

RHIP ORAL HEALTH WORK GROUP 2016-2019 WORK PLAN Rev. 9-1-16

Clinical goal: improve oral health for pre- and post-natal women
Prevention goal: keep children cavity free

Spectrum of Prevention— developing a comprehensive approach/ broad framework for planning population health interventions/improvements and coordination of multiple programs, initiatives or agencies

KEY IMPROVEMENT FOCUS AREAS:

1. Integrated approach to Medical-Dental relationship (“putting the mouth back in the body”; oral health as a key to overall health & wellness)
2. Access to and utilization of preventative dental care interventions (regular dental visits/exams, oral health instruction, fluoride and sealant applications, mobile/portable dental services, non-traditional dental settings, tele-dentistry, workforce capacity)
3. Identification and expanded implementation of successful and/or emerging best practices that support 1 & 2 above (national, state, regional and local)

Spectrum of Prevention Approach	Inventory of Activities/ initiatives: existing/ emerging	Root Cause Analysis/ Next Steps	Gaps/ Opportunities	Action steps	Assigned to (Subteam/ Organization)	Schedule
Influencing policy & Legislation						Complete <u>inventory & root cause</u> by end of 3 rd Qtr 2016; match inventory to root cause analysis – surface potential solutions/gaps & identify links to other RHIP workgroup plans by end of 4 th qtr 2016
Changing Organizational Practices						Complete <u>inventory & root cause</u> by end of 3 rd Qtr 2016; match inventory to root cause analysis – surface potential solutions/gaps & identify links to other RHIP workgroup plans by end of 4 th qtr 2016
Fostering Coalitions & Networks						Complete <u>inventory & root cause</u> by end of 3 rd Qtr 2016; match inventory to root cause analysis – surface potential solutions/gaps & identify links to other RHIP workgroup plans by end of 4 th qtr 2016
Educating Providers						Complete <u>inventory & root cause</u> by end of 3 rd Qtr 2016; match inventory to root cause analysis – surface potential solutions/gaps & identify links to other RHIP workgroup plans by end of 4 th qtr 2016
Promoting Community Education						Complete <u>inventory & root cause</u> by end of 3 rd Qtr 2016; match inventory to root cause analysis – surface potential solutions/gaps & identify links to other RHIP workgroup plans by end of 4 th qtr 2016
Promoting Individual Knowledge & Strengths						Complete <u>inventory & root cause</u> by end of 3 rd Qtr 2016; match inventory to root cause analysis – surface potential solutions/gaps & identify links to other RHIP workgroup plans by end of 4 th qtr 2016

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Spectrum of Prevention Approach	Inventory of Activities: existing/emerging	Root Cause Analysis/ Next steps	Gaps/ Opportunities	Action steps	Assigned to	Schedule
Influencing policy & Legislation	HB 2972 mandatory Kinder dental screenings; OHA Certified School-based Screen & Seal programs; Medicaid reimbursements for PCP's dental screening and fluoride varnish placement; reimbursement for dental visits (and most acute treatments) in OHP and private dental insurance; expanding dental providers' commitment to utilization of the Oregon Prescription Drug Monitoring Program (PDMP);	CODS Newsletter announcement of Pain 101 workshop (done); modify root cause analysis fishbone diagram 9-20-16				INVENTORY & ROOT CAUSE analysis complete by end of 3 rd qtr 2016. NEXT STEPS to match inventory to root cause analysis – surface potential solutions/gaps & identify links to other RHIP workgroup plans by end of 4 th qtr 2016

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<p>Changing Organizational Practices</p>	<p>One Key Question materials; OH preventative services delivery in non-traditional dental settings (e.g., Head Start programs, Kemple S&S Programs, WIC programs); Mosaic implementing OH services-integrating with medical & behavioral; Pacific Source project: increasing % of women who see dentists during pregnancy; delivery of preventative dental services in non-traditional settings (e.g., head start, Advantage/Kemple/OHA in schools & community venues, WIC, health fairs, medical clinics, see lists). Kemple hires Spanish speaking dental clinic coordinator; Kemple and VIM med/dental integration partnership on treating young adults ages 19-25; Advantage partnering with medical groups/clinics; BendLaPine district asked Kemple for expansion of S&S program and agreed to passive dental screenings;</p>	<p>Target dental providers to receive OKQ materials; medical clinics with dental services, start making dental appts for women who answer YES to OKQ; Kemple to present expansion RHIP resources project for S&S programs (Aug 16); Kemple/VIM develop process for medical/dental referrals of pregnant young adults; modify root cause analysis fishbone diagram. 9-20-16</p>	<p>PCP's prescribe oral fluoride supplementation starting at age 6 months; PCP apply fluoride varnish to primary teeth of all infants and children starting at time of primary tooth eruption to prevent dental caries in children from birth through age 5; EHR template revisions; providing OH education in medical waiting areas; Medical office scheduling dental appointments; Medical questions for dental professional intake processes; dental offices scheduling medical appointments; Cascade Women's Health Clinic; Assess dental workforce capacity for our region – e.g., # dentists by specialty, #hygienists, #dental assts, % dentists accepting OHP patients. Identify and prioritize barriers in dental community to peri-natal women scheduling appts. Cascade Women's Health Clinic - Advantage partnership</p>			<p>INVENTORY & ROOT CAUSE analysis complete by end of 3rd qtr 2016.</p> <p>NEXT STEPS to match inventory to root cause analysis – surface potential solutions/gaps & identify links to other RHIP workgroup plans by end of 4th qtr 2016</p>

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Fostering Coalitions & Networks	CO OH Coalition; Oregon OH Coalition; Oregon Strategic Plan for Oral Health ; National/State oral health collaboration, conventions, gatherings; semi annual CO RHIP OH Work Group progress report to Oregon Strategic Plan for Oral Health (August 2016). Upcoming training on Oregon PDMP in Central Oregon – Pain 101 Provider Workshop	Reports and distribution of handouts to OH Work group from attendees at applicable conferences, conventions, coalitions, etc. (ongoing); create listing of OH Work Group membership in other oral health related coalitions and networks nationally, state, and regionally. modify root cause analysis fishbone diagram 9-20-16	OH and PCP collaboratives, gatherings, etc.; CO Dental Society and CO medical professionals combined workshop/meeting;			INVENTORY & ROOT CAUSE analysis complete by end of 3 rd qtr 2016. NEXT STEPS to match inventory to root cause analysis – surface potential solutions/gaps & identify links to other RHIP workgroup plans by end of 4 th qtr 2016

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Educating Providers	First Tooth Training, One Key question training & brochures; Kemple to provide School Nurses with OH education refresher Fall-Winter 2016; Advantage community outreach activities (see list)	Who is doing first tooth training in our region? Assess OBGYN processes for dental referrals; develop process for distribution of OKQ brochure to all dentists with explanation of use. modify root cause analysis fishbone diagram 9-20-16	Expanded OH competency of PCP's, Pediatrics, nurses, in OHP, Private, and safety net clinic organizations; review ACE training and scoring process –and process for providing scores to child's Medical/Dental provider; expand obgyn providers oral health screening and OH education competency, and referral for OH care process.; survey dental providers re: comfort in treating pregnant women; create or use existing One-Key question materials for dental providers- publish brochure drafted for dental offices; Cascade Women's Health Clinic	Implement Smiles for Life (or equivalent), a national OH curriculum designed to enhance the role of primary care clinicians./others in promoting OH for all age groups as dental/medical integration occurs, monitor improvement in % of pregnant women w/dental visit – start with OHP providers integration, then private/uninsured medical/dental integration; - Advantage/St Charles Center for Women's Health-agreement in process		INVENTORY & ROOT CAUSE analysis complete by end of 3 rd qtr 2016. NEXT STEPS to match inventory to root cause analysis – surface potential solutions/gaps & identify links to other RHIP workgroup plans by end of 4 th qtr 2016

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Promoting Community Education	LAUNCH project-Public Awareness video-pregnant moms; school/community based screen and seal programs; head start, WIC, Healthy Families of the High Desert; Kemple educational outreach programs (e.g., tooth fairy scout patch program); Advantage outreach programs (see list)	Obtain support/\$ to rebroadcast video; get video to medical offices for streaming; <i>modify root cause analysis fishbone diagram 9-20-16</i>	Oral Health Literacy – public awareness campaign; Parent Resource Center;			<p>INVENTORY & ROOT CAUSE analysis complete by end of 3rd qtr 2016.</p> <p>NEXT STEPS to match inventory to root cause analysis – surface potential solutions/gaps & identify links to other RHIP workgroup plans by end of 4th qtr 2016</p>

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Promoting Individual Knowledge & Strengths	First Tooth Program; OHI (Oral Health Instruction) at all dental screenings and dental visits; research Brush, Book, Bed (AAP); LaPine Community Medical Center – pregnant moms program; Southern Oregon –pre-post natal study; Pacific Source project – increase % of women who see dentist during pregnancy; school and community based dental screenings (Kemple, Advantage, Head Start, WIC); Educational outreach programs (Advantage, Kemple, others? See lists) to include medical components; research medical educational outreach programs to ensure inclusion of oral health components;	Expand dental screening/OHI opportunities; provide OHI and dental assessment reports to patients, parents; provide PCP and Peds’ tools & training to transfer oral health knowledge/concerns to patients (e.g., First Tooth Program; <i>modify root cause analysis fishbone diagram 9-20-16</i>	Access to regular preventative care dental visits (early detection and preventive interventions); time for dental instruction during dental appointments for both parent and child; utilization of available preventative care options; Nutrition counseling; Oral Health Literacy – public awareness campaign; Parent Resource Center?			INVENTORY & ROOT CAUSE analysis complete by end of 3 rd qtr 2016. NEXT STEPS to match inventory to root cause analysis – surface potential solutions/gaps by end of 4 th qtr 2016