



HUMAN SERVICES DEPARTMENT
COMMUNITY PARTNERSHIPS DIVISION

115 S Andrews Avenue, Room A360 • Fort Lauderdale, Florida 33301 954-357-8647 • FAX 954-357-8204

ORAL HEALTH NETWORK MEETING

Date: April 7th, 2021 at 3 PM – 4:15 PM

Location: WebEx Virtual Meeting Platform

Facilitator: Clinical Quality Management Staff

quality@brhpc.org

(954) 561-9681 ext. 1250

AGENDA

- I. Call to Order**
- II. Welcome/Introductions**
 - A. Clinical Quality Management Coordinator Contact Information
 - Name: Vanessa Oratien
 - Phone: 954-561-9681 x 1343
 - Email: voratien@brhpc.org
- III. Network Meeting Evaluation Results**
- IV. Oral Health Patient Education Materials**
- V. Discussion: Waitlist for Clients**
- VI. Discussion: COVID-19 Vaccine**
- VII. Case Study Assignment**
- VIII. Announcements**
- IX. Adjournment**

Next Meeting Date: July 7, 2021

Broward County Board of County Commissioners
Mark D. Bogen • Beam Furr • Steve Geller • Dale V.C. Holness • Chip LaMarca • Nan H. Rich • Tim Ryan • Barbara Sharief • Michael Udine
Broward.org





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Oral Health Network

Wednesday, January 6, 2021 at 3:00 p.m.
WebEx Virtual Conference Room

MINUTES

PROVIDERS PRESENT

Deborah Davis; AHF
Carlos Herrera; AHF
Michelle Carlisle; AHF
Ryan Robinson; BCFHC
Elliot Romero; Care Resource
Dr. Curtis Barnes; Care Resource
Mark Schweizer; Nova
Kaitlin Mooney; Nova

GUESTS

None

CLINICAL QUALITY

MANAGEMENT (CQM) SUPPORT STAFF

Debbie Cestaro-Seifer
Whitney Saint-Fleur
Nicolette Duong

MANAGEMENT (CQM) SUPPORT

STAFF Contact Information

Whitney Saint-Fleur
954-561-9681 x 1219
wsaintfleur@brhpc.org

Nicolette Duong
954-561-9681 x 1244
nduong@brhpc.org

PART A RECIPIENT STAFF

Kelsey Giglioli
Neil Walker
Timothy Thomas

I. Call to Order

The meeting was called to order at 3:06 p.m.

II. Welcome/Introductions

CQM Support Staff welcomed everyone, made a statement of the goal for the meeting, and individual introductions were made.

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III. Open Discussion – Ensuring Client Retention in Oral Health Care

A. Updates on oral health care delivery

- a. Care Resource's elective services were cancelled for six weeks due to governmental regulation. During this time, exam chairs were increased from four to six. A new process for delivering services has been initiated. Employees are tested on a weekly basis. Extraoral dental suction is used during patient sessions. No patient or staff tested positive for COVID-19 since the pandemic began. Going forward, rapid testing will be implemented. The lobby is limited to 50% capacity.
- b. NSU's elective services were cancelled for six weeks due to governmental regulation. Emergency services remained open during the pandemic. Exam chairs has increased by two. A new process for delivering services has been updated to include a text messaging system which reportedly is improving communication with patients. Extraoral dental suction system is used during patient sessions. The lobby is limited to 50% capacity and free masks are provided to all patients. Patients who bring personal masks are given a bag to hold their masks during their visit.
- c. BCFHC ordered and installed new plastic barriers during the pandemic. The agency has resumed service delivery. The lobby is limited to 50% capacity and masks are provided to patients.
- d. AHF was open during the pandemic and implemented similar strategies to promote safety as other agencies. The lobby is limited to 50% capacity.

B. Adaptations of service to ensure patient engagement

- a. Practices adhere to social distancing and sanitizing guidelines.
- b. New oral health indicators have been placed into the PE system.

III. Broward Outcomes and Indicators

Table 1. Outcomes, Indicators, and Measure

Outcomes	Indicators	Measure
1. Continuity of oral health care.	1.1. 75% of clients have a dental visit at least 2 times within the past 12 months.	1.1.1. Oral health care visits documented in designated HIV Management Information System (MIS).
2. Screening of periodontal health is provided.	2.1. 75% of clients with a history of periodontitis who received an oral prophylaxis, scaling/root planning, or periodontal maintenance visit at least 2 times within the past 12 months.	2.1.1. Periodontal charts and client medical history demonstrating oral prophylaxis, scaling/root planning, or periodontal maintenance in compliance with ADA guidelines ² .

C. Continued barriers

- a. No drastic change has been seen in patient no-show rates. When a no-show event occurs, the reasons for no-shows are different from findings expressed in the Oral Health No-Show Report. In many situations, patients cancelled their appointments. A noted change was that many no-show events were patients schedule for cleanings.
- b. The Network members discussed an increased trend for patients having high blood pressures. Agencies attempt to mitigate this problem by providing patients with low-risk oral health services at the time of their appointment.
- c. Providers shared the concern that their Quarterly PE reports do not run. The Recipient told Network members to use the "Broward Outcomes Report V2" and the "Quarterly Report PE Reporting Guide" to generate a report (see attachments).

IV. **Open Discussion – Final Oral Health No-Show Report**

A. Lessons learned

- a. NSU implemented text messaging technology to mitigate no-shows during the pandemic.
- b. NSU's providers place patients on standby to mitigate no-shows. Around five people will be on the standby list in the morning and afternoon sessions.
- c. During the pandemic, a few providers reported numerous cancellations. However, this can be interpreted as patients continuing to be engaged in the process of obtaining oral health care. Several suggestions were given by providers to identify patients who experience oral health anxiety.

B. Suggested next steps

- a. For patients who suffer from unstable housing, each agency has implemented a different process.
 - i. Agency automatically books these patients on standby.
 - ii. Agency has patients identify family members to act as advocates to assist the patient in obtaining oral health services.
- b. Create an infographic for Oral Health HIV Care showing health benefits of regular oral health service delivery.

V. **Open Discussion – Consideration of Oral Health Patient Education Materials (see attachments)**

- A. Identify patient education materials that may support patients in learning about benefits of regular oral health care.
- B. There is an identified need to ensure patient education materials meet the linguistic needs of all patients.

VI. Announcements

A. CQM Support Staff

- a. All network members are required to complete Ryan White Part A Grant complete survey: <https://survey.alchemer.com/s3/6121286/Network-Evaluation-Oral-Health>

B. Recipient

- a. The executive order suspending ADAP's requirement to have CD4 and viral load labs for eligibility ends on February 26th. All providers are asked to remind their patients to schedule and obtain their HIV-related labs in preparation to resume the pre-COVID-19 eligibility process.

VII. Adjournment

- A. The meeting was adjourned at 4:13 p.m.

Next Meeting Date: April 7, 2021



Oral Health Network Meeting

April 7th, 2021
3:00 – 4:15 PM



Housekeeping Rules



Mute Microphone

Participants will be automatically muted to limit background noise



Identify Yourself

State your name and agency when speaking



Use the Chat Box

Type in the chat box to identify yourself and agency, ask questions, and request additional clarification



Raise Your Hand

The “raise hand” option will notify the presenter of any questions that may arise



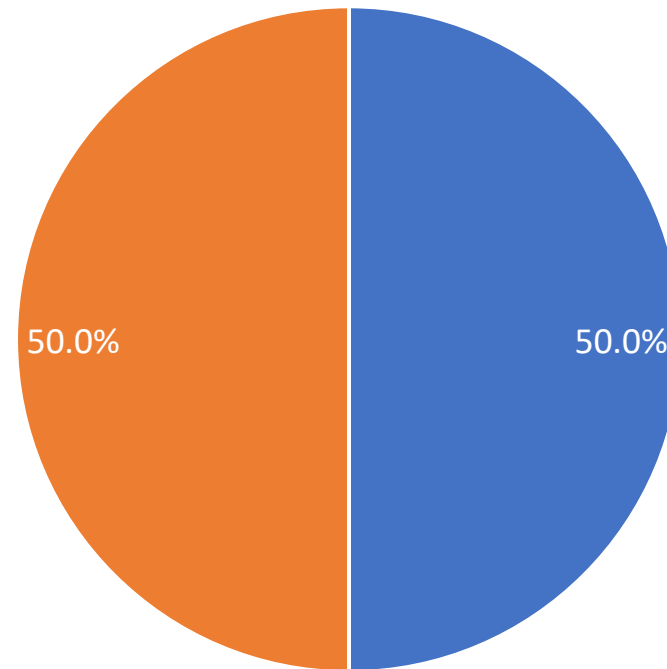
Ask Questions

Please save questions until the end of each slide

Welcome & Introductions

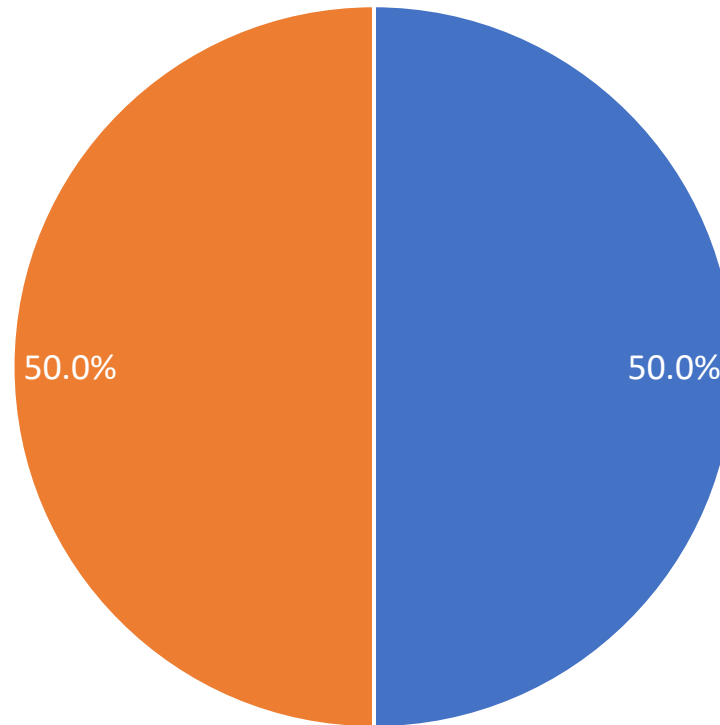
Network Meeting Evaluation Results

1. The meeting agenda consisted of topics that were informational, constructive, and beneficial to deliver Ryan White Part A services.



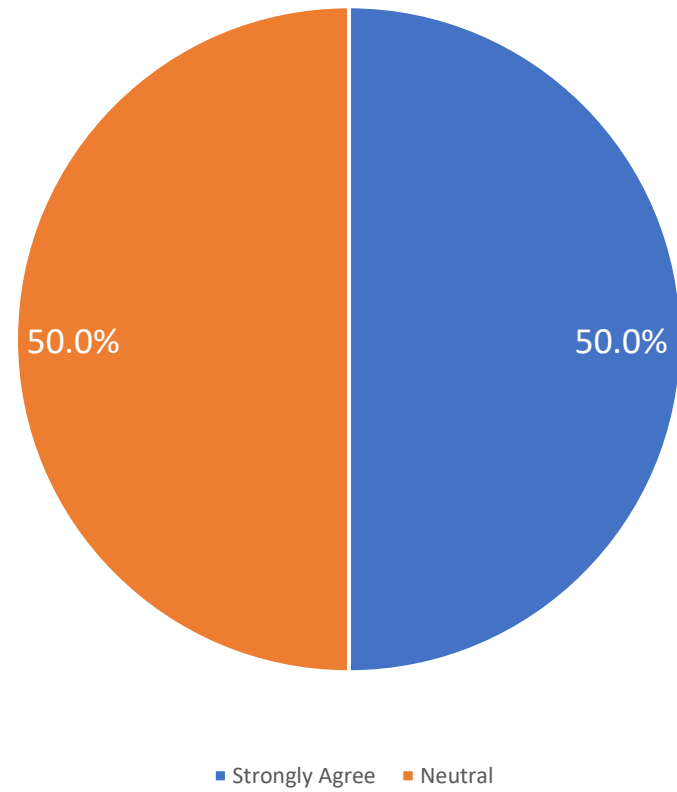
■ Strongly agree ■ Neutral

2. The meeting discussions were on-topic, constructive, and valuable.

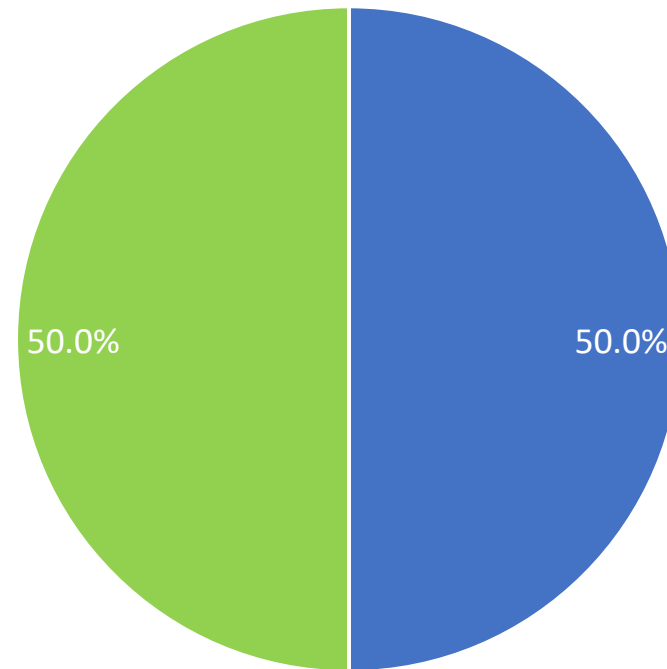


■ Strongly Agree ■ Neutral

3. The meeting materials were well organized, visually appealing, and easy to follow.

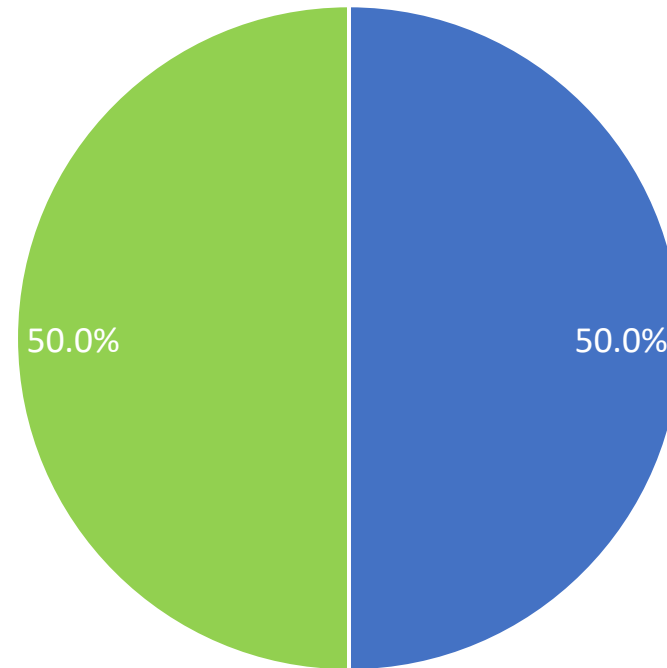


4. I was able to utilize WebEx meeting platform to effectively participate in this meeting.



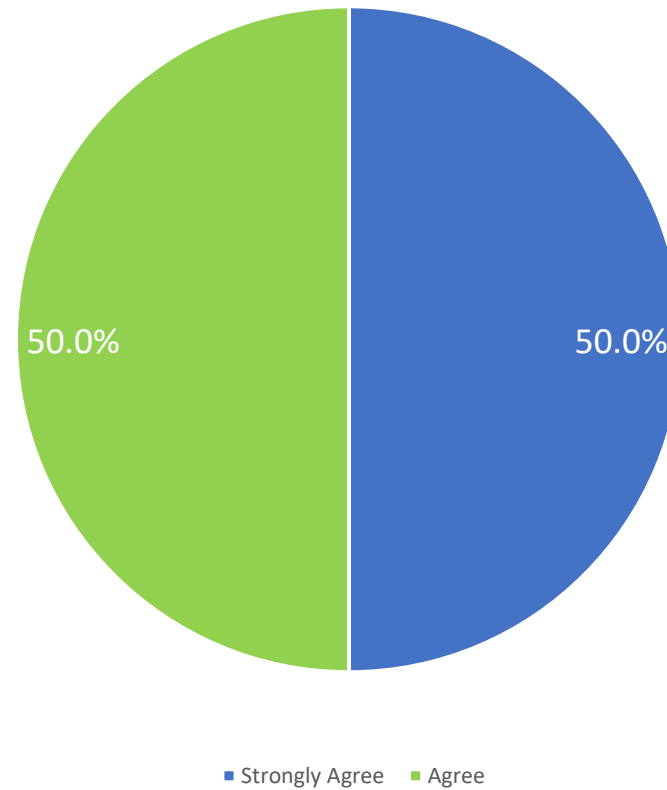
■ Strongly Agree ■ Agree

5. This meeting made progress towards improving the quality of care received by Ryan White Part A clients in the Broward EMA.

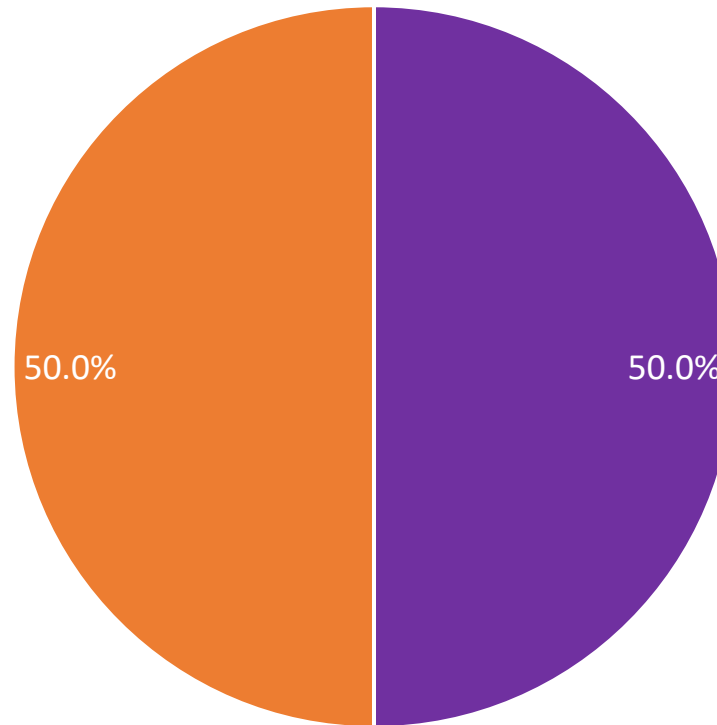


■ Strongly Agree ■ Agree

6. The meeting promoted an environment that encourage networking among participants.



7. Overall, I consider this meeting to be:



■ Very Helpful ■ Neutral

8. Please list a minimum of two discussion or training topics for future network meetings:

A large orange speech bubble with rounded corners and a pointed bottom, containing the text "Motivational Interviewing." in white. It is positioned below a horizontal line that starts with a short orange segment on the left.

“Motivational Interviewing.”

Additional
Recommendations?



Oral Health Patient Education Materials

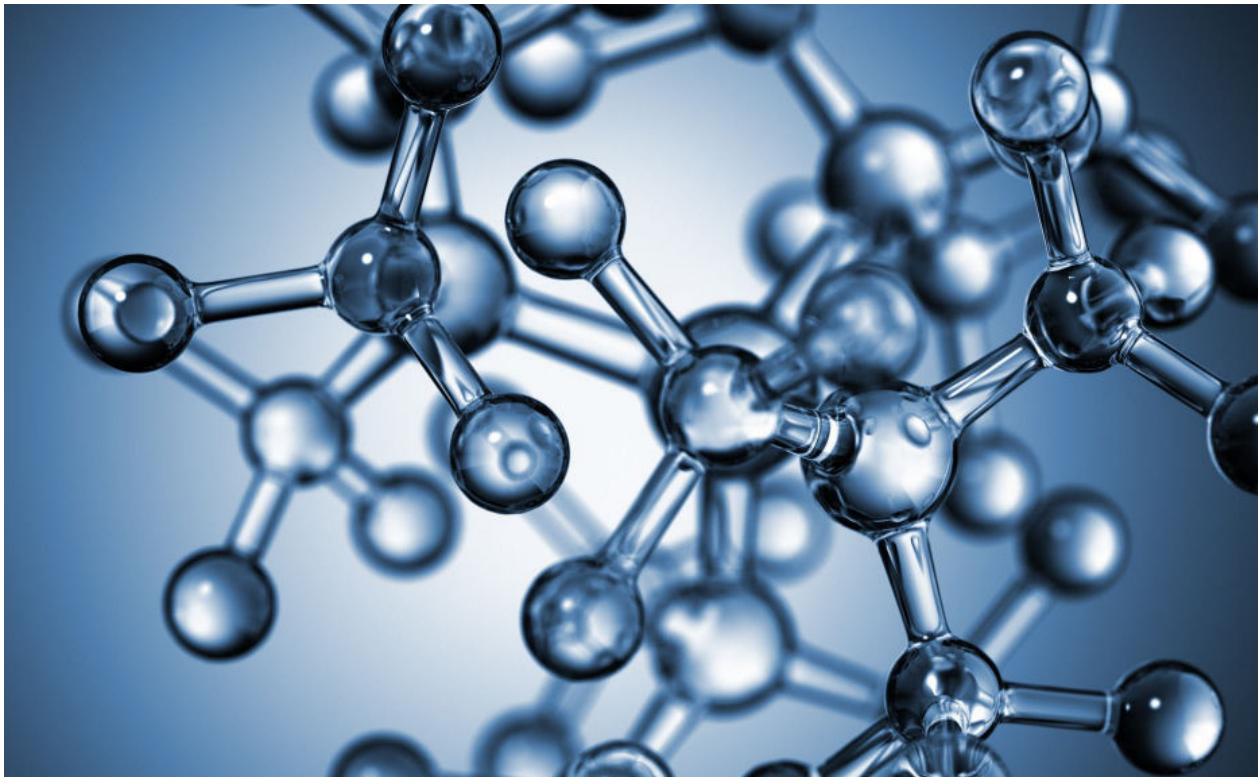
Discussion: Waitlist for Clients

What is your current waitlist process?

How long is the wait for new clients? Follow-ups? Emergencies?

What can be done to shorten wait times?

Discussion: COVID-19 Vaccine



Confidence

Hesitancy

Challenges

Case Study Assignment





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Oral Health: Case Study

Viral Load:	
History of Viral Load	
Mode of Transportation:	
Housing Status:	
Insurance Status:	
Length of Time in Care:	
Other Medical Conditions:	
Support System (Family, Friends, etc.):	
Other Barriers to Care:	

Client History:

Client Issues:

- Each agency is required to present a case in a PowerPoint format
- Two volunteers are needed for the next network meeting

Announcements



Next Meeting Date:

July 7th, 2021

