

Project Aim

Using a population-based approach, the UCLA More LA Smiles Oral Health Improvement Collaborative (OHIC) seeks to improve the health and well-being of children ages 0-6 in LA County by increasing the delivery of preventive oral health services, improving risk-based disease management, and enhancing coordination of care across settings by December 31, 2020.

Background

Dental caries is the most common chronic childhood disease in the US, and in California **6 out of 10 children will have tooth decay by the time they reach kindergarten.**

Although national recommendations endorse establishment of a dental home by a child's first birthday or first tooth eruption, EPSDT 2017 fiscal year data shows that fewer than 3% of children enrolled in Medi-Cal received any oral health services by their first birthday.

Because **children see a medical provider 8-11 times before a dental provider**, it is important to begin early oral health prevention and interventions at the medical home; as emerging science supports risk-based approaches to oral health during well-child visits.

East Valley Community Health Center (EVCHC) has **applied improvement science to develop a population-based approach** for improving children's oral health.

As part of the UCLA More LA Smiles Oral Health Improvement Collaborative, EVCHC is one of five Federally Qualified Health Centers using the Institute for Healthcare Improvement Breakthrough Series model to create an "all teach", "all learn" structure for participants, content experts, and quality improvement experts.

EVCHC **reports monthly population health measures** that demonstrate improvement of care across its population and has refined its workflow to **include preventive oral health services during primary care**. Preventive oral health services such as a caries risk assessment, application of fluoride varnish, healthy home routines and connection to a dental home can and should begin in medical homes in accordance with national recommendations.

Improvement Team



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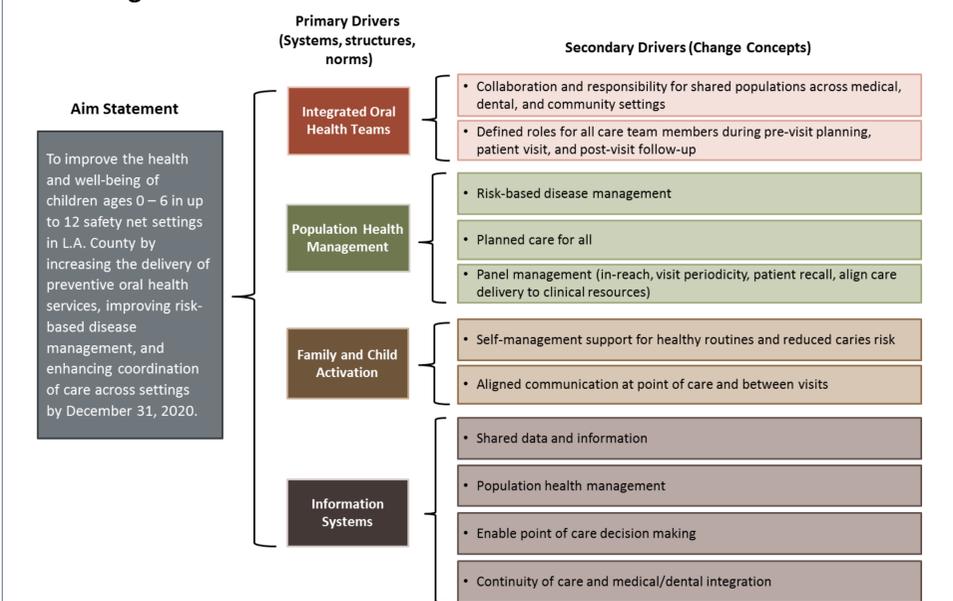


Erwin Rosales
Improvement Coach

Key Project Activities/Actions Taken

- Increase use of caries risk assessments and fluoride varnish applications at Pomona site during well child visits.
- Support healthy routines by tracking dental self-management goals using administrative codes during well child visits.

Driver Diagram



PDSA Cycle

Met and exceeded 15% increase of caries risk assessments and fluoride varnish applications for children ages 0-6 years old. We will continue data collection and aim for a 95% completion rate of CRA during well child visits and a 75% completion rate in fluoride varnish applications.

PDSA Objective
Increase the number of children ages 0-6 years old receiving a Caries Risk Assessment (CRA) and fluoride varnish application during a Well Child Visit by 15%.

Prediction
Providing an alert on patient's Electronic Health Record (EHR) will increase CRA completions and fluoride varnish applications by 15%

Act
For future tests, medical assistant will adopt and continue to set alerts in patients EHR stating that CRA form is needed.

Plan

Study
Tested for several days during a 2 week period. Each time increasing the number of completed caries risk assessments and fluoride applications.

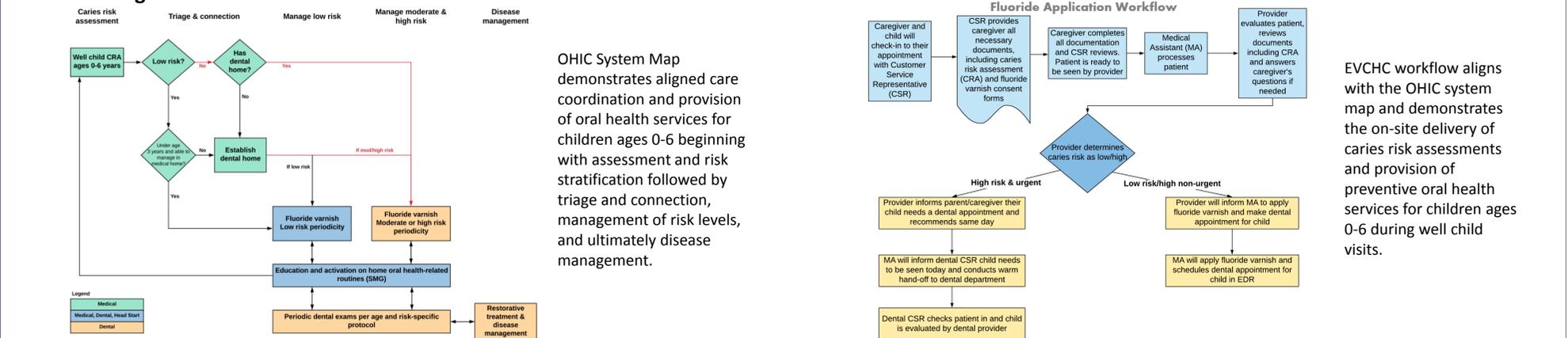
Do
During courtesy reminder calls a day prior to well child visits, medical assistant places an alert in EHR stating a caries risk assessment form is needed during the well child visits. Form is then included in WCV packet for medical assistant to initiate oral health assessment and provider to finish clinical findings.

There was an increase in number of children receiving CRA and fluoride varnish applications during a WCV for children ages 0-6 years old, also increasing the number of dental referrals.

Results



Workflow Diagram



Success & Advice

- Medical and Dental providers work effectively together to re-design workflow and care delivery among pediatric populations and have successfully increased delivery of oral health services outside the dental office.
- Preventive oral health services including oral health assessment, fluoride varnish applications, and dental home referrals are incorporated into a well child visit using quality improvement initiatives like OHIC and More LA Smiles.

Next Steps

- Continue to address oral health disparities of clinic population through self-management activation, motivational interviewing, oral health education delivery, and anticipatory guidance.
- Continue to test oral health care delivery processes to achieve a fully reliable system.