



National *Interprofessional Initiative*
on Oral Health *engaging clinicians*
eradicating dental disease

2012

SYMPOSIUM ON ORAL HEALTH
AND PRIMARY CARE







Funders and health professionals from medicine, dentistry, nursing, physician assistant and pharmacy professions came together to join the fight for oral health and continue their process of ensuring that all health professions consider themselves oral health providers.



DAY 1: MONDAY, OCTOBER 8

- Opening Session
- Initiative Evaluation Preliminary Results
- Momentum Building Events Since September 2011
- Interprofessional Initiative Progress
- Afternoon Discussion
- Discussion Questions

OPENING SESSION

Presenters: Laura Smith, Ralph Fuccillo, and Tracy Garland

Laura Smith opened the Symposium, noting the great progress the Interprofessional Initiative has made toward its goal of engaging professionals from across the medical field on issues of oral health. She positioned the Initiative as a long-term effort, and the Symposium as a chance to celebrate, share, learn, energize, and develop new relationships. Ms. Smith noted the depth and breadth of the professions represented by the attendees—including many leaders of their fields. She expressed the excitement of Initiative funders for working more frequently in partnership with grantees, and commended the work, and growth, of the *Smiles for Life* Steering Committee.

Ralph Fuccillo expanded on Ms. Smith's remarks, emphasizing that funders at the Symposium are interested in working together with grantees to develop the field, as well as identifying new partners



to join the Initiative. He noted that one-third of the audience had not attended a previous symposium, showing impressive growth.

Tracy Garland provided background on the Interprofessional Initiative, defining it as a consortium of funders and health professionals dedicated to eradicating dental disease by engaging the primary care team. Based on *Change Philanthropy and Collective Impact** concepts, the Initiative focuses on ensuring that health professionals receive oral health education, so they enter practice ready and willing to address their patients' oral health needs and partner effectively with dentists. Ms. Garland noted the importance of the foundation's position, which allows them to address sensitive issues and look at long-term goals, in part through their ability to encourage evidence-gathering and professional movement to address oral health.

* *Change Philanthropy: Candid Stories of Foundations Maximizing Results through Social Justice* by Alicia Epstein Korten: San Francisco, 2009.

Collective Impact by John Kania and Mark Kramer, published in *Stanford Social Innovation Review*, Winter 2011.

Ms. Garland detailed the Interprofessional Initiative's approach, which includes: 1) Recruiting oral health champions from the primary care clinician leader/educator ranks; 2) Investing in high-quality curricular tools; 3) Funding work within individual professions, but also creating a venue for professions to collaboratively learn about oral health and each other; and 4) Facilitating interprofessional agreement.

Ms. Garland discussed how the Symposium was designed to help achieve the goals of the Interprofessional Initiative. The Symposium invited a mix of members from different professions interested in change and new perspectives, and has provided both formal and informal sessions to stimulate open discussion.



INITIATIVE EVALUATION PRELIMINARY RESULTS

Presenters: Paul Harder, Katherine Lee

Paul Harder and Katherine Lee, the Harder+Company Community Research evaluation team, presented preliminary evaluation data to inform strategic thinking about the Interprofessional Initiative's next steps.

Harder+Company found that the Interprofessional Initiative has made positive progress toward its goals, but that the strategies used for systems change in the primary care educational system may need refinement. Key findings included:

- Oral health is becoming seen as integral to overall health, though many still view it as a special interest field.
- The Initiative has marshaled a small, but growing, network of health leaders to work toward its mission; organized dentistry has emerged as an important partner.
- The Initiative is making progress on spreading knowledge of oral health. Primary care clinicians are ready and willing to deliver oral health preventive services to patients of all ages.
- The *Smiles for Life* curriculum has received high praise from key informants and a dramatic increase in website visits. There is a need to add modules on Interprofessional competencies and operating delivery system models. There is an opportunity for enhanced promotion at the state level, since some states lag behind in using it.
- The Initiative would benefit from increased visibility overall.

The presentation was followed by a brief Question and Answer session in which symposium participants shared their reactions to the preliminary findings. Key questions and comments included:

- Interprofessionalism is the New Face of Health Care: Students need to see integrated efforts as the new face of healthcare—to what extent is the Initiative training new dentists to participate in interprofessional activity? They learn from existing practitioners, so this group must work to change those who are already practicing, too.
- Advocacy: General dentists and practitioners are so focused on their day-to-day patients and practice management, not national policy. Should this group think about working with legislators?

MOMENTUM BUILDING EVENTS SINCE SEPTEMBER 2011

Facilitator: Tracy Garland

Updates were provided by representatives of different organizations and disciplines. They reported on specific activities with opportunities for questions and comments from the audience. At the end of the individual reports, symposium participants were encouraged to use sticky notepaper to add other ideas, questions or comments to the material posted on the flip chart sheets for use in small group discussions during the afternoon. Highlights include the following momentum-building events:

ORGANIZATION/ ACTIVITY & PRESENTER	KEY POINTS
HRSA, Interprofessional Oral Health Core Competencies Initiative (IPOHCC) Presenter: Marcia Brand	<ul style="list-style-type: none"> • HRSA sees opportunity to collaborate and reinforce the work of this Initiative. • HRSA initiatives include: <ul style="list-style-type: none"> • Interprofessional Oral Health Core Competencies (IPOHCC) • Grant funding to National Network on Oral Health Access (NNOHA) to demonstrate and spread integration of oral health competencies into non-dental safety net settings • Partnership for Quality Care, including 52 million patients and 1 million providers, is looking for innovative ways to increase quality; integrating oral health in primary care is one of five priorities • Patient Centered Medical Home • Center for Interprofessional Education at U. Minnesota
Association of American Medical Colleges (AAMC), Building Oral Health Capacity Presenter: Alexis Ruffin	<ul style="list-style-type: none"> • AAMC is engaged in a Building Oral Health Capacity initiative that entails developing oral health educational materials for pre-doctoral medical educators, subjecting them to a peer-review process, and making them widely available on the MedEdPORTAL website. Eight <i>Smiles for Life</i> (SFL) modules have been qualified for placement on MedEdPORTAL. • AAMC is also creating the iCollaborative online clearinghouse of resources for healthcare education, delivery, and research. • AAMC's annual graduating medical student questionnaire asks about the adequacy of oral health educational content.
U.S. National Oral Health Alliance Presenter: Caswell Evans	<ul style="list-style-type: none"> • The Alliance grew out of recognition at a 2009 ADA Access to Care Summit that there was a need to engage more constituencies. • In 2012 the Alliance convened three colloquia to gather diverse stakeholders, establish common ground, and make structured progress on issues in a safe, collaborative environment. • The colloquia seem to have a "gravitational pull": many people have been attracted and momentum is building.
Oral Health 2014/ DentaQuest Foundation Presenter: Michael Monopoli	<ul style="list-style-type: none"> • The DentaQuest Foundation has awarded 18 state-based oral health coalition implementation grants. • There is high interest in medical-dental collaboration. • DentaQuest is seeing high uptake of the <i>Smiles for Life</i> curriculum.
Consensus Statement on Oral Health Care During Pregnancy Presenter: Renee Samelson	<ul style="list-style-type: none"> • A careful process of developing the consensus statement ended successfully in a sign-off by American Congress of Obstetricians and Gynecologists (ACOG) and the American Dental Association (ADA). • 70,000 midwives and Ob/Gyn providers constitute an important part of the medical workforce to engage in oral health.
American Dental Association (ADA) Presenter: Dr. Kathleen O'Loughlin	<ul style="list-style-type: none"> • The ADA shares the goals of the Interprofessional Initiative and plans to share expertise and influence to help move it forward. • Announced today: ADA is formally endorsing the <i>Smiles for Life</i> curriculum, sending a public message that organized dentistry is behind this Initiative. • This Symposium is the first time Dr. Kathleen O'Loughlin has seen health professionals come together with emotional commitment to set aside turf battles and solve an important health problem.
Interprofessional Education Presenter: Mark Deutchman	<ul style="list-style-type: none"> • In 2011 the Interprofessional Education Collaborative identified core interprofessional (IP) competencies which health professions students need to develop in order to enter the workforce ready to practice effectively. <ul style="list-style-type: none"> • Primary care clinicians need interprofessional competencies as well as clinical competencies to address patients' oral health needs. • Clinicians need to be able to understand and communicate with each other about their roles with the patient. • Clinicians need a common language in order to partner effectively. • The Interprofessional Initiative on Oral Health is producing tools for multiple professions to use to learn about patients' oral health and hopes to partner with those advancing the Interprofessional Education agenda to use oral health as a case example.
Patient Centered Medical Home (PCMH) Presenter: Brenda Sharpe	<ul style="list-style-type: none"> • The REACH Healthcare Foundation has assisted Kansas-based health centers with the process of getting recognition from the National Committee for Quality Assurance (NCQA) as a Patient Centered Medical Home (PCMH). • REACH sees a need and opportunity to include oral health in the NCQA process. • Qualis Health recently completed a report including four case studies featuring community health centers that have made changes to incorporate oral health in the PCMH. • Payment reform will be important to this topic.



KNOWLEDGE BASE

INTERPROFESSIONAL INITIATIVE PROGRESS

Interprofessional Initiative partners, representing different sectors, reported on their progress. Presenters included the following:

ORGANIZATION/ ACTIVITY & PRESENTER	KEY POINTS
<p><i>Smiles for Life</i> Steering Committee Presenter: Melinda Clark</p>	<ul style="list-style-type: none"> • The <i>Smiles for Life</i> Steering Committee welcomed new members from Nursing and Physician Assistant (PA) professions. • Focus for our work is supporting practitioners and educators. • Have determined that willingness to set ego aside is key to success in promoting interprofessional practice.
<p>Oral Health Nursing Education and Practice Initiative (OHNEP) Presenter: Judith Haber</p>	<ul style="list-style-type: none"> • Nursing is an active partner in the national movement toward interprofessional practice. • Recent HRSA grants to nursing education programs that emphasize interprofessional work create additional “points of light.” • OHNEP representatives have presented to over 2,000 nurses over the past year regarding the role of oral health in primary care. • The National Nursing Work Group on Oral Health continues to convene to share ideas and implement plans.
<p>Physician Assistant Leadership Initiative on Oral Health Presenter: Anita Glicken</p>	<ul style="list-style-type: none"> • Since 2009, this Initiative has engaged PA professional organizations responsible for education, practice, licensing and accreditation to imbed oral health in their work. • PA summits have created shared values and a commitment to be “oral health champions” and encouraged new PAs to become involved. • Delivered oral health messages to over 2,000 practicing PAs. • PA students now enter practice expecting to address patient oral health needs and educate others on how to do this.
<p>American Academy of Pediatrics (AAP) Presenter: Laura Barone</p>	<ul style="list-style-type: none"> • AAP has worked with the Interprofessional Initiative on an oral health risk assessment tool that can be used in family medicine, pediatrics, nursing, PA and dentistry. • Optimistic about ability to change practice patterns.
<p>American Pharmacy Association Foundation Presenter: Benjamin Bluml</p>	<ul style="list-style-type: none"> • Assessing best approach to involve pharmacy education and practice leaders about the role of pharmacy in oral health. • Pharmacists’ role in medication/chronic disease management provides opportunity to integrate oral health. • Patient credentialing protocols developed by pharmacy for purposes of diabetes patient self management could be adapted for oral health patient self management.



THE STRONG FIELD FRAMEWORK

The Interprofessional Initiative is attempting to build a strong field of interprofessional practice and is pursuing a number of strategies to strengthen this field. Paul Harder introduced the strong field framework, a useful approach to thinking about the Interprofessional Initiative's work. The framework was developed in 2009 by The Bridgespan Group for use in philanthropy but it offers a way to organize the Interprofessional Initiative's strategies. The framework identifies five components necessary for the creation and support of a strong field. These are:

- Shared identity
- Standards of practice
- Knowledge base
- Leadership and grassroots support
- Funding and policy

The strong field framework provided a conceptual tool that was used during the symposium to organize the discussion about what additional strategies and activities are necessary to continue to strengthen the field.

AFTERNOON DISCUSSION

Facilitator: Paul Harder

Participants were asked to consider the question: What questions do the evaluation and other morning report items pose for the Interprofessional Initiative? Paul Harder provided a synthesis of key ideas to date and facilitated a discussion of the morning report-backs. Key comments included:

- Pharmacists have a potentially very important role to play in oral health, particularly regarding the use of fluoride. They may be able to supplement ADA efforts to respond to anti-fluoride websites.
- There is a need to discuss the issues of reimbursement and Health Information Technology.

DISCUSSION QUESTIONS/GROUP BREAK-OUT

Facilitators: Tracy Garland and Paul Harder

During this session, participants worked in five small groups, each of which was assigned to one of the five strong field elements. The groups were assigned to define a set of interprofessional strategies and action steps in each of the areas needed to advance the work of the Interprofessional Initiative over the next year. They addressed the set of key questions below. After a summary and commentary on a few of the day's key ideas, groups reported back to provide discussion material for the next day's sessions.

Key Questions for Break-Out Groups

- What needs to be done in this area?
- What have we accomplished?
- What should happen next?
- What are the challenges and what strategies can be used to overcome them (in specific disciplines)?
- What resources do we need, including new partners?



DAY 2: TUESDAY, OCTOBER 9

OVERVIEW

- Opening Session
- What are the next steps that would take us furthest, fastest toward our goal?
- Summary and Next Steps

OPENING SESSION

Facilitator: Ralph Fucillo

Ralph Fucillo offered comments to expand participants' thinking about their roles in and mindsets about interprofessional work. He suggested that a paradigm shift is occurring in business around social networks—people are beginning to create alliances and work together toward similar goals, enabling them to work toward the social good while maintaining their focus on the bottom line.

Mr. Fucillo discussed how this shift relates to interprofessional work, emphasizing that this more fluid, networked world is requiring adjustments in professions that have a fairly traditional way of doing business. He asked participants to consider what the new importance of social networks means for their professions, from philanthropy to health. In the health field, he described how networks will have increased significance as a result of Affordable Care Act components (set to roll out in 2014) which include



dental coverage for all children. He noted that participants will need to create new networks in healthcare to meet increased need, rather than simply rearranging the current system.

Participants had a chance to think about the preceding day's work and consider what lies ahead in this context. A few key themes emerged:

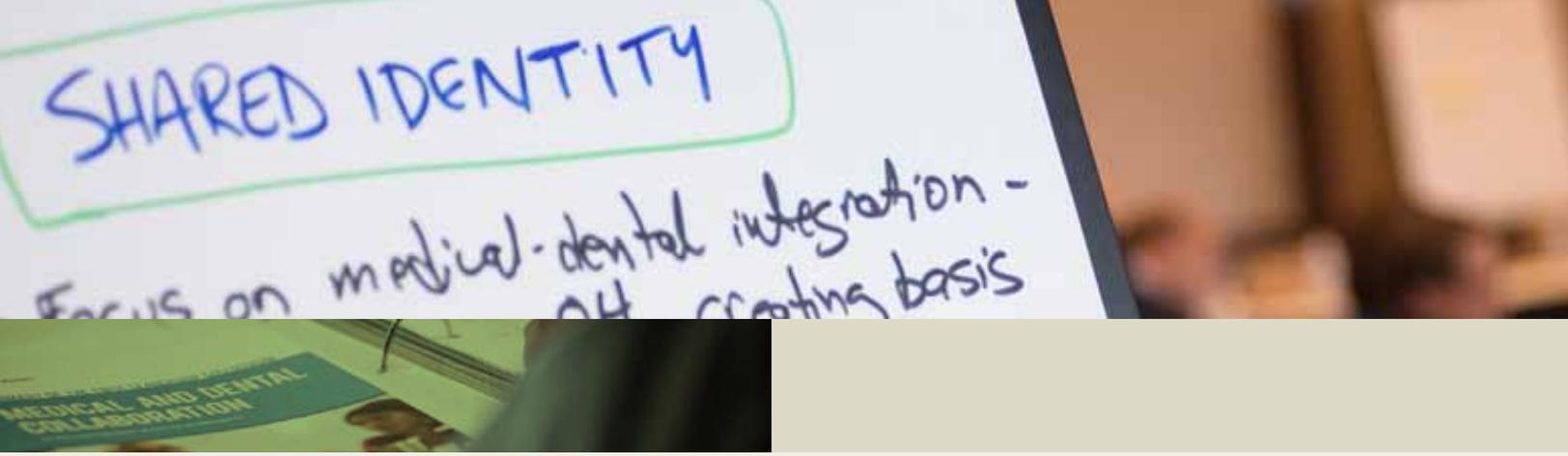
- The deliberate creation of networks is important. Participants discussed ways to create networks in their daily work, such as by connecting someone with a need to someone with a skill or resource.
- Participants raised concerns regarding the difficulty of creating networks—while it is best to work together on common ground, some within the network may also feel a loss of control or ownership over a particular area.
- The group acknowledged the importance of measuring the Interprofessional Initiative's work through social science and social networking analysis. They noted that is critical to communicate results to decision makers, as well as use outcomes and systems thinking in their daily work.

NEXT STEPS TO TAKE THE INTERPROFESSIONAL INITIATIVE THE FURTHEST, FASTEST TOWARD ITS GOAL

Presenter: Tracy Garland

This session provided an opportunity for participants to consider the next steps for the Interprofessional Initiative. Tracy Garland revisited the values of the Initiative, which the group discussed and supported. The values included:

- Willingness to set aside ego
- A “leave your weapons at the door” attitude; no need to posture
- Patient-centeredness
- An intention to value each others’ work, and communicate that respect to ensure that separate activities are mutually reinforcing
- Do no harm/find common ground
- An openness to alternative perspectives



- No need to be the “center of attention; rather, show up where energy has already gathered, bring our agenda and become part of that movement.

Ms. Garland then synthesized information from the previous afternoon’s session as a basis for future action. She outlined positive activities currently underway for the Interprofessional Initiative, which included profession engagement activities; support for *Smiles for Life*; work to add oral health components to accreditation, certification, and licensing programs; communication of Symposium activities to participants and target audiences; and evaluation activities with Harder+Company.

Next, Ms. Garland detailed key future activities to build on current Initiative work. These included a deeper look at what oral health can learn from other fields regarding patient engagement; involvement in Health Information Technology inter-operability and reimbursement reform; attainment of additional funding for the Initiative; and centralization of resources and literature regarding research, education, and practice evidence.

Finally, Ms. Garland discussed current and potential partnerships that will allow the Interprofessional Initiative to strengthen and expand its activities. Some examples of priority partnerships include: HRSA Interprofessional Oral Health Core Competency Working Group, the Partnership for Quality Care, the Patient Centered Primary Care Collaborative, as well as those working in the field of Interprofessional Education.

Other potential partners identified by participants include: AARP (to help activate a consumer voice for oral health); the American Congress of Obstetricians and Gynecologists and national midwife organizations (to incorporate activities on oral healthcare during pregnancy); student organizations (to bring new voices and practitioners into the fold); as well as numerous other organizations that have an interest in oral health, such as the American Diabetic Association and American Association of Dieticians and Nutritionists.



“It’s the first time I think I’ve seen the health professions come together in a way to really solve a problem that has a tremendous impact on the public. I see the emotional commitment in this group, that they have put their ‘weapons’ down and they are going to move forward and be persistent until they have a solution that makes sense. The American Dental Association is very committed to this. We are bringing our expertise and influence to help move this initiative along.” Dr. Kathleen O’Loughlin



“To get people to talk and interact, share information and see themselves as collectively responsible for patient health and community health involves a level of interaction that some find threatening, some find alarming and others think that that’s the way it should have always been done and approached.” Caswell Evans

2012 Symposium on Oral
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Lansdowne Resort
October 7 – 9, 2012
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“This Initiative has grown beyond my expectations...sharing knowledge, building trust, inviting a broad group into this collaboration. People working together, finding common ground, will help patients ultimately. It’s a journey of committed individuals and champions in their own professions that really want to make a greater impact through collective thinking and action.” Ralph Fuccillo



National *Interprofessional Initiative*
on Oral Health

*engaging clinicians
eradicating dental disease*



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