Getting to the Heart via Oral Health: A Medical and Dental Collaboration Summit

> Friday, June 10, 2022 8:30 am – 2:30 pm EST

Helping Healthcare Get Better | mpro.org

We are taking a break for lunch!

We will resume at 12:45pm





CE Instructions

- This <u>live</u> virtual event is approved for 5 AMA PRA Category 1 Credits and 5 dental continuing education credits
 - To claim Continuing Medical Education, dental continuing education credits or a certificate of participation, you will need to complete an event evaluation that will be sent in our follow up email
- This event is being recorded and will be posted online on the summit's landing page



What We've Done

- Implemented Self-Measured Blood Pressure (SMBP) Pilot program
- Created Medical Assistant SMBP Virtual & In-Person Office Visits with standardized documentation
- Virtual and In-Person trainings sessions held
- Identified appropriate patients with valid home BP monitors
- Future: Evaluate the SMBP program, assess patient outcomes, & implement a SMBP loaner device program

How We're Getting it Done

- Teamwork
- Intervention: Education, communication, support from care team, & hypertension self-management
- Technology: Electronic medical record, digital BP device, patient portal, patient instructions (PatientPass[©]), & analytics
- Tip-sheets- SMBP process flow map, competency checklist, Target: BP Device Accuracy Test_©, patient educational resources & training videos

Thanks for Working to Get us There - Our Team

Clinical Team- Nurse	Clinical Team- Provider Champions	Clinical Team- Office Champions	Clinical Informatics Liaisons	Helios Team	MPRO Consultants
Project Leader- Gina Aquino, DNP, RN, CHSP	Steven Fried, MD Lead Provider	Angie Betcher, MA Supervisor	Lisa Bedy, RN	Nicole Ames, Instructional Designer	Andrea Boucher, MHSA, CPHQ Program Manager- Ambulatory
Shirley Tinnon, RN, Nurse Manager	Jeremy Fischer, DO	Monika Eichmann, Lead MA	Germaine Marsh, RN	Courtney Stevens, Director Virtual Care	Julee Campbell, MPH, CPHQ Senior Quality Consultant
Karen Bauer, RN, Regional Nurse Manager	Hilda Ferrarer-Blair, MD	Michelle Williams, Lead MA	Aleksandra Nikolaj, RN	Marie Lee, Manager Access Care Technology	
			Rochelle Webb, RRT		

Who We Are

- We are Henry!
- HFMG Primary Care, Family Medicine, and Internal Medicine Clinics
- Pilot involved initiating SMBP at 9 clinics consisting of 33 providers, 51 residents, 36 medical assistants, 32 CSRs, and other team members
- Website: <u>www.henryford.com</u>

HENRY FORD HEALTH.



WAYNE COUNTY HEALTHY COMMUNITIES

Hypertension Summit June 10th, 2022

WHO WE ARE

Wayne County Healthy Communities (WCHC), a non-profit organization, was awarded Federally Qualified Health Center (FQHC) status in 2012.WCHC provides health services to community members regardless of their ability to pay.



Awarded Status



Patient-Centered Medical Home (PCMH) and accredited by the Accreditation Association for Ambulatory Healthcare (AAAHC)

2 Locations

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With clinic locations in Wayne

- and Hamtramck, WCHC's
- mission is to provide patients with a "one-stop shop" access to healthcare services

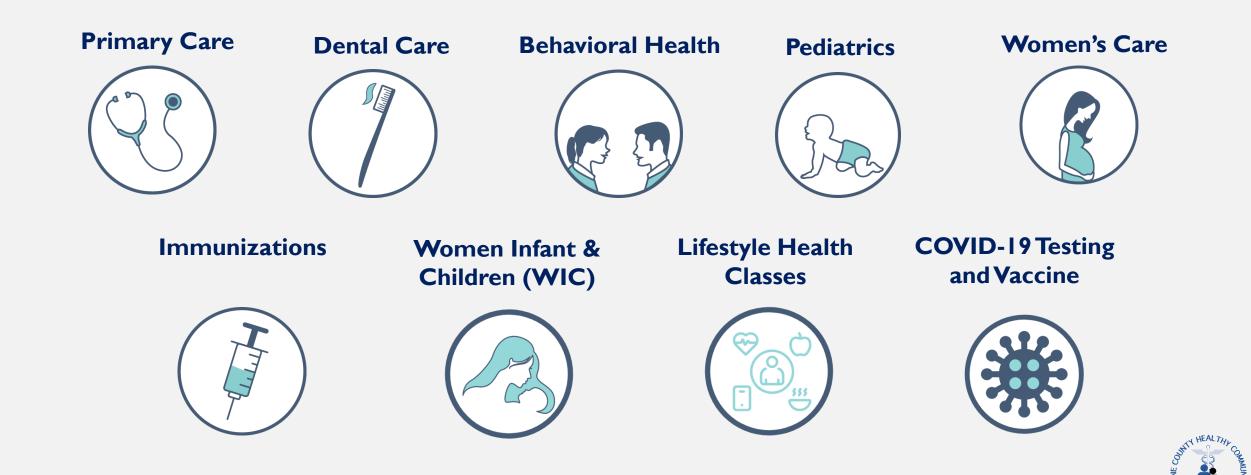
Facility Size



39 staff members who assist in providing culturally and linguistically appropriate material



WHAT WE DO



PLANSTO HELP MANAGE BLOOD PRESSURE





Chronic Care Management (CCM) Pilot Program

Patients need individualized support, as well as opportunities to discuss care goals and areas needing additional support. In April 2022, five patients were selected to participate in the CCM program to assist in patients' goals for self managing their chronic conditions. Patients who are currently enrolled are English speaking, high risk, and have at least 2 chronic conditions. These patients may need any of the following services: transitional care management, chronic care management, care coordination, and/or advanced care planning.

DURATION: Ongoing



Check. Change. Control. (CCC) Program

WCHC is currently in the process of implementing the CCC program in partnership with the American Heart Association. This blood pressure management program emphasizes 3 important aspects of managing hypertension by **checking** for high blood pressure and symptoms, **changing** lifestyle and seeking treatment, and **controlling** hypertension by taking preventative measures. Identified patients fall into one of the following categories (1) patients with uncontrolled hypertension (2) **c**ontrolled hypertension but are high risk, and (3) patients without a diagnosis of hypertension who are at risk due to other risk factors/comorbidities.

DURATION: Once a month for 4 months



Daily Morning Huddles

Clinical team reviews patient list for the day and identify any missing care gaps the patients may have that can be addressed during their appointment including those patients with elevated blood pressure readings.

Thank you to our clinical and outreach staff for making this possible!



CONTACT US To learn more about our progress!



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HOPE Village Revitalization Health Initiative



What We've Done

Healthy Hope Village Project Objectives

HOPE Village Revitalization is a community-based organization working towards an equitable and sustainable future for the Hope Village neighborhood, with a high quality of life for all – including good health. Hope Village has implemented a peer-based community health Worker (CHW) model that has been effective in overcoming barriers to access and trust in the maternal-infant health care field.

What we would like to achieve

The CHW will work to provide trusted non-medical one-on-one and group support for neighborhood residents in order to directly impact health outcomes for adults with heart ailments /hypertension and children with asthma.

How We're Getting it Done

Interventions include:

- Blood Pressure Monitoring, Heart Health Self-Monitoring program Blood Pressure, Wellness Walking Clinics, Yoga and Chair Yoga, 150 Minute Challenge
- Promotion on social media pages: HOPE Village 360 (Facebook and Instagram)
- June 2021 Present

Thanks for Getting us There

- The Jewish Fund
- Kresge
- Wayne State University, and WSU Black Medical Students Association
- Open Airways for Schools

Who We Are

www.hopevillagecdc.org

We're Happy to Talk about our Project

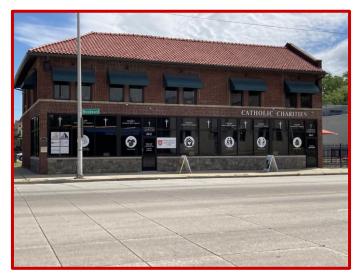
info@hopevillagecdc.org



- The Clinic provides free, high-quality dental and medical care to those in the Detroit area
- Who lack insurance and access to healthcare.
- We serve the poor and sick regardless of age, race, gender, religion or ethnicity.
- Our Clinic has served over 15,000 uninsured, lowincome patients since its opening.
- The Clinic accepts no fees for its services.

Clinic statistics, Jan. 1 - Dec. 3, 2021

1900 patient visits
Over 600 patients served
262 new patients
445 dental exams/hygiene visits
620 tooth extractions and fillings
81 dentures or partials
72 medical visits
49 oral surgery patients, and ...
FOR EVERY DOLLAR SPENT, THE CLINIC PROVIDED
ALMOST THREE DOLLARS' WORTH OF SERVICES!
Since opening in 2004, the Clinic has served over 15,000
patients!



Presented by

Jasmine Kaur

SERVICES PROVIDED

Dental

Examinations X-rays Fillings Teeth cleanings Dentures and partials Extractions Referrals Eye Clinic (last Tuesday of each month) Eye examinations Prescription glasses

Medical

General clinic care
Physical exams
Blood pressure screening
Urine analysis
Urine pregnancy tests
Diabetic supplies and medicine
Asthma supplies and medicine
Free generic medications refills
Wound care
Free vitamins
Outpatient referrals



- In 2014 American Medical Academy (AMA) wanted all dental clinics to record blood-pressure of all the patients reporting to the facility for care.
- The rationale was that a "toothache is more common than a stroke " thus, dental clinics would be a great screening point for blood-pressure in patients.
- They aimed to increase patients awareness and compliance for the same leading to a decreased number of strokes.

Our Objective

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Increased patient awareness and educating patients about blood pressure and health ۲

Intervention

- At our medical clinic (2014 Present) Number of patients screened ~ 5000
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Result

- Increased compliance rates have been observed with all our patients. Patients return for dental treatment after obtaining good control.



How is it done

Blood pressure and dental appointments:

Use this recommendations sheet with patients to help you decide

if the patient can have dental treatment based on their blood pressure. At the start of an appointment, you should take blood pressure on all patients who are:

→ 18 years and older

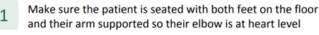
(-) 17 years or younger and have a high blood pressure diagnosis

Why should I check a patient's blood pressure during a dental appointment?

- A patient's blood pressure can give information about their overall health and help you decide if it's safe for them to have dental treatment
- Some medicines taken for high blood pressure (hypertension) can cause dry mouth or other dental symptoms
- · High blood pressure can affect which type and dose of local anesthetic to use



How to check blood pressure (\rightarrow)



Choose the right size blood pressure cuff:

- The inflatable part should cover about 40% of the distance around the upper arm
- The entire cuff should cover 80% of the area from elbow to shoulder
- Place the cuff on the bare skin of the patient's arm, not over a shirt
- Ask the patient to sit still and not talk, use their phone, or do other activities while taking the reading
- Take the blood pressure reading 5





How is it done

⇒ Can the patient have dental treatment based on their blood pressure?

Blood pressure of 139/89 mmHG or lower

Yes, continue dental treatment - there are no contraindications.

Blood pressure of 140-179/90-109 mmHG

Follow these steps:

- 1 Tell the patient their blood pressure reading is high
- 2 Take the patient's blood pressure again to confirm
- 3 Ask the patient these questions to decide if they can have dental treatment:
- 4 If the patient can be treated:
 - Decide if they need a local anesthetic. Consider how the patient's blood pressure affects which type of anesthetic and dose to use.
 - Monitor their blood pressure every 10-15 minutes during longer appointments that last 90 minutes or more.
- 5 After treatment: Refer the patient to their primary care provider to talk about their high blood pressure reading.



- Do you have any of these symptoms: chest pain, headache, or blurry vision?
 - o Yes, do not treat. Refer to their PCP.
 - No, ask next questions to decide.
- Do you have any heart problems? For example, have you had a heart attack or stroke in the past?
 - o Yes, do not treat. Refer patient to their PCP.
 - No, go to next question to decide.
- · Does the patient answer "yes" to 4 or more of the questions below:
 - Yes, you can treat the patient.
 - o No, do not treat. Refer patient to their PCP.

Questions to ask patient:

- · Can you do light work around the house, such as dusting or washing dishes?
- Can you do heavy work around the house, such as scrubbing floors or lifting or moving heavy furniture?
- · Can you climb a flight of stairs or walk up a hill?
- · Can you walk quickly on level ground?
- · Can you run a short distance?
- Can you play a sport, such as golf, bowling, dancing, doubles tennis, or throwing a baseball or football?



How is it done

Blood pressure 180/110 mmHG and above

Follow these steps:

- 1 Tell the patient their blood pressure reading is high
- 2 Take the patient's blood pressure again to confirm
- 3 If their blood pressure is still very high: allow patient to sit for 10-15 minutes before taking again
- 4 Only consider emergency and non-invasive treatment.
- 5 Ask the patient these questions to decide if they can have emergency or non-invasive treatment:
- 6 If the patient can be treated:
 - Decide if they need a local anesthetic. Consider how the patient's blood pressure affects which type of anesthetic and dose to use.
 - Monitor their blood pressure every 10-15 minutes during longer appointments that last 90 minutes or more.
- 7 After treatment: Refer the patient to their primary care provider to talk about their high blood pressure reading.

- Do you have any of these symptoms: chest pain, headache, or blurry vision?
 - o Yes, do not treat. Refer to their PCP.
 - No, ask next questions to decide.
- Do you have any heart problems? For example, have you had a heart attack or stroke in the past?
 - Yes, do not treat. Refer patient to their PCP.
 - No, go to next question to decide.
- Does the patient answer "yes" to 1 or more of the more of the Category A questions below:
 - Yes, go to the next question to decide.
 - No, do not treat. Refer patient to their PCP.

Questions to ask patient (Category A)

- Do you take any medicine for high blood pressure (antihypertensive medicines to lower your blood pressure)? If yes, did you take it today?
- Do you see a doctor for high blood pressure, and have you seen the doctor in the past 6 months?
- Are you feeling anxious, worried, or stressed about your dental treatment? (mark as a yes if their heart rate is higher than 100 beats per minute)
- Does the patient answer "yes" to 1 or more of the more of the Category B questions below:
 - Yes, you can treat the patient.
 - No, do not treat. Refer patient to their PCP.

Questions to ask patient (Category B)

- · Did you take either take public transportation or drive yourself to our office today?
- Do you take care of your own house or apartment?
- · Can you walk up a flight of stairs?





We're Happy to Talk about our Project

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> For appointments Contact number - 313-894-2240 Clinic phone: 313-894-2240

Additional Questions? Interested in more MPRO events and resources?

Contact: jcampbel@mpro.org

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