

Integration of Oral Health Care into Prenatal Care and Diabetic Management:

A Community Health Center
Experience

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Primary medical Care and oral health treatment



What's the problem?

- The separation between oral health and systemic health fails to the holistic needs of patients.



What's the solution?

- Provide efficient communication between oral health care and primary health care providers.
 - Thus creating **Integration of Care**

Donoff, McDonough, Reidy, 2014

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Rationale Behind Program....

- ▶ There is an association between periodontal disease and premature labor as well as low birth weight.
- ▶ Good oral health may have a positive effect on cardiovascular disease, diabetes and other disease states.
- ▶ Optimal maternal oral health hygiene during the perinatal period may decrease the amount of caries-producing bacteria transmitted to the infant during common parenting behavior.

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Safety of Dental Care in Pregnancy...

- ▶ Safety is a concern expressed by both patients and dentists.
- ▶ According to the ADA and ACOG, having dental X-rays during your pregnancy is considered safe with appropriate shielding.
- ▶ Some women may elect to avoid dental work during the first trimester knowing this is the most vulnerable time of development. However, there is no evidence suggesting harm to the baby for those electing to visit the dentist during this time frame.
- ▶ Dental work while pregnant, such as cavity fillings and crowns, should be treated to reduce the chance of infection.

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Implementation Process

1. Clinical staff overseeing process need to familiarize themselves with the pertinent medical literature. ACOG and ADA both support oral health care during pregnancy. **Everyone has to buy in.**
2. **Adequate dental staff** are needed to insure that when the program is begun, nothing has been “over promised.” Provider access must be adequate to meet demand.
3. Both obstetric staff and dental support staff, including the front desk, must buy into the oral health initiative.
4. Develop patient information/coaching/counseling...”Buy In”

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A Little About Olde Towne Medical & Dental Center (OTMDC)....

- ▶ Established 1994 to offer primary medical and dental care to uninsured and underinsured of our community, as well as prenatal care.
- ▶ 85.5% patients from York and James City Counties and greater City of Williamsburg and 83.3% between ages 18-64
- ▶ ~15,000 patients visits a year for ~5,000 individual patients
- ▶ 76.6% of patients uninsured; 3.6% Medicaid, 0.5% Medicaid dental, 7.2% Medicare, 8.7% MCO...48.8% below 138% of federal poverty
- ▶ Patient profile: 35.2% white; 31.1% black; 23.5% Latino; 3.8% Asian
- ▶ NO PATIENT IS TURNED AWAY FOR INABILITY TO PAY

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Initiating the Process at OTMDC

- ▶ From Oct-Dec of 2014:
 - Held educational discussions with dental, medical and obstetric providers
 - Held sessions with front desk and medical, dental and obstetrical support staff. Designated team leader for medical and dental.
 - Created dental hours dedicated to obstetric patients, and also setup “work in” appointments each day for them
 - Obtained materials for patient education, from Dept. of Health as well as other resources.
 - Began ongoing monthly monitoring of referral of pregnant and diabetic patients to dental service beginning January 2015.
 - Visits tracked on electronic health record...Allscripts

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Results for Prenatal Patients

Year	Appt. Offered	Scheduled	Cancelled	"No Show"	Seen
2019	222	119	41	28	49(22%)
2018	330	180	45	51	84(25%)
2017	316	224	60	62	102(32%)
2016	284	134	39	23	72(25%)
2015	278	155	46	28	81(29%)

*The data for 2018, 2017, 2016 and 2015 encompass the entire year, while 2019 is Jan-Oct only.



What are outcomes of prenatal dental visits?

- Of the past 388 pregnant patients seen by our dentists, we performed:
 - ❖ 143 teeth cleanings
 - ❖ 280 restorative care (dental fillings)
 - ❖ 159 extractions
 - ❖ 43 scalings (scraping teeth and gums)

OVER 85% OF PRENATAL PATIENTS WHO HAD A DENTAL VISIT WERE FOUND TO HAVE A DENTAL PROBLEM....THIS IS NOT PREVENTATIVE CARE

Results for Diabetic Patients

Year	Appt. Offered	Scheduled	Cancelled	"No Show"	Seen
2019	95	53	32	10	11 (20%)
2018	93	48	30	15	3 (6%)
2017	97	31	15	5	11 (35%)
2016	84	34	9	2	23 (67%)
2015	56	32	7	5	20 (62%)

*The data for 2018, 2017, 2016 and 2015 encompass the entire year, while 2019 is Jan-Oct only.

Additional Observation

- ▶ During this same period of time, 2015-present, we also initiated including oral health exams in the care of our diabetic patients.
- ▶ Of our 1016 diabetic patients, 425 were contacted and offered **FREE** diabetic dental screenings, 268 (63%) accepted referral to our dentists, but only 198 (46.5%) actually scheduled an appointment.
- ▶ Of those 268, only 68 (**16%**) patients kept their appointment. These 68 patients needed:
 - ❖ 80 oral surgical procedures
 - ❖ 15 root canals
 - ❖ 86 fillings



Why do our patients choose not to see a dentist for free oral health exam?

- ▶ We surveyed 65 patients who repeatedly declined to make a dental appointment, and asked the reason for their reluctance....
- ▶ All stated they were not having a dental problem, and saw no reason to see a dentist.
- ▶ Several mentioned transportation issues, related to work hours for themselves or the person they relied on for transportation.
- ▶ Very busy lives...concern over shelter, food, jobs that have uncertain and changing hours...always feel like they don't have enough time...
- ▶ No one mentioned fear of dentists or concerns of dental care adversely affecting pregnancy, although this was asked directly.

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