This report represents America's ToothFairy: National Childrens Oral Health Foundation's responses to Charting Impact, a joint project of BBB Wise Giving Alliance, GuideStar USA Inc, and Independent Sector. Charting Impact uses five simple yet powerful questions to encourage strategic thinking and help organizations share concise information about their plans and progress toward impact.

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Mission:
To eliminate children's pain and suffering from preventable pediatric dental disease and improve quality of life for at-risk children. As Educator, Preventer and Protector, America's ToothFairy drives systems change by delivering proven programs and resources that expand access to care and education, improve oral health literacy, and promote overall wellness.
The content of this Charting Impact Report is the sole product and responsibility of America's ToothFairy: National Childrens Oral Health Foundation. This report does not in any way represent an endorsement from Independent Sector, BBB Wise Giving Alliance, or GuideStar, nor does it represent fulfillment of the BBB Wise Giving Alliance's Standards for Charity Accountability. For more information on Charting Impact, visit www.guidestar.org/chartingimpact.
1. What are we aiming to accomplish?

With a growing Affiliate Network of exemplary non-profit community programs, the Kids Club, professional and student service programs, and strong partnerships with national organizations including Boys & Girls Clubs of America, National Association of School Nurses and the US Hispanic Chamber of Commerce, America’s ToothFairy is building a powerful, united effort to achieve our goal of reaching 5 million children annually with vital oral health services.

2. What are our strategies for making this happen?

• Collaboratively develop and continually refine a range of learning experiences to foster lifelong positive behaviors leading to eradication of disease. • Attract, aggregate, and distribute resources, which expand access to quality services for underserved children and their caregivers. • Engage a broad range of community stakeholders, experts, and partner organizations, share best practices, and deliver programs to build a healthier nation.

3. What are our organization's capabilities for doing this?

Internationally recognized leaders, including several members of the Oral Health section of the American Academy of Pediatrics, serve on the Scientific Advisory Board, which reviews all educational materials and guides programming. The Board of Directors is comprised of highly respected, dedicated leaders of national organizations concerned with children’s oral health. Partnerships with organizations including Boys & Girls Clubs of America, National Association of School Nurses, US Hispanic Chamber of Commerce and Special Olympics International expand our ability to reach and serve children with economic, physical and intellectual challenges. Strong partnerships with renowned national and international professional organizations such as Pankey Institute, Dawson Academy, Alpha Omega International Dental Fraternity allow NCOHF to facilitate professional volunteer programs and increase access to care for underserved children. NCOHF is also working with state Oral Health Coalitions across the country. Developed with guidance from the Scientific Advisory Board, the ToothFairy 101® Community Education Kit is a comprehensive tool for improving oral health literacy through community outreach activities. The kit content covers nutrition, germ transmission and prevention, mouth safety, tobacco, and infant care, as well as basic preventive strategies. America’s ToothFairy Component Programs raise awareness and reach at-risk children and their families through a multitude of channels. This collection of programs has been designed to engage all community stakeholders including children, caregivers, students, educators, community organizations, allied health professionals, and dental professionals in a united effort to fight pediatric dental disease. The America’s ToothFairy Affiliate Network is a collaborative network of the finest university dental and dental hygiene programs, community clinics, school-based and mobile programs providing comprehensive oral health services in underserved communities.

4. How will we know if we're making progress?

Just as careful attention is paid to organizational financial responsibilities, the NCOHF Board of Directors Audit Committee conducts regular program audits. America’s ToothFairy requires careful documentation including comprehensive end-of-year reports from all Affiliate partners to ensure optimized utilization of resources. Professional volunteers and student groups are also required to submit verifiable reports on their activities and the number of children impacted. Showing impact, not just in numbers reached but in learning and engagement, is essential in showing positive behavioral change. Effectiveness and substantive impact is measured through data collected and evaluated by an online and tablet-based Oral Health Surveyor application developed specifically to measure efficacy of America’s ToothFairy-supported program delivery, allowing for real-time collection and aggregation of behavioral data. Data is extracted from the Surveyor and compiled to demonstrate aggregate changes in oral health literacy. Findings are made publicly available through our annual report. Participating health professionals, teen mentors and volunteers administer tests to measure the efficacy of the educational lessons on
behavior and knowledge both before and after their presentation, including a six-month follow up when possible. Oral health data, especially statistics regarding caries rates and hospital emergency room visits by children due to dental problems, is also regularly reviewed and evaluated to measure overall reduction in pediatric dental disease.

5. What have and haven't we accomplished so far?

In FY 2015, America's ToothFairy provided engaging educational materials, products and programs that impacted the lives of more than 2.2 million children and caregivers in the following ways: • 1,308,140 children/caregivers received oral health services through the America's/Canada's ToothFairy Affiliate Network • 133,539 children were reached with oral health education through the America's ToothFairy partnership with National Association of School Nurses • America's ToothFairy My Smile Matters programming reached a total of 595,494 children and teens with oral health education. This includes 369,410 children and teens reached through our partnership with the Boys & Girls Clubs of America; 206,770 students were reached through our partnership with HOSA: Future Health Professionals; and 19,314 patches were distributed to Scouts participating in the ToothFairy Patch Program • America's ToothFairy volunteer dental hygiene professionals and students provided oral health education for 76,233 children, teens, their caregivers and pregnant mothers • Student volunteers participating in America's ToothFairy collegiate programs reached 20,968 children and their caregivers with preventive services and/or oral health education • 15,937 received important oral health information, fun educational activities and Tips from the ToothFairy through the America's ToothFairy Kids Club Though we have made tremendous strides since 2006, pediatric dental disease, more commonly known as severe tooth decay, remains one of the most prevalent chronic, untreated illnesses among children in America. Lack of access to pediatric dental care creates a set of health disparities that impede wellness throughout adulthood. As a result, a significant burden is placed on local communities, exacerbating poverty, increasing long-term health consequences, decreasing workforce productivity and draining significant personal and governmental financial resources. However, for every $1 spent on preventive services, up to $50 is saved in restorative and emergency treatment. Thus, America's ToothFairy invites all interested parties to join us in an aggressive effort to eliminate children's preventable pain and suffering from pediatric dental disease and improve quality of life for at-risk children.