

HEALTHY SMILES FOR MOM AND BABY
"PROMISING PRACTICE"
Jefferson County Health Department and
The Community Dental Clinic

Abstract: Preventive, diagnostic, and restorative dental treatment is safe throughout pregnancy and is effective in improving and maintaining oral health. Children's Health Alliance of Wisconsin received Health Resources and Services Administration funding to identify promising practices for integrating oral health into the primary health care delivery system in Wisconsin. Partnering with local clinics, health departments and organizations we aim to answer the framing questions "What will it take for pregnant women to be referred from medical settings to receive dental care" and "What will it take for pregnant women who are referred for dental care to complete appointments". Creating formal referral processes between local public health departments and dental providers is a promising strategy of this work.

Background

Community Health Needs Assessment

- Local public health departments conduct a Community Health Needs Assessment to identify health priorities and develop a plan for addressing them in the following five years.
- Recognizing oral health as a community need is a catalyst to bring partners together.

Medical/dental integration

- Pregnancy is a time period in a woman's life where she is more likely to receive medical care. This provides an opportunity to utilize medical providers as oral health messengers.

BadgerCare dental coverage

- Dental insurance coverage for pregnant women includes preventive and restorative care throughout pregnancy.

Inputs

Jefferson County Health Department, Prenatal Care Coordination Program (PNCC)

- PNCC is a BadgerCare Plus benefit to help pregnant women get the support and services they need to have a healthy baby. Services include health education/nutrition counseling, referrals and care coordination.
- Two oral health questions are asked on the PNCC screening questionnaire.

Community Dental Clinic

- To provide basic dental health services to uninsured and Medicaid patients in Jefferson County communities is the mission of the clinic.
- Capacity and willingness to accept pregnant patients made them an ideal partner.

Activities

Oral health training for PNCC and Women Infant Children (WIC) staff

- Training on oral health concepts including disease development, transmission and how to have an oral health conversation with a patient. Training included a toolkit with visual and hands-on tools staff can use when working with families.
- Referrals are access to care interventions indicated in the care plan specific to each patient's individual needs. Any referral made and documented in the care plan is followed up on by a public health nurse within two weeks per requirements of the program.
- Documentation of referral follow-up is standard of care in PNCC case management.

Priority scheduling for pregnant patients

- Clinic coordinator verifies patient's active BadgerCare status prior to scheduling.
- Blocking hour and a half appointments for first appointment; includes exam, x-rays and cleaning. This allows more time to complete follow-up treatment.
- Cancellation call list: if patient has flexibility they can get in sooner by being on the call list if openings in the daily schedule occur.

Structured referral process

- Public health nurses(PHN) and WIC staff conduct intake screen using the PNCC questionnaire, if patient 'fails' dental questions the need for a referral is indicated.
- PHN engages in oral health conversation and creates referral with patient consent.
- Clinic coordinator receives email with referral form from PHN, and calls patient to schedule appointment.
- Scheduling call occurs within one week of referral and an appointment is made within one month.

Activities continued

- Diagnosis and treatment plan is communicated to the PHN and again, when the treatment is complete.

Aim and measures

Aim

- By December 2017, increase by 15% above baseline the percentage of pregnant women enrolled in PNCC at Jefferson County Health Department who complete a dental appointment as measured by Community Dental Clinic appointment list.

Baseline

- 70% completed referrals in 3 month period.

Process Measures

- **Oral health referral:** percent of pregnant women enrolled in PNCC program who receive an oral health referral to CDC.

Outcome Measures

- **Receipt of oral health appointment:** percent of pregnant women who received a referral that complete an appointment at CDC.

Impact

Referral 'no-show' rate

- As of this writing, the Dental Clinic has had zero no-shows of women referred through the PNCC program.

Family care

- Pregnant women are scheduling appointments for their children who otherwise did not have a dental home.

Collaboration/integration

Enhancement of dental component of PNCC

- Oral health training for staff and toolkit enhanced confidence of PHN and WIC staff to have oral health conversations with pregnant women.

Closing referral loop

- 'Structured' referrals and timely data sharing between dental clinic and PHN enhanced care coordination.

Sustainability

Integration into existing programs

- PNCC is a service provided by the Health Department.
- JCHD and the Community Dental Clinic have a long history of working together.

Reliable referral process

- Using quality improvement methods to create a reliable referral system was paramount to the success of the project.

Policy change

- Internal policy within the health department for dental referral policy and training for new staff on procedures is a next step to ensure sustainability.

Lessons learned

Dental capacity is critical

- Ability of Community Dental Clinic to accept new Medicaid clients.
- Dental providers practicing current guidelines to provide preventive, diagnostic and restorative care during all trimesters of pregnancy.

Champions are key to implementation

- **Public Health Nurse** led the day-to-day implementation of the referral system change process.
- **Dental Clinic Coordinator** led the prioritization and scheduling of pregnant patient, makes initial contact with patient and reports referral completion data to PHN.

Organizational support creates sustainability

- **Health Officer and Nurse Manager** support dental integration as it aligns with the current PNCC requirements for referral, follow-up and tracking.
- Implementing a quality improvement project is necessary for public health accreditation process.
- **Dental Clinic Manager** utilizing capacity to partner and accept new patients, prioritize pregnant patients and communicate data back to health department.

Partnering Organizations Contact Information:

Jefferson County Health Department

Emi Reiner, PHN

emir@jeffersoncountywi.gov

Community Dental Clinic

Tina Nissen, RDH, Clinic Coordinator

tina@communitydentalclinic.com

For additional 'promising practice' strategies to improve perinatal oral health in Wisconsin visit www.chawisconsin.org/hsmdb or contact Dana Fischer, Healthy Smiles for Mom and Baby Project Manager at: dfischer@chw.org