

Spotlight on the Safety Net

A Community Collaboration

Cabarrus Health Alliance

The Cabarrus Health Alliance (CHA) has a reputation for collaborative innovation in medical care, and for oral health care as well. Its Oral Health Program has grown over the years from a single mobile dental unit to include 2 clinic locations with a wide array of services and partnerships across the state. Kimberly Dehler, CHA dental director, notes that “the most impressive part [of CHA] is the collaboration in the community,” which has allowed so much to be accomplished in such a short time.

The CHA Oral Health Program began in 1977 as a mobile unit with a grant from the Cannon Foundation. A community needs assessment in 1998 identified access to dental care as a priority public health issue. As a result, a dental task force was formed in 1999 through Healthy Cabarrus, which is the local Healthy Carolinians partnership. The task force has representation from the local private-practice dentist community, the CHA dental program, city and county school administration, the CHA school nurse program, CHA clinical services, the local hospital, and the Cabarrus Partnership for Children, as well as other community partners.

Due to the work of the dental task force, the CHA was able to expand dental services in the county. One of the first accomplishments was hiring a public health hygienist with funding from the Cabarrus Partnership for Children. The hygienist was then trained by the Oral Health Section of the North Carolina Division of Public Health to perform screening and surveillance in the community. With assistance from volunteer private-practice dentists, many children in the community were screened.

Providing oral health care to children was the foundation for a strong collaboration between Smart Start and the CHA, which led to the establishment of screenings in child care centers and financial assistance for preschoolers who were in need of dental care services. The hygienist and community dentists began to receive referrals from teachers as well as from hygienists performing the screenings for children with early childhood caries. The increased outreach demonstrated that there was a greater need for oral health services for children than first thought, and particularly for children receiving Medicaid or those with no den-

tal insurance. To meet this need and other community needs, the CHA opened its first 3-chair clinic in Kannapolis with the help of Smart Start, the Cabarrus Partnership for Children, and the Cannon Foundation. The demand for pediatric oral health services also created a need for a pediatric dentist in the community. In 2003, through the work of dental task force partners, a pediatric dentist was recruited into the community. The demand for services continued, and in 2004, the CHA opened a 6-chair clinic in Concord with plans for future expansion. In 2006, the CHA expanded the 6-chair clinic to 12-chairs. Concord First Assembly Church donated the space, while the Cannon Foundation, Sisters of Mercy, the Kate B. Reynolds Charitable Trust, local dentists, local charities, Carolinas Medical Center-NE Hospital, Cabarrus Partnership for Children, and Community Care of Southern Piedmont (formerly known as Southern Piedmont Community Care Plan) were all integral to these expansions. In April 2012, the CHA Oral Health Program further expanded by opening a 6-chair clinic on the North Carolina Research Campus in Kannapolis under the same roof as the CHA's medical services.

In 2005, the CHA began working with Community Care of Southern Piedmont to treat medically complex patients. Rather than continuing to treat these patients in the hospital emergency department, Community Care of Southern Piedmont provided funding to the CHA dental clinic to treat them. The staff of CHA found that they were comfortable treating medically compromised adults and continued to treat the population—even after the 3 years of funding ended. CHA currently receives referrals from a variety of medical specialists for people with complex medical needs, which is a growing population.

Electronically published May 17, 2012.

Address correspondence to Ms. Kimberly Alexander-Bratcher, 630 Davis Dr, Ste 100, Morrisville, NC 27560 (kabratcher@nciom.org).

NC Med J. 2012;73(2):134-135. ©2012 by the North Carolina Institute of Medicine and The Duke Endowment. All rights reserved.

0029-2559/2012/73214

The CHA Oral Health Program has grown over time to become a leader and frequent collaborator on regional oral health projects. For example, it participates in the North Carolina Public Health Incubator Collaboratives. The collaborative that CHA is part of is the Southern Piedmont Partnership for Public Health. The dental workgroup in this collaborative convenes all 11 counties in the region to discuss barriers to efficiency in dental practices and innovative ways to approach them. The coordinator of the collaborative's dental workgroup engages between 5 and 7 counties at a time in monthly meetings to share resources and tools, and to develop new tools to share. The work of the incubator group grew into a study on oral health efficiency, which actually showed improvements in access to care, provider productivity, and client satisfaction. One need identified from this study was the need to train public health dentists in special techniques for treating children with severe dental needs. The training was conducted by the chair of Pediatric Dentistry at the University of North Carolina-Chapel Hill and was attended by pediatric dentists involved in the public health incubator project, as well as those from the private sector. The lecture

was followed by a hands-on workshop. In addition to providing education to dental professionals, the training also provided much-needed services for individuals. The study's success led to funding from the Blue Cross and Blue Shield of North Carolina Foundation to support another phase of the project. The Blue Cross and Blue Shield Foundation of North Carolina and the CHA also funded an additional project focusing on outreach dental case management for children with special health care needs.

Collaboration and sustainability have been the keys to the success of the CHA Oral Health Program. The partners review resources and then share them with others, look for ways to give back, share best practices, participate locally, and invite other partners into the fold. The program, which started locally, has grown and now leverages resources statewide. NCMJ

Kimberly Alexander-Bratcher, MPH project director, North Carolina Institute of Medicine, Morrisville, North Carolina.
Kimberly R. Dehler, MS, DDS dental director, Cabarrus Health Alliance, Kannapolis, North Carolina.

Acknowledgments

Potential conflicts of interest. K.A-B. and K.R.D. have no relevant conflicts of interest.