Mobile/Portable Dental Care Providers--Things to Consider

To ensure the safety and health of all students, consider the following when talking with a mobile or portable dental care provider:

1. Any school or district entering into a contractual relationship should have their legal counsel review the contract and/or memorandum of understanding before it is finalized.
2. Most mobile/portable dental care providers are businesses and they need to make money to operate. They may target children with government sponsored insurance (e.g., Denti-Cal, Healthy Families) while largely ignoring uninsured children.
   - Is this group privately funded or non-profit?
   - How they will ensure all children will have access to the care they are offering?
   - Are they willing to treat uninsured children and if so how many?
   - Do they case manage to assure children receive care / needed treatment?
3. Can they provide references?
4. Is the mobile/portable care provider going to provide comprehensive care (fillings, extractions, stainless steel crowns) or only preventive care (fluoride, sealants, cleaning)?
5. How often will the mobile/portable care provider return to provide services?
   - What happens if a child seen by the mobile/portable provider develops problems while the provider is not at the school? Who will the child be referred to?
   - Who are their community partners?
6. How and in what language(s) will the provider communicate with parents to obtain permission, present a treatment plan, inform them of the services they performed on a child, provide referral information, provide instructions for post operative care, etc.?
7. How do they determine if a child has a regular dental provider and what is done to assure the child returns to their provider of record?
8. Request in writing the electronic reports you wish to receive including, but not limited to:
   a. Individual Student Reports
      - Patient’s treatment plan
      - Treatment completed
      - Any unmet treatment needs
      - Referral information if the child was referred to another dentist for any care – to include the reason for the referral and contact information of the dentist to whom the child was referred
   b. Aggregate Reports
      - Number of children returning permission slips
      - Number of children served
      - Medical/dental insurance status of each child
      - List of each service provided and the number of students that received that service
      - Percentage of uninsured children receiving treatment
      - Number of children referred, and for what treatment
   c. Emergency follow up:
      - Contact information of the mobile/portable dental care provider
      - Instructions for what to do in case of an emergency (including contact information for the local dental provider/clinic with which the mobile/portable care provider has an agreement)
9. When will the mobile/portable provider return to provide recall (routine cleaning and exams), follow-up, and new patient care?
10. How and where are services provided, e.g., in a mobile van in the parking lot, inside the school using portable equipment? What are the space, water and other needs?
11. How is quality of care determined, e.g., sealant retention, follow up on extractions?
12. What are their policies on photography and use of information for marketing or with the media?

To ensure success, establish and work with an advisory committee or your School Wellness Committee

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