How to create an integration plan

The first step to integration is to design a tailored strategy to integrate services and education throughout your health system that is data-driven, sustainable, and informed by patient needs. This toolkit offers an integration framework and provides core components of integration, resources, real-life examples, and tips to navigate unique organizational and community challenges. Start your journey by considering the core components of integration:

Identify Your Team

Your most valuable asset is your team, including clinical staff, administrative leaders, and front desk support. Start by assessing your entire team's oral health knowledge, care capacity, and motivation for change. This assessment will serve as a jumping-off point as you develop an integration initiative that meets your patients' and clinic's needs. Encourage open communication throughout the process to address questions and concerns as they arise.

Who already serves as an integration champion? Who are the outliers? Do you have leadership support? What integration practices are you already doing, and what are your future goals? How do you currently report patient outcomes to other team members or external providers?

Understand Your Community's Needs and Diversity

Refer to community health needs assessments, patient data and screenings, patient interviews, and your own observations to understand the community you serve including its health disparities and cultural richness. The care integration approach you design should address needs in a way that is sensible, equitable, and culturally sensitive.

Do the issues lifted up in community assessments match what you are seeing and hearing at the clinic? What disconnects do you see? For example, is the community-level diabetes rate consistent with what you are seeing in the clinic, or does the data suggest an opportunity for additional screening?

Design Measurable Goals

Use your team's feedback and data about your patients and community to choose measurable goals that assess both patient health outcomes and process changes. Implement changes to workflow and measurement using process mapping, health IT support, and an internal data dashboard, and continuously study and adjust your changes as you find weakness and opportunities. Review your measurable goals periodically to evaluate the project's success at improving health and workflow. The National Committee for Quality Assurance provides sample health quality measures you can adopt to assess your care integration plan, such as the Healthcare Effectiveness Data and Information Set (HEDIS) and Patient-Centered Medical Home (PCMH), and the Consumer Assessment of Healthcare Providers & Systems (CAHPS).

Factors to consider when integrating care

This toolkit outlines a few, common integration models, but there are numerous pathways to integrated care. It is vital first to consider the unique needs and challenges of your clinic. The following factors can apply to any population and should be considered across all integration models to ensure success and sustainability.

Leadership and Buy-in

When care is integrated, patient health improves and health care spending is reduced; however, directing staff to add oral health services, assessments, or referrals into a jam-packed workday can feel like "one more thing." Start by building a team that includes leadership, volunteers, and support staff. An integration champion can create buy-in by relaying a vision for better health – for example, "We can better manage our diabetic patients' blood sugar if we can treat their gum disease." Then, discuss a shared definition of what it means to be healthy and provide comprehensive care. In our definition, comprehensive health always includes oral health. Next, engage all staff around a care integration plan and ensure the entire team has the tools, training, and support to see it through. Check-in often to answer questions and address concerns. Consider surveying or involving patients in the process to assess their experience with receiving education, making an appointment, or receiving care. Often, simply asking patients a question about oral health sparks a great discussion about why it's important.

Virginia Health Catalyst can provide data, case studies, shared-learning opportunities, and connections with other integration leaders.

Communication

Good, bi-directional communication is crucial. This includes provider interactions with patients, and also encompasses communication among clinical team members and staff as well as communication that happens electronically through electronic health records (EHRs) or other mechanisms. With technical assistance, EHRs can be made easier to use, more functional, and shareable among medical and dental teams. For example, EHRs can be augmented with additional alerts or reminders to help staff deliver oral health risk assessments or follow-up on referrals, or to provide patients with information to help them track their own outcomes. Teams can also improve communication without technology using workflow mapping, assessments, and shared treatment notes to deliver coordinated, comprehensive care.

Virginia Health Catalyst can connect practices with health IT support professionals and provide quality improvement templates, sample measures, and case studies to help ensure your EHR and communication practices enhance – and do not inhibit – your care integration plan.

Factors to consider when integrating care

Health Equity

Successful care integration programs consider environmental and societal factors. Achieving health equity requires addressing avoidable, unfair, or remediable differences among groups of people, particularly people of color. For example, black adults in Virginia are twice as likely to be diagnosed with diabetes when compared to white adults[2]. And while over one-third (38%) of all Virginia adults lack dental coverage, that number jumps to 60% among Hispanic adults[3]. Successful care integration programs consider environmental and societal factors. Achieving health equity requires addressing avoidable, unfair, or remediable differences among groups of people, particularly people of color. Teams should consider these five social determinants of health:

- Economic stability
- Education
- Social and community context
- Health status and health care
- Neighborhood and built environment.

For example, if a family is food insecure or facing a housing crisis, dental care will be a low-priority issue. Cultural humility training enhances a provider's ability to deliver health services with respect and humility about cultural differences. Trauma-informed care is also an emerging health practice that trains providers to consider the many ways that trauma in all forms impacts health. Leverage data, like the community health needs assessment, to help gauge health disparities in your community and identify opportunities for improvement.

Virginia Health Catalyst's Clinical Advisory Board and field experts are on hand to deliver training and educational resources on cultural competency, trauma-informed care, and leveraging community partnerships to help providers improve health equity and address social determinants of health.

Virginia Health Catalyst works with providers across Virginia to integrate care and improve access to comprehensive health care that includes oral health for all Virginians. To learn more about how Virginia Health Catalyst can assist in your integration process contact Samantha Dorr at sdorr@vahealthcatalyst.org.