



# Crafting Seamless Dental Care Coordination: Effective Strategies

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### Outline

- Definition of Care Coordination
- Dental Care Coordination Flow and Timeline: School Dental Screenings
- Training Dental Care Coordinators
- Tracking Progress and Setting Performance Metrics
- Communication with Guardians



### Definition of Care Coordination

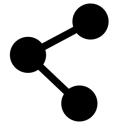
"Care coordination is the deliberate organization of patient care activities between two or more participants (including the patient) involved in a patient's care to facilitate the appropriate delivery of health care services."

- Patient- and family-centered, team-based activity
- Designed to assess and meet the needs of patients while helping them navigate effectively and efficiently through the healthcare system (goal is empowerment, building motivation and self-efficacy)
- Sometimes involves determining where to send the patient next and what information to transfer to other agencies/providers









Train
Dental Care
Coordinators

Rethink Places

Create
Connected Care



# Why **Dental** Care Coordination?

- There are significant disparities in oral health often due to the influence of social determinants
- Families face internal and external barriers when attempting to access dental care
  - Navigating the dental care system is complicated
- One of the drawbacks for Medi-Cal dental providers is the low show rate



# Guiding Principles of Dental Care Coordination

- Early intervention
- Family-centered
- Flexible
- Relationship-based
- Warm hand-off





### Who Can Do Dental Care Coordination?

- Care Coordinators, Community Health Workers/Promotores/Representatives (CHW/P/Rs) all different configurations
- Ideal if they are from the community, are bilingual, and understand the culture
- Family advocates, school nurses, and other school staff
- Federally Qualified Health Center (FQHC) staff / CHW/P/Rs
- Care Coordinators within public health departments: Oral Health Program; Maternal, Child, and Adolescent Health (MCAH) Programs; Home Visiting Programs; First 5; Women, Infants, and Children (WIC) Centers; etc.



# Components of Dental Care Coordination





Working within Environments/with Systems



### Working with Patients

- Outreach and education
- Building relationship/rapport with the family and empowering their participation in the process
- Assessment: social needs, oral health needs, urgency of care
- Timing and nature of first appointment



### Working with Dental Providers

- Learning about and building relationships with dental providers
- Coordination with general providers
- Coordination with hospitals or specialists



### Working within Environments/Systems

- Learning about and working with Medi-Cal eligibility
- Working within environments where the community resides, works, and gets services: WIC, Head Start, schools, etc.

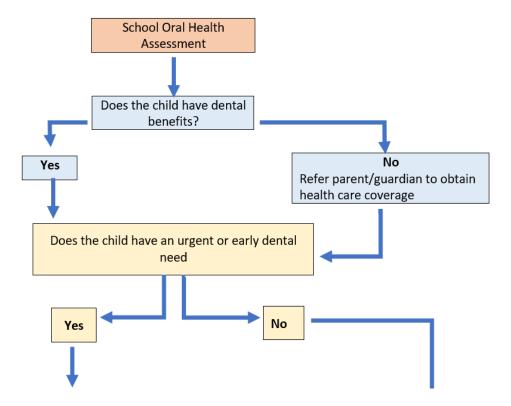


# Preparation for Care Coordination

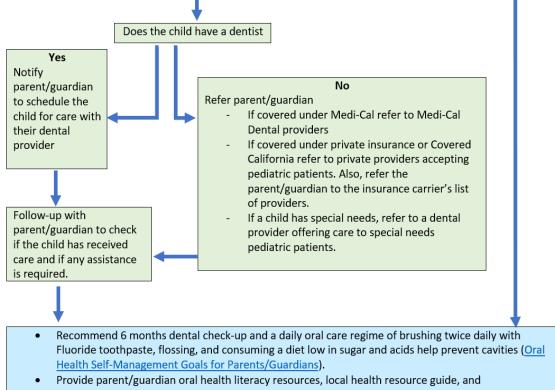
- Have a list of active providers in your area ready:
  - Including weekday and weekend hours, services provided (including sedation), if they accept Medi-Cal, if they see young children
- What's their process for admitting new patients or making appointments?
- How can you do a warm hand-off?
  - Start the communication with specific providers that you will be referring to, especially for urgent cases (sedation, hospital dentistry)
- Have a point person/answer for barriers:
  - Medi-Cal eligibility questions
  - Transportation difficulties, language assistance, special needs, etc.
- Have a script ready



### Care Coordination Flowchart







- recommendations for oral health care.
- Share information related to services available to assist with interpretation, transportation, and provide contact information of dental care coordinator.
- Report data.



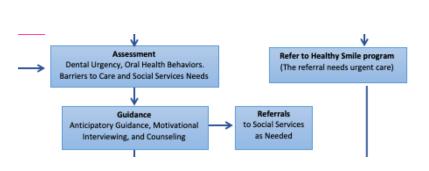
# Dental Care Coordination Time Guideline Schools Screenings

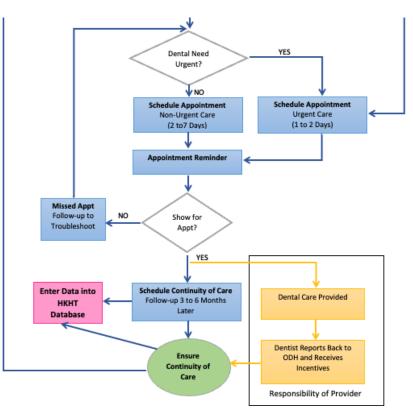
Level of Urgency	Referral Timeline
Level III	24-48 hours
Level II	One month
Level I	Send a referral list or within 6 months



Example of a Care Coordination Flowchart

Alameda County







# Dental Care Coordination Training Topics

- Introduction to program, policies, and procedures
- Oral health preventive strategies
- Role and skills of CHW/P/Rs
- Leadership skills
- Community outreach principles and practices

- Oral health education/ motivational interviewing
- Care coordination flow
- Data collection/management, evaluation, and HIPAA
- Community agencies
- Medi-Cal and local agencies



# Care Coordination Process Tracking

Contacted the guardian(s): (1st, 2nd, 3rd attempt and the results)

Talked with the guardian(s):

- Discussed the results of the screening
- Social determinants of health (SDoH) identified and addressed (e.g., transportation, language, fear, Medi-Cal eligibility)
- Identified the appropriate dental provider

The first appointment was made

The first appointment was attended

Treatment completed



# How to Track Progress

- Use an electronic tracking spreadsheet (Excel) or other dental referral management software
- Inquire about access to care barriers, note them in your tracking tool, and try
  to address them. List them to be marked
- Follow up with the family to ensure continuity of care and/or assist them with changes or specialty care referrals if indicated
- Oral health education
- Oral health outreach and promotion in the communities most needed
- If there is capacity, follow up with the dental providers and align your activities



### Performance Metrics

#### Programmatic Evaluation/Quality Improvement

How much did we do?	How well did we do it?	How are we better off?
Care Coordination - Recruitment/Training		
<ul> <li>Have the resources been identified and enlisted to assist in community-clinical linkage?</li> <li>Number of care coordinators trained to serve patients using evidence-based curricula?</li> <li>Care Coordination - Outreach Efforts</li> </ul>	- How confident do the care coordinators feel about conducting dental care coordination?	- Number of trained care coordinators to perform care-coordination in the schools
- How many outreach activities were conducted?	<ul> <li>Care coordinators collaborated with schools and other community partners to conduct outreach to families</li> <li>Outreach material developed for use at events</li> </ul>	- % increase in families participating in school dental program



How much did we do?	How well did we do it?	How are we better off?		
Care Coordination - Referral				
<ul> <li>Established a care coordination protocol</li> <li>Created a provider list with their operating hours, specialty services offered, and availability</li> <li>Established communication with providers willing to accept referrals and identified a person of contact at the clinics</li> <li>Number of students who received care coordination</li> </ul>	- % of parents whose kids needed care coordination and signed a consent	<ul> <li>- % of students identified with an urgent dental need who were connected with a dental provider within 2 days</li> <li>- % of students who needed care coordination and received care coordination of any form</li> </ul>		
Care Coordination - Provider Communication				
- Number of first appointments for urgent and early dental care scheduled with a dental provider	- Efficiently communicated and relayed the level of urgency to the provider	<ul> <li>- % of students who had their urgent dental need addressed in a timely manner</li> </ul>		
Care Coordination - Outcomes				
- Number of follow-up appointments the care coordinators helped schedule	- Satisfaction level of families receiving care coordination	<ul> <li>- % of students referred to care who attended the first appointment</li> <li>- Show rate of appointments scheduled by the care coordinator</li> <li>- % of students receiving care coordination who completed the treatment</li> </ul>		



## Communication with Parents/Guardians





Establish Rapport

Ask Permission



# Communication with Parents/Guardians

	I am with I am following up on the dental please speak with the parent/caregiver of?			
	Enter when to call back. May I please give you my phone number so that they can call me? Thank you. Good bye.  was seen by one of our dentists at their school during			
a dental screening. Did you see the paper with the	e dental screening results?			
<b>Yes</b> or <b>No</b> = The dentist who saw found an	eas of concern that need attention.			
Level 3 has severe dental problems. We recommend visiting a dentist as soon as possible.				
Level 4 is in pain. We recommend immediat	e treatment to get your child out of pain.			
It is important that your child gets treatment. There is the path the body. <b>Go to #3</b> .	possibility of the infection spreading throughout the mouth and			



### Connectors and Facilitators of Health



VO: The day I no longer feared the dentist

Animated exclaimation marks and hands and face of woman



**VO:** started with my dental coordinator.

Background horizontal line draws in with the entrance of the dental coordinator.



**Vo:** She helped me find a dentist who understood what I was going through. This took a huge weight off my shoulders.





VO: At each appointment I'm greeted with kindness, Scene changes with background color. Friendly dentist comes in and waves.



**VO:** and my dentist walks me through every step of my visit.

Dentist uses her fingers to help emphasize the steps as we see the images change.





### Resources

- <u>COHTAC School-Linked Dental Program Manual: Care Coordination and Program Evaluation sections</u>
- Alameda County Curriculum on Dental Care Coordination
- SJ TEETH Care Coordination
- Healthier Kids Foundation of Santa Clara County uses an electronic platform to implement the <u>DentalFirst program</u>
- Sacramento County the <u>Medical Dental Referral and Navigation</u> (<u>MDRAN</u>) system
- Health Outreach Partners
- ADA Community Dental Health Coordinator



