

# Oral Health in Primary Care: A Framework for Action

National Oral Health Conference, April 2015

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National *Interprofessional Initiative*  
on Oral Health *engaging clinicians,  
eradicating dental disease*



Advancing Healthcare  
Improving Health

# Who we are...

Qualis Health is one of the nation's leading population healthcare consulting organizations. We work with public and private sector clients to advance the quality, efficiency, and value of healthcare

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# Objectives

*“Oral Health: An Essential Component of Primary Care (June 2015)”*

- Present an organizing framework for delivering oral health preventive care in the primary care setting
- Offer ideas on supporting actions for stakeholders



# What is the problem we are trying to solve? *A Prevention Gap*

- Oral disease is preventable
- Nationwide we have an unacceptably high burden of oral disease; little improvement in oral health status
- The oral healthcare system, as currently configured, fails to reach the populations with the highest burden of disease resulting in significant and pervasive health disparities
- Dental care is the most common unmet health need



# An upstream solution...

Intervene earlier in the course of disease

## Proposal

Expand the oral disease prevention workforce

1. Incorporate oral health in routine medical care
2. Apply a population health management approach to oral disease
3. Find new ways to engage patients and families in the prevention of oral disease



# Oral Health in Primary Care Project

**Sponsor:** National *Interprofessional Initiative*  
on Oral Health *engaging clinicians  
eradicating dental disease*

**Consultant:**  **QUALIS**  
HEALTH.

**Funders:**  **DentaQuest**  
FOUNDATION

 **REACH**  
healthcare foundation

**Washington Dental Service  
Foundation**

*Community Advocates for Oral Health*

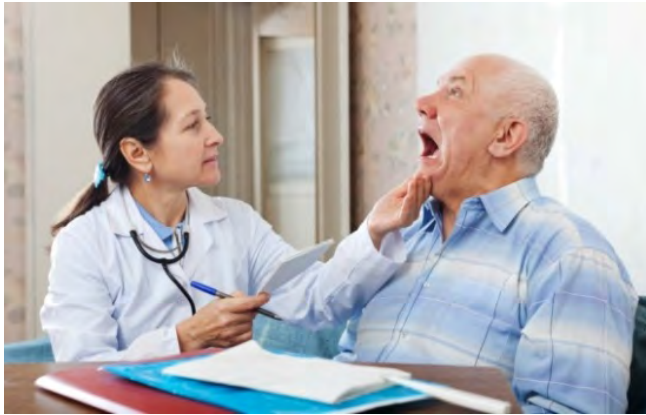


# Process

- Reviewed literature and results of recent efforts to integrate behavioral health services
- Assembled Technical Expert Panel
  - Primary care and dental providers; medical and dental associations; payors and policymakers; patient, family, public health advocates



# Question: What will it take to change the standard of care?



- Clear definition of what can be done in the primary care setting to protect and promote oral health
- Streamlined process for fitting oral health into an already packed primary care workflow
- Practical model for a close collaboration between medicine and dentistry





# Oral Health Delivery Framework



Ask

## Symptoms & Risk Factors

- Pain, bleeding
- Burning, dry mouth
- Dietary patterns
- Adequacy of fluoride
- Oral hygiene
- Time since last dental visit



Look

## Signs of Disease

- Dry mouth
- Chalk marks
- Obvious caries
- Inflammation
- Exposed roots
- Mucosa abnormalities



Decide

**On the most appropriate action** using standardized criteria based on the answers to the screening and risk assessment questions and findings of the oral exam, and the values, preferences, and goals of the patient and family

# Oral Health Delivery Framework



## Offer Interventions to Reduce Risk and/or Refer for Treatment

1. Make changes in the medication list to protect the saliva, teeth, and gums
2. Offer fluoride therapy
3. Offer dietary counseling to protect the teeth and gums
4. Demonstrate and coach good oral hygiene, for example by using teach-back to model brushing and flossing
5. Offer therapy for tobacco, alcohol, or drug dependency
6. Refer for treatment

# Structured Referrals

- Many patients screened in the course of a primary care visit will need care that only a dentist can provide
- Referrals to dentistry ought to be as smooth as referrals to medical specialists -- *burden should not be on the patient*
- Requires:
  - Referral network able to serve diverse patients
  - Referral agreements to clarify expectations
  - Tracking and care coordination processes
  - Logistical support
  - Connectivity; ability and commitment to transfer information



# Oral Health Delivery Framework



## Document Findings and Measure Care Processes

- Structured data
- Reporting functionality
- Measures to gauge impact on patients, families, practice as a whole
  - % given written/verbal assessment
  - % given oral exam
  - % referred to a dentist
  - % referred with a completed referral
  - +1 clinical intervention measure: fluoride varnish, counseling, hygiene training, medication change

# Who will do this new work?

- Framework focuses on function
- Not prescriptive on role
- Most functions can be conducted by a trained Medical Assistant or LPN
- Possible without new members of the team
- No specialized equipment required



# Conceptual Model

- Built on sound clinical concepts
- Informed by recent efforts to integrate behavioral health services
- Activities within scope of practice for primary care
- ***Is it feasible?*** Advanced primary care practices have resources in place to do this work now; others can take an incremental approach, process or population of focus

Primary care is in the midst of a transformation, striving to provide more patient-centered and value-oriented care. This evolution provides new resources, and a new responsibility, for addressing oral health as a component of comprehensive, whole-person care.



# Field-Testing a Conceptual Framework

Develop

Test

Improve

Disseminate

12+ diverse primary care practices



**Washington Dental Service  
Foundation**

*Community Advocates for Oral Health*

Private practices (4)  
adults with diabetes &  
pregnant women



**REACH**  
healthcare foundation

Safety net sites (2) w  
co-located dental offices  
peds & all well visits



**DentaQuest**  
FOUNDATION

FQHCs (5)  
peds & adults with  
diabetes

**Project design underway:** Kansas Association of the Medically Underserved (FQHCs)

Oregon Primary Care Association (FQHCs)



# Implementation Support

- Technical assistance for implementation:
  - Assessment and goal setting
  - Workflow mapping
  - Clinical content training
  - Development of a referral network
  - HIT support
  - Oral health metrics: data collection and reporting
- Develop regional capacity with State Primary Care Associations





# Future Products

Implementation guide—toolkit for primary care practices (2016)

- Sample workflows
- Referral agreements
- Risk assessment/screening questions
- Patient education resources
- Clinical training resources
- Case studies and impact data



Public domain resource available at:  
[www.safetynetmedicalhome.org](http://www.safetynetmedicalhome.org)



# Supporting Actions

- Developing primary care-dentistry referral networks will take effort and commitment from primary care providers and dentists, and their respective teams
- Support from stakeholders will be crucial: Dentists, payers & policymakers, patient and family advocates, educators
  - Acknowledge and incentivize with payment
  - Strengthen the evidence base for oral health preventive care; make oral health preventive care a national research priority
  - Change social norms
  - Enhance interprofessional workforce training opportunities



*Available June 2015*  
*[www.safetynetmedicalhome.org](http://www.safetynetmedicalhome.org)*

*Questions? Reactions?*