**Background and Aims**

**Mission:** CIPCOH serves as a national resource to consolidate the evidence base for systems-level oral health integration into primary care training.

**Vision:** CIPCOH envisions the role of integrative training and practice leading to cost-effective, patient-centered, and improved patient outcomes within the delivery of primary care.

- Primary care providers currently receive uneven training in oral health content.
- HRSA Integration of Oral Health and Primary Care Practice Initiative (HOHPCP) defined a set of core competencies as gold standard for ensuring appropriate training and knowledge base for primary care providers.
- Since then, diverging sets of competencies and guidelines have been released or endorsed by the governing bodies of primary care disciplines.
- The aim of this project is to collate an overarching set of competencies (and evaluation of) that summarize the most important oral health knowledge, skills, and attitudes needed in primary care training.

**Methods**

- Literature search was conducted in the following databases: PubMed, Web of Science, EBSCO Databases: Academic Search Premier; CINAHL with Full Text, Cochrane Database of Systematic Reviews, Dentistry & Oral Sciences, and EMBASE.
- A web search for oral health competencies in grey literature was also conducted for the same discipline-specific professions as well as organizations.
- The following inclusion criteria were used to select studies for the data extraction step:
  1. U.S.-based programs
  3. Articles/reports mentioning the following disciplines: pre-doc medical/osteopathic programs, Family Medicine, Pediatric medicine, Internal Medicine, Obstetrics, Physician assistants and Nurse Practitioners
  4. Articles/reports mentioning oral health integration of competencies or curricula in primary care and not solely a call to action
- PRISMA Framework was used for record selection. Review and synthesis of competencies and standards were analyzed using a mixed analysis approach to identify common themes and patterns within the text.

**Results**

**Scoping review identified 8 full sets of competencies and 3 comprehensive competency-based oral health curricula.**

**The 8 full sets of competencies cross referenced were: HRSA HOHPCP competencies, the AAMC Oral Health in Medicine for the undergraduate Medical Curriculum, Smiles for Life, IOHPCP competencies, the AAMC Global Oral Health and competencies curriculum.**

**Development of oral health EPAs**

- **GAP 1:** Cross check with 7 additional sets of competencies produced 36
- **Creation of 8 EPAs**

**Next Steps**

**Mapping Oral Health Entrustable Professional Activities (EPAs) onto ACGME Competency Domains and AAMC EPA Categories**

1. Perform an oral health risk assessment, taking into account demographics, epidemiologic and environmental factors, individual systemic health issues, and social determinants of health.
2. Perform a complete oral health history sufficient to identify patient-specific risk factors including systemic conditions that impact oral health and oral health conditions that impact systemic health.
3. Perform a complete oral exam sufficient to identify common oral health conditions and benign oral lesions (including dental caries, periodontal disease, and benign oral lesions), as well as oral cancer.
4. Perform disease-specific evaluation, for common oral health issues (including dental caries, periodontal disease, oral pain, benign oral lesions and oral cancer).
5. Deliver treatment or referral for common oral health issues.
7. Provide prevention-targeted patient education and counseling to maintain good oral health.

**EPAs for Oral Health Integration into Primary Care**

- **Performance**
  - **Medical Knowledge:**
  - **Patient Care Practice:**
  - **Based on learning and improvement**
  - **Systematic health into account**

- **Pre-Entrustable:**
  - **Unable to provide limited oral health risk assessment:**
  - **Consider some but not all patient-related tasks when performing a risk assessment:**

- **Entrustable:**
  - **Consistently takes demographics, epidemiologic and environmental factors into account:**
  - **Considers individual systemic health issues and social determinants of health to inform risk assessment.**

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number U1QHP29862, Walid Academic Units for Primary Care Training and Enhancement. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred from HRSA, HHS, or the U.S. Government.