He serves as a member of the Steering Committee for Smiles for Life, where he has assisted in the creation and implementation of oral</p>

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	health curriculum for inter-professional healthcare providers. He also sits on numerous state and national oral health advocacy committees including the American Dental Association's Public Health Advisory Committee for the Council on Access, Prevention and Interprofessional Relations. He co-chairs the Massachusetts Medical Society's Committee on Oral Health (which he also founded).
Abstract	The oral-systemic connection influences chronic disease management and requires a holistic model of health to improve total health. Integrated and interprofessional care delivery is important in facilitating whole-person health with an interdisciplinary care team of oral health and medical professionals working in concert on both care delivery and community assets. Integrated initiatives for veterans with the VA and the Military Health System have reduced disparities and improved health outcomes, creating opportunities for oral health to extend this existing framework. To this end, advancing medical-dental integration places the veteran at the center of a comprehensive care team that collaborates seamlessly to address the veteran's medical, dental, and behavioral health needs.
Learning Objectives	<ol style="list-style-type: none">1. Assess the current landscape for advancing a medical-dental integration model of care for veteran oral health.2. Determine pathways to expand chronic disease management within a medical-dental integration model.3. Evaluate opportunities both in the present and future to advance a multi-directional mechanism for advancing medical-dental integration.

Session Time	12:15pm-1pm CT
Session Title	Expanding the Role of Rural Health Clinics in Veteran Oral Health Care Delivery
Number of CEUs	.45
Speaker(s)	Alan Morgan
Speaker Biosketch(es)	<p>Recognized as among the top 100 most influential people in healthcare by Modern Healthcare Magazine, Alan Morgan serves as Chief Executive Officer for the National Rural Health Association. He has more than 31 years experience in health policy at the state and federal level, and is one of the nation's leading experts on rural health policy.</p> <p>Mr. Morgan served as a contributing author for the publications, "Policy & Politics in Nursing and Health Care," "The Handbook of Rural Aging" and for the publication, "Rural Populations and Health." In addition, his health policy articles have been published in: The American Journal of Clinical Medicine, The Journal of Rural Health, The Journal of Cardiovascular Management, The Journal of Pacing and Clinical Electrophysiology, Cardiac Electrophysiology Review, and in Laboratory Medicine.</p> <p>Mr. Morgan served as staff for former US Congressman Dick Nichols and former Kansas Governor Mike Hayden.</p>
Abstract	<p>As part of the 2018 MISSION Act, the VA expanded access to care for veterans through the Community Care Network (CCN). The CCN comprises six regional networks that serve as the contract vehicle for the VA to finance care for veterans from community providers. The expansion is particularly helpful given the innovative model of care integration that FQHCs are uniquely positioned to provide. The CCN can not only expand access points for veterans as the network broadens but can also explore value-based care integration that prioritizes the health outcomes of veterans. Similarly, extending the reach of rural health centers is critical to meeting the needs of rural veterans. The VA Office of Rural Health has implemented several initiatives to not only support the needs of veterans living in rural areas but also to train providers to support rural health. These rural initiatives often include an integrated and whole-person approach to care that includes nontraditional stakeholders like clergy, social workers, and disability advocates in the health care process. Asset-based approaches to care in rural areas with both FQHCs and rural health clinics should be supported and expanded to support all facets of health, including oral health.</p>
Learning Objectives	<ol style="list-style-type: none"> 1. Assess the current oral health landscape for rural veterans. 2. Understand the role of Rural Health Clinics and other community models in supporting access to oral health care for veterans. 3. Evaluate opportunities to expand and leverage the existing health care infrastructure to meet the oral health needs of rural veterans.

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February 16th: DAY TWO CEU INFORMATION

Session Time	10am-11am CT
Session Title	Plenary Panel: Fostering Care Team Innovation for Veteran Oral Health Care
Number of CEUs	1.0
Speaker(s)	Sean Boynes, Scott Trapp, Don Weaver, Fred Leviton
Speaker Biosketch(es)	<p>Dr. Scott Trapp is the Deputy to the Assistant Under Secretary for Health for Dentistry for the Veterans Health Administration Office of Dentistry. He has served as the Chief Dental Officer at a number of VA and Indian Health Service facilities during his government career. He has held national leadership roles with the American Dental Association (ADA), where he has served as the Chairman, Standards Committee on Dental Informatics and serves as the VA representative to the American Dental Association's Standards Committee on Dental Products. He has authored several professional papers, is a member of numerous professional organizations including the American and International Colleges of Dentistry. Dr. Trapp has a Bachelor of Science in Chemistry and Doctor of Dental Surgery (D.D.S.) from the University of Iowa with Master's degrees in Public Health (MPH) from the University of South Florida and Business Administration (MBA) from Creighton University.</p> <p>Mr. Leviton is the President and CEO of Dental Lifeline Network (DLN) since 2011, having previously served as Vice President and Chief Operating Officer from 1976 to 2011. His primary responsibility is setting the proper strategic direction for the organization and creating an environment and culture to further the organization's efforts to improve the oral health of people with disabilities or who are elderly or medically fragile. Mr. Leviton has a Master's degree in Health Administration from the University of Colorado and attended the University of Illinois for his undergraduate studies. He has served on several nonprofit boards, most recently as President of the Foundation of a senior housing organization in Denver, where DLN is headquartered.</p> <p>Dr. Sean G. Boynes is a Dentist Anesthesiologist who received his D.M.D. from the University of Pittsburgh and completed a three-year residency in anesthesiology from the University of Pittsburgh Medical Center. He currently serves as President of Dental Medicine Consulting where he supports national programs and initiatives focused on the integration and coordination of person-centered care, creating and implementing value-based strategies, and utilizing data-driven insights to empower the patient and individual to own their oral health. Dr. Boynes lives in Pittsburgh with his partner, Vicki, and sons, Smith & Maverick, enjoying hiking and playing guitar whenever possible.</p> <p>Don has a lifelong commitment to improving the health of underserved communities and vulnerable populations through community-responsive, culturally competent care delivered by interprofessional teams. He currently serves as Senior Advisor, Clinical Workforce for the National Association of Community Health Centers. Prior to joining NACHC, Dr. Weaver had a distinguished career as a Commissioned Officer in the United States Public Health Service (USPHS), retiring with the rank of Assistant Surgeon General. Don began his career in the USPHS as a National Health Service Corps (NHSC) volunteer physician in Tooele, Utah. During his career, he served in a variety of regional and national leadership positions with both health professions and service delivery programs. A 1973 graduate of Harvard Medical School, Dr. Weaver</p>

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	completed a two-year pediatric residency at Boston Children's Hospital Medical Center. He is a member of the American Academy of Family Physicians.
Abstract	Increasing access to care and improving both oral health and overall health require an oral health workforce working in concert. Increasing access to care and stimulating oral health innovation to include rural and underserved areas will be more successful if diverse intra- and interprofessional care teams are deployed. Regulatory and scope of practice requirements that govern all health care team members should be evaluated to ensure that access to high-quality care is a possibility for all veterans regardless of geography, level of need, or disability. Alongside traditional clinical care teams, new oral health team members such as physical therapists, community health workers, behavioral health specialists, and health informaticians can innovate care delivery for veterans. The VA has promulgated a keen awareness in innovating health workforce solutions, encouraging opportunities for oral health to be considered and elevated within an existing whole-person framework. Congress will need to ensure that VA oral health care teams have the resources and staffing to drive integrated approaches to care and achieve whole-body well-being. A focus on a diverse, efficient workforce will streamline the delivery system to meet veterans where they are, while enriching the communities they call home.
Learning Objectives	<ol style="list-style-type: none">1. Assess how the current oral health workforce is supporting the oral health care of veterans.2. Evaluate opportunities for expanding and innovating care team models in advancing equitable oral health for veterans.3. Identify avenues for collaboration among public, private, and community oral health providers.

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Session Time	11:30am - 12:15pm CT
Session Title	Prioritizing trauma-informed approaches to clinical care for veterans
Number of CEUs	.45
Speaker(s)	Aniela Brown, Aimee Rachel
Speaker Biosketch(es)	<p>Aniela Z.G. Brown brings over 14 years of experience building relationships, developing communities, planning events, and training staff. Since first learning about the ACEs study as a graduate student, she has been a passionate advocate on behalf of trauma-informed practice and open dialogue about healing and resilience. While at TACHC, Aniela has worked alongside her colleagues to create and facilitate trauma-informed training sessions aimed at supporting behavioral health staff with clinical skill development and self-care promotion. Aniela also brings a strong commitment to national service, and has served in both AmeriCorps (Jumpstart) and the U.S. Peace Corps (Zambia 2011-13). She is also a proud U.S. Navy spouse and the sister of a U.S. Marine.</p> <p>Aimee Rachel joined TACHC as the Trauma Informed Care Project Coordinator, she is responsible for coordination of the TACHC trauma informed care program, curriculum development, and providing training and consultation to health centers on the implementation of trauma informed care. Aimee earned her Bachelor of Social Work at Texas Woman's University and obtained her Master's in Social Work from the University of Buffalo. While in Buffalo, Aimee worked as a project manager at the Institute on Trauma and Trauma Informed Care. Aimee was responsible for trauma informed care training and consultation to human service organizations, health care organizations, and refugee organizations. Aimee also led trainings in trauma informed care to local, state, and federal first responders as well as court personnel. Aimee is currently a doctoral student at Baylor University where she is working on a doctoral of education with an emphasis in organizational change.</p>
Abstract	<p>For the nearly 19 million veterans and approximately 2 million active-duty members, a positive connection to peers and a sense of duty to their country is typically central to military service. Service personnel may have experienced traumatic events during and outside of deployment. While research indicates that both Adverse Childhood Experiences (ACEs) and trauma that occurs in adulthood are unfortunately extremely common, the impact on individuals, families and communities can be addressed to mitigate potential cumulative effects on health outcomes. As one of the "Strategic Recommendations for Improving Quality of Care" outlined by CareQuest and the AIDPH, prioritizing trauma-informed approaches in oral health care can ultimately support veterans on their path to wellness. True TIC transformation can also improve clinical workflows, patient interactions, and staff engagement. TIC approaches in the health care setting are aligned with the full integration of patient-centered, team-based, and can lead to value-based care. This presentation and discussion will provide participants with foundational knowledge about trauma and the potential manifestations in clinical care settings. Practical tips for oral health professionals to consider, with use of universal trauma precautions, will be provided.</p>
Learning Objectives	<ol style="list-style-type: none"> 1. Understand trauma and its impact on individuals and communities, particularly veterans. 2. Recall key components of trauma-informed care, such as language recommendations and key SAMHSA pillars. 3. Reflect on the ways TIC can be applied to current dental services for veterans. 4. Collaborate with colleagues and patients to prioritize trauma-informed approaches in future dental services.

Session Time	11:30am - 12:15pm CT
Session Title	Expanding Veteran Oral Health Care Delivery Beyond an Urgent Needs Model
Number of CEUs	.45
Speaker(s)	Theresa Cheng, Jessica Elwell
Speaker Biosketch(es)	<p>Dr. Theresa Cheng is a periodontist who received her D.D.S. from Kaohsiung Medical University in Taiwan, and completed her Periodontics residency at the University of Washington. She owned her private practice for over 20 years and is presently a part-time Clinical Assistant Professor at the University of Washington School of Dentistry, Department of Periodontics. Dr. Cheng is the founder of the nonprofit, Everyone for Veterans which honors combat veterans by connecting them to dentists in their community for no cost dental care. She is the recipient of the 2021 ADA Humanitarian award. Dr. Cheng and her husband, Don have 3 sons and reside in Issaquah, WA.</p> <p>Jessica Elwell is an experienced nonprofit executive director with a demonstrated history working in human services. Her focus is in fundraising, donor stewardship, volunteer management, public speaking, conflict resolution, and event management. Jessica has been in the nonprofit sector as a volunteer and professional for over a decade. She is passionate about this industry and the unique opportunity to effect change and transform the communities that we serve. Jessica is originally from Eugene, OR, and currently resides in southeast Washington State with her husband, Evan, and their teenage son.</p>
Abstract	Many veterans who are low-income, unemployed, and struggling with chronic disease or unmet health needs often experience inadequate access to dental care. Episodic and urgent dental care may not be sufficient in alleviating poor oral health to establish overall health outcomes. Recent American Dental Association Humanitarian Award Winner Theresa Cheng will describe her approach to filling gaps for veteran dental care as part of her work with Everyone for Veterans. Speakers will share strategies and opportunities for dental clinicians to meet the oral health care needs of veterans beyond an urgent needs model by generating a whole-person approach.
Learning Objectives	<ol style="list-style-type: none"> 1. Describe current stop-gap measures surrounding access to dental care for veterans 2. Understand the unique clinical considerations for providing dental care to veterans. 3. Evaluate opportunities to move beyond an urgent needs model and embrace a whole-person health model for veteran dental care.

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Session Time	12:15pm-1pm CT
Session Title	Veteran Voices: Dental Care from a Patient Perspective
Number of CEUs	.45
Speaker(s)	Annaliese Cothron, Chelsea Chokas, Chelsey Simoni, Tammy Barlet
Speaker Biosketch(es)	<p>Chelsea Chokas is a United States Navy Veteran and project coordinator with CareQuest Institute for Oral Health. With her experience and knowledge of the military and VA health systems, she co-leads the Veteran Oral Health Initiative with AIDPH. Chelsea earned a Bachelor's in Healthcare Administration and a Master of Science in Management from the University of North Florida, Jacksonville.</p> <p>Tammy Barlet is Deputy Director of the National Legislative Service for the Veterans of Foreign Wars of the United States. It is her responsibility to analyze and consult with Congress on issues related to women veterans, and health care. She served eight years in the United States Coast Guard as an Operation Specialist Third Class Petty Officer. In 1998, she patrolled the Persian Gulf on the USCGC Chase (WHEC-718) for Military Interdiction Operations (MIO). During this patrol, USCGC Chase diverted four vessels in violation of United Nations Sanctions against Iraq, interdicted 1,527,740 gallons of fuel oil, and conducted eighty-six gunnery exercises. After returning home to Pennsylvania, Tammy was certified as a sterile compounding pharmacy technician and worked in the Lehigh Valley area for ten years. In 2017, Tammy received a Bachelor of Science in Public Health from Temple University. She completed the Master of Public Health program at George Washington University.</p> <p>Dr. Annaliese Cothron is the Co-Founder and Executive Director of the American Institute of Dental Public Health. She received her Doctor of Health Sciences (DHSc) from A.T. Still University in Leadership and Organizational Behavior and Master of Science from Mississippi State University, specializing in Experimental Psychology with a theme in Applied Statistics. Dr. Cothron is credentialed as Certified in Public Health and has a certificate in nonprofit management and fundraising from Our Lady of the Lake University. Dr. Cothron is an active member and leader within several national professional organizations, including the Dental Informatics Section of the American Dental Education Association and the American Public Health Association. She serves as a board member for Equality Texas, Texas Impact, and the Texas Oral Health Coalition while supporting the Oral Health Progress and Equity Network as a ROCHT Lead and facilitating the LGBTQIA+ workgroup.</p> <p>Ms. Chelsey Simoni is a published clinical researcher, veteran advocate, and health educator. She possesses a Master's Degree in Science of Nursing and Public Health from Rhode Island College with a focus on global population wellness while conducting theoretical and systemic evidence-based research in post-9/11 veteran healthcare concerns. She is currently pursuing a Doctorate of Nursing Practice while maintaining her full-time clinical nursing endeavors. In her current capacity as a research and clinical nurse, she is leading research on monoclonal antibodies in COV-19 patients in the center for infectious diseases in Boston, MA.</p>
Abstract	Veterans cannot be healthy without good oral health. Veterans experience poorer oral health outcomes than nonveterans. These disparate health outcomes are exacerbated by a historically fragmented dental care system. Clear evidence underscores a need to

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	improve the US oral health infrastructure to support all patients, including veterans. Understanding how veterans perceive their own oral health and how they access oral health care will be critical to implementing systemic changes that improve oral health in this population. This panel of veterans will highlight patient voices to share how their lived experience has shaped their perception and access to dental care.
Learning Objectives	<ol style="list-style-type: none">1. Understand oral health care experiences from veteran patients.2. Evaluate the clinical, workforce, and infrastructure considerations for addressing the structural gaps in providing equitable dental care for veterans.3. Identify pathways to engaging in equitable solutions on the regional, local, state, and national levels.

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