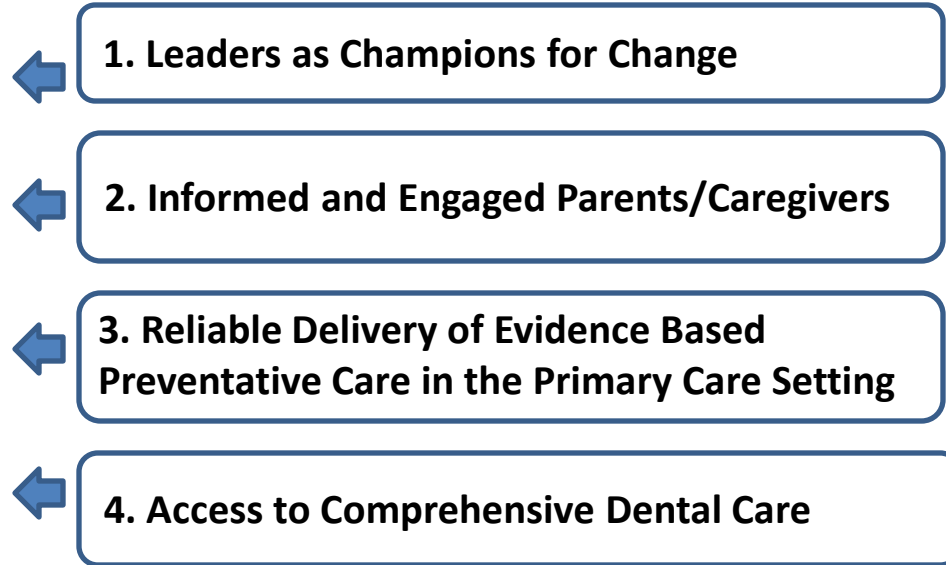


Primary Care: Improving Oral Health Outcomes for Children



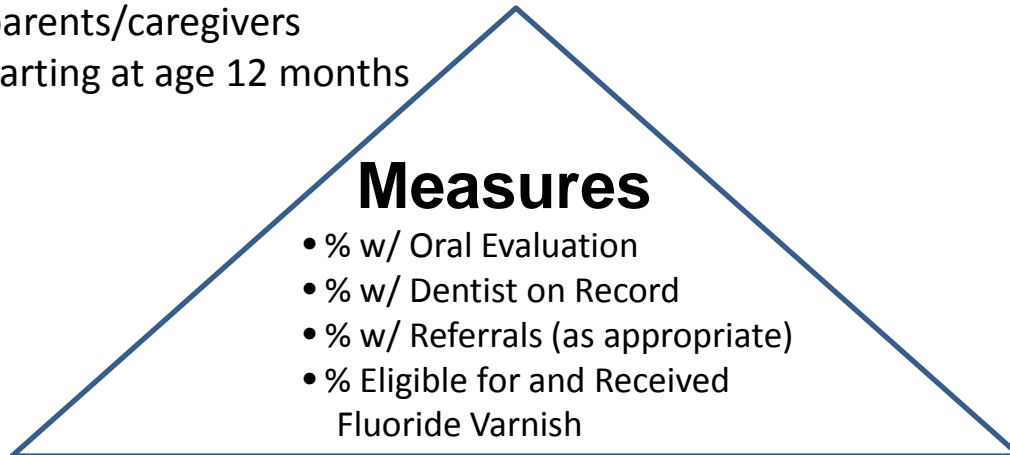
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Specific Aims

Improved care will result in increased:

- Oral evaluations by primary care providers
- Proportion of children who have received 4 fluoride applications by 4 years of age
- Health education for parents/caregivers
- Referrals to dentists starting at age 12 months



(Revised 04.25.14 sbd)

Global Aim

Primary Drivers

Secondary Drivers/Changes

Resources (available at <http://www.fromthefirsttooth.org/>)

Leaders as Champions for Change

- Identify a physician and an office manager and/or nurse to establish aim/targets and to champion the improvement work
- Identify a practice team, including the champion(s) and staff, to meet at least once a month to identify tests of change and to review progress
- Assess your current primary care processes related to oral health care
- Agree upon, document and communicate aim and goals of the initiative
- Dedicate resources toward educating staff and improving systems

Informed and Engaged Patients/ Caregivers

- Provide parents/caregivers access to information & community links
- Engage parents/caregivers in dialog to nurture trust and share the evidence
- Use technology like websites, emails, texts, and/or videos to spread messaging
- Engage parents/caregivers in developing oral health plan for the child

Reliable Delivery of Evidence Based Preventative Care in the Primary Care Setting

- Develop "ideal workflow", embedding core processes related to oral health management and prevention into the well child visit
- Standardize processes, roles and responsibilities
- Assure practice has incorporated oral health elements into EHR
- Design and use checklists based on ideal workflow
- Based on guidelines, perform early and ongoing oral evaluation using standardized risk assessment tool
- Agree on, document and communicate periodicity schedule within practice
- Ensure staff are trained and competent in delivering care
- Assure comprehensive preventative care including oral evaluation, application of fluoride varnish, oral health plan and parent counseling
- Assure practice is billing and coding properly for services
- Involve parent/caregivers in improvement efforts
- Integrate quality improvement into office practice including measurement of targets

Access to Comprehensive Dental Care

- Identify resources and gaps in care for children in your practice/community
- Identify and engage community partners to optimize oral health care for children (dentists, dental hygienists, families, caregivers, WIC, Head start, schools, community based dental clinics, FQHCs, From the First Tooth, etc.)
- Develop reliable systems for referrals and follow up
- Design Improved models for outreach and interventions

To improve oral health care for Maine children ages 0-4 years.

- FTFT Parent Brochure
- Baby Teeth Q&A
- UMD Video
- Websites for Parents
- Maine Fluoridated Communities
- Fluoride Water Testing

- Getting Started in Your Practice
- FTFT Clinic Workflow
- Smiles for Life Training Presentation
- Maine Oral Health Risk Assessment
- Building OHRA into the EMR
- D0145 Summary Sheet
- From The First Tooth Periodicity Schedule
- Billing and Coding Information
- From The First Tooth Order Forms
- Ordering Fluoride Varnish and Toothbrushes
- Frequently Asked Questions
- Resources List of Websites

- FTFT Dental Referral List
- Insure Kids Now