Collaborative Dental Care Models: Bridging Nursing, Orthodontics, Endodontics, and Social Work for Comprehensive Patient Outcomes

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Abstract

Collaborative care models are designed to integrate multiple healthcare disciplines to provide comprehensive, patient-centered care. This paper explores the potential benefits of a collaborative approach that combines the expertise of nursing, orthodontics, and social work in achieving optimal patient outcomes. By aligning clinical care with emotional support and social resources, these models create a holistic treatment environment that addresses physical, mental, and socio-economic factors. We will discuss the roles and contributions of each discipline, the benefits of interdisciplinary communication, and the impact on patient satisfaction and health outcomes.

Keywords: Collaborative care, nursing, orthodontics, social work, patient outcomes, interdisciplinary care

Introduction

Collaborative care models emphasize a holistic approach to patient care by integrating various disciplines to address the multifaceted needs of patients. (1)

When it comes to nursing, orthodontics, and social work, a collaborative model fosters a comprehensive strategy that ensures patients receive well-rounded care. (2)

The complexities of modern healthcare require a more integrated approach to care delivery. Traditional healthcare models often silo care providers, leading to fragmented patient experiences. (3)

Collaborative care models, which integrate multiple disciplines, aim to bridge these gaps by fostering communication and cooperation between healthcare providers. This model has been particularly effective in enhancing patient outcomes in complex cases where multiple factors—physical, emotional, and social—must be addressed simultaneously.(4)

This manuscript focuses on the collaborative model of care that bridges nursing, orthodontics, and social work, recognizing the interdependent nature of physical health, oral health, and emotional wellbeing. (5)

Social work is integral to achieving comprehensive patient outcomes in healthcare, especially when integrated into collaborative care models. By addressing the psychosocial, emotional, and socioeconomic factors that affect patient well-being, social workers play a crucial role in ensuring that patients can engage with and benefit from their treatment plans. (6)

Through advocacy, resource coordination, emotional support, and family education, social workers enhance the overall healthcare experience and improve long-term outcomes. As healthcare continues to evolve, the integration of social work into interdisciplinary care teams will remain a key component of patient-centered care that leads to improved health outcomes and patient satisfaction.(7)

The collaboration among these disciplines is essential in addressing the full spectrum of patient needs, improving health outcomes, and enhancing patient satisfaction. Through interdisciplinary coordination, patients benefit from personalized care plans that consider both immediate health concerns and long-term wellbeing.(8)

The collaborative care model emphasizes the importance of teamwork among professionals from different fields.(9)

According to the World Health Organization (WHO), collaborative practice occurs when "multiple health workers from different professional backgrounds work together with patients, families, caregivers, and communities to deliver the highest quality of care." (10)

The integration of nursing, orthodontics, and social work within a collaborative care model creates a comprehensive and patient-centered approach to healthcare. By combining physical care, emotional support, and social resource management, this model addresses the diverse needs of patients, improving outcomes, reducing complications, and enhancing patient satisfaction. (11)

As the healthcare landscape continues to evolve, the collaborative care model will play an increasingly vital role in providing holistic, coordinated care that fosters long-term well-being and success for patients.(12)

This approach has been shown to improve patient satisfaction, enhance health outcomes, and reduce healthcare costs by minimizing duplication of services and preventing complications through early detection and intervention.(13)

This integration ensures that each aspect of a patient's health—physical, mental, and social—is attended to, leading to better outcomes, increased patient satisfaction, and more efficient care delivery.(14)

1. The Role of Nursing in Collaborative Care

Nurses are the backbone of patient care, often serving as the first point of contact and providing continuous monitoring and management. In a collaborative care model, nursing professionals contribute in several critical ways:(15)

- Patient Monitoring and Assessment: Nurses perform health assessments, tracking changes in a patient's condition, and alerting the rest of the care team to potential concerns. This is especially important for patients undergoing orthodontic treatment, as nurses can monitor overall health and identify early signs of complications (e.g., oral infections or other health issues impacting dental health).
- Education and Support: Nurses educate patients on various aspects of their care. For orthodontic patients, this includes teaching them how to maintain good oral hygiene, adhere to orthodontic guidelines, and understand the potential effects of treatment on their overall health
- Care Coordination: Nurses act as the central point of communication, ensuring that information flows smoothly between the orthodontist, social worker, and other healthcare providers. This allows for a cohesive treatment plan that integrates all aspects of the patient's care.(16)

2. Orthodontics in a Collaborative Care Framework

Orthodontics is primarily focused on the alignment of teeth and jaw structures, but the role of an orthodontist within a collaborative care model extends far beyond just dental treatment. Key contributions include:(9)

- Customized Treatment Plans: Orthodontists develop treatment plans based on the patient's specific needs. Collaborating with nurses ensures that these plans are adjusted as necessary to accommodate any physical health changes that may affect treatment (such as managing allergies, or ensuring there are no oral infections).
- Monitoring Oral Health and Overall Well-being: An orthodontist's role also includes
 looking for any signs of oral or systemic health problems. This is especially true in patients
 with underlying medical conditions, such as diabetes, where oral health can be closely linked
 to overall health.
- Ensuring Patient Compliance: Orthodontists work with nurses and social workers to ensure that patients understand the importance of complying with treatment schedules and instructions, from wearing retainers to maintaining proper oral hygiene. This collaboration helps improve adherence and reduces the risk of treatment delays.(17)

3. The Social Work Component

Social workers play a crucial role in addressing the psychosocial aspects of patient care. In the context of a collaborative care model involving nursing and orthodontics, the social worker helps bridge the gap between clinical care and the patient's social and emotional needs. Their role includes:(18)

- **Psychosocial Support**: Patients undergoing orthodontic treatment, particularly young people or those with visible dental issues, may struggle with self-esteem, anxiety, or depression. Social workers provide counseling and emotional support to help patients navigate these challenges, promoting mental and emotional well-being.
- Resource Management: Social workers help patients access the resources they need, such as financial assistance for expensive orthodontic treatments, insurance navigation, or support

services. For patients from underserved communities, this is essential to ensure access to necessary care.

• Family Support: Families may face challenges related to the financial or emotional aspects of orthodontic treatment. Social workers provide guidance on how families can support the patient throughout the treatment process and help them manage any difficulties arising from the patient's care plan.(19)

4. Benefits of a Collaborative Care Model

When nursing, orthodontics, and social work combine in a unified care model, patients experience significant benefits:(20)

- Holistic Patient Care: Addressing the physical, emotional, and social needs of patients ensures that no aspect of their health is overlooked. This holistic care helps improve overall treatment success and supports long-term well-being.
- Improved Patient Outcomes: Interdisciplinary collaboration improves health outcomes by providing a continuous, comprehensive treatment plan that accounts for all aspects of the patient's health. This reduces the risk of complications and enhances the quality of care.
- Enhanced Communication: With a team of professionals working together, patients benefit from more efficient care. Regular communication ensures that each professional is aware of the patient's progress and any concerns that arise, which can be addressed proactively.
- Patient-Centered Care: A collaborative model prioritizes the needs and preferences of the patient. By incorporating the perspectives of multiple healthcare providers, patients feel more empowered in their treatment and are more likely to follow through with care recommendations.
- Cost Efficiency: By providing coordinated care, this model can reduce unnecessary treatments, hospital admissions, and emergency visits, leading to more cost-effective care in the long term.(21)

5. Real-World Example: Integrating Care for a Teenager with Orthodontic Needs

Imagine a teenager requiring orthodontic treatment for severe dental misalignment. In a collaborative care model:(22)

- **Nurse**: The nurse ensures the teenager's overall health is monitored, checking for any signs of infection or health issues that might impact orthodontic treatment (e.g., gum disease). The nurse also educates the teenager on hygiene practices to prevent complications.
- Orthodontist: The orthodontist designs a personalized treatment plan for the teenager, taking into account their dental needs and collaborating with the nurse to ensure the treatment plan is medically safe and effective. The orthodontist also checks for any systemic effects of treatment.
- Social Worker: The social worker provides counseling to help the teenager cope with potential emotional challenges related to their appearance or the discomfort of orthodontic treatment. Additionally, they help the family navigate insurance issues, ensuring that financial barriers do not interfere with the treatment process.(23)

By working together, this interdisciplinary team ensures that the teenager receives a well-rounded, personalized care plan that supports both their physical and emotional well-being, ultimately leading to better health outcomes and a more positive experience with orthodontic treatment.(24)

Consider a teenager undergoing orthodontic treatment for significant malocclusion. The treatment is expected to last several years, requiring constant attention and management from different care providers:(25)

- **Nurse**: The nurse monitors the teenager's overall health, ensuring that there are no infections, nutritional deficiencies, or other health issues that may interfere with orthodontic care.
- **Orthodontist**: The orthodontist provides the specialized dental treatment, adjusts braces, and manages the alignment process, working closely with the nurse to monitor any changes that might require adjustments.
- Social Worker: The social worker provides counseling to address the teenager's self-esteem issues related to their appearance, helping them cope with the emotional and social aspects of treatment. The social worker also helps the family access financial resources to cover treatment costs.(26)

Collaborative care models that integrate nursing, orthodontics, and social work offer a comprehensive approach to patient care that improves health outcomes, enhances patient satisfaction, and provides a more holistic treatment experience.(27)

By addressing the full spectrum of patient needs—physical, emotional, and social—these models help reduce health complications, enhance patient adherence to treatment plans, and optimize overall care delivery. (28)

As healthcare continues to evolve, the integration of interdisciplinary care teams will likely become the standard, offering patients a more personalized and effective approach to healthcare.(29)

Social work plays a pivotal role in promoting comprehensive patient outcomes within healthcare systems, especially when integrated into collaborative care models. By addressing the psychosocial, emotional, and socio-economic factors affecting a patient's well-being, social workers ensure that patients receive the support they need to manage their health effectively. (30)

This paper explores how social work integrates into collaborative care models, particularly in healthcare settings that require a multi-disciplinary approach, such as those involving nursing and orthodontics. We discuss the core roles of social workers in improving patient outcomes, including emotional support, resource coordination, and advocacy, and how their contributions enhance the overall healthcare experience.(31)

As healthcare becomes increasingly complex, with a focus on patient-centered care, the role of social workers has expanded beyond traditional counseling and advocacy. Social workers now engage more deeply in collaborative care, ensuring that patients have access to necessary resources, support systems, and education to manage their health more effectively. (32)

By bridging the gap between patients and healthcare providers, social workers contribute significantly to improving health outcomes, reducing disparities, and enhancing patient satisfaction.(33)

Conclusion

Collaborative care models that bring together nursing, orthodontics, and social work are essential for improving patient care and outcomes. By focusing on the whole patient—considering their physical, emotional, and social needs—these models create a more integrated and efficient approach to healthcare. With enhanced communication, coordinated care, and a focus on holistic well-being, this interdisciplinary approach fosters better patient outcomes, greater patient satisfaction, and a more efficient healthcare system.

References

- 1. Aguinaldo LD, Sullivant S, Lanzillo EC, Ross A, He JP, Bradley-Ewing A, et al. Validation of the ask suicide-screening questions (ASQ) with youth in outpatient specialty and primary care clinics. Gen Hosp Psychiatry. 2021;68:52–8.
- 2. Shah AK, Rizy ME, Neijna AG, Uppstrom TJ, Gomoll AH, Strickland SM. A Preliminary Study of Post-Market Bridge-Enhanced ACL Restoration (BEAR) Suggests Non-Inferior Short-Term Outcomes and Low Complications. HSS Journal®. 2024;15563316241265352.
- 3. Ghafari JG, Macari AT. Interaction between the Orthodontist and Medical Airway Specialists on Respiratory and Nonrespiratory Disturbances. Integr Clin Orthod. 2023;248–71.
- 4. Abulkhair AA, Alsunaidy AA, Abdullah MAHAL, Alrumayh WS, Taher MW, Abuhurair MM, et al. Exploring the Theoretical Relationship Between Orthodontic Treatment and Dental Decay in Epidemic Scenarios. J Int Cris Risk Commun Res. 2024;755–70.
- 5. Goffin G, Carter N, Sari Widyarman A, Erri Astoeti T, Kabir Bulbul H, Puplampu P, et al. Role of teledentistry in enabling improved oral care outcomes. Br Dent J. 2024;236(3):162–8.
- 6. Sadhunavar T, Nilgar A, Santhosh VN, Jalihal S, Shankkari S. Awareness and Perception of Dental, Medical, and Paramedical Students Toward the Use of Clear Aligners in Orthodontic Treatment in Belagavi, India. Cureus. 2024;16(7).
- 7. Genaro LE, Marconato JV, Tagliaferro EP da S, Pinotti FE, Júnior AV, Saliba TA, et al. Oral health in home care: Perspectives and experiences of dentists in a Brazilian region. Gerodontology. 2024;
- 8. Perpetua Z, Seitz S, Schunk J, Rogers D, Gala J, Sherwood P, et al. Virtual discharge: enhancing and optimizing care efficiency for the bedside nurse. J Nurs Care Qual. 2023;38(3):234–42.
- 9. Alshammari SM, Aljaload MM, Alamri FM, Almaimoni AG, ALMutairi AR, Almukhallafi FA, et al. Promoting Oral Health Through Interdisciplinary Collaboration: A Focus on Dentistry and Dietitians. J Int Cris Risk Commun Res. 2024;114–8.
- 10. Prodger E, Greenwood S. Enhancing the care of older people: role of community hospitals. J Community Nurs. 2024;38(1).
- 11. khalifah wasmi Alwasmi W, Almutairi WM, Almuneef KM. Dental Trauma and Its Management: A Comprehensive Review of Current Practices and Challenges. J Int Cris Risk Commun Res. 2024;227–35.
- 12. Richa R. Appreciative inquiry in evaluating the integrated primary oral health services in Quebec Cree communities. 2022;

- 13. Keilman L, Holley S, Harris M, Sheehan A. Advances in Family Practice Nursing, 2024: Advances in Family Practice Nursing, 2024, E-Book. Vol. 6. Elsevier Health Sciences; 2024.
- 14. Mutziger AM. Bridging The Gap: A Comprehensive Discharge Guide. 2022;
- 15. Felter C, Garguilo E, Keys R, Kim D, Saathoff E, Johnson D, et al. "We Are the Bridge." A Qualitative Approach to Compare Value Perceptions of Rehabilitation Therapists in the Academic Medical Center. J Acute Care Phys Ther. 2025;16(1):10–20.
- 16. Pratt LD. Exploring the Perceived Effects of Integrating Unloader Braces and Exercise Therapy Interventions in Orthopedics and Sports Medicine: An Investigation Among Athletes with Knee Osteoarthritis. 2024;
- 17. Jacobson RP, Dobler RR. Embedding Physical Therapy in the Pediatric Primary Care Setting: Qualitative Analysis of Pediatricians' Insights on Potential Collaborative Roles and Benefits. Pediatr Rep. 2024;16(4):854–71.
- 18. Verdonck C, Willems R, Borgermans L. Implementation and operationalization of integrated people-centred health services delivery strategies in integrated osteoporosis care (IOC) initiatives: a systematic review. Osteoporos Int. 2023;34(5):841–65.
- 19. Thakkar R, Karre S, Jahagirdar A, Swatantramath S, Ravipati V, Parmar D, et al. Connecting Smiles: Bridging Gaps in Oral Health Access with Teledentistry. 2024;
- 20. Campbell A, Kreshanti P. Comprehensive cleft care centers: scalable, sustainable, and cost effective surgical care. Glob Cleft Care Low-Resource Settings. 2021;517–29.
- 21. Algobisi NMB, Mutairi LFAL, Al Otaibi SMH, AlRasheed NM, Al-Saadoun AM, Alotaibi BH, et al. Comprehensive Review of Foundational Advances Across Healthcare Disciplines. J Ecohumanism. 2024;3(8):2541–51.
- Alajmi SSR, Sahlan NSH, Alslaie MMS, Al Jawad MMA, Alyami MHH, Al Grad MMH, et al. Improving Patient Care: The Active Duo Of Doctors And Nurses-A New Appraisal. J Namibian Stud Hist Polit Cult. 2023;36:342–52.
- 23. Al-Worafi YM. Dentistry Education: Comparison Between the Developing Countries. In: Handbook of Medical and Health Sciences in Developing Countries: Education, Practice, and Research. Springer; 2024. p. 1–32.
- 24. Lakshmikantha HT. Leveling up orthodontic education: Game-based learning as the new frontier in orthodontic curriculum. Res Dev Med Educ. 2024;13(1):13.
- 25. Bevans S, Swana HS, Pattisapu J V, Foy AB, Clarke MJ, Hopson BD, et al. Two novel models to optimize transitional care in spina bifida: the patient as provider and the congenital neurosurgeon in active collaboration. Neurosurg Focus. 2024;57(2):E2.
- 26. Saber AF, Hussein S. Enhancing Obstructive Sleep Apnea Management: A Collaborative Care Model Incorporating Cognitive Behavioral Strategies. 2024;
- 27. Allareddy V, Atsawasuwan P, Frazier-Bowers S, Hong C, Huja S, Katebi N, et al. Orthodontic educational landscape in the contemporary context: Insights from educators. In: Seminars in Orthodontics. Elsevier; 2024.
- 28. Ticku S, Nath S, Ramesh N, Riedy CA. Attitudes toward adolescent mental health screening in a dental setting: a mixed-methods study. JDR Clin Transl Res. 2024;9(1_suppl):70S-87S.
- 29. Zhang J. The integrated care model for the management of older patients with hip fracture in China. UNSW Sydney; 2023.
- 30. Boloor VA, Hosadurga RR, Jenifer HD, Bhat S. Barriers and Promotion of Integrated Care in Dentistry: A Brief Communication. Arch Med Heal Sci. 2023;11(2):291–7.
- 31. Modha B. Utilising dentist-dental health educator skill-mix to implement oral health promotion that better supports diverse communities. J Integr Care. 2022;30(3):237–50.
- 32. Sharma R, Joneja P, Sharma DK. Exploring the Clinical Disconnect in Integrated Treatment Pathways for Craniofacial Structural and Functional Anomalies: Collaboration Challenges between Orthopaedic Surgeons, Paediatricians and General Practitioners Referring to Orthodontists. Adv Hum Biol. 2024;10–4103.
- 33. Kharbanda OP, Wadhawan N, Sennimalai K. Orthodontic diagnosis and treatment planning: Collaborating with medical and other dental specialists. Integr Clin Orthod. 2023;18–51.