An Interprofessional Roadmap for Integrating Oral Health in Nurse Practitioner Education and Practice: Findings of a National Survey

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Speakers

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Objectives

1. Disseminate results of the national NP Survey assessing integration of interprofessional oral health competencies in nurse practitioner programs.

2. Describe the impact of oral health on overall health across the lifespan.

3. Discuss the rationale for using interprofessional oral health competencies to prepare the nurse practitioner workforce for collaborative practice in a transformed health system.

4. Identify models for integrating interprofessional oral health competencies in primary and acute care nurse practitioner education and practice.
IPEC Competencies

Core Competencies for Interprofessional Collaborative Practice:

2016 Update

https://www.ipecollaborative.org/
HRSA Report (2014)

- HEENOT
- Health History
- Physical Health Exam
- Oral-Systemic Risk Assessment
- Action Plan (preventive interventions, management within scope of practice)
- Collaboration
- Referral

Shared Principles of Primary Care
Moving the United States toward a vibrant future of person-centered, team-based, and community aligned primary care

Shared Principles of Primary Care

- Person & Family Centered
- Continuous
- Comprehensive & Equitable
- Team Based & Collaborative
- Coordinated & Integrated
- Accessible
- High Value
Comprehensive and Equitable Primary Care

• Primary care addresses the whole-person with appropriate clinical and supportive services that include acute, chronic and preventive care, behavioral and mental health, oral health, health promotion and more. Each primary care practice will decide how to provide these services in their clinics and/or in collaboration with other clinicians outside the clinic.
PERSON-CENTERED PRIMARY CARE FOUNDATIONAL TO STRONG HEALTH SYSTEM

- Community Centers
- Public Health
- Employers
- Faith-Based Organizations
- Medical Home
  - Team-based Primary Care
- Hospital
- Home Health
- Oral Health
- Pharmacy
- Specialty & Subspecialty
- Mental Health
- Skilled Nursing Facility

Payment Reform

Health IT

CIPCOH
Center for Integration of Primary Care and Oral Health
Interprofessional Oral Health Workforce Capacity Model

Oral Health Integration in Primary Care NP Programs
Results of National Survey
Audience Poll

Are you integrating oral health in your NP program?
A. Yes
B. No
C. Not sure
Oral Health in Primary Care Training

Building the evidence base for integration of oral health into primary care training and practice
2017 Survey of Primary Care NP Programs

Purpose:
• Assess oral health curricular integration in primary care NP programs and identify influencing factors that promote integration and satisfaction with graduates’ level of competence.

Research Questions:
(1) What is the current level of oral health education across pediatric, family, and adult-gerontology primary care NP programs?
(2) What are the influencing factors that promote oral health curricula integration?
(3) What are the influencing factors that promote satisfaction with graduates’ level of oral health competence?
Methods

- 19-item, self-administered survey
- Emailed to program directors
  - Family \( (n = 252) \)
  - Pediatric \( (n = 74) \)
  - Adult-Gerontology Primary Care \( (n = 133) \)
- 5 demographic questions
- 13 questions about oral health curriculum integration
- 1 question requesting permission to contact for a follow-up study
Results

- Response rate: 50% ($N = 230/459$)
  - FNP: $106/252; 41\%$
  - PNP: $50/74; 68\%$
  - AGPCNP: $74/133; 56\%$
- All U.S. regions well-represented
Audience Poll

Is there administrative support for integrating oral health into NP education?

A. Yes
B. No
C. Not sure
Audience Poll

Does your program have a faculty oral health champion?
A. Yes
B. No
C. Not sure
Results

• Program directors reported oral health was covered in curriculum:
  – Pediatrics – 100% ($n = 50$)
  – Family – 93% ($n = 47$)
  – Adult-gerontology – 84% ($n = 62$)

• Majority (86%) reported a range of one to six hours of didactic, non-clinical oral health education
Most Prevalent Topics by Program

**Pediatric**
- Caries/cavity risks and causes
- Pediatric/infant oral screening exam
- Prevention/anticipatory Guidance

**Family**
- Medical conditions that impact oral health
- Pediatric/infant oral screening exam
- Oral cancer

**Adult-Gerontology**
- Medical conditions that impact oral health
- Geriatric oral health issues
- Oral cancer
Audience Poll

How do you evaluate students on their oral health competencies? (Select one)

A. Written/computer testing
B. Direct observation in clinical setting
C. Review of clinical documentation
D. Simulation experiences
E. OSCE or equivalent
F. None
Most common methods used to evaluate oral health competencies

- Written/computer testing
- OSCE or equivalent
- Simulation experiences
- Direct observation in clinical setting
- Review of clinical documentation
- None

AGPCNP, FNP, PNP
Audience poll

What are the **barriers** that prevent you from teaching more oral health in your curriculum?

A. Time in the curriculum
B. Lack of faculty expertise in oral health
C. Competing priorities
D. Lack of interest from faculty
E. Lack of national nursing core competencies in oral health
F. Lack of nursing accreditation standards addressing oral health
Barriers by Program

- Time in the curriculum
- Lack of faculty expertise in oral health
- Competing priorities
- Lack of interest from faculty
- Lack of national nursing core competencies in oral health
- Lack of nursing accreditation standards addressing oral health
- None

Barriers by Program:
- PNP
- FNP
- AGPCNP
Results

• 82% reported not having a formal relationship with a dental school, dental residency, or dental hygiene program.

• 17% indicated that routine teaching from a dental professional was included in their program.

• 33% reported routine teaching from non-dental oral health expert.
Use of *Smiles For Life* Courses by Program

- 39% reported awareness
# Significant Findings

Programs that reported having a faculty champion were significantly more likely to:

- Provide seven or more hours of oral health curriculum
- Evaluate students on their oral health competencies
- Cover interprofessional education with an oral health component
- Be satisfied with the level of oral health competency of their graduates

Programs with a faculty oral health champion were significantly more likely to use the following evaluation methods:

- Objective structured clinical examinations
- Simulations
- Direct observation
Conclusions

• Curriculum integration and satisfaction with graduates’ competence in oral health vary across NP primary care specialty programs.
• The majority of pediatric, family, and adult-gerontology primary care programs are educating NP graduates about oral health.
• Increase focus on evaluation of oral health competencies.
• Significant factors promoting curricular integration and satisfaction with graduates’ level of competence included presence of a faculty champion and routine teaching by a dental professional or non-dental oral health expert.
Implications for Practice

NPs are ideally positioned to integrate interprofessional oral health competencies into primary care practice, thereby:

• expanding access to oral health care;
• reducing oral health disparities; and
• improving oral health and overall health outcomes.
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