Title of Intervention: The Interdisciplinary Children’s Oral Health Promotion (ICOHP)

Intervention Strategies: Provider Education

Purpose of the Intervention: To train primary care medical providers to promote oral health in rural regions

Population: Residents and faculty in family medicine

Setting: Residency training programs located in rural areas; community-based, worksite-based

Partners: University of Washington Affiliated Family Practice Residency Network, Departments of Pediatric Dentistry, Family Medicine, Medical Education, Biomedical Informatics and Pediatrics within the School of Medicine; Yakima Valley Farmworker’s Clinic

Intervention Description:
- Provider Education: Five modules were developed to address identified barriers and reinforce positive themes. The module topics included 1) Public Health Overview, 2) Oral Health Promotion and Practice, 3) Normal Dental Development/Common Oral Pathology, 4) Dental Caries, Fluoride Varnish and Collaborating with Dentists, 4) Dental Trauma and Emergencies, and 5) Oral-Systemic Health Interactions/Children with Special Health Care Needs. The modules were accompanied by learning objectives and quizzes. The curriculum was augmented with hands-on training in application of fluoride varnish. Participants were supplied with written copies of all modules and additional references.

Theory: Not mentioned

Resources Required:
- Staff/Volunteers: Interdisciplinary dental-medical-educational team, faculty champion
- Training: Not mentioned
- Technology: Not mentioned
- Space: Training sites
- Budget: Not mentioned
- Intervention: Written module materials
- Evaluation: Printed exams

Evaluation:
- Design: Pre- and post-test with follow up
- Methods and Measures:
  - Multiple choice examinations to assess participants’ knowledge.
  - Three Likert scales to assess attitudes and self-efficacy

Outcomes:
- Short Term Impact: Knowledge increased significantly. The highest gain score was attained on test items covering caries process, anticipatory guidance and risk assessment in Module 3.
- Long Term Impact: Not measured

Maintenance: Each residency training site interested in the training was required to identify a “faculty champion” who was responsible for addressing logistical arrangements, ensuring resident attendance and completion of evaluation forms and addressing pragmatic issues needed to translate the training into clinical practice.

Lessons Learned: Collaboration with dental practitioners at the community level is important to ensure that children with the identified disease can access needed care. Once past the initial buy-in and training, it is believed that the longevity of residency involvement in oral health will depend upon creation of smooth systems for delivering oral care in a busy clinic, a working referral network and financial reimbursement. Additional adult oral health topics of interest to family medicine residents have been identified. Educational institutions have a key role to play in developing training programs and modeling collaborative dental-medical relationships.
Citation(s):