Washington County Dental Health Access Project: Innovative Partnership to Achieve Equity in Access to Oral Health

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Background

- Oral Health Access was identified as priority area in the Washington County Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP)
- CHIP organizations partnered to develop dental access pilot program
 - Washington County Public Health
 - Oregon Oral Health Coalition
 - Pacific University School of Dental Hygiene Studies
 - Providence Promotores de Salud
- Serve patients of the Pacific University dental hygiene outreach van and migrant farm worker camps
- Program focuses on:
 - CDHC Model
 - Coordinating access to care
 - Ensuring closed-loop referrals to needed follow-up services recommended at hygiene van visit
 - Developing community resources for donated care



CDHC Training

- Rio Salado College Online program
 - August 2016 August 2017
- ADA Scholarship







CDHC Role & Duties

In General:

- A dental team member whose primary function is the prevention of dental disease with an emphasis on community health worker skills.
- All CDHCs share basic core competencies. However, their job responsibilities vary depending on the goals of the clinics and communities they serve. Examples:
 - Increase awareness of the importance of oral health and how to become and stay healthy through community outreach
 - Helping patients navigate the health care system
 - Providing oral health education and clinical preventive services, such as screenings, x-rays, fluoride and sealants
 - Improving health outcomes by linking at-risk patients to dentists
- The CDHC model has been adapted to numerous community settings, including clinics, private practices, schools, Head Start centers, institutional settings, churches, social service agencies and others.
- The CDHC's greatest strengths are the decrease in missed appointments, coordination of care, and management of follow-up care, prevention and education.

Source: ADA CDHC Brochure



CDHC Roles & Duties

This project:

- Additional services I provided:
 - Closed loop referrals for patients receiving hygiene services at the Outreach Van
 - Community-based preventions, coordination of care, provide education and training
 - Building community partnerships that provide care to patients in need of dental services (NHS, VG, MTI)
 - Create plan of care that best serves the well-being of each patient, while also giving education to volunteers that enables them to support their patients' success
 - I am in dialogue with patients several times after their appointment in order to close the loop on referrals (texting)



Preliminary process and outcomes

- Out of 110 clients:
 - 63 Referred for fillings, extractions or deep cleanings
 - 35 completed
 - 14 referred for high blood pressure, high blood sugar, and/or other social services/resources
 - 5 completed
 - 34 did not need any referrals I kept track of them for their six month recare, some returned to the van after six months!

69 clients completed treatment and/or came back for their recare appointment (**closed the loop**) – That's <u>%62.7</u>!!!



Preliminary process and outcomes

- Seven clients established dental homes
- Six clients returned for recare
- Improved medical and oral health knowledge for Promotores (Blood pressure example and Pregnancy gingivitis example)
- Completed community dental access resource guide
- Provided Oral Health training for African CHWs to become certified in Oregon
- Inspired two others to pursue the CDHC program!





Stories from the Van



Migrant Camp Experience June 11th



Students did not show up for rotation, I identified what was needed and jumped right in to help.



Stories from the Van





Success Stories

Client #14 seen initially on February 5th

- Services provided: DH Screening, OHI, Gross
 Debridement, Fluoride Varnish
- Referrals:
 - PU School of DH for FMX, comp exam, SRP, restorations
 - MTI for more restorations and extractions
 - Had SRP and some fillings at Pacific University
 - I called MTI and scheduled patient for remaining treatment
- All services completed in April (CLOSED THE LOOP!)
- Client seen July 23rd at the PU van for recare ³



Success Stories

Client #25 seen initially on Feb 12th

Services provided: DH Screening, OHI, Gross
 Debridement, Fluoride Varnish
 Had FMX, Comp Ex, SRP at PU over four appointments
 Client seen Sept 10th at the PU van for recare

Client #56 seen initially on April 2nd

Services provided: Screening only (board patient)
 Qualified as board patient: had FMX, Comp Ex, SRP at PU
 Client was seen Sept 24th at the PU van for recare



Thank you!

Questions

