



INTERNAL MANAGEMENT POLICY & PROCEDURE

Department of Corrections

Applicability: ADULT Operations Only JUVENILE Operations Only DEPARTMENT-WIDE

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HEALTH CARE SERVICES: Oral Health Care Services

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Approved By:  Secretary Next Scheduled Review: 10/2023

POLICY

Residents in the custody of the KDOC are to receive timely oral screening, examination, and treatment (not limited to extractions) for dental conditions that would otherwise adversely impact the resident's health. Services are performed by licensed dental personnel under the direction and supervision of a dentist licensed in Kansas and practicing under the auspices of the contracted health services vendor's Regional Dental Director. Consultation with dental specialists and emergency dental services are available to KDOC residents in accordance with guidelines outlined by the contracted health services vendor. Each resident has access to the preventive benefits of fluoride in a form determined by the dentist to be appropriate for each resident's individual needs. The contracted vendor's written policy, procedure, and practice are to be in accordance with ACA and NCCHC standards.

DEFINITIONS

Oral Care: Includes instruction on oral hygiene, as well as examination, and treatment of dental problems. Instruction in oral hygiene minimally includes information on plaque control and the proper brushing of teeth.

Oral Screening: Includes inquiry about dental pain, visual observation of the teeth and gums, assessment of swelling or functional impairment, notation of any obvious or gross abnormalities or impairment requiring immediate referral to a dentist.

Oral Examination: A dentist takes or reviews the patient's oral history and includes an extraoral head and neck examination, charting of the teeth, and examination of the hard and soft tissue of the oral cavity with a mouth mirror, explorer, and adequate illumination.

Oral Treatment: A full range of services that are necessary in the judgement of the supervising dentist.

Regional Dental Director: Responsible for the clinical supervision of all facility dentists and dental health care personnel within the KDOC facilities. The Regional Dental Director is responsible to the Regional Medical Director clinically and the Regional Vice President or designee administratively.

Regional Medical Director: The physician Medical Director of the contracted agency or organization responsible for the provision of health care services for the KDOC offender population. This position has full clinical autonomy and responsibility for the provision of clinical services within the KDOC.

Facility Dentist: An individual licensed to practice dentistry and responsible to provide dental health services to the resident population of a facility; the facility dentist works under the direction of the Regional Dental Director.

PROCEDURES

I. Dental Personnel and Equipment

- A. Dentists must be licensed in Kansas to perform dentistry and to prescribe controlled medication.
- B. The site dentist must supervise the services of all site dental staff and must provide dental examinations and treatment.
- C. The dentist must oversee the infection control practices, quality control, and continuous quality improvement activities of the dental department.
- D. The dentist must train staff who perform oral screening. Documentation of the training must be maintained in the individual staff member's training file. Training is not limited to self-study programs.
- E. Dentists, oral hygienists, or personnel trained by the dentist must provide oral hygiene instruction and preventive oral education.
- F. A physician, nurse practitioner, physician assistant, or registered nurse approved and trained by a dentist must conduct the oral screening, during receiving screening.
- G. X-ray equipment is available, and X-rays must be used as indicated to develop treatment plans.
- H. Oxygen and blood pressure monitoring equipment must be readily available while the dental operator is in use and anesthesia, including local anesthesia, is being used.

II. Screening, Examination, and Treatment

- A. There is a defined scope of available dental services, including emergency dental care.
- B. **ADULT:** Oral screening must be conducted during the receiving screening process but no later than seven (7) calendar days from admission.
- C. **JUVENILE:** Oral screening must be conducted during the receiving screening process but no later than fourteen (14) calendar days from admission.
- D. Oral hygiene, oral disease/preventive education, and self-care instruction must be provided within thirty (30) days of admission.
- E. Each patient must receive an oral examination within thirty (30) days of admission into the system. The examination includes:
 - 1. Reviewing and or taking a dental history,
 - 2. Charting of teeth,
 - 3. Examination of the hard and soft tissue of the oral cavity with a mouth mirror, explorer, and adequate illumination,
 - 4. Periodontal examination,
 - 5. Extra-oral head and neck examination, and,
 - 6. X-ray studies for diagnostic purposes if necessary.
- F. Documentation of dental examination and treatment must be in accordance with a defined charting system approved by the Regional Dental Director and Director of Healthcare Compliance.
- G. Follow up appointments must be prioritized and scheduled for care based on the findings of the oral examination.

- H. Dental examinations and oral hygiene instruction must be provided every two (2) years during the birthday month for all patients.
- I. Dental treatments, not limited to extractions, must be provided according to a system of treatment priorities determined by the dentist.
 - 1. Dental extractions must be performed in a manner consistent with community standards and American Dental Association clinical guidelines. Informed consent must be obtained from the patient before an extraction. Dental extractions require recent radiographic images depicting the patient's current oral conditions.
 - 2. Vital signs must be taken prior to invasive procedures.
- J. A patient's non-compliance with good oral hygiene practices (e.g., plaque control) must not be used as a basis to deny urgent oral care.
- K. Medication orders from the dentist must be documented in the electronic health record, noted by an RN, and administered to the patient in a timely manner.
- L. Referrals to dental specialists and oral surgeons must be available as clinically indicated and when such treatment falls outside of the scope or professional capability of the facility dentist upon approval of the Regional Dental Director.
- M. Healthcare staff must use nursing clinical guidelines to assess and treat conditions such as unrelenting tooth pain, abscesses, and avulsion in absence of a dentist.
- N. When dental staff are not on site, nurses must handle dental requests through the sick call process and or in accordance with the site process for emergent assessment.
- O. Requests for dental care and follow up appointments are scheduled by the dental department based on priority guidelines established by the dentist.

III. Dental Prosthesis

- A. Dental prostheses are to be provided to the residents as clinically indicated.
 - 1. A receipt of appliance/equipment form must be generated and signed by the resident for any appliance received.
 - 2. The form must be maintained in the electronic health record and a copy must be sent to the property officer for inventory.
- B. The healthcare vendor is responsible to provide dentures at no cost to the resident when required for mastication.
- C. Dentures must be provided by the vendor and paid for by the resident when requested only for cosmetic purposes as allowed by time and approval by the Regional Dental Director.
- D. Replacement dentures are provided by the vendor and paid for by the resident for dentures that are lost or damaged within five (5) years of the originally issued denture.
- E. Replacement of dentures is the responsibility of the vendor if the original dentures are required for mastication and the lost or damaged denture is older than five (5) years.
- F. The contracted vendor must purchase all medically necessary dentures from their chosen vendor.

IV. Statistics

- A. Monthly statistics must be generated by the dental department as designated in the KDOC monthly health services report and or as directed by the Health Services Administrator.

NOTE: The policy and procedures set forth herein are intended to establish directives and guidelines for staff, residents, and offenders and those entities that are contractually bound to adhere to them. They are not intended to establish State created liberty interests for employees, residents, or offenders, or an independent duty owed by the Department of Corrections to employees, residents, offenders, or third parties. Similarly, those references to the standards of various accrediting entities as may be contained within this document are included solely to manifest the commonality of purpose and direction as shared by the content of the document and the content of the referenced standards. Any such references within this document neither imply accredited status by a Departmental facility or organizational unit, nor indicate compliance with the standards so cited. The policy and procedures contained within this document are intended to be compliant with all applicable statutes and/or regulatory requirements of the Federal Government and the state of Kansas. This policy and procedure are not intended to establish or create new constitutional rights or to enlarge or expand upon existing constitutional rights or duties.

REPORTS

None.

REFERENCES

ACA 4-4360
ACA 5-ACI-6A-19-1
ACA: 4-JCF-4C-15
NCCHC P-E-06
NCCHC Y-E-06
Comprehensive Healthcare Services Contract 2.5

HISTORY

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ATTACHMENTS

None.