

MEDICAL-DENTAL INTEGRATION: CREATING INFRASTRUCTURE TO BETTER OVERALL HEALTH

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NH Oral Health Forum
October 30th, 2015
Concord, New Hampshire**

LEARNING OBJECTIVES

Upon completion of this session, participants will...

- Identify opportunities for medical-dental informed clinical practice that supports patient-centered care
- Name a medical diagnoses or condition that require oral health assessment for comprehensive treatment
- Discuss the impact of primary care medicine on prevention and management of child and adult dental disease
- Describe at least one community-based sustainable business models for the delivery of preventive oral health care
- Define one benefit on inter-professional education training and practice



“Interprofessional education (IPE) occurs when students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes..”

*-- World Health Organization (2010): Framework for
Action on Interprofessional Education & Collaborative Practice*



**World Health
Organization**

IPE PHASE 1

Case 1:

A 26 year old female presents to the Western University general practice dental residency clinic at Pomona Valley Hospital and Medical Center for a screening examination, and you notice that her skin tone and conjunctivae appear faint-yellow. As you obtain the medical history, you learn that over the past 2 weeks, the patient has been experiencing nausea, vomiting and decreased appetite. During the review of systems, she replies yes to the following: headache, fatigue, nasal discharge, cough, myalgia, abdominal discomfort/tenderness (points to the right upper quadrant) and anorexia. Approximately 2 weeks ago, she started working at a daycare center with children of ages 18 – 36 months. Her scope of work includes feeding the younger children and changing diapers. Her immunization history is unclear. You take her vital signs and note: BP=132/76, RAS; Pulse=74 bpm; RR=18; Temperature=38.5°C. You access the medical record in the hospital computer system and review the latest serology from 1 day prior. You note elevated serum aspartate aminotransferase (AST), serum alanine aminotransferase (ALT) and serum bilirubin (6 mg/dL).



IPE PHASE 2



A 50-year-old male patient presents to Western University Dental Center for a cleaning. Patient reports no change in dental history since last visit, and currently has no discomfort in his dentition other than some slight aching of his upper teeth due to sinus pressure. Patient recently returned from a business trip to China 3 days ago, where he toured several poultry farms and food processing plants. His eyes appear red, watery, and have yellow crusts over his eyelashes. Patient reports having allergies, in addition to catching a cold during his trip. After sneezing, the patient rubs his eyes with his unwashed hands and indicates that his stuffy nose forces him to breathe through his mouth.

Questions:

1. What safety concerns do you have for this patient?

- Patient exhibits flu-like symptoms.
- Patient encountered poultry in a farm in China
- Patient has poor hand hygiene.
- Patient rubs his eyes with his dirty hands.
- Patient's allergies
- Red watery itchy eyes with yellow crusts over the eyelashes
- Performing dental procedure with suspicious infectious disease
- Cavitron and aerosol in infectious disease
- Unable to breathe through his nose for dental procedures
- Potential duties as a healthcare provider with a case of suspicious infectious disease such as reporting to Center for Disease Control

2. Describe how your profession would be involved in this case. Is this a specific practice type/specialty that would be involved?

As a general dentist, we would practice universal precautions, only be involved in the observation of symptoms, and referral of patient to emergent care. Only perform emergency dental procedures. Reinforce importance of washing hands, not touching mucous membranes (eyes, mouth, etc), and theories of prevention of spread of disease. Limit the number of health care providers to only those needed for direct patient care to reduce potential exposure.

**Unique cases for
each professional
program**

Consultation request



Consultation reply & feedback



IPE PHASE 3



Standardized patient actor w/ Congestive Heart Failure



CASE STUDY: OBESITY AND DIABETES

Dental history:

A 50-year-old male presents to Patient Care Center for a comprehensive oral exam with chief complaint “I got bad breath.” Patient reports bad breath “runs in his family” including his dog. Patient experiences generalized dull pain on his gingiva, and some of his teeth are loose or missing. Patient reports brushing teeth once a day but does not floss. Patient snacks junk food frequently and shares his food with his dog. Patient has not seen a dentist for the past 10 years due to lack of transportation. Since the opening of the Patient Care Center, patient can walk to his appointments.

Medical history:

Patient reports a history of type II diabetes and describes his health as “poor”. Patient reports having joint and foot pain which cause him to have difficulty walking, but patient has not been to a doctor office since he lost his health insurance 5 years ago. Patient ran out of his medications and cannot recall the names of his medications. Patient denies allergy to medication or food. Patient has a 20 pack-year history of smoking and drinks beers in the weekends. Vital sign is 160/90, pulse 80. BMI is 30. ASA III.

CASE STUDY QUESTIONS:

- What **safety concerns** do you have for this patient?
- Describe how **your profession** would be involved in this case.
- List the **other healthcare professions** you need in your team in order to resolve each safety issue?
- What criteria would you use to evaluate the **quality of care** provided by each team member?
- Write a **consultation request** for this patient's care.

Interprofessional Collaborative Practice (IPCP)



“Collaborative practice happens when multiple health workers from different professional backgrounds work together with patients, families, caregivers and communities to deliver the highest quality of care.”

-- World Health Organization (2010): Framework for Action on Interprofessional Education & Collaborative Practice



PRIMARY CARE:

- A primary care practice serves as the **patient's first point of entry into the health care system** and as the **continuing** focal point for all needed health care services.
- Primary care includes health promotion, disease prevention, health maintenance, counseling, patient education, diagnosis and treatment of acute and chronic illnesses in a variety of health care settings.

**Primary Care. AAPF Policies 2014.



AMERICAN ACADEMY OF
FAMILY PHYSICIANS

STRONG MEDICINE FOR AMERICA

Integration of Oral Health and Primary Care Practice (IOHPCP)

U.S. Department of Health and Human Services
Health Resources and Services Administration
February 2014



HRSA IHOPCP

FIVE DOMAINS OF CLINICAL COMPETENCIES:

1. Risk assessment

- Identify factors that impact **oral health and overall health.**
- Conduct patient-specific, **oral health risk assessments** on all patients.
- Integrate epidemiology of caries, periodontal diseases, oral cancer, and common oral trauma into the risk assessment.

HRSA IHOPCP

FIVE DOMAINS OF CLINICAL COMPETENCIES:

2. Oral Health Evaluation

- Integrate subjective and objective findings based on completion of a focused oral health history, risk assessment, and **performance of clinical oral screening**.

3. Preventive Intervention

- Recognize the options and strategies to address oral health needs.
- Implement appropriate patient-centered **preventive** oral health interventions.

HRSA IHOPCP

FIVE DOMAINS OF CLINICAL COMPETENCIES:

4. Communication and Education

- Provide targeted **patient education** about importance of oral health and how to maintain good oral health, which considers **oral health literacy**, **nutrition**, and patient's perceived oral health **barriers**, in a culturally sensitive manner.

5. Interprofessional Collaborative Practice

- Exchange meaningful information among health care providers to identify and implement appropriate **high quality care** of patients, based on comprehensive evaluations and options available within the **local health delivery** and **referral system**.
- Facilitate patient navigation in the oral health care delivery system.

- “coordinate with **community health providers, other health science colleges** and **state and local partners** to develop collaborative practices and interdisciplinary teams.”
- “Graduates will be able to draw on interdisciplinary experiences and apply this training their future practices to improve the health of children, families and communities

---Friedrichsen S, Martinez T, Hostetler J, Tang J. Innovations in Interprofessional Education: Building Collaborative Practice Skills. CDA Journal. Vol 42. No 9. Sept 2014.



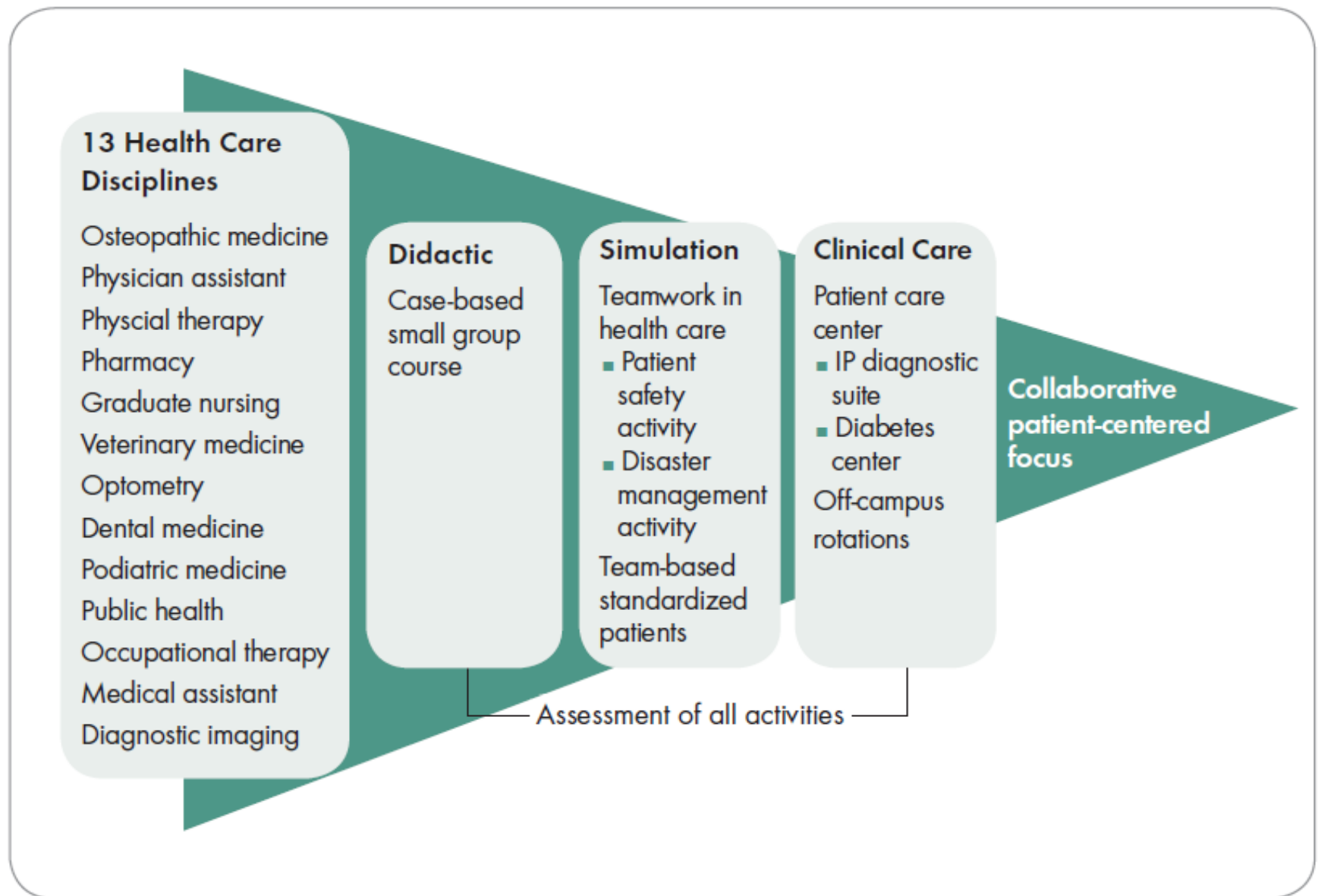



FIGURE 1. Western University of Health Sciences interprofessional education (IPE) model.

---Friedrichsen S, Martinez T, Hostetler J, Tang J. Innovations in Interprofessional Education: Building Collaborative Practice Skills. CDA Journal. Vol 42.No 9.Sept 2014.



Community Based Organizations

LAUSD
PUSD
EMCSD
THE VILLAGE

CHILD DEVELOPMENT EHS/HS
Crittenton Foster Care
WIC
Elder Care Sites
Claremont Manor
Hillcrest

Community PHC Sites

Community PHC Sites
APLA
LA Christian Center

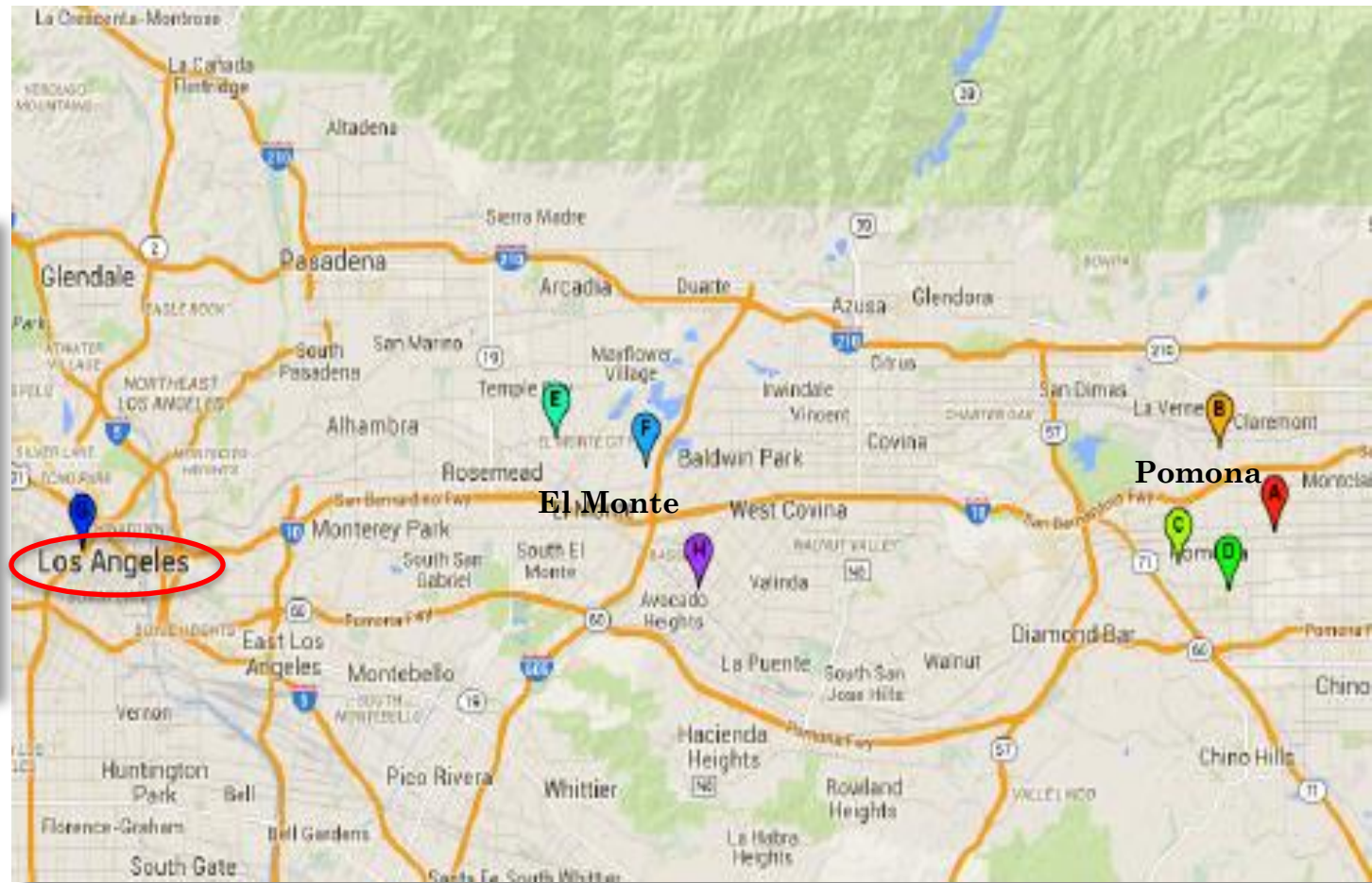
Hurtt
Native Am HC
CHC Central Coast
Student Run Health Clinic

Training Programs

Pomona Valley
CommunityHospital
Family Medicine Residents
Graduate College of Nurs-
ing
WH College of Allied
Health PA
WU College of Pharmacy

SCHOOL BASED ORAL HEALTH CENTERS IN POMONA, EL MONTE, LOS ANGELES UNIFIED SCHOOL DISTRICTS

- A 1460 E Holt Ave
- B 2211 N Orange Grove Ave
- C 851 S Hamilton Blvd
- D 1600 S Towne Ave
- E 10226 Lower Azusa Rd
- F 12233 Star St
- G 333 S Beaudry Ave
- H 14101 E Nelson Ave



Interprofessional Collaborative Practice WesternU College of Graduate Nursing:

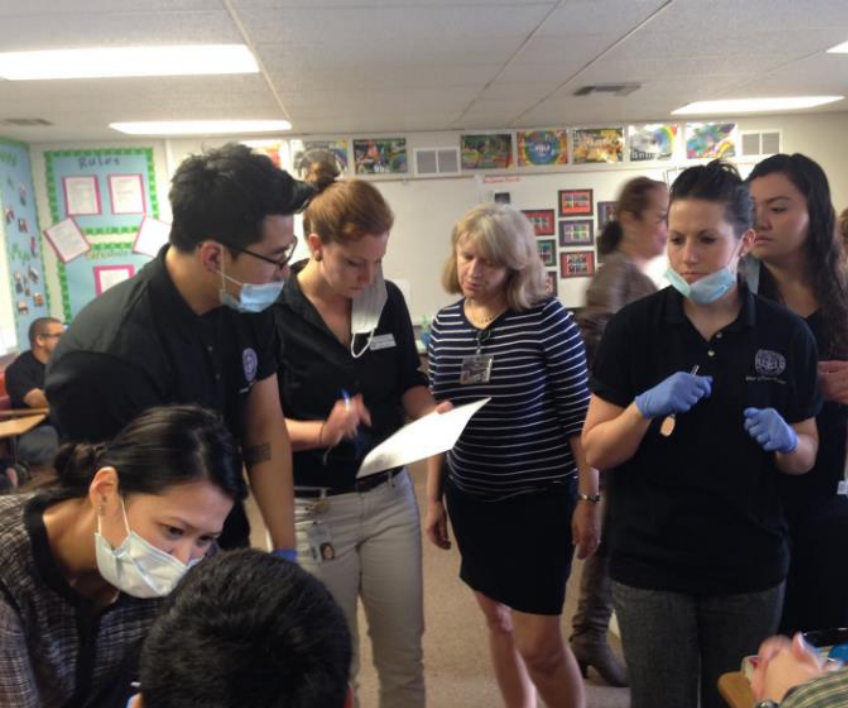
Outreach to children in transitional housing

Outreach to elementary school children

Outreach to special healthcare needs population



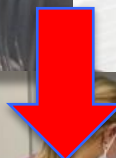




**Interprofessional Collaborative Practice
WesternU College of Allied Health Professions
Department of Physician Assistant Education**

Outreach to
School Based Oral Health Centers







Discussion

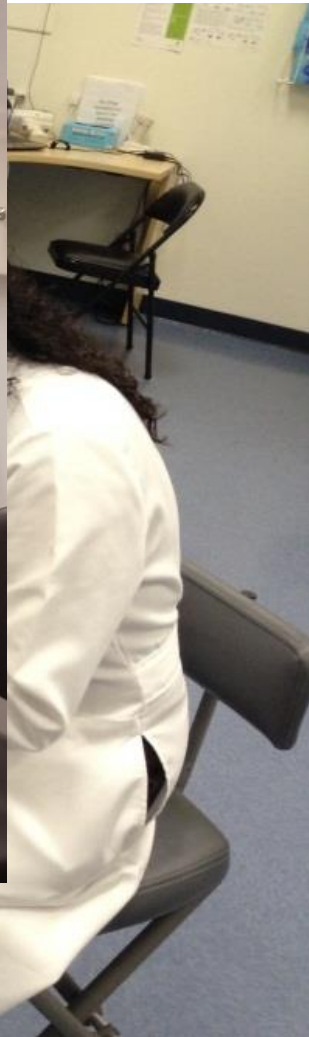


Hands on

**Interprofessional Collaborative Practice
Family Medicine Residency Program
Pomona Valley Hospital Medical Center**

Outreach to
School Based Oral Health Centers
Women, Infants, Children (WIC)







Interprofessional Collaborative Practice

**Home visits
to special health care needs population**





IPE FEEDBACK FROM PHYSICIAN ASSISTANT STUDENTS

- I have a **better appreciation for all the work Dentists do** and the need for oral health. I felt like I learned more in those couple of hours [in clinic] than what could have been spent in the classroom for way longer. -- Darin, MSPA2015
- This experience made me realize that I want to be a **well-rounded provider** and learn as much as I can from all the different health professions. -- Kaitlin, MSPA 2015
- I learned that as a PA you could learn a lot from a dentist that **improves the quality of care** you give to your patients. -- Desirae, MSPA 2015
- I learned that it is important to take advantage of any opportunity to learn from other professions because **they may have insight** I would not be able to get anywhere else. -- Shannon, MSPA 2015



Feedback from family medicine residents

Contact Information

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