



The Pediatric Integrated Health Home Program (PIHHP)

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Best Practices Conference- Tucson, AZ

*Your HEALTH
is our PASSION*



El Rio Community Health Center: Mission

Improving the health of our
community through
comprehensive, accessible,
affordable, quality, and
compassionate care.

El Rio Community Health Center: Vision

To be a national model of
excellent healthcare

El Rio Community Health Center: Overview

- ◆ Federally Qualified Health Center
- ◆ 17 Clinic Locations
- ◆ Established:
 - 1970 for medical services
 - 1974 for dental services

El Rio: Staff

- ◆ Over 900 employees
- ◆ Over 80 Medical Providers
- ◆ 318,085 total encounters in 2014
- ◆ 83,824 total patients served in 2014

El Rio Dental: Locations

- ◆ Downtown/Congress Location: 16 operatories
- ◆ Southwest Location: 18 operatories
- ◆ Northwest Location: 7 operatories
- ◆ TMC- Special Needs Clinic: 2 operatories
- ◆ PIHHP (Congress Pediatric Medical Clinic): 2 operatories

El Rio Dental: Staff

- ◆ 11 Dentists
- ◆ 10 Registered Dental Hygienists
- ◆ 2 Oral Surgeons
- ◆ 1 Orthodontist
- ◆ 3 Pediatric Dentists
- ◆ 14 Pediatric Dental Residents
- ◆ 5 AEGD Residents
- ◆ 1 Dental Public Health Resident

El Rio Dental: Encounters

2014

◆ Encounters: 44,127

◆ Patients: 20,070

□ Of these patients:

■ 9,929 are dental only

■ 10,778 are dental/medical

El Rio: Dental Teaching Programs

- Rotations for 4th year dental students from Arizona School of Dentistry and Oral Health
- Lutheran Medical Center (Brooklyn, NY) Clinical Training Site:
 - Advanced Education in General Dentistry (AEGD)- started 1997
 - Advanced Education in Pediatric Dentistry- started 2010
 - Dental Public Health Residency Program- started 2014

El Rio: Special Dental Populations & Programs

- ◆ Homeless
- ◆ Collaboration with El Rio Special Immunology Associates (HIV/AIDS)
- ◆ Children's Clinic at Tucson Medical Center
- ◆ Arizona Hemophilia & Thrombosis Center

El Rio: Outreach Programs

- ◆ Dental Partnership Program- El Rio Foundation
- ◆ First Smiles Matter (Pima County)- Oral health screenings and fluoride varnish treatment for children (birth- 17 years)
- ◆ Oral health screenings for pregnant women in collaboration with El Rio OB/Gyn Assc.
- ◆ Community Health Fairs and outreach events throughout Tucson, AZ.



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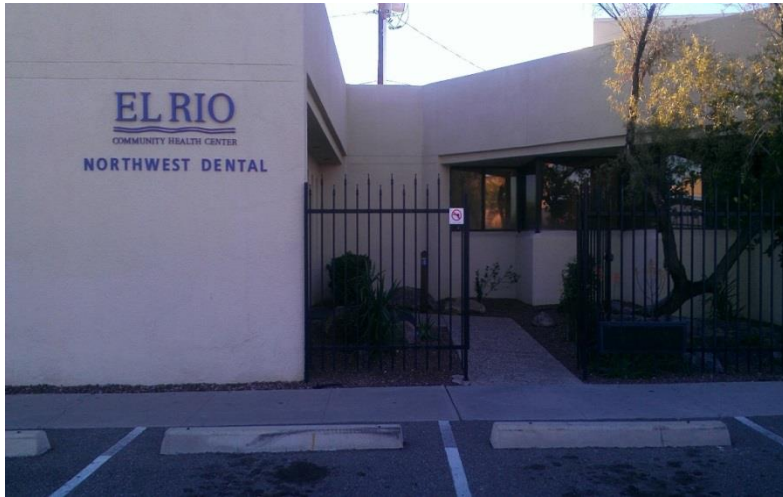




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Northwest Dental



Southwest Dental



INTEGRATION



Why Implement the Pediatric Integrative Health Home – Rationale

The American Academy of Pediatric Dentistry – Definition of Dental Home (2006):

- ◆ “The dental home is the ongoing relationship between the dentist and the patient, inclusive of all aspects of oral health care delivered in a comprehensive, continuously accessible, coordinated, and family-centered way. Establishment of a dental home begins no later than 12 months of age and includes referral to dental specialists when appropriate”.

Why Implement the Pediatric Integrative Health Home – Rationale

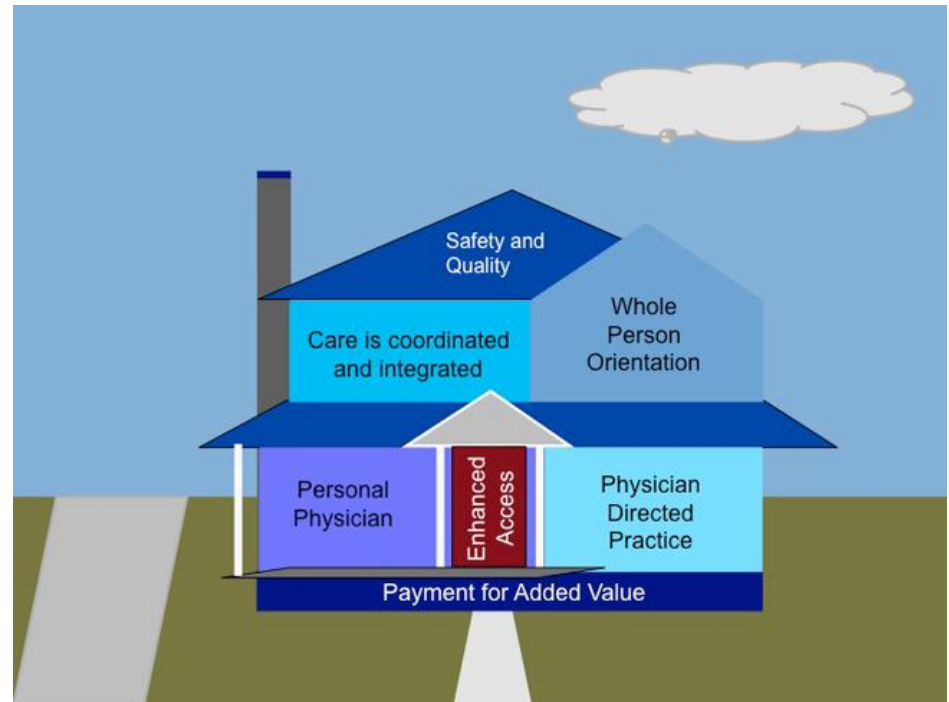
The American Dental Association - in 2006 urges parents and guardians, as a child's first tooth erupts, to consult with their dentist regarding:

- ◆ Scheduling the child's first dental visit. It is advantageous for the first visit to occur within six months of eruption of the first tooth and no later than 12 months of age, and
- ◆ Receiving oral health education based on the child's developmental needs (also known as anticipatory guidance).

Patient Centered Health Home: Medical Home

Joint Principles of PCMH:

- ☐ Personal Physician
- ☐ Whole Person Orientation
- ☐ Coordinated/Integrated Care
- ☐ Enhanced Access
- ☐ Quality & Safety
- ☐ Payment



Necessity of Integrated Health Care

- ◆ El Rio strives to meet all needs of the patient population.
- ◆ In order to meet these needs, El Rio offers a variety of medical/dental/behavioral health/pharmacy services to address all patient needs in an effective, caring, and efficient manner.

Challenge: Integration of Care

Needs to address, problems to solve, barriers to eliminate: 2006

- ◆ High Caries Rate (Advocacy and Evidenced-Based Practices)
- ◆ Limited Access to El Rio Dental Care – 38,000 Pediatric Medical Patients (Eliminate Barriers)
- ◆ Low comfort level among Staff Dentists treating the challenging Pediatric Patient -only 2 out of 12 (Eliminate Barriers)

Needs to address, problems to solve, barriers to eliminate: 2006

- ◆ Need to improve Dental IQ of the Pediatric Medical Staff (Advocacy) * Dr. Wagner*
- ◆ Pediatric MD's perceptions that Staff Dentists were not comfortable treating children (Eliminate Barrier).
- ◆ Pediatric MD's referring to outside Medicaid "Mills" (QA Concerns and Lost Revenue).

Implementation of Integrated Health Care: PIHHP

- ◆ The best way to meet all patient needs is to provide a patient centered medical home
- ◆ El Rio Dental joined with El Rio Pediatrics to create the Pediatric Integrated Health Home

Implementation of Integrated Health Care: PIHHP

- ◆ Eliminate barriers to care for patients
- ◆ Incorporate evidence based strategies by applying research findings to improve oral health outcomes
- ◆ Allow for the achievement of better outcomes utilizing a collaborative/team approach
- ◆ Medicaid program fully funding children's dentistry

PIHHP: Goals

- ◆ Decrease caries rate in El Rio-Pediatric population
- ◆ Increase access to dental care at El Rio for pediatric population
- ◆ Eliminate practice of referring out dental care
- ◆ Increase the percentage of children treated in dental practice to 50%

PIHHP: Goals

- ◆ Benchmark: Increase the number of children receiving a dental exam within 12 months of receiving a well child medical visit.
- ◆ Increase dental IQ for medical staff
- ◆ Increase Staff Dentists' comfort level in treating children
- ◆ Improve financial sustainability of dental operations

Evolution of PIHHP

- ◆ The evolution of the pediatric integrated health home is a long journey/ongoing process
- ◆ The El Rio team has implemented the project through 8 phases (more phases to come)
- ◆ PIHHP was open to seeing patients in September 2014

Evolution of PIHHP: Phase 1

Establishing a Project Team:

- ◆ **Chief Clinic Officer:** Dr. Doug Spegman, MD
- ◆ **Associate Medical Director for Pediatric Medicine:** Dr. Andrew Arthur, MD
- ◆ **Dental Director:** Dr. Gregory LaChance, DDS
- ◆ **Associate Director for Pediatric Dentistry:** Dr. Amanda Pinder, DDS
- ◆ **Dental Manager:** Candace Clausen, MBA
- ◆ **Pediatric Dental Clinic Supervisor:** Marcela Noriega
- ◆ **Clinic Supervisor/Facilitator:** Joan Shafer
- ◆ **Dental Public Health Resident:** Dr. Tania Arthur, DDS/MPH

Evolution of PIHHP: Phase 2

Staff Education:

- Multiple organizational meetings and in-service trainings
 - Pediatric Medical Staff
 - Dental Staff
 - Women, Infants, Children (WIC)

Trainings focused on the purpose of PIHHP and importance of oral health starting at birth. Increasing staff knowledge eliminates barriers.

Evolution of PIHHP: Phase 3

Collaborative Caries Prevention Program

- ❑ Fluoride Varnish Program in pediatric medical suite
- ❑ Dental Caries Screening Form- completed by RDH
- ❑ Feeder System for PIHHP/Pediatric Dental Residents
- ❑ “Warm Hand Off System”
- ❑ Child receives a dental exam in conjunction with well child visit

Child's Name/Date of Birth (mm/dd/yy)

Site Name/ Zip Code

BSS/Treatment Record

Surveillance Data (for Statistical Purposes Only)
(Use BSS Definitions-Screen Entire Mouth-No Explorers)

Check <u>one</u> per box	Initial Assessment	2 nd Visit	3 rd Visit
Non Cavitated White Spots	<input type="checkbox"/> -Yes <input type="checkbox"/> -No	<input type="checkbox"/> -Yes <input type="checkbox"/> -No	<input type="checkbox"/> -Yes <input type="checkbox"/> -No
Untreated Decay	<input type="checkbox"/> -Yes _____ # Teeth <input type="checkbox"/> -No	<input type="checkbox"/> -Yes _____ # Teeth <input type="checkbox"/> -No	<input type="checkbox"/> -Yes _____ # Teeth <input type="checkbox"/> -No
Treated Decay	<input type="checkbox"/> -Yes _____ # Teeth <input type="checkbox"/> -No	<input type="checkbox"/> -Yes _____ # Teeth <input type="checkbox"/> -No	<input type="checkbox"/> -Yes _____ # Teeth <input type="checkbox"/> -No
ECC	<input type="checkbox"/> Yes <input type="checkbox"/> -No	<input type="checkbox"/> -Yes <input type="checkbox"/> -No	<input type="checkbox"/> -Yes <input type="checkbox"/> -No
Treatment Urgency	<input type="checkbox"/> -Urgent <input type="checkbox"/> -Early <input type="checkbox"/> None	<input type="checkbox"/> -Urgent <input type="checkbox"/> -Early <input type="checkbox"/> None	<input type="checkbox"/> -Urgent <input type="checkbox"/> -Early <input type="checkbox"/> None

-Recommend FV applications
☐ 2 with FSM / 2 other with dental home

Consent Form/Health History Reviewed	<input type="checkbox"/> -Yes <input type="checkbox"/> -No	<input type="checkbox"/> -Yes <input type="checkbox"/> -No	<input type="checkbox"/> -Yes <input type="checkbox"/> -No
Fluoride Varnish Applied	<input type="checkbox"/> -Yes <input type="checkbox"/> -No	<input type="checkbox"/> -Yes <input type="checkbox"/> -No	<input type="checkbox"/> -Yes <input type="checkbox"/> -No
Post Varnish instructions given	<input type="checkbox"/> -Yes <input type="checkbox"/> -No	<input type="checkbox"/> -Yes <input type="checkbox"/> -No	<input type="checkbox"/> -Yes <input type="checkbox"/> -No

Comments:

El Rio Provider ID	Provider Signature (Required for documentation)	Date
1 st		
2 nd		
3 rd		

Evolution of PIHHP: Phase 4

Dental Reporting Forms

- Send reporting forms to MD after dental exam
- Closes the loop in pediatric integrated health care
- Pediatric MD discusses results with parents
- Encourages the continuation of linked dental/medical appointments.

**El Rio Community Health Center
Integrated Health Home Program
Dental Report**

PATIENT NAME: _____
DATE OF BIRTH: _____ **AGE OF PATIENT:** _____
PHYSICIAN NAME: _____
DENTAL CLINIC: Southwest _____ Congress _____ Northwest _____
NAME OF DENTAL PROVIDER: _____
DATE OF DENTAL SERVICES: _____

Dear El Rio Medical Provider:

Thank you for referring this patient to us as part of the Integrated Health Home Program (IHHP). The goal of the IHHP is to establish a collaborative physician/dentist health team in order to provide integrative medical/dental care for El Rio's pediatric patients. Your patient named above, was seen by an El Rio Dental provider. The following report contains the patient's dental diagnosis, dental services provided on the day of the examination as well as the follow-up dental treatment plan recommended for your patient to achieve optimum dental health. Please review this report with your patient's parents at their next medical appointment. This will re-enforce the need for good oral health as well as let the parents know that the El Rio medical/dental team is truly concerned and working together to improve the overall health of their child. If you have any questions or concerns, please feel free to contact the patient's dentist as contained in this report.

Diagnosis

Caries: YES NO Teeth with Caries: _____ Gingivitis: YES NO
 Malocclusion: YES NO Other: YES NO If YES: _____

<u>Treatment Provided</u>	<u>Completed</u>	<u>Proposed</u>
Examination		
Caries Screening (under 3 y/o)		
Radiographs		
Cleaning		
Fluoride Varnish		
Oral Health Education		
Nutritional Counseling		

Follow-Up Treatment Plan

Number of the following treatment/s required:

Fillings: _____ Pulpotomies: _____ Crowns: _____ Extractions: _____

Other: _____

Recommended Dentist: Pediatric Dentist _____ General Dentist: _____ Orthodontist: _____

Other Treatment Options:

Oral Sedation _____ IV Sedation _____ GA _____ Ortho Consultation _____

Place of Treatment: El Rio _____ Other: _____

Recall Schedule: 3 month _____ 6 month _____ 1 year _____

Comments: _____

Signature of Providing Dentist: _____

To reach a dental provider, please dial "0"

Evolution of PIHHP: Phase 5

Development/Utilization of Lifetime Cavity Prevention Record

- Parental education tool
- Delineates frequency of dental encounters
- Patterned after Lifetime Immunization Record

Description of Preventive Services

Oral Exam: We check your child's entire mouth: teeth, tongue, bite and gums to keep them healthy!

Fluoride Varnish Treatment: We place a special fluoride on your child's teeth to prevent decay!

Oral Hygiene Instruction and Nutritional Counseling: We teach you and your child how to brush and floss properly; we also talk about eating habits to keep teeth healthy!

Dental Cleaning: Your child's teeth will be professionally cleaned by one of our friendly dental hygienists!

Dental Sealants: We place a white, thin, protective coating on molars at ages 6 and 12 years to prevent cavities!

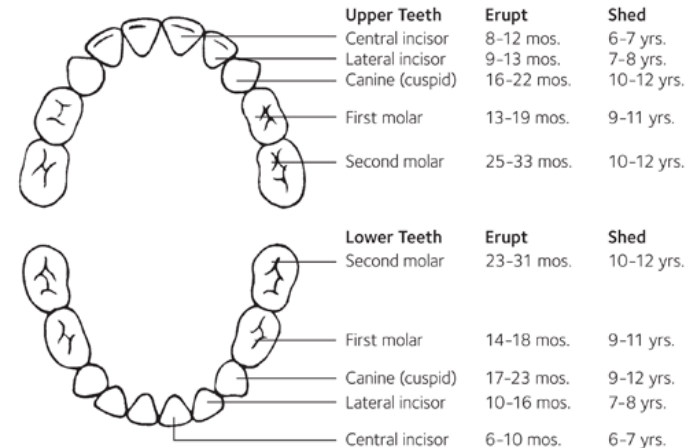
TOOTH ERUPTION CHART

Courtesy: American Dental Association

If your child is at high risk for dental cavities, you and your dental provider should discuss the possibility of your child receiving fluoride every three months.

*Please note the gap between 6 years and 12 years- your child should still receive dental care every 6 months. Ages 6 & 12 are important for sealants due to eruption of the 1st & 2nd adult molars.

NAME: _____ DOB: _____



Procedure →	Oral	Fluoride Varnish	OHI/	Dental	Dental
Age ↓	Exam	Treatment	Nutrition	Cleaning	Sealants
6 months	/ /	/ /	/ /		
Signature of Provider					
12 months	/ /	/ /	/ /	/ /	
Signature of Provider					
18 months	/ /	/ /	/ /	/ /	
Signature of Provider					
24 months	/ /	/ /	/ /	/ /	
Signature of Provider					
30 months	/ /	/ /	/ /	/ /	
Signature of Provider					
36 months	/ /	/ /	/ /	/ /	
Signature of Provider					
42 months	/ /	/ /	/ /	/ /	
Signature of Provider					
48 months	/ /	/ /	/ /	/ /	
Signature of Provider					
54 months	/ /	/ /	/ /	/ /	
Signature of Provider					
60 months	/ /	/ /	/ /	/ /	
Signature of Provider					
6 years	/ /	/ /	/ /	/ /	/ /
Signature of Provider					
12 years	/ /	/ /	/ /	/ /	/ /
Signature of Provider					

Evolution of PIHHP: Phase 6

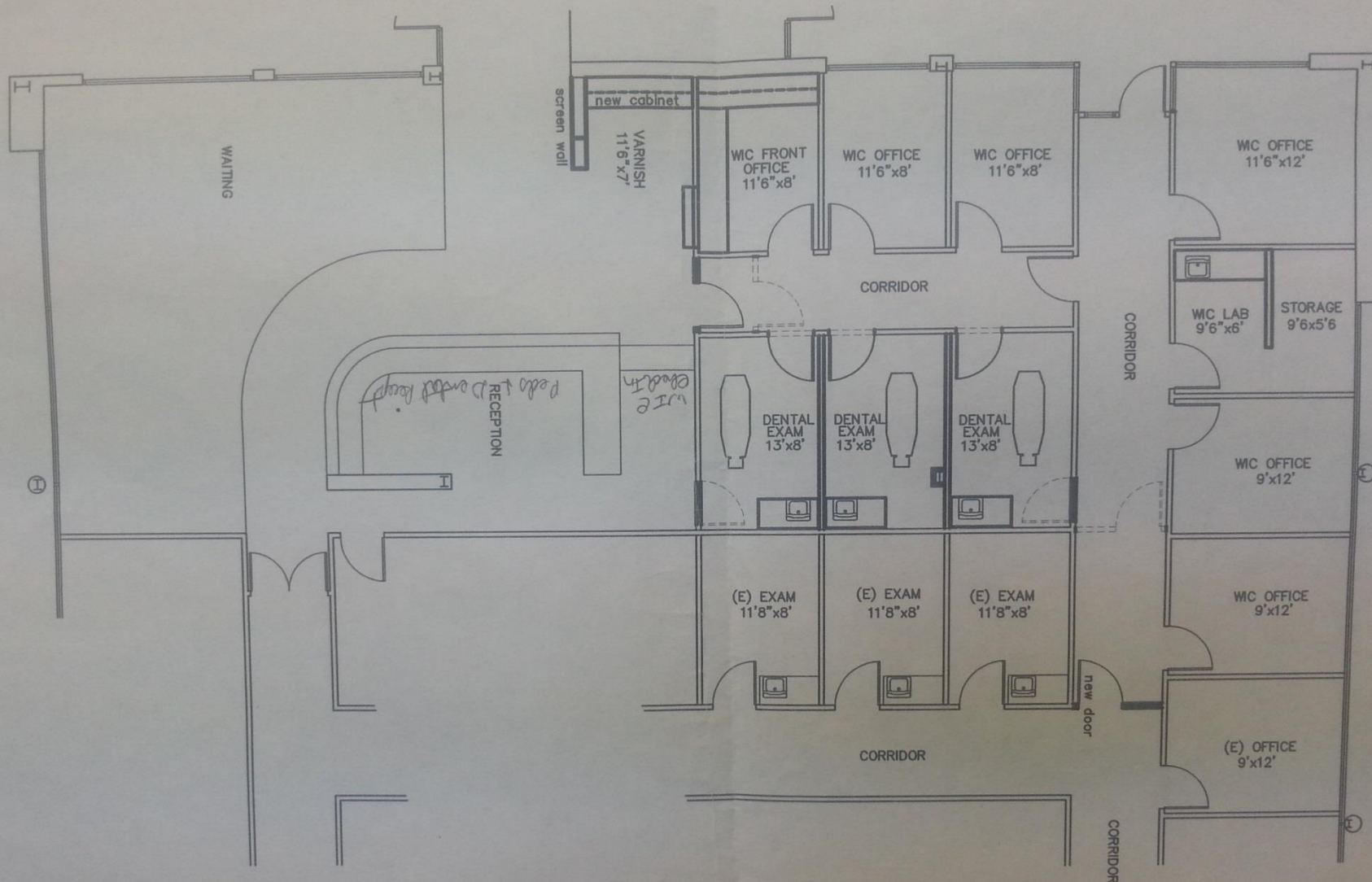
Establish Pediatric Dental Residency Program

- Became clinical training site in July 2010 for Lutheran Medical Center.
- Two year program
- Expanded capacity for treating pediatric dental patients
- First class: 4 Residents (2010)
- Current class: 14 Residents (2014)

Evolution of PIHHP: Phase 7

Established the Pediatric Integrated Health Home Program

- ◆ In conjunction with Pediatric Medicine
- ◆ Built out two dental operatories in Congress-Pediatric Medical Clinic
- ◆ Dental visit on same day as well child visit
- ◆ Dental exams/x-rays/prophy/fluoride varnish/sealants



FLOOR PLAN — CONGRESS PEDS

02-14-13

W.I.C. = 1073 SQ. FT.

DENTAL = 390 SQ. FT.





Evolution of PIHHP: Phase 8

Evaluation

- Weitzman Process Improvement Work Group
- Ongoing evaluation is essential to the success of PIHHP
- Quarterly reports
- Weekly meetings

PIHHP Results and Achievements



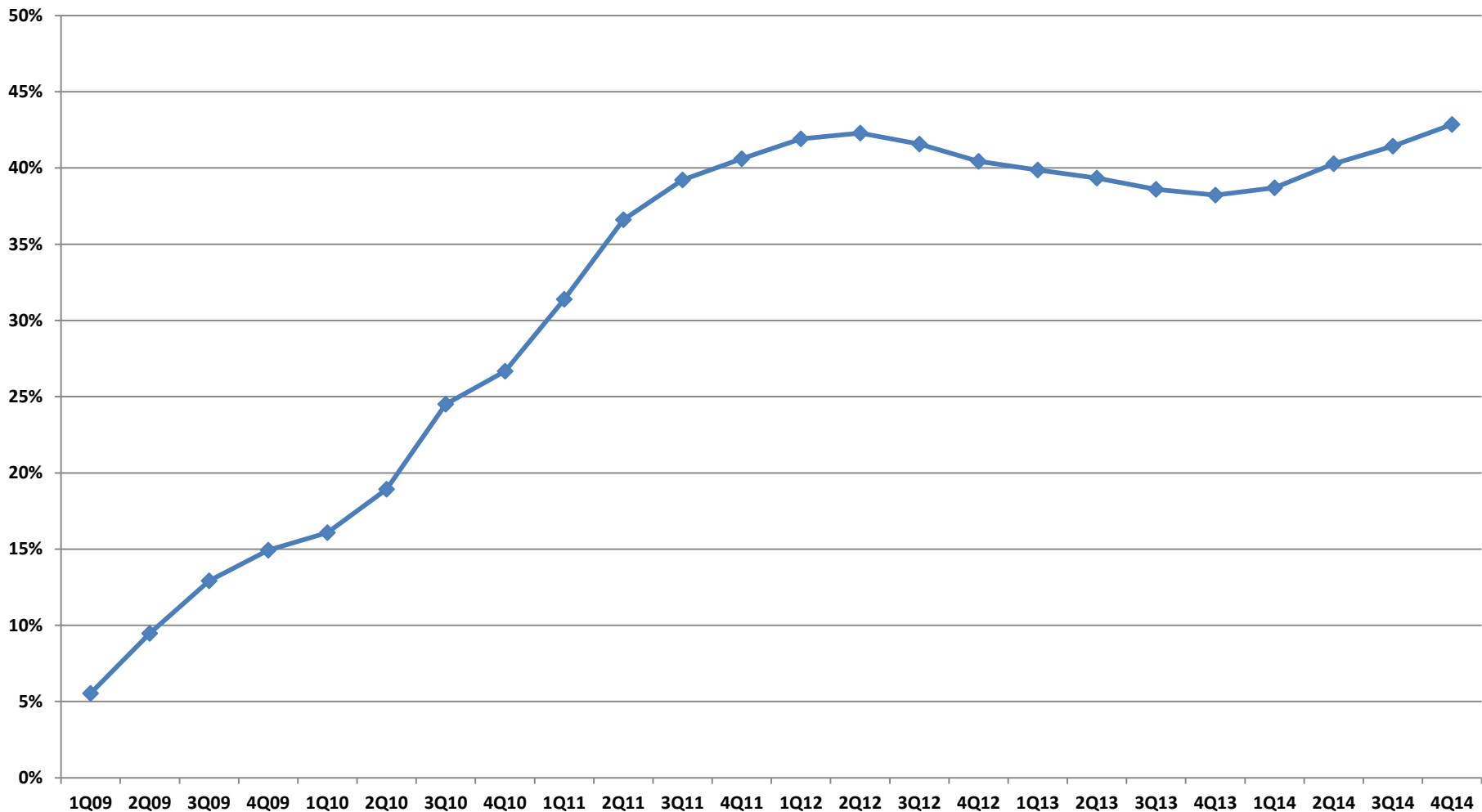
PIHHP Results and Achievements

- ◆ Increased knowledge and comfort for staff and dentists in treating pediatric patients
- ◆ Increased dental knowledge and collaboration with medical staff
- ◆ Pediatric MDs decreased outside referrals for dental care
- ◆ Increased access to children's dental care at El Rio

PIHHP Results and Achievements

- ◆ Parents appreciate having medical visit and dental exam at the same time- saves them a trip to the clinic
- ◆ Parents perceive increased quality of care and teamwork among El Rio providers when pediatricians:
 - Review the results of the dental exam
 - Encourage planned follow up of restorative care

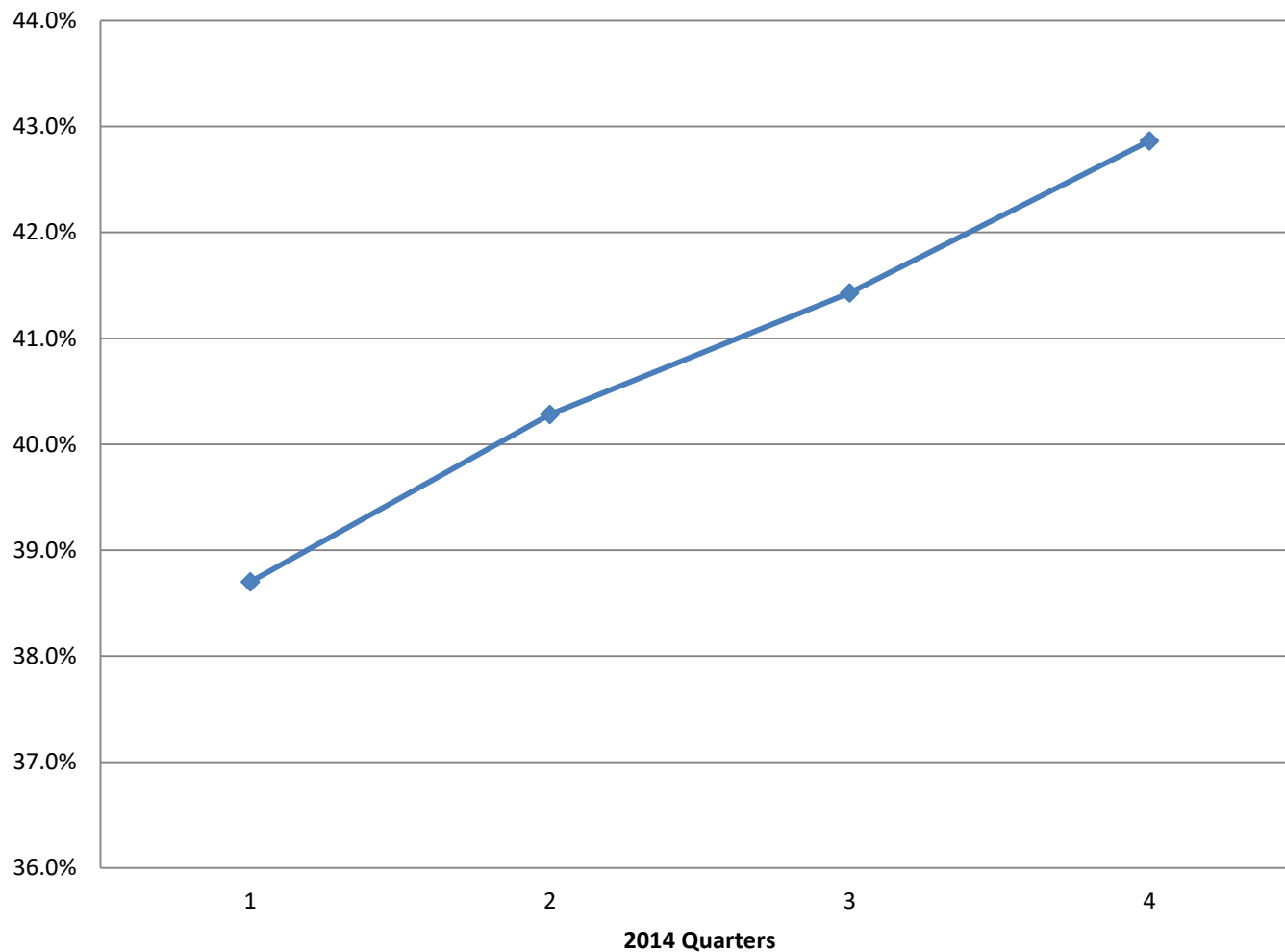
Percentage of Patients Aged 1-5 Who Had a Dental Evaluation Within One Year of a Wellness Visit
(1Q09-4Q14)



PIHHP Results and Achievements

Year	Percentage of children receiving dental exam within 12 months of well-child MD visit
2009	14.9%
2010	26.7%
2011	40.6%
2012	40.4%
2013	38.2%
2014	42.9%

Percentage of Patients Aged 1-5 Who Had a Dental Evaluation Within One Year of a Wellness Visit (2014)



On-Going Development of PIHHP- Next Steps

◆ Reporting

- Decrease in dental caries (DMF rates)
- Increased number of pediatric patients into dental practice
- Increased number of pediatric patients receiving simultaneous medical/dental visits
- Patient satisfaction surveys

On-Going Development of PIHHP- Next Steps

- ◆ Meaningful use, advocacy, and PR implications at the constituent and state levels
- ◆ If proven effective- potential lobbying opportunities for increase preventive services funding
- ◆ Potential integration model for export

On-Going Development of PIHHP- Next Steps

- ◆ Collaboration with MPH extern projects and DDS/MPH residency programs (LMC)
- ◆ Collaboration with National Interprofessional Initiative on Oral Health
 - *“engaging clinicians; eradicating dental disease”*

On- Going Development of PIHHP- Next Steps

- ◆ Integration of registered dental hygienists (RDH) into the medical team
- ◆ Incentivize the RDHs to establish new dental patients into PIHHP
- ◆ Integrate preventive dental visits into WIC appointments

Strategies for Implementation- Practical Pearls

#1- Best Location for the Caries Screening/Fluoride Varnish Program

- ◆ Pediatric Medical Waiting Area
- ◆ Recruit siblings of medical patients as well
- ◆ Generates interest.
- ◆ Good PR

Strategies for Implementation- Practical Pearls

#2-Location of Dental Operatories in Pediatric Medical Suites

- ◆ Front door in the pediatric medical waiting area and back door with access from pediatric medical clinic or in central location within the medical suite
- ◆ Can increase scope of services from screenings and fluoride varnish to exams, x-rays, prophylaxis, and sealants.

Strategies for Implementation- Practical Pearls

#3- Staff Dental Operatories with Pediatric Dental Residents and RDH's

- ◆ Schedule follow up restorative on pediatric dental residents schedule
- ◆ Use as 'feeder' into pediatric residency training program

Strategies for Implementation- Practical Pearls

#4- Varnish Program Guidelines

- ◆ RDH screens 3-4 patients per hour (12-16 per 4 hour session)
- ◆ Have 1 DA for assistance
- ◆ Make follow up appointments with dentists
- ◆ Check state Medicaid Programs for potential reimbursement

Strategies for Implementation- Practical Pearls

#5- Fund Raise

- ◆ El Rio Foundation provides grant money for prevention services
- ◆ Officially funded program by the Foundation
- ◆ Raised over \$130,000 since 2009
- ◆ Donors: Union Pacific Railroad Foundation, Arizona Cardinals Foundation, Arizona Diamondbacks Foundation, Delta Dental of Arizona Foundation

Strategies for Implementation- Practical Pearls

#6- Much easier participating in outreach events

- ◆ Varnish program provides outreach everyday
- ◆ Structure and organization is culturally engrained in the Health Center
- ◆ Examples: Boys and Girls Club Health Fairs, El Rio Health Fairs, and Give Kids A Smile Day events



Strategies for Implementation- Practical Pearls

#7- Potential clinic service areas for Varnish Program

- Family Practice
- WIC

#8- Caries Screening Form

Strategies for Implementation- Practical Pearls

#9- Annual in-service on oral health and PIHHP to the medical staff provided by 1st year pediatric dental residents

Strategies for Implementation- Practical Pearls

#10- Implement a Pediatric Dental Residency Training Program- Ideas for Success

- ◆ Requires 3 Pediatric Staff Dentists (multiple sites)
- ◆ Hire 2 Pediatric Dentists initially to treat patients build up patient pool for at least one year
- ◆ Hire 3rd Pediatric Dentist when starting program to provide adequate coverage for vacations/sick leave
- ◆ 1.0 FTE of dental services from 3 Pediatric Dentists

Resources

- ◆ National Network for Oral Health Access (NNOHA)
 - “Promising practices”
 - PIHHP

QUESTIONS OR COMMENTS

THANK YOU

Dr. Greg LaChance

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