

Petaluma Health Center: Dental Sealants for Children Ages 6-9

Redwood Community Health Coalition  
Promising Practice

PROMISING PRACTICE OVERVIEW

Petaluma Health Center improved their dental sealant rates for the UDS reported measure for children ages 6-9. The first year that this was reported to HRSA for UDS, PHC did not have any exclusions documented and the reporting to UDS included patients that should have been excluded. In the second year, they added an exclusion code, Caries Risk Assessment (CRA) code and sealant code. They run individual reports with age and then merge them all together. They developed a simplified criteria for posting codes (see below). Workflow changes were informed through PDSA cycles and the changes implemented included adding a CRA question in the clinical note template, they combined CRA questions with MI and SMG, discussed workflow changes in huddles, trained staff, reviewed monthly CRA reports during monthly staff meetings, and the CRA was included in clinical competencies, onboarding and job descriptions.

5999	NO SLT	SLT NOT NEEDED
7000	OB pt	PREGNANT
7001	post OB	POST PARTUM
7005	FINISH TX	FINISH PHASE 1 Tx
7007	DECAY	Caries/Decay Present
D0603	CRAHIGH	Caries Risk High
D0602	CRAMOD	Caries Risk Moderate
D0601	CRALOW	Caries Risk Low
D9993	MI	Motivational Interviewing
RBRV	Risk Based Recall Visit	

AIM

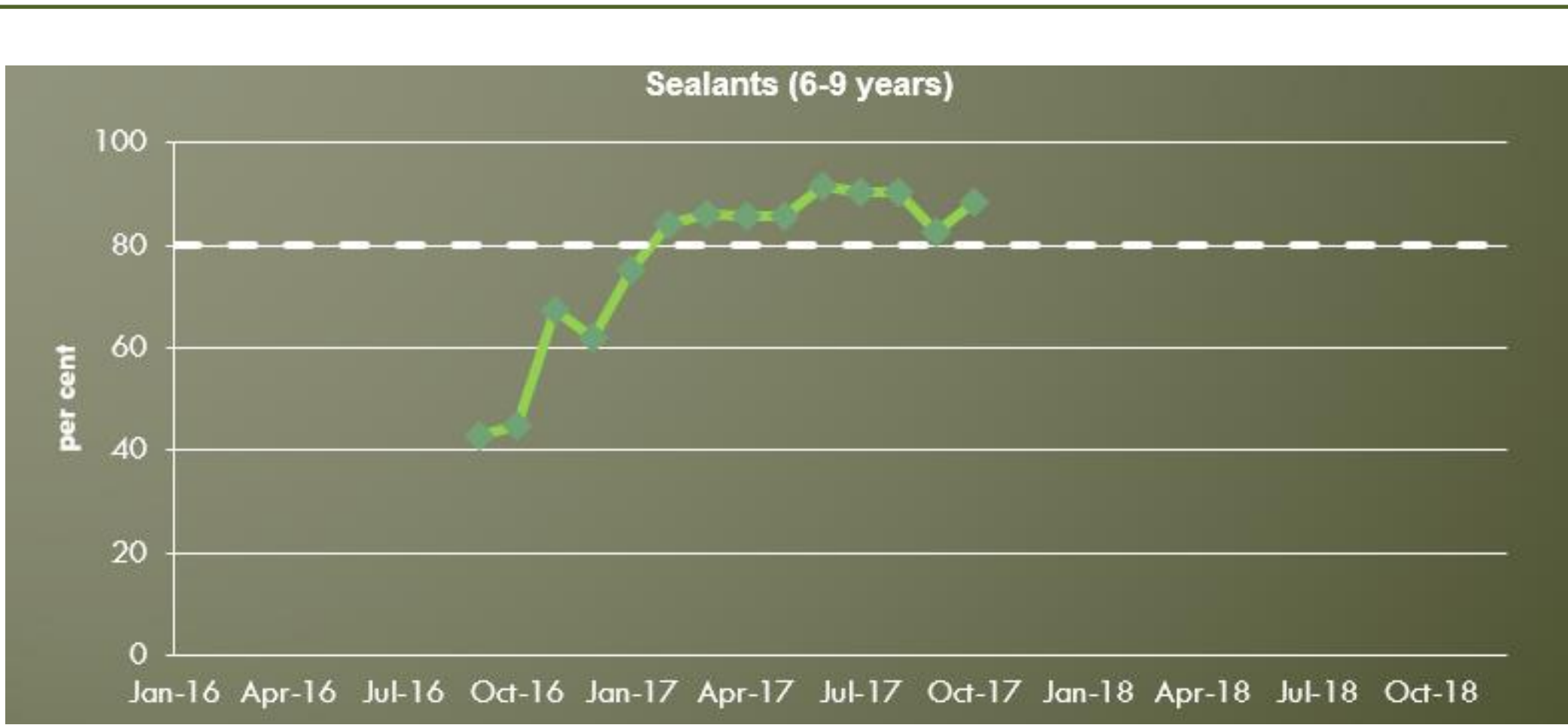
To improve dental sealants for children ages 6-9 served by Petaluma Health Center/Rohnert Park Health Center.

MEASURES

UDS Dental Sealants for Children Ages 6-9

- Numerator: Received a sealant on a permanent first molar tooth in the past year
- Denominator:
- Between 6 and 9 years of age at the end of the reporting period
  - Had at least one oral assessment or comprehensive or periodic oral evaluation visit in the past year
  - At moderate to high risk for caries
  - Exclusion: patients with all first permanent molars non-sealable

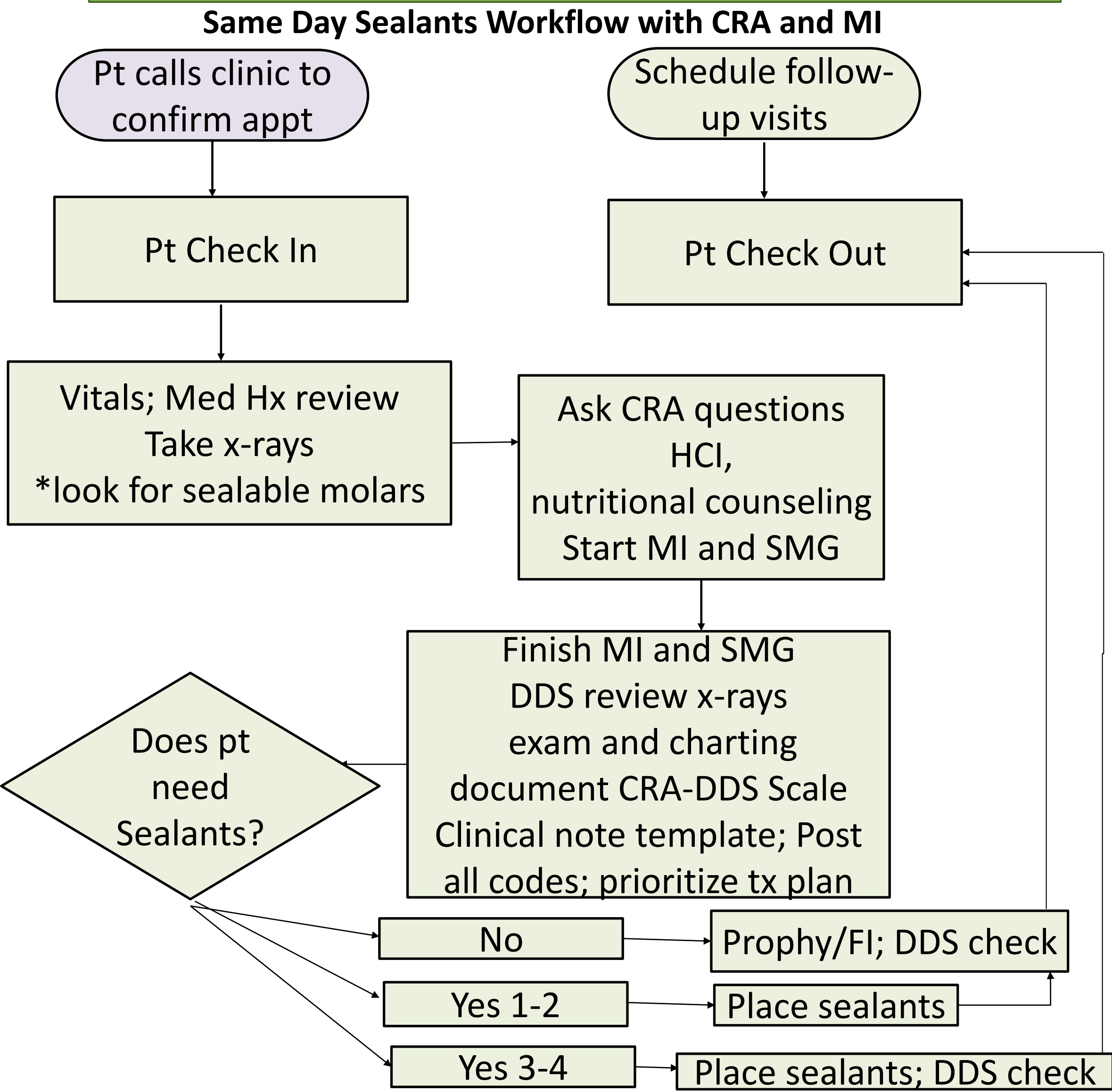
Petaluma Health Center Sealants (6-9 years)



ACTIONS TAKEN

- Improved dental sealant documentation: In 2015, no exclusions were considered in reporting to UDS for dental sealants. PHC created an administration code (6999) to document when a sealant is not needed. The solution was successful by adding the administration code which helped to fix the exclusions, however the age calculation remained a barrier.
- Improved caries risk assessment workflow and documentation (CRA): Improved coding to be able to answer how many 6-9 year olds are at high or moderate risk for caries? This helped to narrow the denominator so only those at moderate or high risk for caries are included.
- PDSAs were conducted around exclusion codes and CRA codes and they adjusted workflow based on findings. This included outreaching patients when they don't show for appointments to ensure the appointment is rescheduled and testing iterations of the workflow for same day sealants with CRA and MI.

WORKFLOW



RESULTS TO DATE

PHC's performance on the 2016 UDS measures (ages 6-9) was excellent (81%) and between 2015 and 2016, PHC improved on the UDS measure from 32% to 81%.

LESSONS LEARNED

- Age calculation by staff: This was initially a barrier which was addressed through staff trainings.
- Documentation and other considerations: Need to clarify who owns the process; staff buy-in through huddles, storyboards and champions; new employee trainings; staff competencies; run monthly data; reduce window internally on the sealant measure to 90 days
- Staffing ratios and staff allocations: sealant certified RDAs are helpful; recommend 2-2.5 RDAs per dentist; 3 chairs per dentist
- Sealant protocol efficiency: sealant supplies in each operatory; improved isolation system; product testing for speed and quality; consent on file





# The HRSA UDS Sealant Measure

A clinic's story

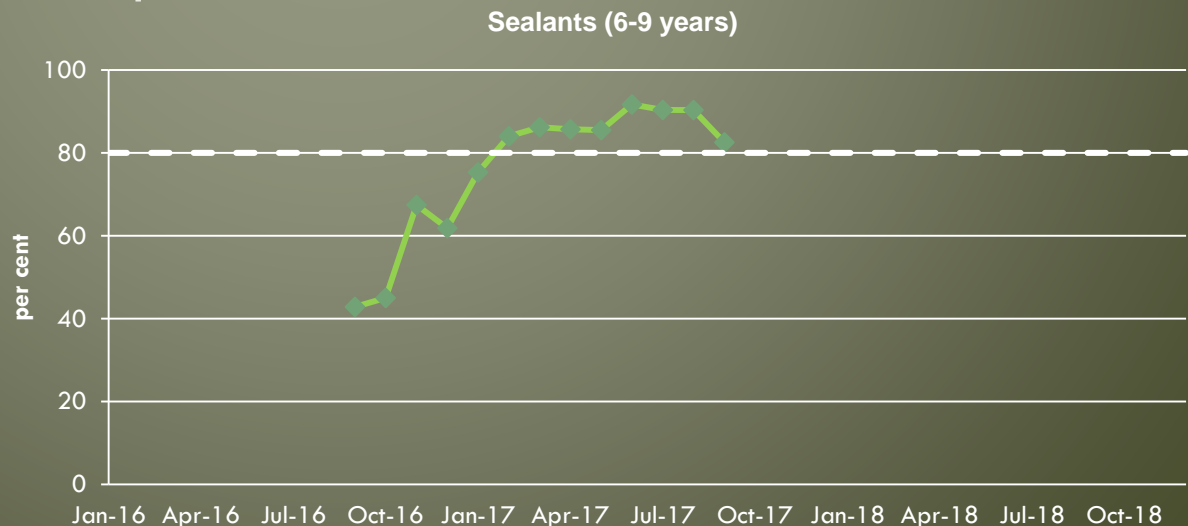
# Petaluma Health Center

- Two main sites: Petaluma and Rohnert Park
- Family medicine, behavioral health, women's health, dental health, wellness, chiropractic, school based programs
- 35,000 health center patients
- Dental started in 2005, expanded in 2011 and again in 2015
- Across sites 24 dental operatories
- 8 FTE General dentists
- 1FTE Pediatric dentist



# The HRSA UDS Sealant Measure

- 2015: 32.1%
- 2016: 81%
- Data collection method: EDR reporting
- No exclusions in 2015
- 5 other local clinics: 2 chart audits, 2 reports with no exclusions, 1 report with manual exclusion



# The HRSA UDS Sealant Measure

- Exclusion criteria - non-sealable molars: decayed, filled, already sealed, un-erupted or missing
- Exclusion solution- administrative code
- How about the age calculation?
- How about exams done at the end of one year and sealants done the following year?

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# The HRSA UDS Sealant Measure

- PDSAs on using the Sealant exclusion code
  - Age calculation by staff was a barrier
  - Clarification regarding charting molars

Driver	Phase of Improvement	Plan		Do		Study	Act
What driver is addressed by this change? Select from the dropdown list.	Is this change designed to develop, test, implement or spread a standard process?	What specific change do you plan to test? What question are you trying to answer?	What is your prediction? What do you think will happen and what data will you gather to assess results?	Date test was done	Were you able to test the change? Note any barriers or surprises.	What happened? Do you have data to review (qualitative or quantitative)? What did you learn?	What will you do next? Refine and test again? Abandon? Move to implementation or spread?

# The HRSA UDS Sealant Measure

- The Caries Risk Assessment (CRA)
  - Workflow
  - Form/Documentation
  - CRA codes D0602 and D0603
- PDSA based CRA changes
  - Staff training
  - Included a CRA question in the clinical note template
  - Combined CRA questions with MI and SMG
  - Revised workflow and discussed in huddles
  - Monthly CRA reports discussed at staff meetings
  - CRA included in clinical competencies, onboarding, job descriptions

Caries Risk Assessment Form Patient ID: 51618-1006827 Created: 01/12/2015 08:29:22 GMT-08:00 Last Updated: 02/01/2015 08:29:22 GMT-08:00  
Age Group: 0-12

Legend: ☒ Clear Selection ☐ Add Annotation ☐ Show Warnings ☐ Show History

Guidelines: ☒ Low ☐ Moderate ☐ High ☐ Insufficient Information

### Caries Risk Assessment

**Auto Score:** ☐ LOW ☐ MEDIUM ☒ HIGH

**Manual Score:** ☐ LOW ☐ MEDIUM ☐ HIGH

Patient First Name:  Patient Last Name:

Visit Date:  Chart Number:

Date of Birth:  Age:

Provider:

### Protective

Patient has sealants on permanent posterior teeth ☐ Yes ☒ No

Patient receives topical fluoride varnish from health professional ☒ Yes ☐ No

Patient is exposed to Fluoride through drinking water, supplements, or toothpaste ☒ Yes ☐ No

### Clinical

Child has >1 decayed/missing/filled surfaces (dmfs) ☒ Yes ☐ No

Child has active white spot lesions or enamel defects ☒ Yes ☐ No

Child has elevated mutans streptococci levels ☐ Yes ☒ No

Patient has Appliances (Orthodontic/Dental) present, fixed or removable ☐ Yes ☒ No

Patient has Visible Plaque or Gums Bleed easily ☐ Yes ☒ No

Patient has special health care needs that prevent or limit performance of adequate oral health care by themselves or caregivers? (For example: Patients with developmental, physical, medical, or mental disabilities) ☐ Yes ☒ No

Mother/primary caregiver/Patient has active caries ☒ Yes ☐ No

### Environmental

Child is a recent immigrant ☐ Yes ☒ No

Child is put to bed with a bottle containing natural or added sugar ☒ Yes ☐ No

Patient has low socioeconomic status ☒ Yes ☐ No

Patient is exposed to Sugar or Starchy Foods, including juice, carbonated or non-carbonated soft drinks, sports /energy drinks (low PH), medicinal syrups >3 per day ☒ Yes ☐ No



# The HRSA UDS Sealant Measure

- Sealants
  - Do we believe?
  - Are we treatment planning them?
  - How are they prioritized?
  - Are they being scheduled?
  - Are the patients showing for their appointment?





# The HRSA UDS Sealant Measure

- Sealant schedule
  - Are we maintaining access?
  - Are we providing timely continuing care?
  - Are patients getting through the phones?
  - Are we increasing access when patients are available?
  - What are the no show reasons?
- Changes
  - Two additional scheduling templates
  - Sealant RDA column
  - Sealant day
  - Sealant providers

RDA CC	Pedo DDS	Pedo DDS	Staff DDS	Staff DDS
PROC/CC/S EAL 60 MINS	PROC 60 MINS	30 MINS SDF, OREY 3, SEALS, 1 & R CASE 40 MINS POE, SPC MAINT IMPRESS	Procedure 60 min	Child CC/SEAL/PA NO 40 min
OREV3/PAN/ REF 30 MINS	PROC 60 MINS	30 MINS SDF, OREY 3, SEALS, 1 & R CASE 40 MINS POE, SPC MAINT IMPRESS	Root Canal 60 min	Adult CC/SCRIP 50 min
PROC/CC/S EAL 60 MINS	PROC 60 MINS	40 MINS POE, SPC MAINT IMPRESS	Extraction 60 min	LOE 50 min
PROC/CC/S EAL 60 MINS	PROC 60 MINS	30 MINS SDF, OREY 3, SEALS, 1 & R CASE 40 MINS POE, SPC MAINT IMPRESS	Procedure 60 min	Child CC/SEAL/PA NO 40 min
PROC/CC/S EAL 60 MINS	PROC 60 MINS	30 MINS SDF, OREY 3, SEALS, 1 & R CASE 40 MINS POE, SPC MAINT IMPRESS	Procedure 60 min	Child CC/SEAL/PA NO 40 min
PROC/CC/S EAL 60 MINS	PROC 60 MINS	30 MINS SDF, OREY 3, SEALS, 1 & R CASE 40 MINS POE, SPC MAINT IMPRESS	OREV3/PAN/ REF 30 MINS	OREV3/PAN/ REF 30 MINS
	SDF, SPC MAINT IMPRESS	BLOCK		

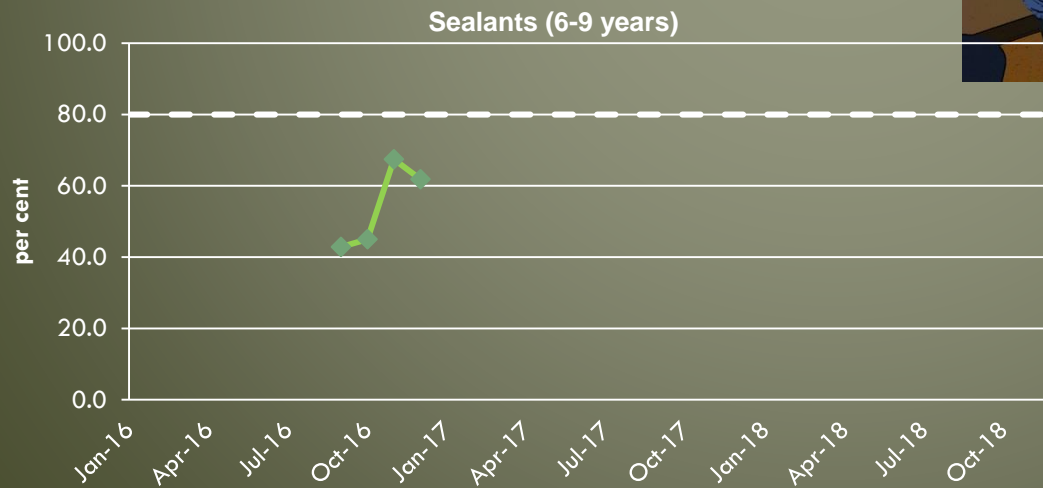
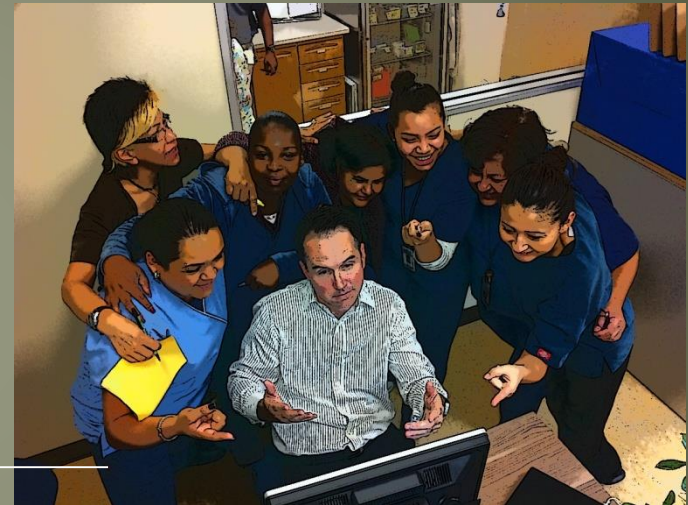
# The HRSA UDS Sealant Measure

- Staffing ratios and staff allocation
  - 2-2.5 RDAs per dentist
  - 3 chairs per dentist
  - Sealant certified RDAs
- Sealant protocol efficiency
  - Sealant supplies kit in each operatory
  - Improved isolation system
  - Product testing for speed and quality
  - Consent on file



# The HRSA UDS Sealant Measure

- Back to chart audits and reliability testing
  - Was the CRA done and documented?
  - Who did not receive sealants?
  - More huddles focused on sealants
  - “Go see”
  - Staff meetings

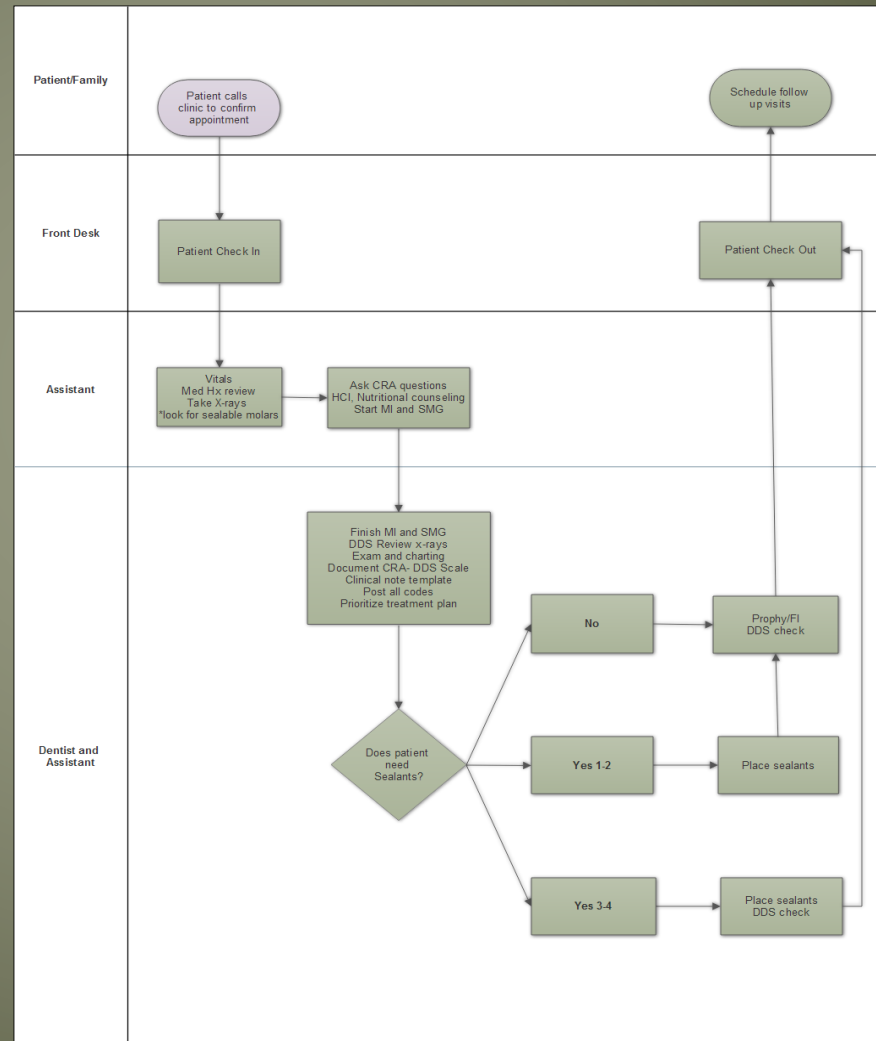




# The HRSA UDS Sealant Measure

Same Day Sealants Petaluma Health Center

## Same Day Sealants Workflow with CRA and MI



# The HRSA UDS Sealant Measure

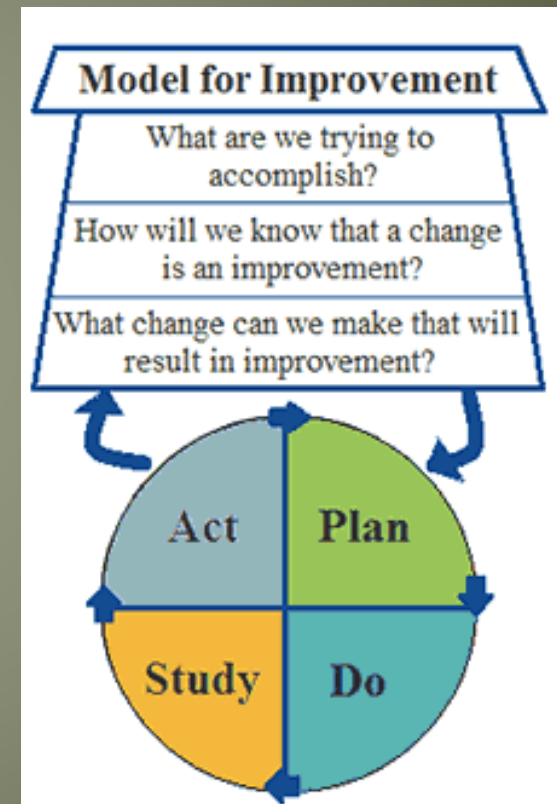
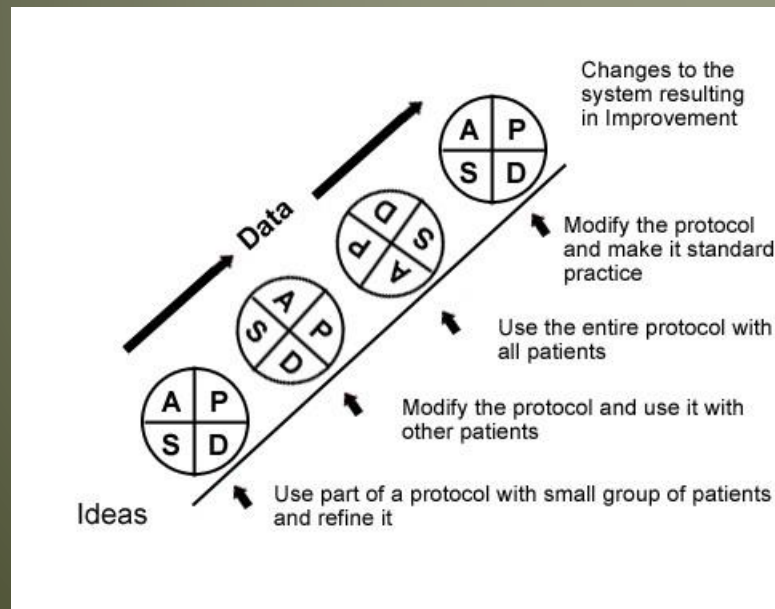
- Documentation
  - Clarity on who owns the process
  - Per diem providers
- Other things to consider
  - Staff buy in: storyboards, huddles, champions
  - New employee training
  - Staff competencies
  - Performance evaluations
  - Reduce window internally on the sealant measure to 90 days
  - Run monthly data



# The HRSA UDS Sealant Measure

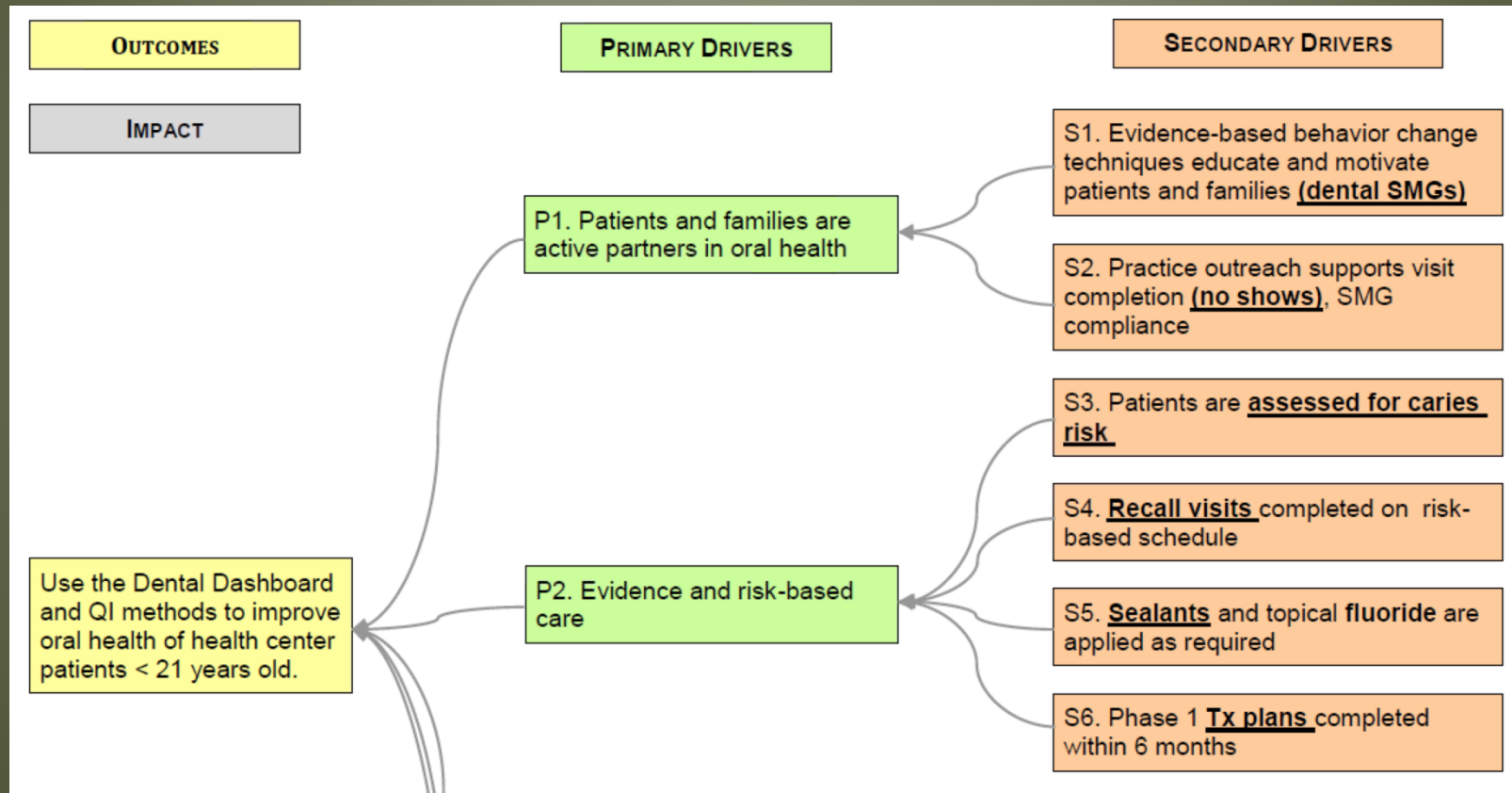
Useful tools:

- Model for improvement
- Aims, Measures, and Changes
- PDSAs: Test, Implement, Spread

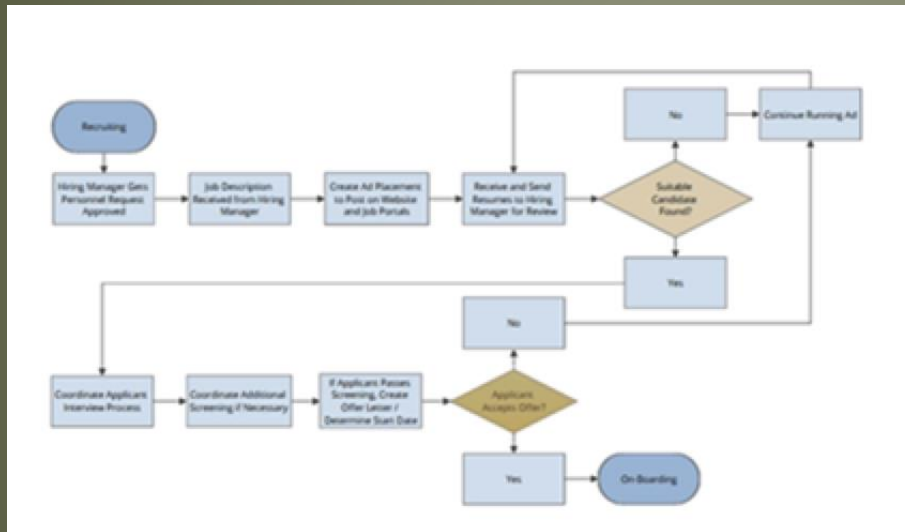




# The Driver diagram



# Swim lane diagram and the weakest link



# The HRSA UDS Sealant Measure

Plan for sustainability:

- align QI measures with strategic goals and report monthly to the board
- teams have time and resources to improve
- dashboard reports on standing staff meeting agenda
- storyboard in prominent place
- empower and use ideas from front line staff
- run reliability tests





# The HRSA UDS Sealant Measure



- THANK YOU!
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