The Power of Integrated Care Teams: Improving Oral Health Outcomes

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&

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Introduction

About Codman:

• Established in 1979
• Located in Dorchester Center
• Federally Qualified Health Center
• Recognized as Level 3 PCMH by NCQA
• Staff of over 250 multi-lingual & multi-cultural clinicians, interdisciplinary staff, & employees
• School Based Health Center: Located at Tech Boston
• Codman²: CSHC & Codman Academy-the country’s first co-located health & education partnership
Mission, Vision, and Core Values

Mission:

The Mission of the CSHC is "to serve as a resource for improving the physical, mental, and social well-being of the community." The Health Center places its emphasis on personalized, quality care for families and individuals and we strive to be responsive to the needs of the residents of the Codman Square area.

Vision:

Codman Square Health Center is our community’s first choice for comprehensive, holistic, and integrated services and empowers individuals to lead healthy lives and build thriving communities.

Values:

• Patient
• Community
• Staff
• Advocacy
• Innovation
• Partnership
Patient Demographics

Race/Ethnicity

- Black/African American: 82%
- Hispanic: 5%
- White: 3%
- Asian: 3%
- Other: 1%
- Unknown: 1%
Patient Demographics

Insurance Payor

- Medicaid: 55%
- Private: 24%
- Medicare: 8%
- Uninsured: 14%

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Patient Demographics

Patient Visits

- Medical: 71%
- Enabling: 8%
- Dental: 8%
- Mental Health: 4%
- Vision: 9%

FY 2015 UDS Data
- 115,739 Total Visits
- 22,971 Patients
Dental Team

Current FTEs

• 5.3 General Dentists
• 2.0 Dental Hygienists
• 4.95 Dental Assistants
• 1.0 Senior Dental Assistant
• 1.0 Clinical Care Coordinator
• 0.3 Specialty Practice Manager
• 1.0 Dental Unit Secretary
• 1.0 Temporary Dental Scheduler

Vacancies

• 1.0 Senior Dental Assistant
• 1.0 Dental Assistant

Non-paid Contributing Team Members

• Lutheran AEGD Resident
• BU, Tufts, & Forsyth Student Externs
Dental Clinic

- 7 Dental Operatories
- 1 Dental Operatory @ Tech Boston SBHC
- EDR: DENTRIX
- EHR: EPIC
- State of the Art Dental Equipment
  - Dexis Digital Xray
  - Digital 3M CAD/CAM scanner
  - Biolase system
  - Endo Microscope

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Codman Square Health Linkages
Project Charter

Start date: April, 2014

• Key Stakeholders
  • COO
  • CMO
  • Dental Director
  • Specialty Practice Manager
  • Dental Unit Secretary
  • 2 Primary Care Physicians
  • 1 Nurse
  • Certified Dental Assistant
CSHC Health Linkages
Project Charter

Goal:
• Increase oral health education for diabetic patients and the medical care teams that treat them

Measures of Success:
• Increase access to dental care for high risk diabetics
• Establish joint medical-dental diabetes group visit time
• Develop a digital referral process for high risk patients

Scope:
• Diabetic Patients
• Internal Referrals Only
• Limited Exams in Group Setting
CSHC Health Linkages
Integration Activities


• Dental integrated with medical care teams to regularly participate in Diabetes Groups
• Increased the # of diabetic patients who received oral health screening during a group visit
• Developed a screening tool to assess oral health in group visit setting
• Increased the # of diabetic patients referred for dental care: Prioritized into 3 categories by screening tool
  1. Requires urgent dental care (given a priority appointment)
  2. Requires non-urgent dental care (given a regular appointment)
  3. No obvious problems
CSHC Health Linkages
Integration Activities

Outcomes:
- 50 Diabetic patients were screened for oral health in a group visit model
- 28 of the 50 patients were not pre-existing dental patients
- 58% of Diabetic patients screened needed follow up care
CCHC Health Linkages
Integration Activities

Limitations:

- Limited participation from key stakeholders due to time constraints
- Diabetic group model structured by primary care included repeated participation of the same patients, limiting dental’s scope
- Group visits tend to be seasonal
- Focus was on one patient population (diabetics)
- Limited access for follow up appointments due to a full schedule
- Transitions in leadership
Re-designing the Health Linkages Project Charter

Dental Department Transition:

- New Dental Director: *July*
- New Clinical Care Coordinator Role: *October*
- 1 FTE Dentist: *September*
- 1 FTE Dental Assistant: *September*
- 1 FTE Dentist: *December*
- 1 FTE Dental Assistant: *December*
Re-designing the Health Linkages Project Charter

Start date: July, 2015

• Selected new stakeholders:
  • Dental Director
  • Clinical Care Coordinator
  • Dental Hygienist
  • Medical Director of Pediatrics
  • Family Medicine Physician
  • Internal Medicine Nurse
  • Pediatrics Nurse Manager
  • CEO & CMO: Advisory role
Re-designing the Health Linkages Project Charter

New Goal
• Build partnerships with medical care team members to:
  • Develop innovative dental referral tools
  • Increase access to dental care for CSHC patients

New Measures of Success
• Develop referral tool(s) to increase access to dental groups and dental care
• Increase the # of “reserved” dental appointments for CSHC patients including children, diabetics, & pre-natal patients considered high risk for dental disease
• Increase the # of dental group visits that focus on oral health education
• Increase the # of patients referred to & treated in the dental department

New Scope
• CSHC patients
• Innovative internal referrals
• Dental group visits
CSHC Health Linkages
New Integration Activities

1. Medical and Dental Care Teams participated in several integration planning meetings to develop referral process
2. Developed three question prompt for medical care team to utilize during intake to identify and refer patients for dental care
3. Worked with IT Department to develop internal EMR referral process for pediatric and diabetic patients (in-basket pools)
4. Developed Pediatric Dental Group from EMR referrals
5. Created same day access referral “warm hand-off” for pediatric patients
6. Created Codman Academy dental referral program
1. Three Question Prompt Administered by Medical Care Team
   • Has your child seen a dentist in the last 6 months?
   • Does your child have any dental pain?
   • Would you like to take your child to a pediatric dental group?

2. Medical Care Team Flags In-Basket Pool to refer patients

3. Clinical Care Coordinator checks EMR for referrals, schedules & registers patients for Pediatric Dental Group

4. Pediatric Dental Group is led by a Dentist, Hygienist, CDA

5. Referral loop is closed in EMR and patient is placed on recall once care is completed
CSHC Health Linkages
Pediatric Dental Group

Four Stations

• Interactive
• Parental Involvement
• Provided education
• Provided preventative dental treatment
Pediatric Dental Group
Educational Handouts for Parents

DENTAL CARE
Codman Square Health Center

Caring for Your Child's Teeth

Tooth Eruption:
Your child will first develop 30 primary teeth (baby teeth). Primary teeth begin to erupt around 6-8 months, starting with the bottom front teeth. All 20 primary teeth have usually erupted by age 3.

When teeth are emerging, it can cause discomfort for some children. Please check with pediatrician before giving any teething medication or pain relievers. It is helpful to rub baby’s gums with clean finger and provide chilled (not freezing!) teething ring or toy.

Your child will begin developing secondary (permanent/adult) teeth around age 6. The first adult teeth to erupt are the permanent molars (behind the existing baby molars). It is very important to floss the back molars to prevent decay on permanent teeth.

Primary (baby) teeth eruption sequence

Secondary (adult) teeth eruption sequence

Brushing and Flossing

It is Never too Early for Good Oral Care
When there are no teeth—it is still recommended to wipe gums with a damp cloth to remove surface bacteria.
When teeth emerge—wipe teeth and gums with damp cloth. You may start using appropriate age soft toothbrush to brush teeth.
Space between teeth close—when teeth start touching each other, it is important to start flossing! You can use floss with holders to make it easy!

Tips:
Teeth Should be brushed twice daily (morning and prior to bed)
Replace toothbrush every 3-4 months (when the bristles change)
Brush child’s teeth until child learns how to tie shoelaces

Risk Factors for Cavities
Cavities are the most common chronic disease of childhood—5 times more common than asthma! The bacteria, acid, food debris, and saliva in the mouth combine to form plaque, which clings to the teeth. The acids in plaque dissolve the outside surface (enamel) of teeth, forming holes in the teeth known as cavities. Beverages like soda, fruit juice, sports drink, energy drinks and vitamin waters contain high amounts of sugar and acid which weaken the enamel and cause cavities! (Even when these drinks are available in sugar-free options, they still contain ACID)

How much sugar is in your drink?

How to Prevent Cavities
- Regular dental visits for child and family (every six months)
- Fluoride mouth rinse 1 time daily (when child learns to spit) and drink tap water with fluoride
- Less or no junk food including candy—more healthy snacks
- Bottles with only water for sleeping!
- Avoid drinks with sugar—drink sugary drinks with straw
- Cutting juice with water only decreases calories not cavity risk

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Integrating Same Day Access

- Pediatric Dental Group Limitations led to adding alternative option for pediatric access to dental care
- Pediatrics Department is busiest on Mondays w/ 5 providers on the schedule
- Pedi Mondays: Same day access in the form of a “warm hand-off”
- Dental Team member attends Pediatrics Monday morning huddle to remind providers of same day access during specific times during AM & PM Sessions
- Pediatrics Team member call up to Dental when ready to “hand-off patient”
Pedi Patients Referred, Treated, & Appointed for Dental Care

October
- Referred
- Treated
- Appointed

November
- Referred
- Treated
- Appointed

December
- Referred
- Treated
- Appointed

January
- Referred
- Treated
- Appointed

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Pedi patients treated due to EMR referral resulting in an appointment

- October: 0
- November: 18
- December: 35
- January: 53
Same Day Access & Hold Slots

- 65 Pedi Patients Treated in January 2015
- 20 Patients benefits from same day access
- 45 Hold Slots in 2 provider schedules during the month of January
Codman Academy Integration Activities

- Coordinated efforts with Partnership Director and School Nurse
- Partnership Director reached out to parents to gain consent
- Clinical Care Coordinator manages referrals, consents, appointments, and registration
- Dental Hygienists and student externs provide classroom oral health education to students
Codman Academy Integration Activities

Treatment Provided:
- Exam & Xrays
- Child Prophylaxis
- Fluoride Application
- Composite Fillings
Lesson Learned

• Integration is possible and can be rewarding for staff and patients
• Pediatric Dental Group is labor intensive & works best for children ages 6 and under
• Clinical Care Coordinator is needed to manage integration activities
• Same day access is a solution to CHC’s dental department capacity problems
• Allow integration to naturally evolve into every practice
Sustaining Integration Practices

• Continue to integrate EMR referrals & Same day access into every day practice
• Pediatric Dental Suite under construction in Pediatric Department
• Continue to build internal partnerships that support integration activities
• Roll-out same day access to Family Medicine: Pedi & Pre-natal Tuesdays
Oral Health Integration is Possible!
Thank You

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