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Dental Director

Organizational Profile Community Healthcare Network

Our Mission

Community Healthcare Network (CHN) is a not-for-profit organization that provides access to quality, culturally competent and comprehensive community-based primary care, mental health care and social services for diverse populations in underserved communities throughout New York City.

Our Care

CHN offers a broad selection of services and programs for people of all ages. Our community health centers, offices, and mobile unit are located in the boroughs of Bronx, Brooklyn, Manhattan and Queens. CHN serves more than 70,000 individuals a year.

Our Vision

CHN envisions a time when all people, regardless of their ethnicity, finances, beliefs and citizenship will be provided basic health care throughout their lifespan. We strive to be a leader in providing high-quality, innovative, sustainable and accessible health care that promotes the wellbeing of the entire community.

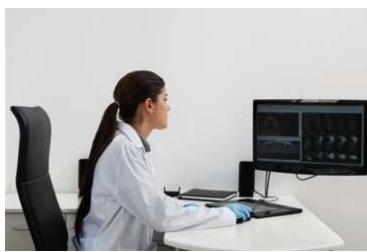
Locations

- •Williamsburg Brooklyn, East New York, Jamaica Queens, Manhattan (Harlem and Chinatown), LIC (Long Island City, Queens) School Based Program
- •3 FTE dentists and 1 PTE hygienist. (2013 will have 5 FTE dentists with the opening of 2 new clinics in Oct 2012)
- •2011 = unique patients = 7371 and unique visits = 9,700
- •2012 = unique patients YTD = 5549 and unique visits YTD = 6,903
- •EHR = eCW (eClinicalWorks version 9.0.35) and EDR = Open Dental version 11.1.9.0

How Diagnostic Codes Are Used

 We use integrated health electronic health records systems to identify and alert medical providers about special populations (Pre-Natal), Diabetes, ID), that need a dental referral. A clinical pop-up global alert based on the diagnostic code will notify providers/nurses to refer patients to dental services.



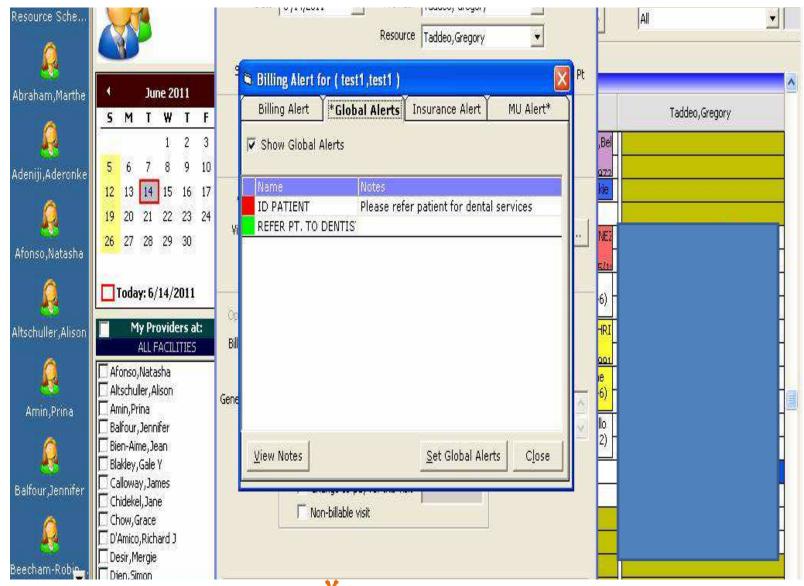


How Diagnostic Codes Are Used

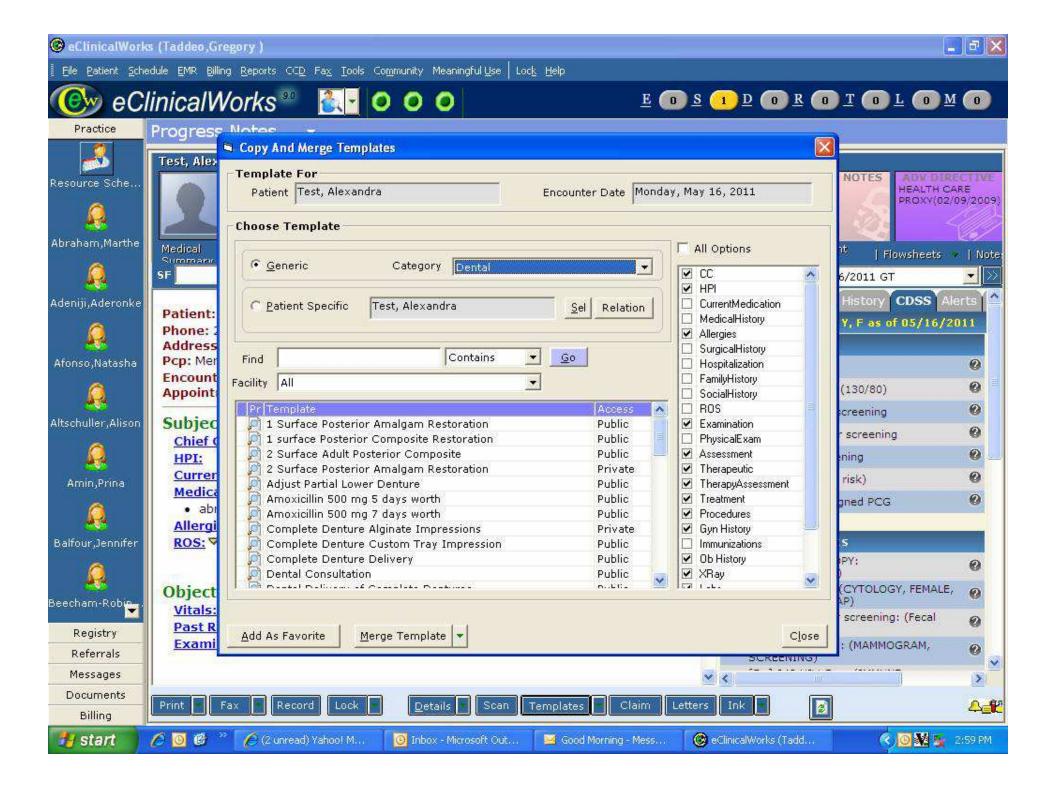
- Data analysis of number of treated patients, patients requiring treatments, and types of procedures/treatments provided for special populations (ID, Prenatal, Diabetes).
- Run reports to compare the outcomes of patient ("Quantitative" and "Qualitative" analysis) care. Ultimately have better outcomes for the treatment of the individual

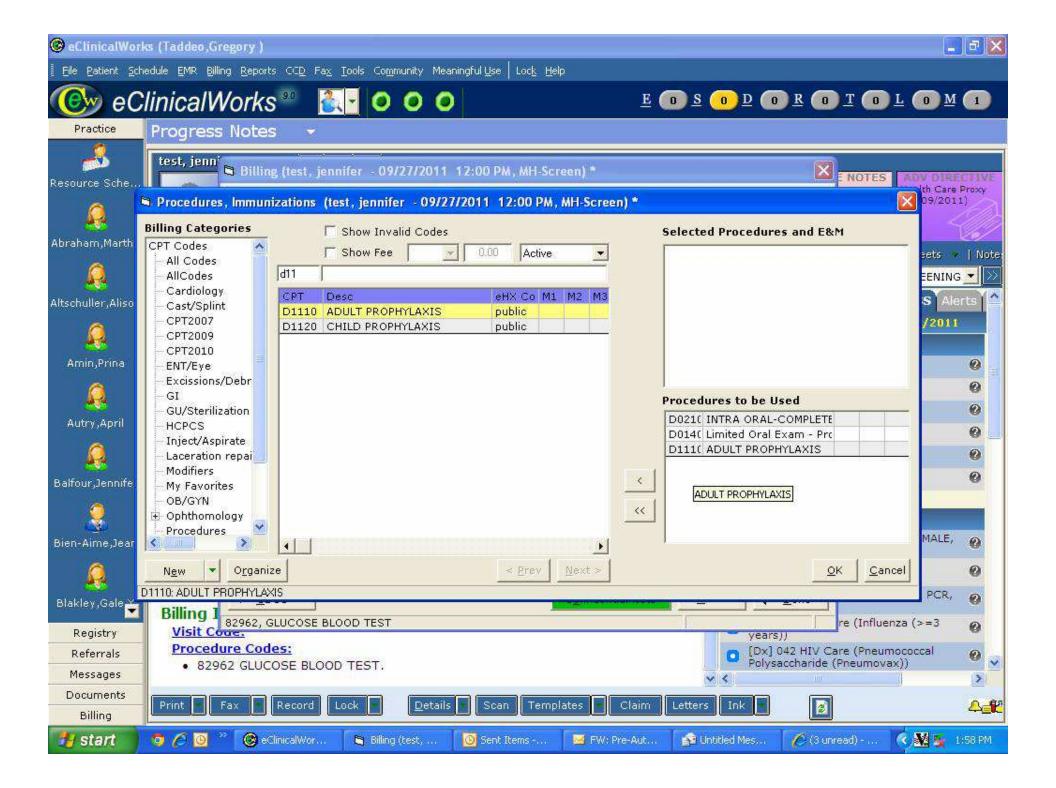
Implementation Story

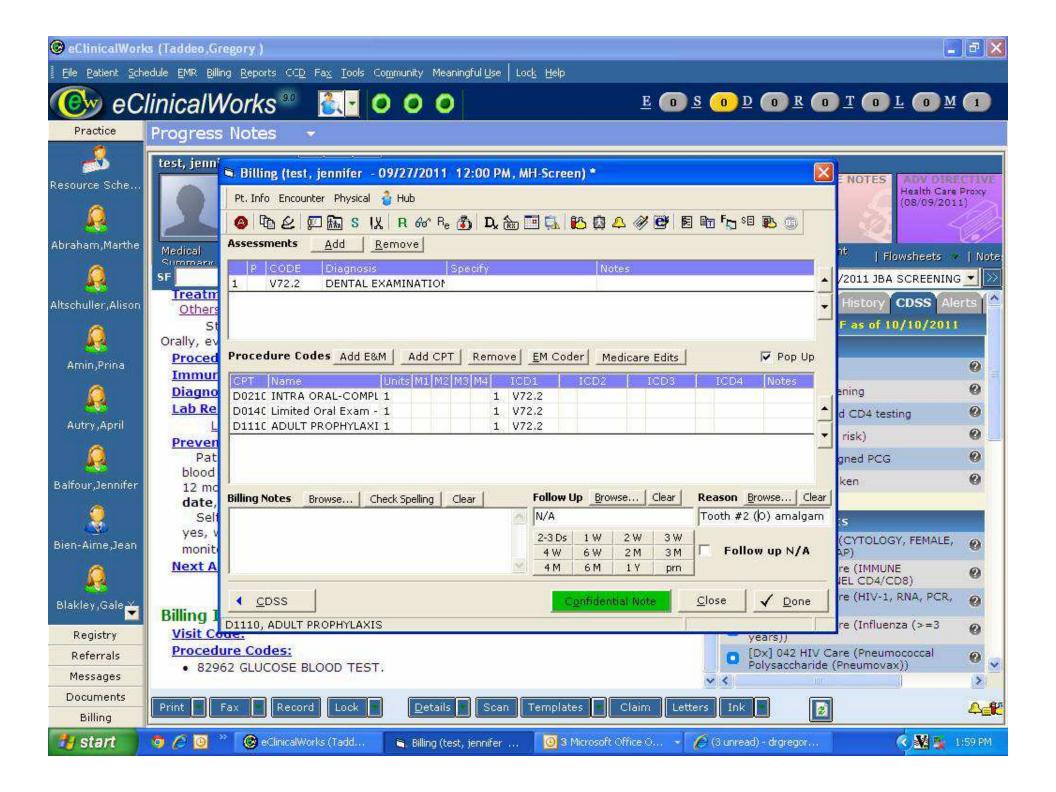
- Key implementation team members: Dental Director, IT department and our "Senior Team" (CEO,CMO,CFO).
- Piloting two weeks with eCW and creating "Dental Templates" for providers to use for the next 2.5 years until we adopted our EDR "Open Dental". Now use Open Dental integrated with EMR eCW.
- Development and utilization of "pop up alerts" for special patient populations based on medical diagnostic code. Getting the patients to the dentist (internal vs. external referrals). We addressed the "Internal Referrals" via "clinical pop-up global alerts" within our EMR eCW.

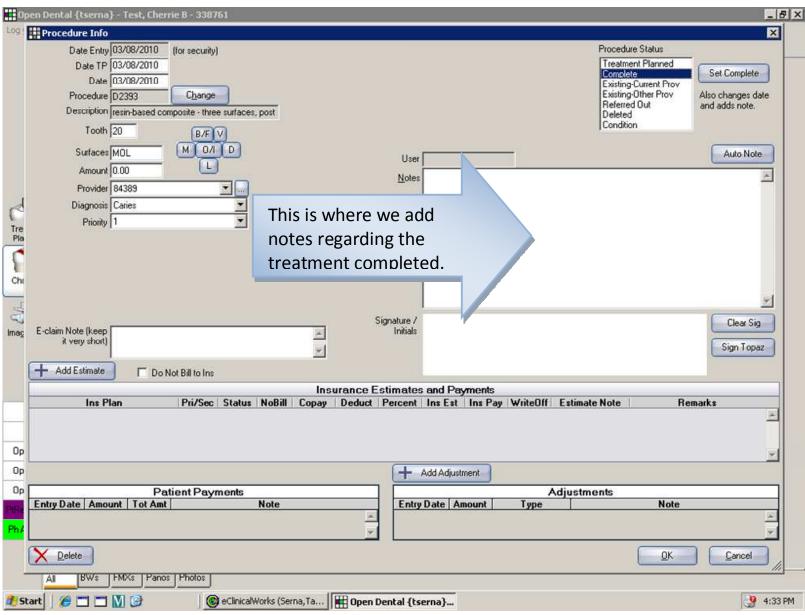


* Global Alert Notification



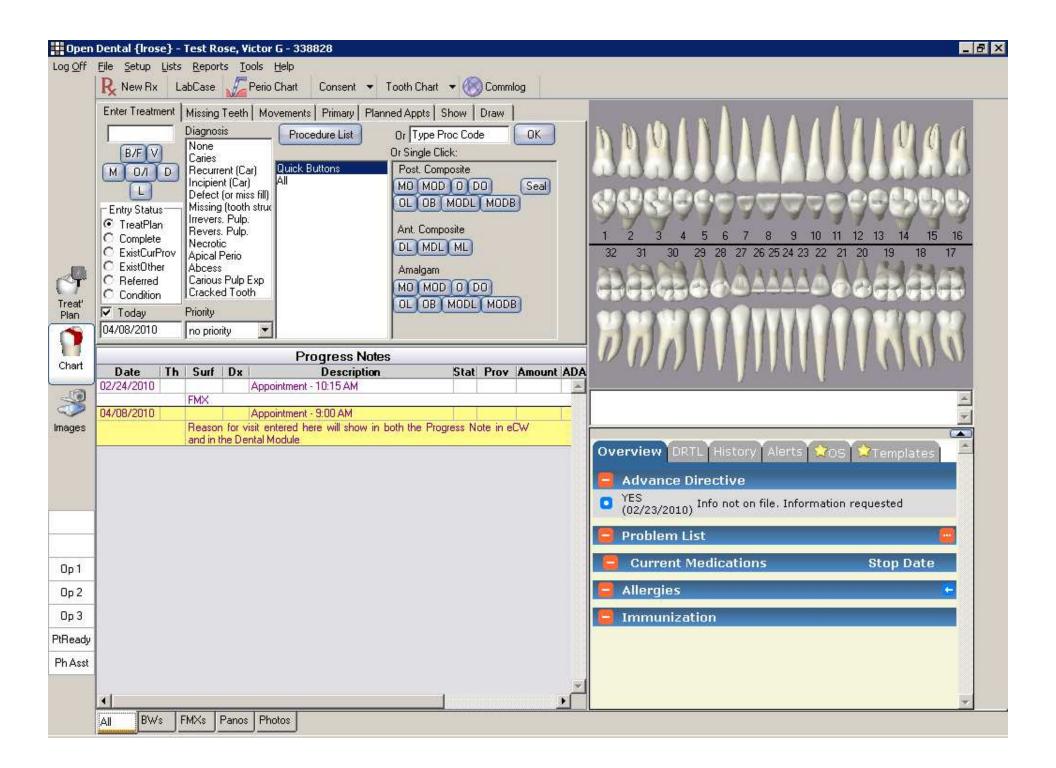






Procedure Notes in the Dental Module



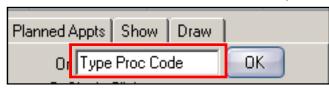


This can be accomplished by either:

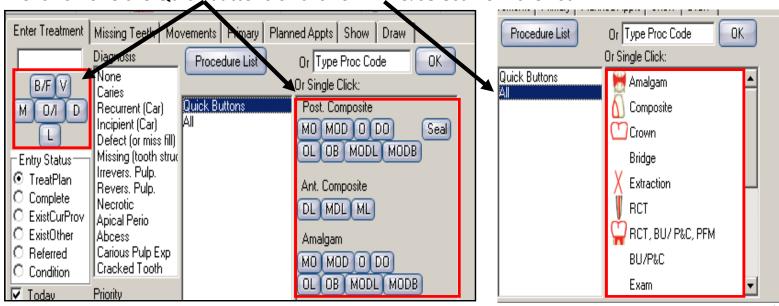
1. Selecting the procedure(s) from the main procedure list.



2. Type the procedure code in the Procedure Code box directly under Enter Treatment



3. Click on one the Quick buttons or click on ALL & select from the list.

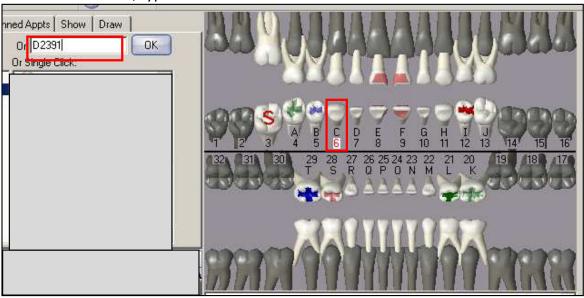




Using the Procedure Code box:

If the User knows the ADA Procedure code they can

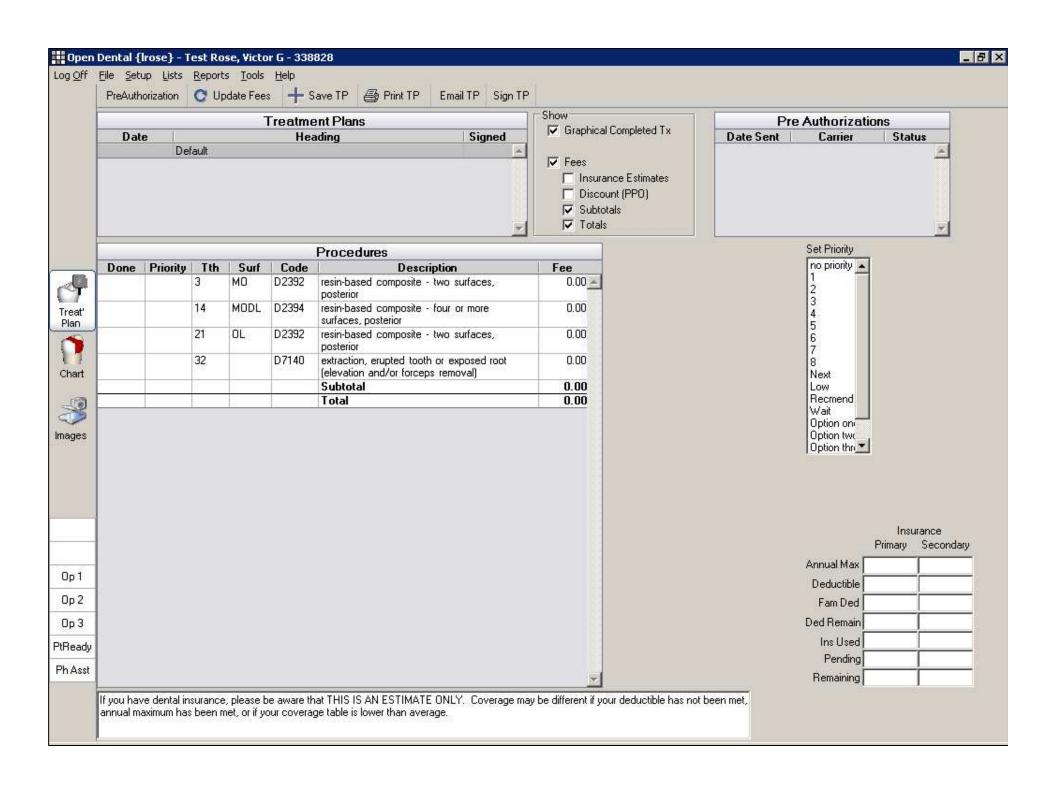
• In the Procedure Code box, type the ADA Procedure Code



• Click the OK Button. If more information is needed the procedure info screen will pop up indicating that a surface or area needs to be selected (it will be highlighted in yellow).

Trocedure Kino		
Date Entry	07/08/2010	(for security)
Date TP	07/08/2010	
Date	07/08/2010	
Procedure	D2391	C <u>h</u> ange
Description	resin-based composite - one surface, posteri	
Tooth	6	B/F V
Surfaces		M O/I D
Amount	164.00	L





Future State

- Use diagnostic codes data to meet state, federal, and external organizations regulatory and accreditation requirements e.g. HIVQUAL Compliance.
- Diagnostic code data provides a link between providers and public health authorities to address disease and its prevention.





Challenges

- Education and training is time consuming and costly with marginal room for error and modifications.
- System/Software Updates and the "Glitches" that come along with them.







Recommendations

Auto Notes/Templates

- These are pre-made templates that increase efficiency so the user does not have to keep typing in the same information each time.
- Templates containing the correct diagnostic codes allows for data analysis.





Conclusion

•Integrating EMR and EDR will link resources available to track all patients especially special needs patients (ID, Prenatal and Diabetes) via diagnostic codes

