Health Center Oral Health Promising Practice

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Dental Director Learning Network


One Sentence Description: Convening CHC Dental Directors quarterly to discuss strategies for improving the oral health of their patients with an emphasis on prevention and dental/medical collaboration.

Summary:

Background: Of the 26 CHCs in Washington, 23 offer dental care. Over the last 10 years, CHC dental clinics have greatly expanded leading to a significant increase in patients served. The number of dental patient visits provided by CHC’s annually more than doubled between 2000 (268,774) and 2010 (640,535). Typically, CHC dental clinics are faced with such significant treatment needs of their patient populations that it is a challenge for them to focus on population-based prevention activities. However, many CHC’s are in an optimal situation to implement prevention strategies since most dental clinics are co-located with medical clinics simplifying the referral process for high-risk populations (e.g. young children, pregnant women, patients with diabetes) to access dental care.

In 2007, WDS Foundation conducted a survey with CHC dental directors in WA to determine their level of interest in a collaborative effort to improve the oral health of the patients they serve. One-hundred percent of the dental directors surveyed expressed interest in meeting quarterly to problem solve common issues and share promising practices. In 2008, WDS Foundation partnered with WACMHC, a Primary Care Association in WA, to launch the Dental Director Learning Network.

Methods: WDS Foundation provides a grant on an annual basis to WACMHC to plan and implement the Learning Network. A planning team was developed that consists of representatives from WACHMC, WDS Foundation, a CHC CEO, and two CHC dental directors. The planning committee meets via phone prior to each Learning Network meeting to set the agenda and determine the flow of the meetings. During the first year of the Learning Network, the meetings were professionally facilitated, emphasis was placed on external speakers, and all CHC dentists were invited.

To produce a greater sense of collective action, the second year transitioned to having dental directors chair each meeting with facilitation support from WACMHC, engaging dental directors in panel presentations to share their expertise (in addition to bringing in external speakers), and focused the meetings on dental directors (as opposed to all CHC dentists). The all-day meetings typically run from 9:30 am to 3:30 pm and include a keynote, dental director panel, open discussion (on topics top-of-mind for dental directors), updates on the health policy environment, and review of the metrics (see below).

The topics addressed by the Learning Network are designed to provide dental directors with tools to better prevent oral disease among vulnerable patient populations, improve dental department operations...
and clinical systems and boost financial sustainability. Dental/medical integration is an ongoing theme throughout each of the learning sessions, with dental directors sharing successes and challenges to engaging their medical colleagues in activities such as risk assessment, patient education, and referrals. Specific topics that have generated particular interest include early childhood caries, perinatal oral health, dental director leadership and quality improvement.

**Results:** In 2009, participating CHC dental programs agreed to begin providing metrics on a quarterly basis to WACMHC in order to measure how individual CHCs and CHCs collectively were increasing access and services to two high-risk populations. The measures are: percentage of medical patients under age two, and percentage of pregnant medical patients that receive a dental visit. Since 2009 across WA Health Centers, the percentage of medical patients under age two that received a Health Center dental visit increased from 12% to 24%. The percentage of pregnant patients that received a dental visit has increased from 33% to 45%.

Participation in the Learning Network meetings has been high. In 2012, 75% of the CHC dental directors attended at least two of the four meetings. Dental Directors report positive experiences:

- “Contact with other dental directors is really what keeps me going.”
- "It's a brain trust...I can bring my unique challenges to a select group of peers and benefit from the collective thoughts."
- “Seeing a level of cooperation that I didn’t realize was there before between the CHCs.”

In January of 2011, Washington State cut Medicaid adult dental program benefits with the exception of emergency care and comprehensive care for pregnant patients and some seniors. The Learning Network became a forum for dental directors to grapple with many consequent issues including how to determine the best patient mix that would enable continuation of dental services to adults without becoming financially vulnerable, advocacy for restoration of the adult dental benefit (one learning session was held in conjunction with the CHC advocacy day and dental directors were encouraged to participate in legislative meetings), and when the adult dental benefit is restored preparing for likely increased demand from adults.

**Conclusion:**
Key success factors include: engaging dental directors in the planning and facilitation of the meetings, gaining buy-in from Health Center CEOs so that providers can attend quarterly meetings, ensuring meeting topics are relevant and interesting to dental directors, organizing meetings to promote a high level of interaction and participation of dental directors, and providing a link to policy efforts and other Health Center state initiatives.

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