



Linking Oral Health with Overall Health: A Population Health Vision for the Future

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Program Director
Oral Health Nursing Education and Practice



Oral Health Integration on Your Campus

Text **OHNEP** to **22333** to join.
For each question, text
Y for Yes,
N for No.

Are you integrating oral health into your curriculum?

Yes

No

Start the presentation to see live content, 2021 no live content! Install the app or get help at [PollEv.com/app](https://www.PollEv.com/app)

Do you know about "Smiles for Life: The National Interprofessional Oral Health Curriculum"?

Yes

No

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Do you have interprofessional oral health classroom or clinical experiences with programs from other disciplines on your campus?

Yes

No

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Does your program have a faculty oral health champion?

Yes

No

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OHNEP Program Aims

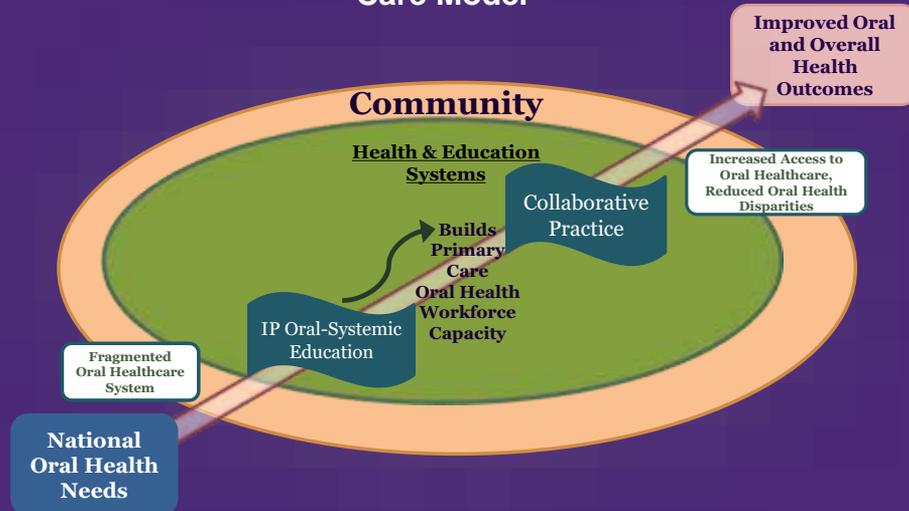
- Advance a national oral health agenda for the nursing profession
- Build interprofessional oral health workforce capacity
- Integrate oral-systemic health into undergraduate and graduate nursing programs nationwide.
 - Faculty development
 - Curriculum integration
 - Establishment of “Best Practices” in clinical settings



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Interprofessional Oral Health Care Model





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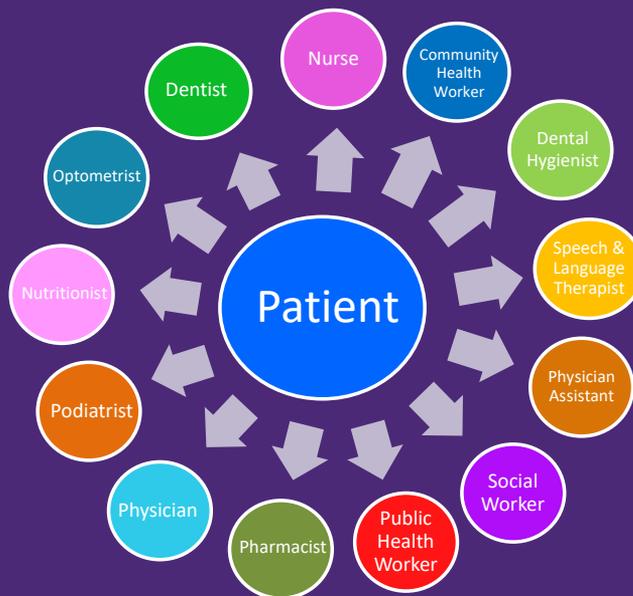
Individual Paradigm	Population Health Paradigm
Individual-focused	Population-focused
Provider-centered	Patient-centered
Physician-centered	Team-centered
Fragmented Care	Coordinated Care
Face-to-Face Encounters	Virtual Encounters
Provider-directed Care	Patient-Provider Partnership in Self-Care
Episodic Care Management	Chronic Disease Management
Fee-for-Service Reimbursement	Value-based Reimbursement



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Whole Person Care





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Population Health

Shift in thinking about the health of *populations* rather than individuals

- Providing care beyond the single patient
- Identifying shared traits of illnesses across populations
- Health concerns specific to each community

Management of chronic illnesses has become a major component of health care with patient populations

- i.e. diabetes, cardiovascular disease, stroke, congestive heart failure, COPD and asthma, pneumonia, non-HAP (non-hospital acquired) pneumonia, mental health



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Population health is an evidence-based approach that promotes patient-centered management strategies to improve overall health across patient populations

- Builds a diverse team for a panel of patients using care management and care coordination
- Engages patients in improving self-management of chronic conditions
- Improves quality, cost, and satisfaction of patient experiences
- Features value-based payment arrangements





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To support population health behavioral change, care teams need to be skilled in:

- a) shared decision-making
- b) health literacy
- c) teaching patients about self-care
- d) coaching techniques

Identify care gaps and tailor population health strategies to the community

- Consider size, clinical and social needs of population
- Identify widespread oral health issues & links to overall health i.e. dental caries, smoking, asthma
- Collaborate on interprofessional content and clinical experiences around these issues
 - e.g. high prevalence of COPD → use evidence to design interprofessional population-specific teaching-learning activities



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Navigating Patients Across the Population Health Care Continuum

Components of a successful network:

- ❖ High-quality
- ❖ Cost-efficient
- ❖ Satisfying

Find patients appropriate care settings and providers





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Management of chronic illnesses is a major component of population health care. Patients are assigned to a care team which manages a group of patients.

- Diabetes
- Cardiovascular Disease
- Congestive Heart Failure
- Celiac/GI Disease
- COPD
- Early Childhood Caries (ECC)
- Periodontal Disease
- Respiratory Disease
- Cancer
- Asthma
- Depression
- Substance Abuse



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Population Health...Why Nurses?

- ✓ Largest Health Profession
 - 4 million Registered Nurses (RNs)
 - 270,000 Nurse Practitioners (NPs)
 - 87% are certified in an area of primary care
 - 12,200 Nurse-Midwives (NMs)
- ✓ Most Trusted Profession
 - Providing care and promoting health
 - On the frontlines of care 24/7
- ✓ Nurses are Everywhere
 - Hospitals, ambulatory centers, schools, camps, workplace, retail clinics, homecare





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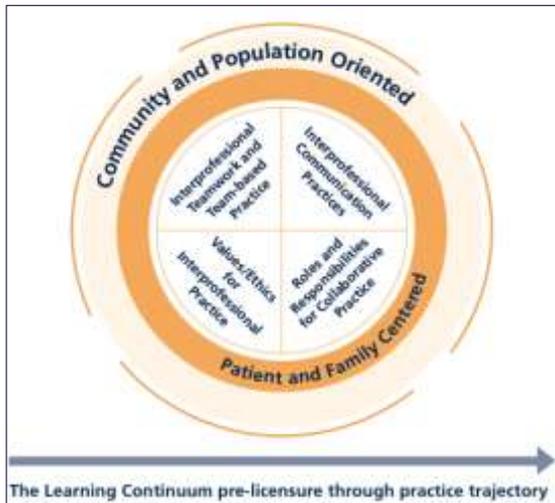
New RN Roles

- 61% work in hospitals
- 18% in ambulatory and primary care
- Expand role in primary care
 - Case managers
 - Patient navigators
 - Health coaches
 - Care coordinators
- Manage patient panels
 - Interpret panel metrics
 - Identify care gaps
 - Close care gaps through complex care management and coordination



(Bureau of Labor Statistics, 2016)

IPEC Competencies (2016)



Core Competencies for
Interprofessional Collaborative Practice:

2016 Update

(Interprofessional Education Collaborative, 2016)



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Potential IPE Partners On Your Campus

- Dentistry
- Dental Hygiene
- Medicine
- Pharmacy
- Occupational Therapy
- Social Work
- Nutrition
- Speech and Language
- Public Health
- Physical Therapy



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Oral Health – Crucial Component of Population Health

Social determinants of oral health outcomes include...

- ❖ Age
- ❖ Education Level
- ❖ Income
- ❖ Location
- ❖ Access to medical insurance





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Morbidity	Access	Cost
<ul style="list-style-type: none"> Children and adolescents aged 5-19 from lower income families are twice as likely to have untreated tooth decay More than 1 in 4 (27%) have untreated tooth decay One-fifth of U.S. adults aged 65 or older have lost all of their teeth 	<ul style="list-style-type: none"> About 108 million people in the U.S. have no dental insurance Nearly 37 million people (65%) of Medicare beneficiaries do not have dental coverage Only 17 states have an adult Medicaid dental benefit 	<ul style="list-style-type: none"> Employed adults lose more than 164 million hours of work each year due to oral health problems or dental visits 34 million school hours are lost annually because of oral health problems or dental visits In 2010, an estimated \$1 billion was spent on emergency dental care

(CDC, 2019b; CDC, 2019c; Allareddy, Rampa, Lee, Allareddy, & Nalliah, 2014)



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Healthy People 2020



- Access to health services
- Clinical preventive services
- Environmental quality
- Injury and violence
- Maternal, infant, and child health
- Mental health
- Nutrition, physical activity, and obesity
- ➔ Oral health
- Reproductive and sexual health
- Social determinants
- Substance abuse
- Tobacco

(Healthy People 2020)



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A population health perspective...

- Integrates *oral health care* as a standard of care in primary, acute, home, and long-term care clinical care settings
- Develops *collaborative relationships* with our dental colleagues
- Benefits include...
 - ✓ screening
 - ✓ risk factor reduction
 - ✓ early detection
 - ✓ seamless whole-person care
 - ✓ elevate referral stream for health care professionals



Oral Health Delivery White Paper (2015)

ENDORSERS:

American Academy of Nursing
American Academy of Pediatrics
American Academy of Physician Assistants
American Association of Colleges of Nursing
American Association for Community Dental Programs
American Association of Family Nurse Practitioners
American Association of Public Health Dentistry
American College of Nurse Midwives
American Public Health Association – Oral Health Section
Association of Clinicians for the Underserved
Association of Maternal & Child Health Programs
Association for State and Territorial Dental Directors
Institute for Patient- and Family-Centered Care
National Association of Pediatric Nurse Practitioners
National Network for Oral Health Access
National Organization of Nurse Practitioner Faculties
National Rural Health Association
Patient-Centered Primary Care Collaborative
Physician Assistant Education Association

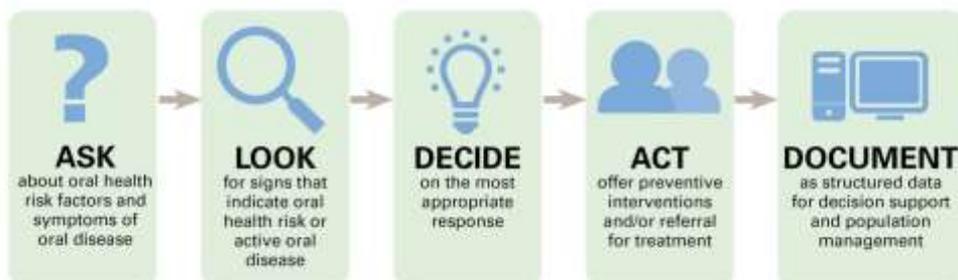
SUPPORTERS:

American Academy of Family Physicians
National Association of Community Health Centers



Available at: www.QualisHealth.org/white-paper

Oral Health Delivery Framework (2015)



Available at: www.QualisHealth.org/white-paper

(Hummel, Phillips, Holt, & Hayes, 2015)



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Nurse-led Oral Health Interventions for Population Health Management & Value-Based Care



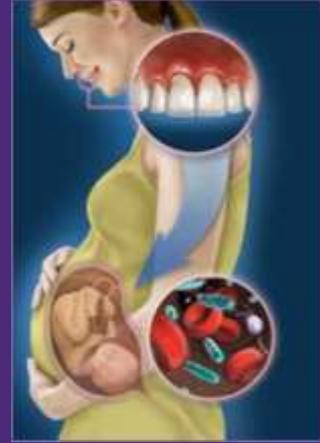


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Oral Health and Pregnancy

- 76% of pregnant women surveyed had oral health problems such as bleeding gums or toothaches...
- Yet only about half with a dental issue report a dental visit during pregnancy.
- Studies show an association between periodontal infection and negative pregnancy outcomes.
- When a mother has untreated caries, her child's odds of having untreated dental caries almost doubles.
- Periodontal treatment is SAFE for pregnant women.
 - Avoids the adverse consequences of periodontitis for the mother
 - Not associated with any negative infant or maternal outcomes



(American Congress of Obstetricians and Gynecologists, 2013; Cigna Corporation, 2015; Clark et al. 2010; Le, Riedy, Weinstein, & Milgrom, 2009; Hummel, Phillips, Holt & Hayes, 2015; Oral Health Care During Pregnancy Expert Workgroup, 2012; Silk, Douglass, Douglass, & Silk, 2008)



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Nurse Family Partnership

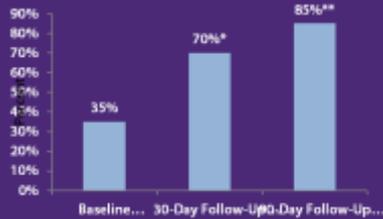
Nurse Home Visitor (NHV) Oral Health Education Program



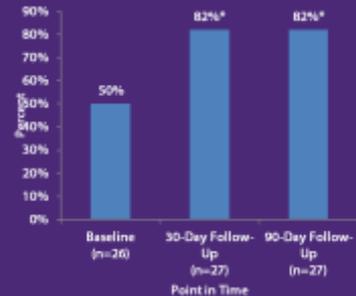
My NHV gave me information about oral health care.



My NHV talked with me about how to prevent cavities.



I clean my child's mouth twice per day.



(Haber, Harnett, Hille, & Cipollina, in press)

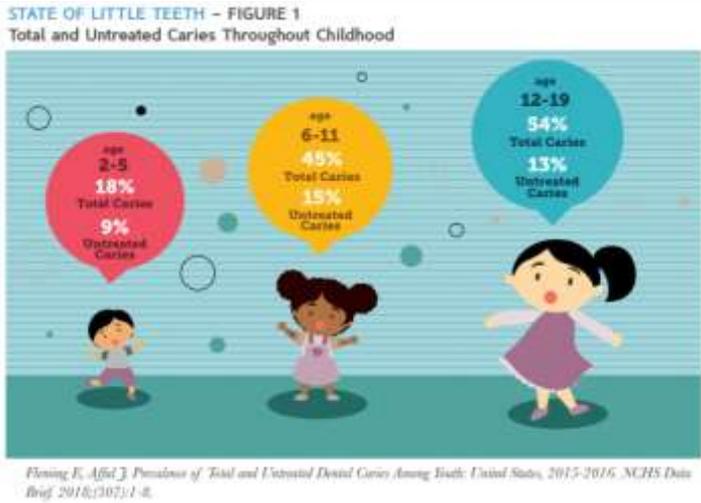




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Early Childhood Caries (ECC)



- Major public health problem
- Most common chronic childhood disease
- 5 times more common than asthma
- Children lose 34 million school hours annually due to oral health related problems

(AAPD, 2014; CDC, 2019a; Hill et al., 2019)



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Community Nursing Head Start Clinical Rotation



Knee-to-Knee
Examination



(Hallas, Fernandez, Lim, Carobene, 2011)



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Oral Health Literacy

Students collaborate on developing health literacy brochures and/or pictographs for low literacy populations to make population-specific links between oral health and general health



(Hallas et al., 2011)



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Oral Health and Adolescents



- HPV is the most common sexually transmitted virus and infection in the US.
- Every day in the US, about 12,000 people ages 15 to 24 are infected with HPV.
- Approximately 26 million Americans on any given day have an oral HPV infection.
- 9 HPV strains are known to cause cancers, and another 6 are suspected of causing cancers.
- HPV is a leading cause of oropharyngeal cancer (the very back of the mouth) and a very small number of front of the mouth, oral cavity cancers.

(CDC, 2015 & 2017; Oral Cancer Foundation, 2017)



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Oral Health in Adult Primary Care

- More than 27 % of adults have untreated tooth decay.
- Almost half of adults over age 30 exhibit signs of gum disease.
- Dental disease causes employed adults to lose more than 164 million hours of work per year.
- In 2015, 30.3 million Americans, or 9.4% of the population, had diabetes.
- Most adults with diabetes don't know they're at high risk for oral complications, such as periodontitis.



(American Diabetes Association, 2017; Delta Dental Plans Association, 2017; Darling-Fisher, Borgnakke & Haber, 2017; Dye, Thornton-Evans, Xianfen & Iafrolla, 2015)



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Adults who are diabetic may have more mouth problems!

- Increased risk for gum disease
- Increased risk for tooth loss
- Increased risk for dry mouth
- Increased risk for thrush
- High blood sugar helps bacteria grow which can lead to tooth decay.
- High blood sugar can also interfere with normal healing in your mouth.



(Oral Health America & Wisdom Tooth Project, 2017)



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Oral Health and Diabetes

Diabetes Case Study

A 65 year old Hispanic male Mr. M. was referred by the Dental clinic because of early evidence of periodontal disease. The patient has family history of Type 2 Diabetes (T2D) and history of caring for his diabetic grandfather for many years. He described himself as an expert in diabetes because of the years of caring for his ailing diabetic grandfather. During the health history, he complained of symptoms of hyperglycemia: fatigue, thirst, and weight loss. On physical exam, his blood pressure was 160/95, BMI of 31, random blood sugar of 332 mg/dL and HgbA1c > 13%. He was diagnosed with T2D and obesity. He was started on Metformin twice a day and was counseled on diet and physical activity. The patient was referred back to dentistry for continued periodontal care in light of his new diagnosis of T2D.

What is the follow-up nursing primary care action plan for Mr. M.?

What are the 3 months follow-up outcomes?

- Oral Health History
- Physical Health Exam
- Oral-Systemic Risk Assessment
- Action Plan
- Preventive Interventions
- Interventions
- Collaboration
- Referrals

© Oral Health Nursing Education and Practice (OHNEP)

Download at our website! <http://ohnep.org/sites/ohnep/files/Diabetes-Case-Study.pdf>



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Oral Health in Adult Acute Care





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Ventilator Associated Pneumonia (VAP)

- VAP crude mortality approximately 10-40%.
- Est. cost \$10,000-\$30,000 per VAP
- Increase LOS up to 4-14 days
- Annual cost \$2 billion dollars



(Brennan & Vollman, 2017; Edwards et al., 2009; Collard, Saint & Matthay, 2003; Ratto et al., 2002; Mandell et al., 2007; Coffin et al., 2005; Rosenthal et al., 2006; Zilberberg et al., 2006)



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Non-ventilator Hospital Acquired Pneumonia (NV HAP)

- 1st most common HAI in U.S
- Increased morbidity → 50% are not discharged back home
- Increased mortality → 18%-29%
- Extended LOS → 4-9 days
- Increased Cost → \$28K to \$109K
- 2x likely for readmission <30 day



(Munro & Baker, 2018; Diffusion of Excellence Initiative, 2019; Brennan & Vollman, 2017; Staywell, 2017; Mandell et al., 2007; Lynch, 2001; Suetens, Hopkins, Kolman, & Högberg, 2013)

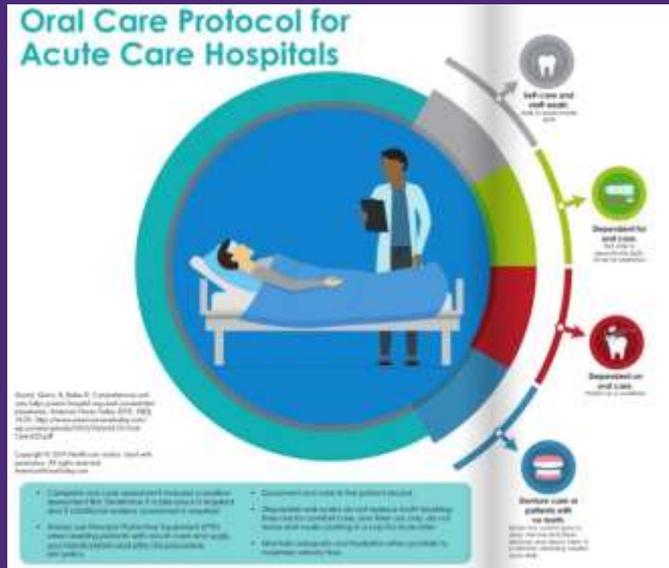


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Resources for Older Adults

From *Integrating Oral Health Care into Patient Management to Prevent Hospital-Acquired Pneumonia: A Team Approach* (Shannon Munro & Dian Baker, 2019)



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Wall Street Journal: “In Hospitals, Pneumonia Is a Lethal Enemy”



Available at: <https://www.wsj.com/articles/in-hospitals-pneumonia-is-a-lethal-enemy-1518868800>



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Poor Behavioral Health → Poor Oral Health

- Depression is associated with higher abuse of alcohol, caffeine, and tobacco, which may cause tooth erosion and decay.
- Depression often causes self-neglect, which often results in poor oral hygiene and consequential tooth decay.
- Bipolar disorder often causes over-brushing that may damage gums and cause dental abrasion, mucosal lacerations, or gingival lacerations.
- Bipolar patients treated with lithium have a higher rate of gingivitis, xerostomia, and stomatitis.
- Acids from vomiting make patients with eating disorders more susceptible to enamel erosion and tooth decay.
- Side effects of antipsychotic, antidepressant, and mood stabilizer drugs include a higher risk for diabetes, oral bacterial infections and xerostomia.



(Penn Dental, 2017)



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NYU Master's Preceptor Recognition Breakfast and Development Day (2015)



NYU Master's Preceptor Recognition Breakfast and Development Day

Available at: <https://www.youtube.com/watch?v=aLxaDbnFb0E>





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Oral Health and Older Adults



- There is no Medicare dental benefit; 70% of adults 65 and older have no dental benefit.
- Older population is retaining their own teeth.
- Teeth that are being retained have more extensive (and older) restorations in them.
- Mouths of older people have less potential to remineralize.
- Older populations may be less able to maintain a clean mouth.
- Oral cancers are most common in older adults, particularly in people who smoke and are heavy drinkers.

(Oral Health America & Wisdom Tooth Project, 2017)



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Aging and Oral Health

- Personal Reasons
 - Smiles
 - Kisses
 - Laughter
- Good Nutrition
 - Vital for nourishment and eating
- Health
 - Chronic Illnesses
 - Gum disease
 - Medications
- Quality of Life
 - Life pleasures
 - Feel good
 - Relax with friends and family



(Oral Health America & Wisdom Tooth Project, 2017)



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Interprofessional Education and Practice (IPEP): Community Geriatric Oral Health Program



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Oral Health at the End of Life

Task	Supplies/Equipment	Directions	Frequency
Keep lips moist	Petroleum jelly	Use a lip balm form	At all times needed
Keep inside of mouth moist	Enzyme-containing gels or rinses	Apply with oral sponge or mouth ties	At all times needed
Brush teeth	Manual or powered brush with fluoride dentifrice	Use pea-sized amount of paste	After breakfast and at bedtime
Interproximal cleaning	Floss by itself or with floss holder	Caregiver to provide assistance as needed	At least once daily
Clean soft tissues	Soft brush or oral sponges	Moisten brush with water	Remove adherent debris, including dried mucus saliva
Clean dentures	Denture brush	Brush under running water	At least once daily and if food collects

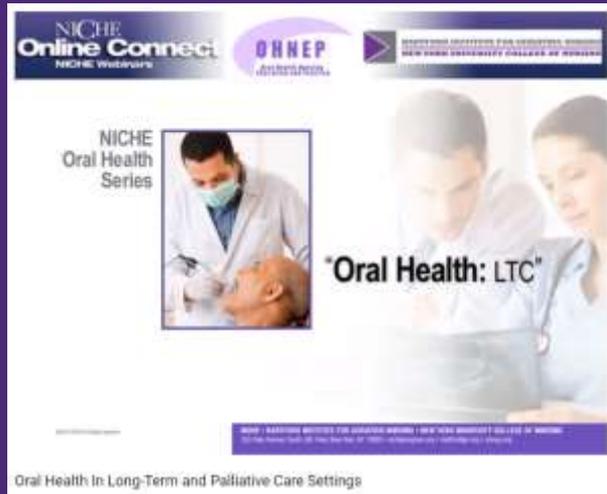




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Video: Oral Health In Long-Term and Palliative Care Settings



Available at: https://www.youtube.com/watch?v=l_8_OZdaclM&t=26s



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Population Health Goal

- ❖ Include *proper oral health care* to patients as part of whole-person care
- ❖ Develop *collaborative relationships* with our interprofessional colleagues

Benefits include...

- ✓ screening for oral cancers
- ✓ risk factor reduction
- ✓ early detection
- ✓ seamless whole-person care
- ✓ elevate referral stream for health care professionals





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Smiles for Life: A National Oral Health Curriculum



Download
the SFL
app!

www.smilesforlifeoralhealth.org



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Visit www.OHNEP.org

News

- April 1, 2015: **OHNEP** leading the March 20th to the March 22nd in Detroit.
- News: **OHNEP** (OHNEP) leads the March 20th to the March 22nd in Detroit.
- **OHNEP** (OHNEP) leads the March 20th to the March 22nd in Detroit.
- **OHNEP** (OHNEP) leads the March 20th to the March 22nd in Detroit.
- **OHNEP** (OHNEP) leads the March 20th to the March 22nd in Detroit.
- **OHNEP** (OHNEP) leads the March 20th to the March 22nd in Detroit.

OHNEP LEADS THE WAY

OHNEP is at the forefront of helping more practitioners, nurse practitioners, nurses, and other health professionals incorporate oral health into patient care.

Why? **Oral health and general health are interconnected.** Research is proving that poor oral health (the periodontal disease is associated with diabetes, cancer, heart and lung diseases, and progression of dementia and Alzheimer's), among others. Yet few health professionals are prepared to do routine oral health assessments.

OHNEP is changing that.

As a national voice promoting interprofessional oral health, **OHNEP** educates, educates, creates and provides resources that primary care providers can use to improve the quality of oral health care in their practices. The **OHNEP** mobile serves as a knowledge center and portal for best practices.





HEENOT

Putting the Mouth Back in the Head: HEENOT to HEENOT

Improving oral health is a complex endeavor that goes beyond the traditional focus on dental care. It requires a multidisciplinary approach that involves medical, dental, and behavioral health professionals working together to address the needs of older adults. This approach is essential for ensuring that older adults have the oral health and functional skills necessary to maintain their quality of life and independence.

HEENOT: A Model of Interdisciplinary Care

The HEENOT (Healthy Eating, Eating, and Nutrition) program is a model of interdisciplinary care that brings together medical, dental, and behavioral health professionals to address the oral health needs of older adults. The program focuses on identifying and addressing the barriers to oral health care, such as lack of access to dental services, financial barriers, and health literacy. By working together, these professionals can provide comprehensive care that addresses the physical, emotional, and social aspects of oral health.

The HEENOT program has been shown to be effective in improving oral health outcomes for older adults. It has been associated with increased dental care utilization, improved oral health status, and increased patient satisfaction. The program has also been shown to be cost-effective, as it has been able to reduce the need for more expensive medical and dental services.

The HEENOT program is a model of interdisciplinary care that is essential for ensuring that older adults have the oral health and functional skills necessary to maintain their quality of life and independence. By working together, medical, dental, and behavioral health professionals can provide comprehensive care that addresses the physical, emotional, and social aspects of oral health.



Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4330841/pdf/AJPH.2014.302495.pdf>



Oral Health Care for Older Adults NLN ACE.S Framework



Oral Health Teaching Strategies

- Importance of Oral-Systemic Health in Older Adults
- Oral Health for the Older Adult Living in the Community
- Developing Interprofessional Education and Practice in Oral Health
- Performing Oral Health Assessments on Aging Patients

Developed through a collaborative effort between the National League for Nursing and Community College of Philadelphia, Advancing Care Excellence for Seniors (ACES) fosters integration of gerontological nursing education.

Unfolding Cases	Teaching Strategies
NLN ACE.S Framework	Development and History
Harford Foundation Resources	ACE.S Video Library

Available at <http://www.nln.org/professional-development-programs/teaching-resources/ace-s>



Oral Health Care for Children NLN ACE.P Framework



With generous funding from the Howard Foundation, the NLN has developed ACE.P unfolding cases to focus on the increasing impact of environmental, housing, and access to care for children in vulnerable populations. The cases focus on the special needs of vulnerable children in the areas of nutritional status, oral health, preventive care, immunizations, mental health, and autism. The ACE.P Cases follow the format of NLN's highly regarded and successful Advancing Care Excellence for Vulnerable Populations (ACE) series.

Unfolding Cases	Teaching Strategies
NLN ACE.P Framework	Additional Resources

- Mia Jones Unfolding Case
 - Katrina's Introductory Monologue
 - Simulation 1: Primary Care Clinic
 - Simulation 2: PACU
 - Simulation 3: ER
 - "Finish the Story" Assignment
- Teaching Strategies
 - Nutrition Education Program
 - Oral Health in Childhood

Available at <http://www.nln.org/professional-development-programs/teaching-resources/ace-p>



Oral Health Literacy

Available at <http://ohnep.org/interprofessional-resources>

Oral Health and HIV
HIV is a virus that can affect your immune system, making you more likely to get sick. Oral health is important for people with HIV because it can help prevent and manage HIV-related complications.

Oral Health and Diabetes
People with diabetes are at a higher risk for oral health problems. High blood sugar can lead to gum disease and tooth loss. It's important to keep your blood sugar under control and to see your dentist regularly.

Oral Health and Older Adults
Oral health is not just about keeping teeth clean. It refers to the jaw, lips, gums, mouth, tongue, and throat that make us able to eat, talk, and breathe. As you age, you become more prone to certain oral health problems.

Oral Health and You
Oral health is not just about keeping teeth clean. It refers to the jaw, lips, gums, mouth, tongue, and throat that make us able to eat, talk, and breathe. As you age, you become more prone to certain oral health problems.



NEW! Undergraduate Interprofessional Oral Health Faculty Tool Kit

- ✓ Microbiology
- ✓ Anatomy & Physiology
- ✓ Pathophysiology
- ✓ Research Methods
- ✓ Pharmacology
- ✓ Health Assessment & Promotion
- ✓ Fundamentals



- ✓ Nursing Care of Adults & Older Adults
- ✓ Nursing Care of Children
- ✓ Maternity & Women's Health
- ✓ Community
- ✓ Psychiatric-Mental Health
- ✓ Leadership in Nursing
- ✓ Professional Nursing

Evaluation Strategies

- ❖ How do we know that interprofessional oral-systemic population health strategies work?
- ❖ How and why does it benefit students?
- ❖ How and why does it benefit patients, families, and communities?

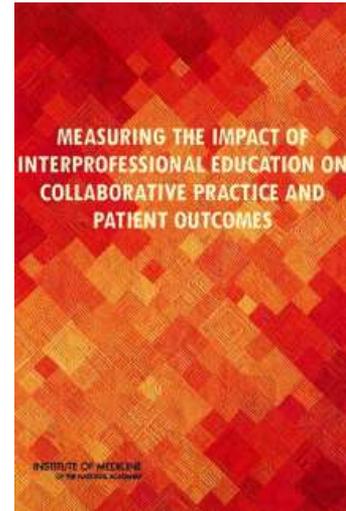




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- Surveys
 - Attitudes
 - Behavior
 - Knowledge, Skills, Ability
 - Organizational Practice
 - Patient Satisfaction
 - Provider Satisfaction
 - Faculty Satisfaction
- Smiles for Life Utilization
- Graduate Follow-Up
- Clinical Outcomes



ICCAs – Interprofessional Collaborative Competency Attainment PRE-Survey

Please answer the following questions by filling in the circle that most accurately reflects your opinion about the following interprofessional collaboration statements. 1 = "Poor"; 2 = "Fair"; 3 = "Good"; 4 = "Very Good"; 5 = "Excellent"
Please rate your ability for each of the following statements.

Before participating in the learning activities, I am able to:

1. Promote effective communication among members of an interprofessional (IP) team	1	2	3	4	5
2. Actively listen to IP team members' ideas and concerns	1	2	3	4	5
3. Express my ideas and concerns without being judgmental	1	2	3	4	5
4. Provide constructive feedback to IP team members	1	2	3	4	5
5. Express my ideas and concerns in a clear, concise manner	1	2	3	4	5
6. Seek out IP team members to address issues	1	2	3	4	5
7. Work effectively with IP team members to enhance care	1	2	3	4	5
8. Learn with, from and about IP team members to enhance care	1	2	3	4	5
9. Identify and describe my abilities and contributions to the IP team	1	2	3	4	5
10. Be accountable for my contributions to the IP team	1	2	3	4	5
11. Understand the abilities and contributions of IP team members	1	2	3	4	5
12. Recognize how others' skills and knowledge complement and overlap with my own	1	2	3	4	5
13. Use an IP team approach with the patient to assess the health situation	1	2	3	4	5
14. Use an IP team approach with the patient to provide whole person care	1	2	3	4	5
15. Include the patient/family in decision making	1	2	3	4	5
16. Actively listen to the perspectives of IP team members	1	2	3	4	5
17. Take into account the ideas of IP team members	1	2	3	4	5
18. Address team conflict in a respectful manner	1	2	3	4	5
19. Develop an effective care plan with IP team members	1	2	3	4	5
20. Negotiate responsibilities within overlapping regions of practice	1	2	3	4	5

Partnership Challenges



Obtaining “buy-in”



Scheduling



Scope of Practice Myths



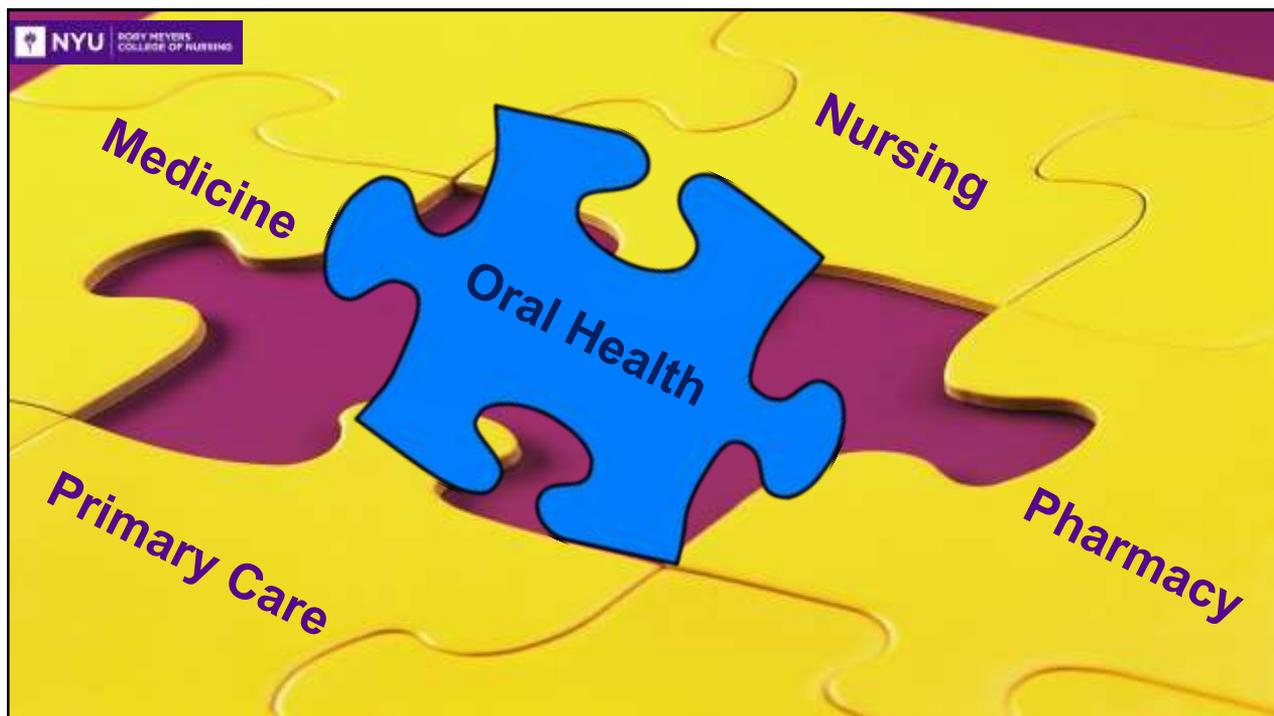
Sustainable Resources



EHR Interoperability



Evaluation





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Oral Health Integration on Your Campus

Text **OHNEP** to **22333** to join.

To respond, text the letter or letters of those responses that apply to you, leaving space in between.

Ex: **A B C**

How do you plan to integrate oral health in your curriculum? Select all that apply.

- A. Weave into classroom content
- B. Integrate into clinical experiences
- C. Integrate into simulation experiences
- D. Find an interprofessional oral health partner



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