

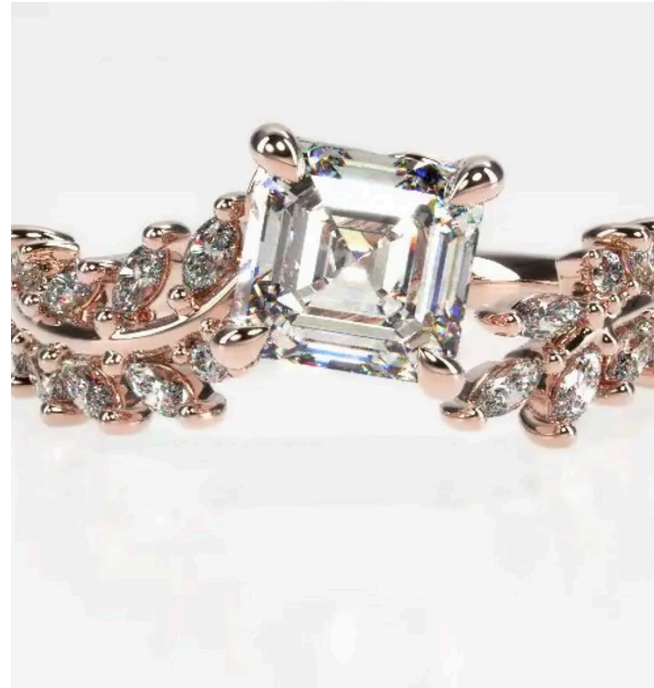
# **Integrating Dental Care within General Healthcare: Emphasis on OB/GYN and Pediatrics**

**Maxmillian Chambers, D.D.S**  
**Imperial County**  
**Wednesday, May 22, 2024**



# Introduction





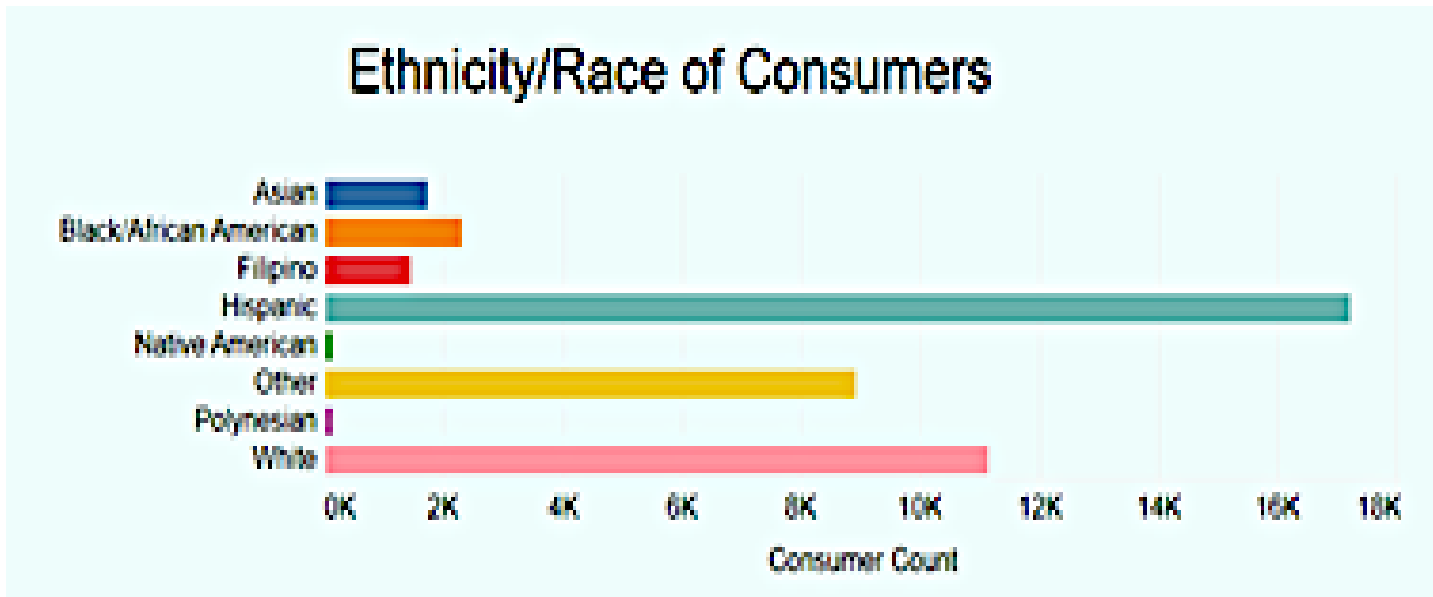
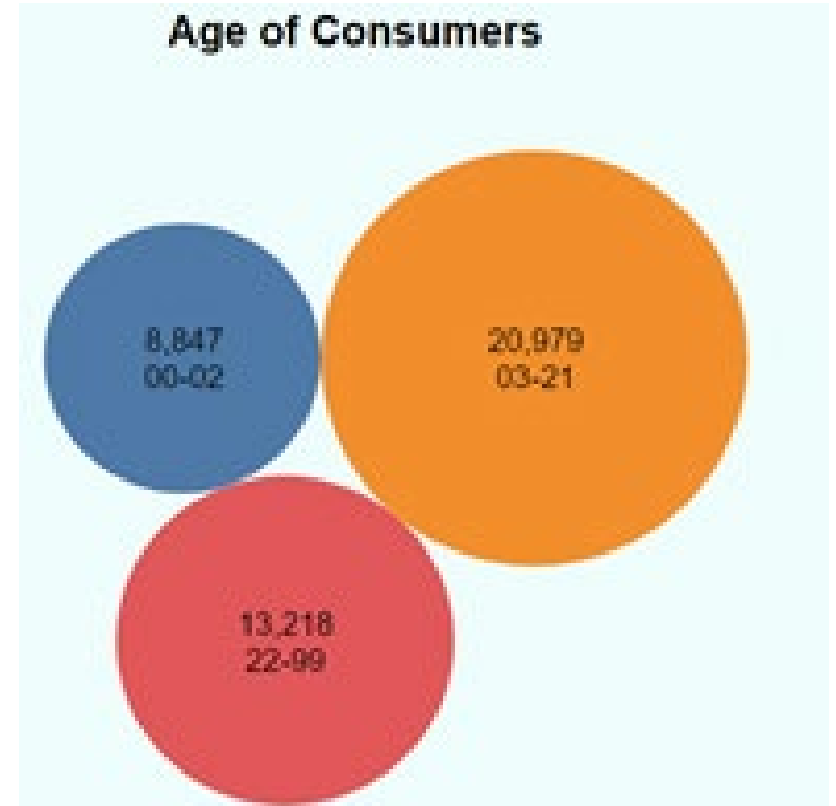




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Clinicas de Salud del Pueblo





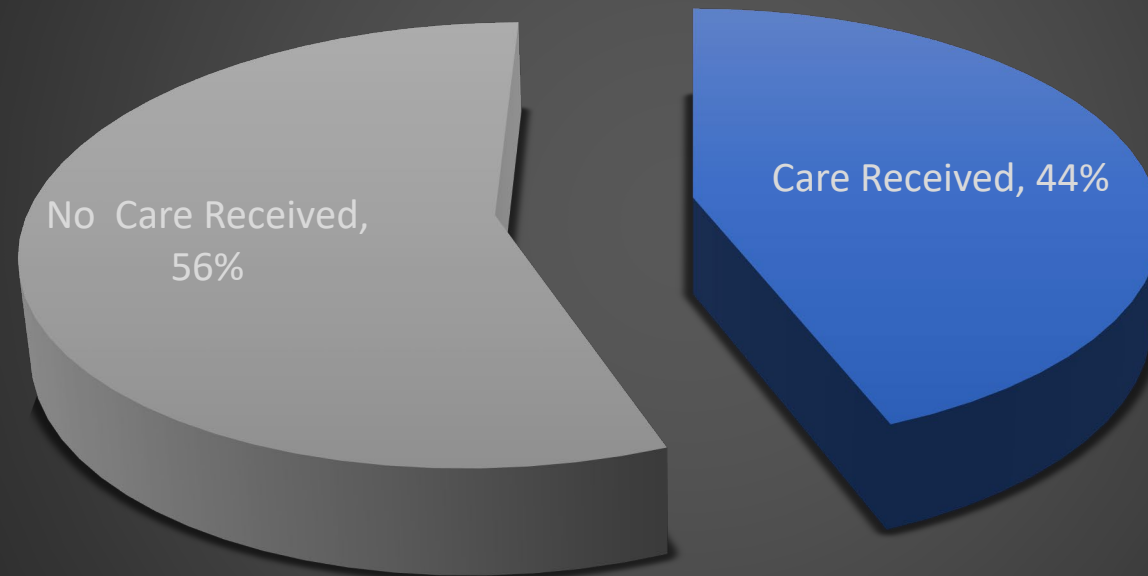


# Background - The Issue

- **Current Policies and Practices:**
  - Prenatal/Perinatal Mother's
  - Pediatric
- **Need for Intervention:**
  - Widening Disparities



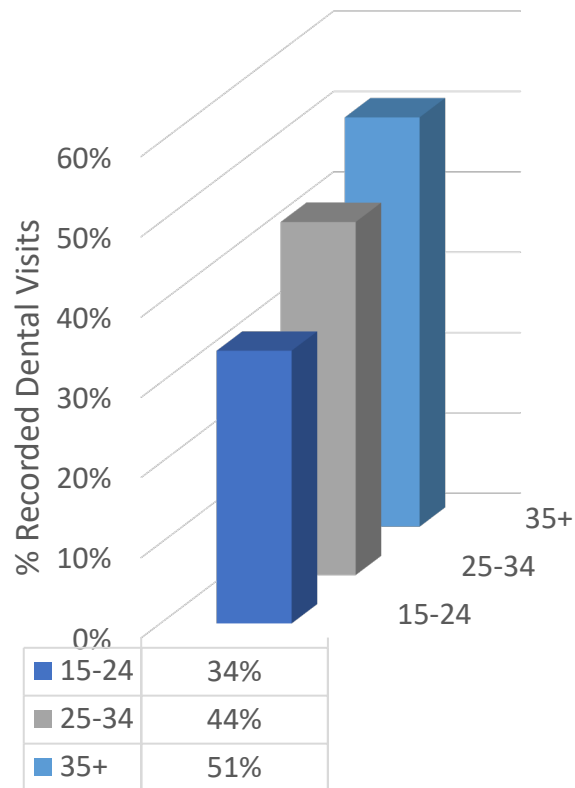
## Received Dental care during pregnancy in California, Maternal and Infant Health Assessment (MIHA) Survey, 2017-2018



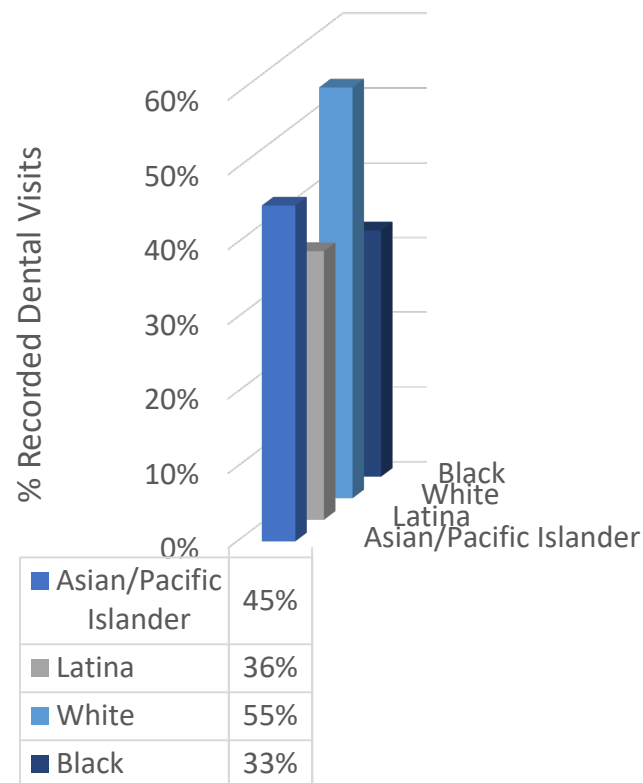
■ Care Received ■ No Care Received

# CA Healthcare Utilization

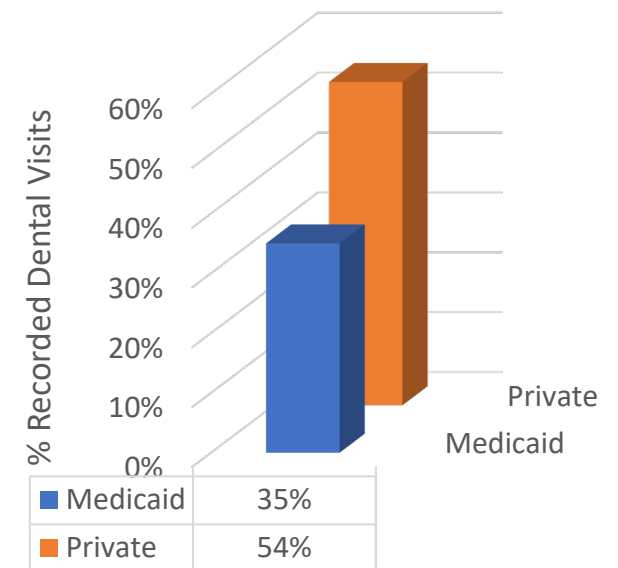
Utilization by age



Utilization By Race



Utilization by Insurance type



UDS Clinical Data Innercare	2018	2019	2020	2021	2022	2023	2022 National Average
Early prenatal care	59.28%	56.47%	56.05%	48.52%	45.35%	42.51%	71.99%
Birth Weight	4.17%	6.23%	6.06%	6.57%	5.46%	8.05%	8.43%
Sealants	30%	22.5%	----	21.57%	22.01%	30.39%	58.39%

(Health Resources & Services Administration, n.d.)

# Background- Why It Matters

- **Improved Total Health:**
  - Oral health significantly impacts systemic health. <sup>1</sup>
- **Current Challenges:**
  - Access
  - Health Literacy
  - Healthcare Models <sup>2</sup>

1 American Academy of Pediatric Dentistry. Oral healthcare for the pregnant pediatric dental patient. The Reference Manual of Pediatric Dentistry. Chicago, Ill.: American Academy of Pediatric Dentistry; 2023:327-36.

2. Oral Health Care During Pregnancy Expert Workgroup. 2012. Oral Health Care During Pregnancy: A National Consensus Statement. Washington, DC: National Maternal and Child Oral Health Resource Center.

# Guiding Objectives

## Healthy People 2030:

- Reduce the proportion of children and adolescents with active and untreated tooth decay — OH-02
- Increase the proportion of low-income youth who have a preventive dental visit — OH-09
- Increase the proportion of children and adolescents who have dental sealants on 1 or more molars — OH-10
- Increase the proportion of children, adolescents, and adults who use the oral health care system

# Guiding Objectives

ICPHD Local Oral Health Program Work Plan Objectives:

- **Work with partners...promoting oral health**
  - Imperial County Public Health Department( ICPHD)
  - Innercare
  - Imperial County Office of Education (ICOE)
  - Local Oral Health Program
- **Establish systems... enhancing care coordination**
  - Maternal Child and adolescent health advisory board
  - Imperial County Oral Health Task Force



# Overview

- Our primary aim is to seamlessly integrate dental care within OB/GYN and pediatric services in our FQHC, ensuring perinatal mothers and their children receive comprehensive care.



# Proposed Intervention

- To achieve an all-encompassing policy, systemic, and environmental change must be utilized by an FQHC that has multiple, easily accessible healthcare access points.
- The proposed intervention is based on the guidelines, policies, and suggestions from the following Governing agencies and Authorities on integrating dental referrals into prenatal care workflows:



# Implementation

## Interprofessional Oral Health Core Clinical Domains



National Network for Oral Health Access

## COMPREHENSIVE PERINATAL SERVICES PROGRAM (CPSP)

<sup>1</sup> <https://www.cdph.ca.gov/Programs/CFH/DMCAH/CPSP/Pages/default.aspx>

# Step 1: Risk Assessment

## During CPSP Orientation Appointment:

1. Do you currently have a dentist?
2. Have you had your teeth cleaned in the last 12 months?
3. Would you like to be referred to our Dental Dept.?
4. Do you have any swollen or bleeding gums, a toothache, mouth pain, problems eating or chewing food, or other problems in your mouth?
5. Do you have any questions or concerns about oral health care or getting oral health care while you are pregnant?

## Step 2: Referral Process



How do you determine the need for a referral?

What member(s) of the primary care team creates the dental referral?

How does the dental referral get to the dental clinic?

# NEXTgen Workflow

HEENT - ROS

Information pre-populated from a popup such as an HPI must be changed on that popup to prevent conflicting documentation.

Select all negative Quick:

<b>Head:</b> Neg Pos	<b>Eyes:</b> Neg Pos	<b>Neg Pos</b>	<b>Neg Pos</b>
<input type="radio"/> <input type="radio"/> Headache	<input type="radio"/> <input type="radio"/> Burning	<input type="radio"/> <input type="radio"/> Photophobia	<input type="radio"/> <input type="radio"/> Scotoma
	<input type="radio"/> <input type="radio"/> Diplopia	<input type="radio"/> <input type="radio"/> Redness	<input type="radio"/> <input type="radio"/> Floaters
	<input type="radio"/> <input type="radio"/> Discharge	<input type="radio"/> <input type="radio"/> Itchy	<input type="radio"/> <input type="radio"/> Tearing
	<input type="radio"/> <input type="radio"/> Dry	<input type="radio"/> <input type="radio"/> Nystagmus	<input type="radio"/> <input type="radio"/> Visual loss:
	<input type="radio"/> <input type="radio"/> Foreign body sensation	<input type="radio"/> <input type="radio"/> Pain	

Comments:  See chief complaint  See chronic conditions  See HPI  See past medical history

<b>Ears:</b> Neg Pos	<b>Nose &amp; Sinus:</b> Neg Pos	<b>Throat &amp; Mouth:</b> Neg Pos	<b>Dental:</b> Neg Pos
<input type="radio"/> <input type="radio"/> Discharge:	<input type="radio"/> <input type="radio"/> Olfactory disturbance	<input type="radio"/> <input type="radio"/> Change in taste	<input type="radio"/> <input type="radio"/> Caries
<input type="radio"/> <input type="radio"/> Excessive cerumen:	<input type="radio"/> <input type="radio"/> Nasal drainage	<input type="radio"/> <input type="radio"/> Voice change	<input type="radio"/> <input type="radio"/> Erosion
<input type="radio"/> <input type="radio"/> Fullness in ears:	<input type="radio"/> <input type="radio"/> Epistaxis	<input type="radio"/> <input type="radio"/> Cold sores	<input type="radio"/> <input type="radio"/> Disease
<input type="radio"/> <input type="radio"/> Hearing loss:	<input type="radio"/> <input type="radio"/> Facial pain	<input type="radio"/> <input type="radio"/> Dysphagia	
<input type="radio"/> <input type="radio"/> Infections:	<input type="radio"/> <input type="radio"/> Nasal congestion	<input type="radio"/> <input type="radio"/> Hoarseness	
<input type="radio"/> <input type="radio"/> Otagia:	<input type="radio"/> <input type="radio"/> Nasal obstruction	<input type="radio"/> <input type="radio"/> Lump in throat	
<input type="radio"/> <input type="radio"/> Tinnitus:	<input type="radio"/> <input type="radio"/> Rhinitis	<input type="radio"/> <input type="radio"/> Mouth sores	
	<input type="radio"/> <input type="radio"/> Rhinorrhea	<input type="radio"/> <input type="radio"/> Odynophagia	
<input type="radio"/> <input type="radio"/> Vertigo:	<input type="radio"/> <input type="radio"/> Sinusitis	<input type="radio"/> <input type="radio"/> Post nasal drainage	
<input type="radio"/> No <input type="radio"/> Yes Exposure to excessive noise:	<input type="radio"/> <input type="radio"/> Sneezing	<input type="radio"/> <input type="radio"/> Sore tongue	
		<input type="radio"/> <input type="radio"/> Pharyngitis:	
		<input type="radio"/> <input type="radio"/> Snoring	
		<input type="radio"/> <input type="radio"/> Tooth pain	

Other associated symptoms:

Other pertinent negatives:

Comments:  See chief complaint  See chronic conditions  See HPI  See past medical history

# Step 3: Patient Education

Throughout Pregnancy:

CPSP Orientation Appointment

Patient Waiting Room

Provider Visits

During Dental Telehealth

During Dental Visit

Postpartum / Pediatric Visit



# Step 4: Rapid Oral Health Screen

- Performed by the Prenatal PCP
- Rapid visual exam performed by PCP
  - Rapid screen should take 20 seconds at most
    - Tongue
    - Teeth
    - Gingiva
- Training PCP in confidence building is the limiting step



# Key Differences

- The proposed intervention for Imperial County
  - Increase frequency of using questionnaire and likelihood of referral to dental.
    - Initial visit/orientation appointment.
    - Beginning of the 2<sup>nd</sup> and 3<sup>rd</sup> Trimesters.
  - Ultimately seeks to establish dental/oral health optimization for every expectant mother, as a best practice and standard of care.

# Implementation Progress

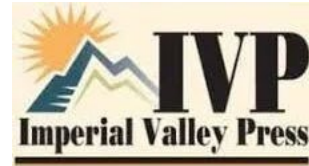
Since initiating the pilot project in Q3 2024 we have:

- Seen an increased number of prenatal mothers being seen.
- An increase in the number of infant/toddler exams.
  - Prior to first tooth eruption.
- Increased patient encounters in dental by 1.5-2%

# Next Steps

- **Forward Strategy:**
  - Our next phase focuses on:
    - Expanding our pilot solo clinic model
    - Enhanced data collection efforts.
- **Seeking Input:**
  - Scaling the model
  - Engaging more stakeholder

# Partnership



ICDS

Imperial County Dental Society



# Resources

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- Office of Disease Prevention and Health Promotion. (n.d.). *Healthy People 2030*. U.S. Department of Health and Human Services. Retrieved May 13, 2024, from <https://health.gov/healthypeople>
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- Hartnett, E., Haber, J., Catapano, P., Dougherty, N., Moursi, A. M., Kashani, R., Osman, C., Chinn, C., & Bella, A. (2019). The Impact of an Interprofessional Pediatric Oral Health Clerkship on Advancing Interprofessional Education Outcomes. *Journal of dental education*, 83(8), 878–886. <https://doi.org/10.21815/JDE.019.088>

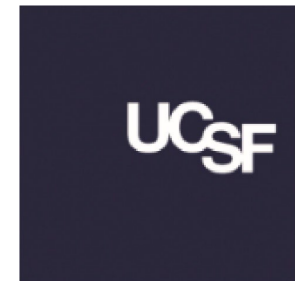
# Keep the Conversation Going

**MaxmillianC@icloud.com**

# Thank you



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