



UHA Connection

Monthly Provider Newsletter: November 2023

PRACTICE TACTICS

INCONTINENCE SUPPLIES

Though Oregon Administrative Rule 410-122-0630: allows up to 200 units of Category I incontinence supplies per month, it is not appropriate to simply order this amount by default. UHA has documented significant waste for this DME in the past and our rules reflect those of all CCOs: **Clinicians must document in office notes how many times a day the member changes these garments and convert that number into a monthly amount for their prescription.** In addition, changing logs are required for members living in assisted care facilities. If you have any questions concerning this policy, please feel free to contact priorauthorizations@umpquahealth.com.

DERMATOLOGY

Save your staff time and lower administrative burden and costs! For covered services, submit your surveillance/treatment plan that supports the frequency of visits in the supporting documentation. Follow the guidance below. If the member meets the diagnosis as listed, you can submit the full treatment visits in a single prior authorization (PA) instead of having to submit your treatment visits one at a time.

• Guideline Note 21 for Severe Inflammatory Skin

- Quantity: Three visits
- Duration: One year
 - Initial, follow up, and annual check in

• Diagnosis: Personal history of melanoma

- Quantity: Four visits
- Duration: One year
 - A visit every three months for two years from the date of the diagnosis.
 - Resubmit the following year for the next years treatment.
- Diagnosis: Personal history of **squamous cell carcinoma**
 - Quantity: Two visits
 - Duration: One year
 - One visit every six months for two years from the date of the diagnosis
 - Resubmit the following year for the next years treatment.
- Diagnosis: Personal history of **basal cell carcinoma**
 - Quantity: Two visits
 - Duration: One year
 - One visit every six months for one year from the date of the diagnosis

If during the review process we determine that additional office visits are warranted for continuation of services, we will increase the quantity to match the treatment plan. Be sure to educate your staff to check the member history in CIM to ensure a visit has not already been submitted and approved but not yet used. If you have questions about this process, feel free to contact us at priorauthorizations@umpquahealth.com.

MATERNITY PROGRAMS FOR UHA MEMBERS

Umpqua Health Care Coordination offers support and resources for pregnant members through three programs. The goal of these programs is for the member to experience a healthy pregnancy, delivery, and newborn.

1. General Maternity Care Coordination is a program offered to any pregnant UHA member. Our priority is to offer support and resources for a healthy pregnancy and newborn. Services include:
 - Evaluation of needs
 - Goal Setting
 - Care Plan Development
 - Connection with OB/GYN
 - Assistance establishing appointments
 - Transportation
 - Connection to resources
 - Additional support as needed
2. New Day is a program offered by UHA that offers support for pregnant women with substance use or mental health disorders. In addition to the services listed above the New Day care coordinator works closely with the member, OB provider and community providers to offer support and resources with a focus on treatment for the patient's mental health and substance use disorders. The end goal is to have a healthy baby and decrease the need for neonatal intensive care unit admissions. **To refer a patient to these programs, send an email to CaseManagement@umpquahealth.com that includes the patient's name, DOB, and a description of the patient needs or call Customer Care at 541-229-4842**
3. Optum – Maternal Fetal Monitoring (MFM) UHA members that are experiencing a high-risk pregnancy are eligible to receive Optum's Maternity Support Program. This program offers personal guidance through all stages of pregnancy and delivery. The goal is to increase gestational ages and birth weights, thereby reducing neonatal intensive care unit admissions. **Early identification leads to success.** Optum's nurses work closely with the mother to provide education, resources, and support. The program offers the following to meet the member's needs:

- Assessment
 - Care planning focused on goal achievement
 - Facilitation of self-management skills
 - Connection to community, public and UHA resources
 - Care coordination
 - Advocacy
4. Optum staff refer members to UHA case management to coordinate additional care for member who have SDOH, medical, mental health or substance use needs outside of the pregnancy. **Members can be referred for this service by submitting a Prior Authorization in CIM for "MFM" this can be done by the patient's OB, specialist, or PCP**

SOCIAL DETERMINANTS OF HEALTH POLICIES & PROCEDURES

UHA has focused on establishing workflows related to screening and referring members for food, housing, and transportation needs. This work is in alignment with the Social Determinants of Health (SDoH) incentive metric which requires the implementation of policies and procedures, gap analysis, CBO contracting, and systematic assessment of screening and referral data sources.

To address the policies and procedures component, UHA has published three new policies which have been thoroughly researched and reviewed for best practices related to **social needs screening and referral practices, required training, over-screening prevention, and REALD and SOGI data utilization.** The policies were developed via an internal Social Determinants of Health Workgroup and reviewed by the Oregon Rural Practice-based Research Network (ORPRN) and the Oregon Health Authority (OHA), as well as by the Community Advisory Council (CAC), which includes Oregon Health Plan (OHP) member feedback. UHA also incorporated feedback from the SDOH Questionnaire that was sent to clinical and CBO partners back in May 2023. Finally, the policies were presented to the UHA Quality Improvement Committee (QIC) for formal approval.

We encourage your organization to:

1. Review the three (3) policies:

- <https://umpquahealth.navexone.com/content/docview/?docid=417&public=true>
 - <https://umpquahealth.navexone.com/content/docview/?docid=415&public=true>
 - <https://umpquahealth.navexone.com/content/docview/?docid=416&public=true>
2. Align your current organizational procedures with the policies.
 3. Sign-up for a Connect Oregon informational session below.

CONNECT OREGON-UNITE US INFORMATIONAL SESSIONS

Connect Oregon is a coordinated care network of health and social service providers. Partners in the network are connected through Unite Us' shared technology platform, which enables them to send and receive electronic referrals, address people's social needs, and improve health across communities. UHA highly encourages partner organizations to utilize Connect Oregon to track social needs screening and referral data. UHA

provides licenses to healthcare and community partners at no cost to your organization. *Sign up for an informational session of the platform below!*

- Monday, November 6th at 2 pm
 - Register here: <https://uniteus.zoom.us/j/6tJlvc-utqz8sGN0fsnHlxkh2NL2ixkLc4dMN#registration>
- Wednesday, December 6th at 10 am
 - Register here: <https://uniteus.zoom.us/j/6tJlvc-utqz8sGN0fsnHlxkh2NL2ixkLc4dMN#registration>
- Wednesday, January 10th at 3 pm
 - Register here: <https://uniteus.zoom.us/j/6tJlvc-utqz8sGN0fsnHlxkh2NL2ixkLc4dMN#registration>

Thank you in advance for the time you and your organization has dedicated to reviewing the attached policies. Contact us with questions or concerns.

BEHAVIORAL HEALTH CORNER

ARE YOU AN EARLY OR MID-CAREER PUBLIC HEALTH PROVIDER INTERESTED IN ADDRESSING INEQUITIES IN MATERNAL AND CHILD HEALTH?

The National Maternal and Child Health Workforce Development Center (the Center) announced a new initiative for early and mid-career public health faculty members from Diverse Institutions. **The Faculty Fellowship** will provide fellowship funding for up to 10 early and mid-career public health faculty members across the country. Fellowships will contribute to building capacity and developing a diverse MCH workforce that is able to build and sustain academic-practice partnerships and address MCH inequities in communities that are historically underserved. Click here to view the [FAQs](#) or [application](#). [Click here](#) for more information about Fellowship Activities, Deliverables, Funding, and Eligibility.

If you're a subject matter expert in public health and maternal and child health (MCH), Title V MCH, a community-based organization who works in the areas of MCH. [Click here](#) for more information about becoming a Consultant with the Faculty Fellowship program.

APPLIED SUICIDE INTERVENTION SKILLS TRAINING (ASIST) TRAINING OPPORTUNITIES

ASIST is a two-day suicide intervention training focused on helping individuals as young as 16 years old. The interactive workshop teaches the skills needed to recognize youths who may be at risk of suicide, including identifying warning signs of suicide, providing a skilled intervention, and developing a safety plan. Below is a series of ASIST training opportunities that are open to the public:

- [Incite Agency for Change](#) has ASIST trainings available and holds an interest list to

connect providers to trainings.

- Visit [LivingWorks website](#) to find an ASIST training near you.
- Visit the [Oregon ASIST website](#) or contact Tim Glascock (tglascock@aocmhp.org) for more information about Oregon trainers.

INTERDISCIPLINARY ASSESSMENT TEAMS (EASY)

UHA is interested in implementing Interdisciplinary Assessment Teams (EASY) to increase access to psychological evaluation for Children & Youth. If you are interested in learning more about easy, or if you would like to partner with UHA to implement a local pilot program, please contact us at behavioralhealthoperations@umpquahealth.com.

What is Expedited Assessment Services for Youth (EASY)?

OHA's EASY demonstration project is working on innovative ways to support psychological testing for youth. This new program is responsive to goals set out in Senate Bill 1 (2019) to provide rapid access to evaluation, assessment and recommendations for complex youth — especially those who are in child welfare custody and are in temporary lodging, emergency department boarding, shelter care, county juvenile facilities or in the custody of Oregon Youth Authority. Initial results have been very promising. EASY has provided much needed clarity by identifying an emerging mental health condition and recommending appropriate mental health services.

EASY provides quick access to full psychological and assessment services within seven to 10 days of referral. It includes:

- A full review of clinical documents,
- Determination of need for psychological testing,
- Psychological testing,
- Communication with current clinical providers and
- When appropriate, coordination with local Intellectual and Developmental Disabilities intake screening departments.

EASY is designed to offer mobile services that meet the youth in the community, either in person or via telehealth. In some situations, a full psychological evaluation may be all a youth and family need to get on the right path to the services they need.

LET'S MAKE NOISE ABOUT BULLYING IN NOVEMBER!

UNESCO Member States declared the first Thursday of November, the International Day against Violence and Bullying at School, Including Cyberbullying, recognizing that school-related violence in all its forms is an infringement of children and adolescents' rights to education and their health and well-being.

Healthcare professionals can actively contribute to anti-bullying efforts in various ways. They can educate parents, teachers, and their colleagues about the signs of bullying, consequences, and preventive strategies. By integrating anti-bullying discussions into routine patient visits, healthcare professionals create safe spaces for open dialogue. Moreover, healthcare professionals can collaborate with schools and communities to develop and implement anti-bullying programs.

UNESCO provides an opportunity for physicians to raise awareness about bullying and contribute to its prevention, which is a practice that can be done throughout the entire year. By understanding the different forms of bullying, recognizing the signs, and utilizing available resources, physicians can make a significant impact on their patient's lives. Together with parents, schools, and communities, healthcare professionals can work towards fostering a safe and inclusive environment that promotes the well-being of all children and adolescents.

If you're interested in learning more:

Interactive webinar: Violence and bullying prevention in school, by IITE and UNESCO Chair on Global Health and Education Register for UNESCO's interactive webinar on [Violence and Bullying Prevention in School](#)

Resources for Healthcare Professionals:

1. The American Academy of Pediatrics (AAP)

Continued from Page 4 >

Bullying Prevention Resources: The AAP provides toolkits, guidelines, and fact sheets to help physicians address bullying and improve preventive strategies: <http://www.aap.org/bullying>

2. STOMP Out Bullying: STOMP Out Bullying is the leading national anti-bullying and cyberbullying organization for kids and teens in the U.S. Providing resources, online chats, and a 24/7 bullying hotline as well as education against homophobia, LGBTQ+ discrimination, racism, and hatred. STOMP promotes civility, diversity, inclusion, equity, and equality: <https://www.stompoutbullying.org/>
3. StopBullying.gov: This U.S. government website offers a wealth of resources to help healthcare professionals, parents, and educators prevent and address bullying: <http://www.stopbullying.gov/>
4. American Psychological Association (APA): The APA provides research-based articles, online courses, and resources for physicians to deepen their understanding of bullying and its impact on mental health: <http://www.apa.org/topics/bullying>
5. Mental Health America (MHA): MHA offers resources and toolkits to help physicians recognize the signs of bullying-related mental health issues and provide appropriate support: <http://www.mentalhealthamerica.net/bullying>



GET CONNECTED

If you're seeking information regarding your patient's benefits, Umpqua Health Alliance is here to help you get the answers you need. Call us today.

- Phone: (541) 229-4842
- TTY: (541) 440-6304 | Toll Free: (866) 672-1551
- Email: UHCustomerCare@umpquahealth.com

Umpqua Health Alliance has adopted the definition of cultural competence that appears on the Oregon Administrative Rules for Cultural Competence Continuing Education for Health Care Professionals (OAR 943-090-0010).

If you have questions or would like to see information on a specific topic in the newsletter please reach out to Dr. Douglas Carr at dcarr@umpquahealth.com or Camille Sorensen at csorensen@umpquahealth.com.

CLINICAL CORNER

UHA PHARMACY COVERAGE UPDATES

The UHA Pharmacy and Therapeutics Committee met on September 20th, 2024. Key decisions are included below. A summary of all changes to UHA pharmacy formulary, prior authorization guidelines, and formulary are available here:

<https://www.umpquahealth.com/pharmacy-services/>

Respiratory Syncytial Virus (RSV) Prevention and Treatment

- Two vaccines for the prevention of RSV were added to UHA formulary effective 9/01/2023.
 - Abrysvo (Pfizer)- indicated to prevent RSV in individuals 60 or older and prevention in RSV in neonates for pregnant individuals 32-36 weeks gestational age.
 - Arexvy (GSK)- indicated to prevent RSV in individuals 60 or older
- Nirsevimab (Beyfortus) is a newly FDA approved intramuscular monoclonal antibody with 5 months of protection after injection.
 - Recommended for all infants under eight months of age entering their 1st RSV season AND children 8-19 months at increased risk of severe RSV entering their second RSV season.
 - Beyfortus must be supplied by a vaccine for children (VFC) provider.

Diabetic Supplies available via pharmacy starting 1/1/2024

- Beginning in January (1/1/2024), UHA members will be allowed to fill selected blood sugar diagnostics and supplies at contracted retail pharmacies.
- Continuous glucose monitors will all require prior authorization with documentation to support that the member requires multiple daily injections of insulin and has received education on how to use the monitor. Additionally, they must have one of the following:
 - Currently use an insulin pump
 - Baseline HbA1c levels greater than or equal to 8.0%
 - Frequent or severe hypoglycemia
 - Impaired awareness of hypoglycemia
 - Diabetes-related complications (i.e., peripheral neuropathy or end-organ damage)
- Please see the guidance of the health evidence review commission (HERC) guideline note 108 as found here: https://www.oregon.gov/oha/HPA/DSI-HERC/Pages/Evidence-based-Reports-Blog.aspx?SelectedID=5&View=%7BDE654D2C-76D6-4607-B754-C7862C05B54F%7D&utm_medium=email&utm_source=govdelivery

DEVICE	BRAND	QL RESTRICTIONS
Glucose Monitors	ReliOn Prime	Limit one per 2 years
	Accu-Chek Guide Monitor System	
	True Metrix Go	
Test Strips	ReliOn Prime	Limit 100 without insulin or 400 with insulin per 90 days
	Accu-Chek	
	True Metrix	
CGM Reader	Freestyle Libre	Prior Auth Required Limit 1 per 2 years
CGM Sensor	Freestyle Libre	Prior Auth Required Limit 1 per 14 days.

CME FOR THEE

REGISTRATION FOR FALL ECHO PROGRAMS IS OPEN

Registration is now open for the fall ECHO programs offered by the Oregon ECHO Network. Continuing education credits are available, and each program is offered at no cost to you or your workplace. ECHO programs fill quickly. Details and registration for general ECHO programs, addiction medicine ECHO programs, and mental and behavioral health ECHO programs are available at <https://www.oregonechonetwork.org/>. Highlighted topics include the following (see ECHO site for full list):

- **Public Health Preceptor** – This 6-session program will help develop more confident public health preceptors who are better equipped to support public health students.
- **Colorectal Cancer (CRC) Screening Outreach for Rural Communities** – This 6-session ECHO program will share evidenced-based approaches for clinical practices or regional health care organizations to improve colorectal cancer screening rates.
- **Long COVID ECHO for Oregon Clinicians** – This 12-session ECHO series will support clinicians, staff, and other health care professionals working with patients who are living with Long COVID.
- **Integrated Behavioral Health for Pediatric Populations** – This 12-session program will build the capacity of pediatric care practices to provide high-quality integrated behavioral and developmental health services for younger children and adolescents.
- **Substance Use Disorder Leadership** – This 8-session program is for SUD leaders across Oregon to share and discuss emerging resources, best practices, and policy updates; support partnerships across interdisciplinary and regional agencies; and provide a learning community and idea incubator

Culturally Competent SUD Care - November 15, 2023 | 6pm

- In this one hour CME course you will learn about cultural competency and cultural humility in SUD care, the impact of culture



on addiction, and how to implement culturally competent care into evidence-based care. To register for this event, go to: <https://www.eventbrite.com/e/718549760677/>

Child Physical Abuse Training for Primary Care Providers,

Four Sessions from Sept. - Dec. 2023, 6.5 AMA PRA Category 1 Credits
For more information or to sign up, [click here](#).

Implementing the Talking Postpartum Depression Campaign in Your Community

- The U.S. Department of Health and Human Services' (HHS) Office on Women's Health (OWH) launched the Talking Postpartum Depression campaign to encourage women to seek help for postpartum depression (PPD). This campaign aims to destigmatize PPD through increased 1) awareness of PPD symptoms, 2) visibility of reliable resources, and 3) understanding of ways to access care. Join us on October 26th at 1pm ET to learn more about the campaign, preview the ready-to-use toolkit, and discuss ways you can leverage campaign resources to reach and support the women and families in your community. To learn more about the campaign and how you can use the toolkit in your work, please join us for a webinar on October 26th at 10:00 pm PST titled, "Implementing the Talking Postpartum Depression Campaign in Your Community". Registration is required and be completed [here](#).
- [Click here](#) to view the webpage of PPD resources.
- [Click here](#) to download Supporting Someone with Postpartum Depression

Continued on Page 8 >

for more tips on how you can support someone experiencing PPD.

The Community Clinical rotations are an opportunity for students to learn about resources and the demographics to better serve their community.

- Our terms are 11-weeks long but, your department likely would not have students every week as they do have on-campus lab clinical days. We have multiple student clinical groups of 8 students and 1 UCC Instructor. The 8 students are out in the community at different clinical sites. Our UCC instructor rounds on each student once during the day and is available if there is a need. The students will need a point person that they shadow at each location.
- For more information and to become a clinical site please contact: Jodi J. Klier-Butler MSN RN, Program Clinical Coordinator
- Office: (541) 440-7793
- Jodi.Klier-Butler@umpqua.edu

National Diabetes Month is a critical opportunity for clinicians to raise awareness about diabetes, promote prevention and management strategies, and engage with patients and the community to combat this growing health issue.

The American Medical Association (AMA) in collaboration with the Centers for Disease Control and Prevention, is hosting a webinar series on diabetes prevention and treatment that clinicians can attend free of charge:

- **Webinar 1: A Team-Based Approach to Treating Prediabetes | Nov. 1, 10 AM PST**
- **Webinar 2: AMA Prediabetes Quality Measures | Nov. 14, 9 AM PST**

Did you know that the National Diabetes Prevention Program (National DPP) is an Oregon Health Plan (OHP) Covered Benefit? If you are a CCO, clinical provider, or Community-based Organization and you're interested in learning more about the program, consider **joining their webinar series** on November 7.



Find us on Facebook **@umpquahealthalliance**

foodsmart™

Foodsmart can help UHA Members to learn tips that can save you money at the grocery store, help them lose weight to improve their health, and find simple, affordable meal plans for their busy holiday season. Their Foodsmart Nutrition coach has them covered!

When they meet with a nutrition coach, they'll get a simple plan that works for their family and their budget. And right now, UHA Members can earn \$25 for completing their first no-cost visit with a nutrition coach!

The first 50 UHA Members to complete a visit with a nutrition coach by 12/31/2023 will receive a FREE turkey for their holiday dinner! All they need to do is use code TURKEY when they schedule their first visit. For full contest terms, please visit **foodsmart.com/umpqua**.

NETWORK NEWS

TRADITIONAL HEALTH WORKERS (THWS)

Traditional Health Workers (THWs) help individuals in their communities, providing physical, behavioral health services and nonmedical support to women and families throughout a woman's pregnancy, childbirth, and post-partum experience. THWs can improve patient and provider experiences while enhancing patient-centered care. They go beyond the clinical aspect of care and can help break down barriers that may exist for the patient. An effective THW workforce consists of individuals who are from the community they serve, who have shared "lived experiences" and who are representative of the population served.

THWs are essential in supporting patients with medically complex conditions during and between doctor visits. THWs also serve as the intermediaries that link clinical services to practical actions in the community to address the social determinants of health. The information THWs can garner about patients' health status, and their unique understanding of patients' social and cultural barriers to health can be shared with the care team, significantly improving care.

There are five types of traditional health workers:

- **DOULA:** A (Birth) Doula is a birth companion who provides personal, nonmedical support to women and families throughout a woman's pregnancy, childbirth, and post-partum experience.
- **PSS:** A Peer Support Specialist is any [range of] individuals who provide supportive services to a current or former consumer of mental health or addiction treatment.
- **PWS:** A Peer Wellness Specialist is an individual who has lived experience with a psychiatric condition(s) plus intensive training, who works as part of a person-driven, health home team, integrating behavioral health and primary care to assist and advocate for individuals in achieving well-being.
- **PHN:** A Personal Health Navigator is an individual who provides information,

assistance, tools, and support to enable a patient to make the best health care decisions.

- **CHW:** A Community Health Worker is a frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served.

Please take a moment to visit the resources on the THW page on our website – [Umpqua Health Alliance Traditional Health Worker Page](#). The Southwestern Oregon Workforce Investment Board THW Training is coming in early 2024 and it is a fantastic opportunity for aspiring THWs.

Additional OHA Resources:

- [About Traditional Health Workers \(THW's\)](#)
- [How to Become a THW](#)
- [THW Training Programs](#)
- [THW Oral Health Requirements](#)
- [THW Continuing Education](#)
- [THW Recertification Process](#)
- [THW Registry](#)
- [Become an Oregon Health Authority Approved THW Training Program](#)
- [Information for Health Systems, Providers, and THWs](#)
- [CCO 2.0 Traditional Health Worker Learning Collaborative Series](#)
- [CCO Traditional Health Worker Deliverables](#)
- [THW Resources](#)
- [THW Legislation and Rules](#)
- [THW Complaint Form](#)
- [THW Commission](#)
- [Suicide Prevention Training](#)

UMPQUA HEALTH ALLIANCE TRADITIONAL HEALTH WORKER INCENTIVE PROGRAM

Did you know that Umpqua Health Alliance (UHA) offers an incentive for Traditional Health Workers (THWs) who become OHA (Oregon Health Authority) certified and credentialed with Umpqua Health Network (UHN). This is an opportunity for contracted clinics to receive a one-time capacity building incentive of \$10,000 for each Traditional Health Worker newly credentialed by UHN.

Community Health Workers, Peer Support and Wellness Specialists, and Peer Health Navigators are eligible for the THW Incentive Program. The THW must be credentialed by UHN no later than December 31st, 2024, to be eligible for the incentive. UHN will validate the THW through the Oregon Health Authority THW Registry and ensure all requirements specified in UHN credentialing policies for non-licensed providers are met. All THW services must be supervised and billed by clinic providers who are Licensed Health Care Professionals ("LHCPs") within the licensed clinic provider's scope of practice.

Please contact uhnproviderservices@umpquahealth.com if you are interested in learning more about the THW Incentive Program or ready to begin the contracting process with UHN.

SOCIAL DETERMINANTS OF HEALTH AND HEALTH EQUITY POPULATION APPROACHES TO CHRONIC DISEASE PREVENTION

Oregon Rural Practice based Research Network (ORPRN) is providing support to clinics in Oregon to improve social needs screening and referral rates, especially for patients at high risk for diabetes and cardiovascular disease. Each clinic will work with ORPRN to identify a high risk patient population, analyze existing social needs screening and referral gaps for that population, and create and implement a quality improvement intervention of their choosing related to social needs and chronic disease prevention. We are currently recruiting 7 clinics in Oregon to participate in this free support opportunity!

Program Components

- Technical assistance One on one support tailored to the clinic's needs and goals, including support from an EHR specialist.

Participation Requirements

- Participate in the program from recruitment through June 2024.
- Work with ORPRN staff to analyze current social needs screening and referral practices. This includes identifying a priority population and conducting a brief chart audit.
- Implement a small quality improvement intervention of your choosing related to social needs and prevention of chronic disease. Share results with ORPRN.
- Participate in a brief monthly meeting with ORPRN staff for technical assistance.
- Complete brief surveys at time of recruitment and in June 2024.

This work is funded by Oregon Health Authority, Public Health Division, Health Promotion & Chronic Disease Prevention section. If you are interested in learning more, please contact Sara Wild at wilsa@ohsu.edu or 971-229-9303.

NETWORK UPDATES

- As of September 30, 2023, CEP America Psychiatry PC is no longer providing psychiatry services at Mercy Medical Center
- Kids First is Lane County's Children's Advocacy Center, providing intervention and advocacy for children who are victims of, or witnesses to, crime. The clinic is located at 299 E 18th Ave in Eugene, (541) 682-3938, www.kidsfirstcenter.net.

ON THE LOOKOUT



November is Lung Cancer Awareness month and a good time to remember that cigarette smoking remains not only the leading cause of lung cancer but the number one cause of preventable disease and death. Between 80-90% of lung cancer deaths can be attributed to cigarette smoking. Douglas County continues to be one of the counties with the highest rate of cigarette smoking, with higher rates than Oregon overall as well as the rest of the country.

However, good news is on the horizon as Douglas Public Health Network, Adapt, Thrive Umpqua, Umpqua Health Alliance and others are fighting back against tobacco use.

Ramping up our smoking cessation efforts:

- The Smokefree Pregnancy class has begun and is open to any current tobacco user who is already pregnant or planning to become pregnant. Did you know nearly 1 in 5 women smoke during pregnancy in Douglas county?
- Smokefree family class: because quitting isn't easy, this class is for individuals and their families to participate in as a group effort to

quit smoking.

- Smokefree workplace: we have launched our pilot program bringing smoking cessation classes to the workplace.

Tobacco prevention efforts:

- The DCSmokeFree youth vaping prevention campaign is underway and set to launch this January.
- We've expanded the "Catch My Breath" prevention class, providing early education to 6th and 7th graders.
- We've also launched the "INDEPTH" program, providing an alternative to school suspension when students are caught vaping or using tobacco products.

Cigarette smoking among youth has decreased dramatically while vaping continues to rise. One of our main focuses is to prevent tobacco use among youth leading to a generation free of tobacco.

Questions?

mitchelldouglaspublichealthnetwork.org

THE RELATIONSHIP BETWEEN STRESS AND YOUR ORAL HEALTH

Did you know that stress can affect your oral health? A Canadian study found that people with perceived psychological stress reported poorer oral health. Also, research shows a correlation between stress, anxiety, depression and oral health problems. It's important to discover the cause of psychological stress to protect your oral health and overall well-being.

How Does Stress Affect My Oral Health?

Stress can affect your oral health in several ways, which include:

Teeth Grinding (Bruxism)

Bruxism occurs when a person unconsciously grinds or clenches their teeth. Stress-induced teeth grinding may occur during the day, when a person feels stressed or dwells on a problem. It may also occur at night during sleep. Symptoms of teeth grinding include:

- Abraded, chipped, or cracked teeth
- Headaches
- Jaw dislocation
- Pain in the face or near the ear
- Sensitive teeth
- Tense facial or jaw muscles
- Tooth enamel wear

Your dentist may recommend a custom-fitted night guard to prevent tooth damage.

Tooth Decay and Gum Disease

If you feel stressed or distracted, you may forget to brush and floss, or if you feel depressed, you might not feel like it. Poor oral hygiene can lead to tooth decay and gum disease. Another sign of stress is white lines, or white or red spots in the mouth, which may indicate an oral infection.

Ulcers (Canker Sores) in the Mouth From Stress

Canker sores are painful ulcers that occur in the soft tissues of the mouth. They often appear as small white spots inside the mouth and usually disappear in 1 to 2 weeks. Psychological stress can trigger canker sores so it's important to reduce stress to minimize their occurrence. Your dentist may prescribe a topical medicine to help alleviate uncomfortable symptoms.

Dry Mouth

People who experience psychological stress or who take medications to reduce stress, or depression may develop dry mouth. Symptoms of dry mouth include reduced saliva production increasing the risk of tooth decay and gum disease.

Nail Biting

Some people who are stressed bite their fingernails. Unfortunately, stress-induced nail biting can transfer germs from your nails to your mouth, which can cause mouth infections. Nail chewing can spread germs from your nails to your mouth to your body. Also, biting your nails can damage tooth enamel and cause teeth to move out of proper alignment.

What Causes Stress?

Common causes of psychological stress include:

- Job stressors
- Arguments with friends, family or loved ones
- Experiencing a long-term illness
- Feeling pressured to complete several tasks in a short amount of time
- Financial problems
- Long-term caregiving
- The death of a loved one

It's essential to figure out why you're stressed. Talk to your dentist or primary care doctor about how you're feeling. Self-care is the first step to improving your oral health and overall wellness.