

BACKGROUND

- Affiliated dental clinics operate out of three locations in the central Bronx, serving a NYCDOH-categorized “extremely vulnerable” population of approximately 600,000
- In order to care for the oral health of their patients, medical providers must be proactive in screening for oral disease and making appropriate referrals
- Only 26% of UCHC medical clinic patients receive dental care at an affiliated clinic, indicating a lack of referrals
- This project focuses on implementing strategies to increase utilization of the three affiliated dental clinics by patients already receiving their medical care at UCHC and SBH.

PROBLEM STATEMENT

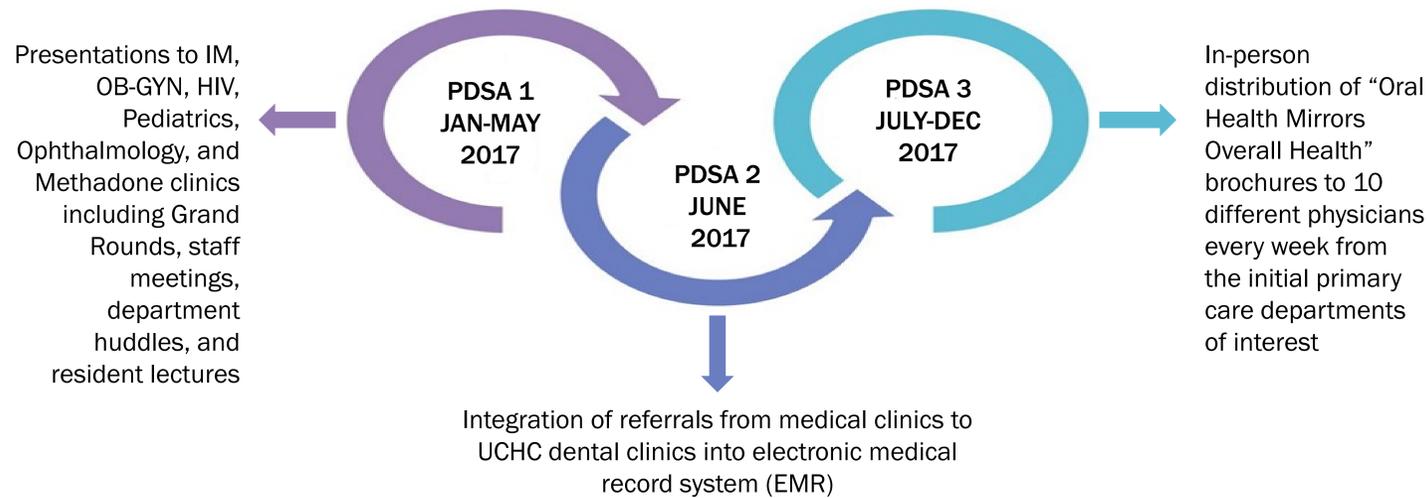
Primary care providers do **not** consistently screen their patients for dental disease, **nor** do they refer patients to the dental clinics with any regularity. The absence of medical referrals leaves our underserved patient population without a dental home and at greater risk of dental emergencies that may impact systemic health.

The overall aim of the HRSA grant is to increase patient access to oral healthcare by collaborating with primary and secondary care providers as a referral source, encouraging physicians to incorporate oral exams into their routine physicals.

AIM STATEMENT (“PLAN”)

The aim of this QI project was to determine whether the outreach efforts to the physicians and the incorporation of an EMR facilitated referral system to the dental clinics would result in an increase of at least 2,300 patient visits in the year.

METHODS (“DO”)

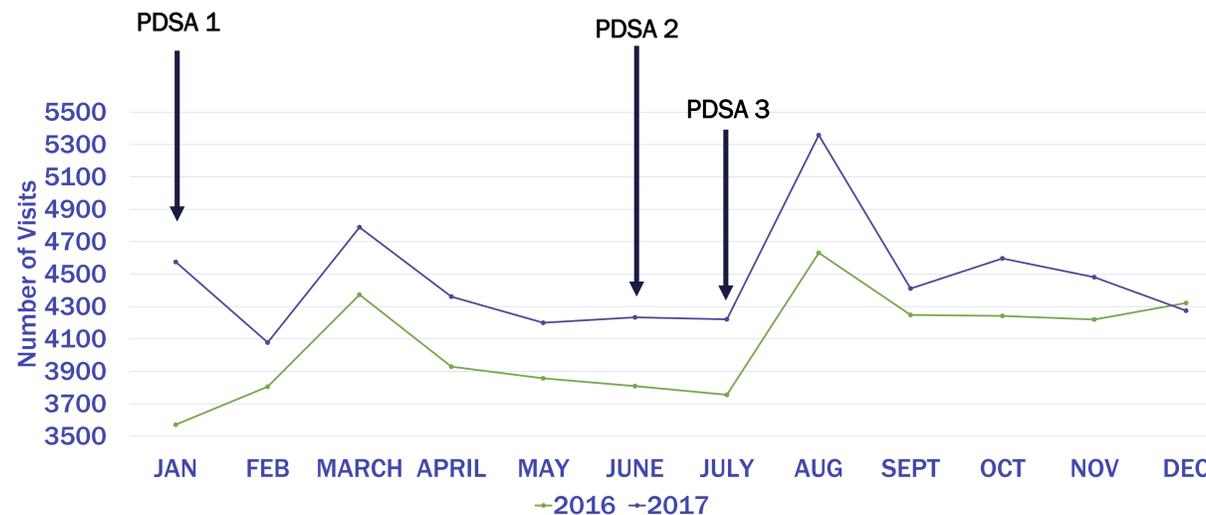


CONCLUSIONS (“ACT”)

- The goal of a minimum increase of 2300 patient visits **was met**; the increase as a result of the interventions was actually 4816.
- Increases** were observed after **every intervention**
- The **first intervention** of presenting to primary care clinics yielded the **greatest percent increase**
- Every intervention after the first had declining percent increases, indicating that either the interventions were not as successful, or that the impact of the initial intervention had worn off as time passed

RESULTS (“STUDY”)

Affiliate Clinic Dental Visits



- PDSA 1: 12.63% increase over five months, average increase of 493.60 per month, total increase of 2468 over five months
- PDSA 2: 11.13% increase over one month, increase of 424.00 over one month
- PDSA 3: 7.60% increase over six months, average increase of 320.67 per month, total increase of 1924 over six months
- Overall, 2017 had 53,578 visits compared to 48,762 visits in 2016, an increase of 4816, or 9.87%

NEXT STEPS

Upcoming Interventions

- Expansion into more medical clinics
- Streamline EMR referral system following system-wide update

Sustainability

The interventions to increase referrals are aimed at the education of physicians at UCHC and St. Barnabas Hospital. This education needs to be reinforced on a regular basis in order for the overall project to be successful.

Suggested Next Steps

There is a need to tailor future interventions to medicine clinics that are still not routinely referring their patients to the dental clinics. The reasons for failure to refer must be identified and corrected in a manner most appropriate for each specific discipline. Among referred patients, many do not come to their initial scheduled appointments. Future interventions should examine why these patients are not coming to their appointment, and if the disappointment rate among referred patients is any different than the rate among the general patient population.