

# QTIP Quality Improvement Ideas for Oral Health

**SMART Aim:**  
80% of the Children between ages 1-6 will have their Oral health needs addressed

## Key Drivers

Social Determinants of Oral Health (SDOOH)

Pediatric Medical Home

## Secondary Drivers

Access/Disparity

Health Literacy

Transportation

Access to healthy foods

Ask and address SDOOH

CYSHCNs

Oral health anticipatory guidance

Caries risk assessment

Apply Fluoride Varnish

Referral relationship with dental home

## Change Ideas

Increase rate of FV at WCC from 0 – 6 yrs.

Increase frequency of FV and the % of members 1-4 years of age who receive at least 2 FV applications per year

Offer FV even at sick visits

Screen for SDOOH needs and provide resources when appropriate

Staff education- lunch and learns, training videos etc.

Create and update Dental provider list

Assess current primary care processes related to oral health care and develop an “ideal workflow”

Engage parents/caregivers in developing oral health plan for the child

Use technology like websites, emails, texts and videos to spread messaging

Partner with local Dental provider- create a referral loop

Incorporate oral health elements into EHR

Perform oral evaluation using standardized risk assessment tool

## ABP MOC Part 4



To be Eligible for Part 4 credits:

- Review the driver diagram and pick a measure
  - *change idea that you want to work on*
- Write your Aim statement
  - *define the denominator, numerator, percentage improvement and time frame*
- Collect 3(including the baseline) or more data sets and 2 QI Cycles
  - *Do 2 PDSA or QI Techniques during the 8-week period (April4/5- June1/7)*
  - *QTIP practices can use QIDA data*
  - *Can use existing projects*
- Complete the ABP attestation form for Oral health topic and send it to-  
[ramkumarjayagopalan@gmail.com](mailto:ramkumarjayagopalan@gmail.com).