

February 7, 2024



# Promoting Preventative Oral Care for Individuals with Behavioral Health Disorders

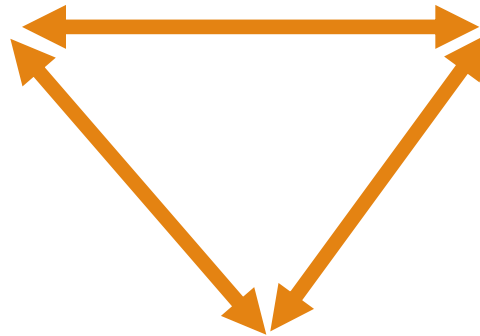


# Key Need for Intervention

Behavioral health disorders are highly linked to poor oral health outcomes

Poor oral health impact quality of life and emotional health:

- ↑ systemic disease
- ↓ prosocial health behaviors
- ↑ stigma



Behavioral health disorders limit protective oral health behaviors:

- ↑ risk factors
- ↓ protective oral health behaviors

**Those with behavioral health disorders have less access to timely, inclusive, and comprehensive oral healthcare**



# Project Evolution

Semi-structured interviews  
with service providers



Fact Sheet + Multi-Level  
Strategy Guide

## Key Takeaways

- Oral Health Providers in King County, especially at community health clinics, are overwhelmed
- Many oral healthcare providers have little training on special care dentistry
- These two factors make it difficult to create meaningful change



# Final Deliverable: Process

## Identified key frameworks used to guide project

- Expanded Chronic Care Model + American Academy of Pediatrics Model on Oral Health Disparities

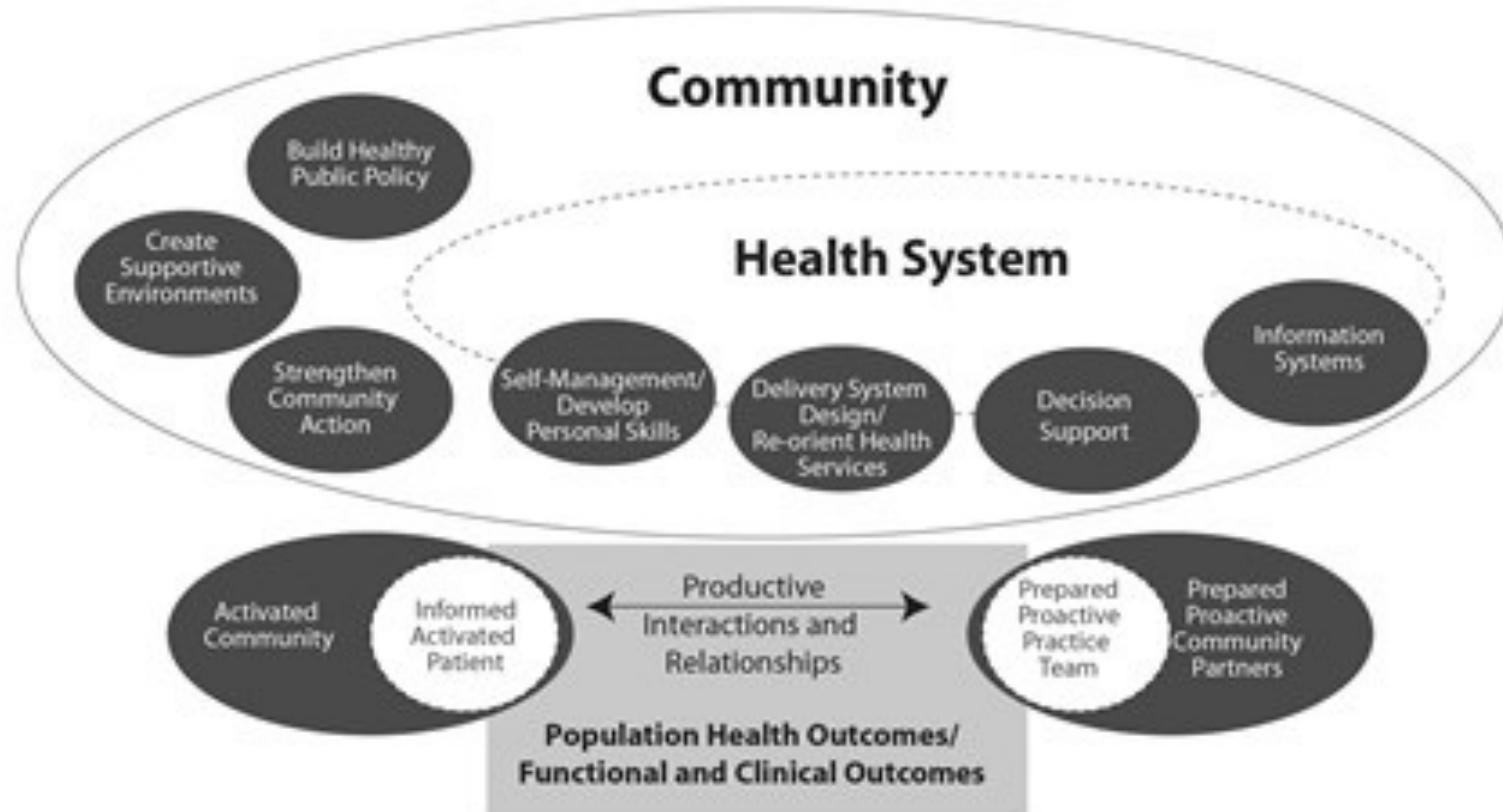
## Sought out strategies to improve oral healthcare for individuals with behavioral disorders

- Literature review focused on PubMed
  - Special Care Dentistry Publication Sources
- Searched resources distributed by non-profit health centers and King County Public Health

## Strategies sorted by key factors

- Domain of intervention based on the Expanded Chronic Care Model
- Approximate level of resource investment for implementation
- Socioecological level for intervention

# Expanded Chronic Care Model



Created by: Victoria Barr, Sylvia Robinson, Brenda Marin-Link, Lisa Underhill, Anita Dotts & Darlene Ravensdale (2002)  
Adapted from Glasgow, R., Orleans, C., Wagner, E., Curry, S., Solberg, L. (2001). "Does the Chronic Care Model also serve as a template for improving prevention?" *The Milbank Quarterly*, 79(4), and World Health Organization, Health and Welfare Canada and Canadian Public Health Association. (1986). Ottawa Charter of Health Promotion.



# Recommendations Summary

## **Prioritize specialized care plans based on a patient's unique needs**

- Increase counseling on care and treatment plans
- Prepare lists of online health education tools for quick distribution
- Give patients specific tools to help with long-term, at-home care

## **Change workstreams and spaces to better support clients with sensory needs**

- Offer quiet or low sensory hours occasionally for patients with sensory needs

## **Increase collaboration with non-oral healthcare providers**

- Have consultation roles for occupational therapists, psychiatrists, etc.
- If in a clinic that provides primary care or mental health services, integrate oral health checklist into appointments

## **Offer training and support for patients and caregivers**

- Call patients and caregivers ahead of time to set expectations about appointment structures
- Create or coordinate with dental health education programs

*Thank you for attending*

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