Integrating Evidence-Based Practice, Quality Improvement, and Systems Leadership to Enhance Patient Safety and Access to Oral Health Services for Vulnerable Populations

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**Problem Identification**

Constraints to oral care services for vulnerable populations in a rural area resulted in an inaugural oral health safety net event. Workflow barriers identified post-event included the need to improve patient flow and provide standardization of volunteer work processes.

**Two-Fold Purpose**

- Design and implement an evidence-based clinical management protocol to promote the standardization of medical screening work processes at Eastern Shore Mission of Mercy (ES MOM) safety net events
- Influence adherence to the developed evidence-based protocol by medical volunteers through implementation of an on-line medical screening volunteer orientation

**Model for Evidence-Based Practice Change**

- Internal data collection (problems, interventions, & outcomes)
- Identify sources of evidence
- Synthesize best evidence & assess risks and benefits
- Define changes (resources, implementation design)
- Implement change (evaluate process & outcomes)
- Integrate change into standards of practice

**Methods**

- Assume Medical Lead role for ES MOM
- Identify significance of problem of oral health care disparities
- Review of Literature
  - Medical screening and health assessment questions
  - Diabetics
  - Hypertension
  - Infective endocarditis
  - Congenital heart defects
  - Joint replacements
- Develop medical screening protocol
- Develop instructional on-line module for medical volunteers
- Develop Google document to capture protocol parameters
- Implement protocol at ES MOM event
- Evaluate outcomes
  - Medical volunteer knowledge
  - Medical volunteer compliance of protocol use
  - Patient time spent in medical triage
  - Numbers of patients screened
- Disseminate Findings

**Outcomes**

- Medical Screening Volunteer Demographics

**Enhanced Medical Screening Volunteer Knowledge**

- Protocol content-specific area
- # Correct Answers
- Pre-survey correct (N=33)
- Post-survey correct (N=33)
- P<0.01

**Evidence-Based Medical Screening Intake Form**

**Enhanced Medical Screening Volunteer Knowledge**

83% patients spent < 10 minutes in medical screening (97% < 15 minutes)

- Decreased numbers of patients denied services (> 1000 patients received services over two days)
- Decreased workflow barriers
- Enhanced client safety by utilization of ‘best practices’ and utilization of inter-professional collaboration

**Systems Leadership**

- Inter-Professional Components
  - Clinical
  - Non-Clinical
  - Planning
  - Organizing
  - Collaboration / Negotiation
  - Change Implementation
  - Accountability

**Challenges & Recommendations**

- Lack of published tools & protocols
- Lack of dedicated funding
- Volunteer status
- Continued collaboration among diverse disciplines
- Lack of sustained funding

**Implications for Practice**

Nurses must exercise leadership skills to translate evidence-based practice recommendations into useful tools that assist in directing practice and guiding interdisciplinary teams across health care systems.

**References**


Nurse to nurse: Evidence-based practice and utilization of inter-professional collaboration in directing practice and guiding interdisciplinary teams across health care systems.