

MNOHI Midwest Network for Oral Health Integration



Participating Community Health Center Needs Assessment

Thank you for your continuous support!

Your feedback is appreciated. This survey should take between five to six minutes to complete.

1. Name of health center

2. Date of assessment

3. Has your health center integrated oral health into primary care? If so when?

Yes

No

Comments or notes

4. Is there an oral health representative on the health center executive team? If yes when?

Yes

No

Comments or notes

5. Are there clinical champions who support integration of oral health care into primary care in both the oral health clinic and the primary care clinic? If yes, since when & list their name & title.

Yes

No

(please list champions)

6. Does the Health Center promote a culture of quality improvement? If yes, since when?

Yes

No

(please specify)

7. Does the Health Center currently track any oral health measures? List the measures.

Yes

No

(please specify how measures are tracked, what measures, and how often)

8. Are care coordination and other patient-enabling services available for oral health? Since when?

Yes

No

(please specify what services are available and who is responsible to educate the patient on services)

9. Are you planning to make any changes to your EHR/ EDR? If yes, which system would you be adapting?

Yes

No

Other (please specify)

10. Primary care team for the patients of focus (6-11 years old) in our practice consists of

Physicians (Enter the total number of primary care physicians)

MAs (Enter the total number of primary care MAs)

RNs (Enter the total number of primary care RNs)

PAs or NPs(Enter the total number of primary care PAs or NPs)

Community Health Workers (Enter the total number of CHWs in the primary care team)

Care Navigators/Care Coordinators (Enter the total number of Care Navigators/Care Coordinators in the primary care team)

11. Primary Care Physicians (PCPs) in our practice conduct

	Always	Often	Sometimes	Rarely	Never
Oral health screenings/risk assessment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Oral health education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fluoride varnish application	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

12. Clinical support staff (e.g. MAs, RNs) in our health center conduct

	Always	Often	Sometimes	Rarely	Never
Oral health screenings/risk assessment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Oral health education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Oral health referrals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

13. Oral health education is provided by primary care providers in our health center by

	Always	Often	Sometimes	Rarely	Never
Disseminating an educational brochure	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Provider's verbal counseling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Developing self management goals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Referral to dental clinic	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

14. Our primary care providers have a current policy or protocol to refer our patients to dental providers based on (select all that apply)

- Patients' age
- Presence of dental disease (e.g. tooth decay)
- Presence of dental anomalies (e.g. developmental enamel defect)
- Report of symptoms (e.g. toothache etc.)
- Preventive care protocols
- Parental/caregiver's request
- Using an oral health risk assessment tool
- No clear protocol
- Other (please specify)

15. Our primary care providers refer patients to the dental clinic through the use of (select all that apply)

- Warm hand-off
- EHR Messaging system/telephone encounter in EHR
- Create a referral in the EHR for staff to coordinate an appointment
- Verbal recommendation for patients to contact dental
- N/A / Currently do not refer patients to dental
- Other (please specify)

16. Is there a protocol for standing orders on initiating oral health referrals that can be acted on by non-clinical support staff?

- Yes
- No
- Unsure

Comments

17. Is there a protocol for standing orders on assuring the completion of oral health referrals that can be acted on by non-clinical support staff?

- Yes
- No
- Unsure

Comments

18. Is there a community resource specialist in your practice who works with patients' families and their care team to facilitate community connections and oral health care access?

- Yes
- No
- Unsure

Comments

19. Please list all the additional medical staff who were added to do the Smiles for Life Oral Health Curriculum (including clinical, non-clinical staff, and support staff).

20. Please list any additional trainings/ topics that you need MNOHI staff to address during the third year of the project.

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