

**BOH
MAC**

**BETTER
ORAL HEALTH
MASSACHUSETTS
COALITION**

Access & Workforce Committee

John Fisher & Lori Rainchuso

Co-chairs

2013-2014 Committee Members

Co-Chairs: John Fisher, DDS

Lori Rainchuso, RDH

Committee Members:

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- Katherine Pelullo
- Lisa Johnson
- Maria Dolce
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- Harris Contos
- Lisa LaSpina
- Jessica Holloman
- Carly Levy
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- Sandra Nicholas
- Cathy Grinham
- LuAnne Chester
- Laura Suarez

2013-2014 Update

- In 2013, the Better Oral Health for Massachusetts Coalition was awarded funding from the Massachusetts Department of Public Health for the Medical-Dental Connections Initiative.
 - Partnered with the Massachusetts League of Community Health Centers for this project.
 - Thank you to Antonia Blinn
- Access & Workforce Committee:
 - Conduct a Needs Assessment to identify and understand the barriers to collaboration between medical and dental providers by conducting 8-10 medical-dental provider focus groups throughout Massachusetts.
- Results:
 - Eight (8) focus groups were conducted around the state. Focus groups conducted in Salem, Boston, during the Yankee Dental Congress, Randolph, Waltham, Wellesley, Worcester, Uxbridge and Worcester.
 - A total of 66 participated in the focus groups. Participants represented both medical and dental sectors.

Medical-Dental Connections Initiative continued

Qualitative Study Findings: The major themes among the medical and dental providers were communication, collaboration and professional development.

- **Both medical and dental providers felt there were many of the same opportunities:**
 - Pediatricians could collaborate with pediatric dentist
 - Bring medical and dental professionals together for a CME/CEU training session
 - Continue to share the fact that the mouth is part of the body
 - A dental professional should be part of the medical team (i.e. dental hygienist)
- **Both dental and medical providers felt that barriers to collaborations included:**
 - The fact that medical records systems and dental electronic records do not talk to one another is a barrier to communication
 - Insurance for medical and dental are separate
 - Dental insurance benefits for adults continually change
 - Fluoride varnish would have been provided more often in medical offices if other insurers also covered fluoride varnish
 - Time. Both see patients and don't have much time to do much of anything else

Looking Ahead

- Next steps in Medical-Dental Connections Initiative:
 - conducting 5-10 key informant interviews (MCPHS Graduate)
 - meeting with focus group participants to review results from the study, and to brainstorm potential next steps.
- MA Community Health Worker partnerships
- An Act Relative to the oral health workforce (Bill H. 1055)

THANK YOU!