

# Successes and Challenges of Integrating Blood Pressure Screenings into Dental Workflows

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**Objective**  
The North Dakota Oral Health Program (ND OHP) has been working to integrate blood pressure screenings and referrals into dental offices. This will improve patient awareness of their blood pressure status and help connect them to medical professionals when needed.

Dental providers have conducted over 79,000 blood pressure screenings across the state since 2019, with over 9,000 referrals to medical practitioners. **The project aimed to determine best practices when adopting blood pressure screenings, and what factors may hinder further expansion and sustainability.**

**Methods**  
The ND OHP partners with dental providers to provide blood pressure screenings and bidirectional referrals for adults. Under this partnership, Dental providers track four key indicators:

- The number of screenings provided
- The number of screenings indicating high blood pressure
- The number of referrals to a medical provider
- The number of referrals receiving follow-up

Dental providers also participate in regular calls with the ND OHP to share successes, challenges, and other contextual information regarding the project. **Results from analysis of calls and other program data are presented in the center pane.**

## Dental providers find it easy to integrate blood pressure screenings into their workflow...



## ...but often lack a simple way to close the loop on bidirectional referrals.



### What works well?

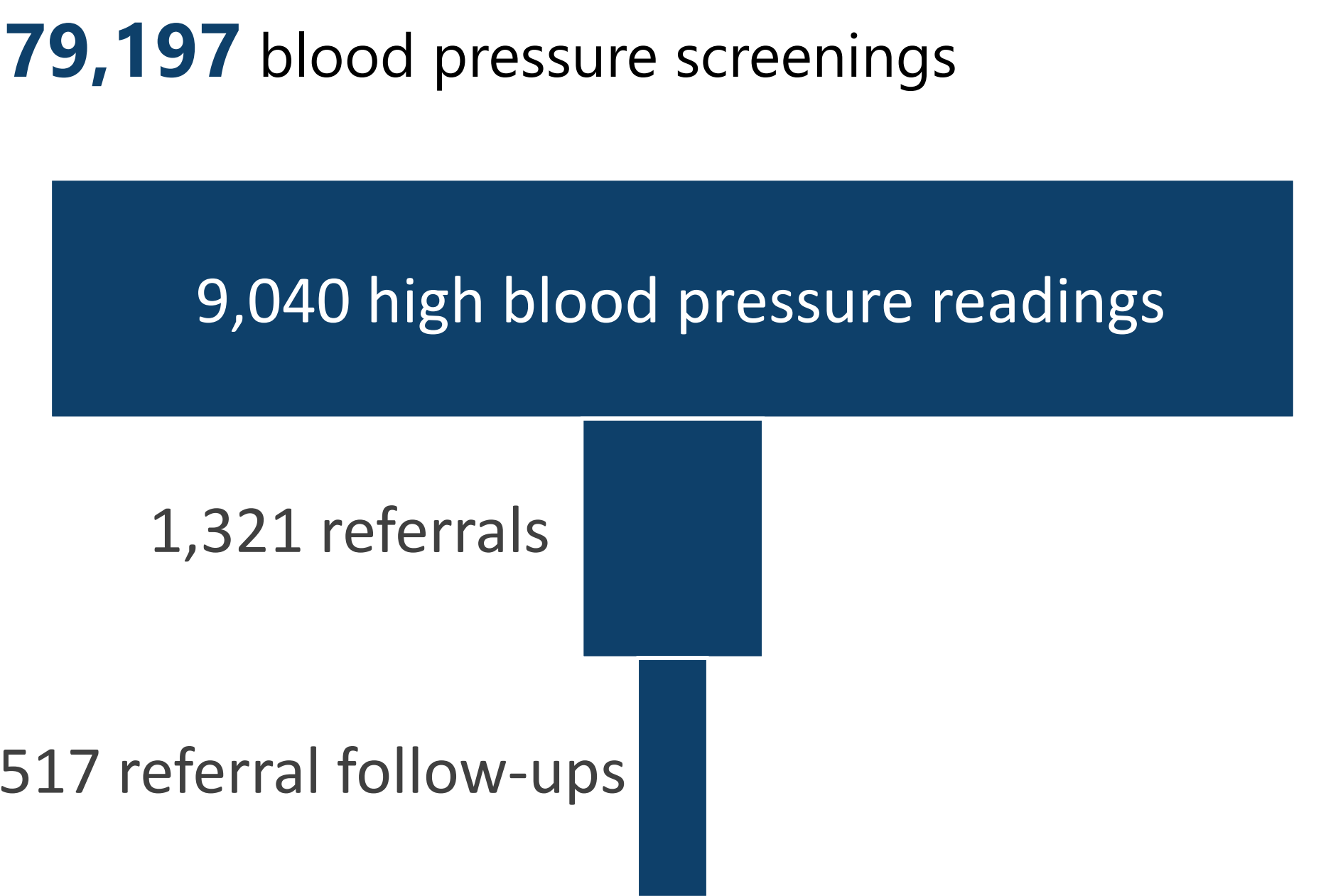
- **Dental providers have buy-in** on the importance of providing blood pressure screenings.
- **High-quality training and support** allows dental providers to easily integrate blood pressure screenings into their workflow.
- Adding blood pressure screenings requires **little added cost.**
- Once established, dental providers usually find blood pressure screenings **easy to maintain.**
- **Ongoing communication with the ND OHP** allows dental providers to troubleshoot emerging problems.



### What are the challenges?

- A **lack of pre-existing bidirectional referral systems** for dental offices requires systems to be developed from scratch. The dental provider often has to manually follow up on each referral.
- **Every dental office has a different structure.** A referral process that works for one office may not work for another.
- **Workforce shortages and high patient loads** can result in lower adherence to screening and referral processes. Providers may refer less often when they don't have time to follow up on referrals.
- **Dental providers can find data collection burdensome** and not always of value to them, which hinders continued project participation.

**Other results**  
From February 2019 through August 2022:



**Discussion**  
This project has effectively increased blood pressure screening of North Dakota residents, enabling detection of hypertension and referral to treatment. In order to address existing challenges, new programs might:

- **Assess staff and infrastructure capacity** of dental offices to ensure that screening and referral processes can be put in place without undue burden.
- **Develop bidirectional referral systems** (such as software) that can be easily implemented and adapted to a variety of settings.
- **Consider whether a one-directional referral is sufficient** in cases when there is a significant added burden to implement bidirectional referrals.
- **Streamline data collection** whenever possible.

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Photos:  
Blood pressure cuff: CDC on Unsplash.com  
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