



**Department of Juvenile Justice
Health Services Operating Procedure**

HSOP VOL IV - 4.3 – 4.07	Statutory Authority: Title 66 of the <u>Code of Virginia</u>
Subject: Access to Dental Health Services	Regulations: 6VAC35-71-900; 6VAC35-71-970; 6VAC35-71-1020
	Board Policy: 12-001; 12-003; 12-004; 12-006 ACA # 4-JCF-4C-03; 4-JCF-4C-04; 4-JCF-4C-06; 4-JCF-4C-07; 4-JCF-4C-15; 4-JCF-4C-20 NCCHC # Y-E-06; Y-G-10

4.07-1.0 PURPOSE

To ensure that residents receive routine and emergency dental care by a licensed dentist.

4.07-2.0 SCOPE

These procedures apply to all JCC employees and staff assigned to the JCCs by other units, agencies, or departments.

4.07-3.0 DEFINITIONS

Annual Examination – An examination no later than twelve (12) months following the previous examination.

Dental Department – The department, consisting of the dentists and dental assistants, within the health services unit that provides dental care to residents.

Dental Prosthesis – Artificial devices to replace missing body parts, such as teeth, or compensate for defective body functions. Examples of dental prostheses include full and partial plates.

High Priority (HP) Dental Care Needs – Those conditions on which the examining dentist opines that (i) immediate treatment would relieve pain, prevent infection, and address acute dental needs (e.g., root canal or extractions) and, (ii) if left untreated, more extensive treatment would be required prior to the next annual examination.

Low Priority (LP) Dental Care Needs – Those conditions on which the examining dentist opines that, if no treatment is provided during the average commitment period or until the next annual examination, there would be no adverse effects to the resident’s oral health.

Medical Department – The location at which the health services staff are located in the JCCs to provide health services to residents. The medical department may include nursing stations, examination rooms, infirmary, and dental office.

Medium Priority (MP) Dental Care Needs – Those conditions on which the examining dentist opines that, if left untreated until the next annual examination, more extensive treatment would be required and non-emergent treatment should be provided prior to the next annual examination.

Orthodontics – The branch of dentistry that deals with the prevention and correction of abnormally positioned or aligned teeth.

Standard Precautions – A combination of the major features of universal precautions (designed to reduce the risk of transmission of bloodborne pathogens) and body secretion isolation (designed to reduce the transmission of pathogens from moist body substances) and apply them all to residents receiving care, regardless of their diagnosis or presumed infection status.

4.07-4.0 PROCEDURES

4.07-4.1 Examinations

1. Residents shall receive a dental examination by a licensed dentist within seven (7) days of arrival to the DJJ intake reception facility. The examination shall consist of at least:
 - a. A review of the resident’s history of past dental health problems, heart disease, allergies, and bloodborne pathogen disease;
 - b. Clinical examination;
 - c. Radiographs, as indicated; and
 - d. Treatment plan, if applicable.
2. Any identified treatment needs shall be classified as high priority (HP), moderate priority (MP) or low priority (LP).
3. All dental examinations and follow-up dental recommendations shall be documented in the resident’s medical record in accordance with HSOP VOL IV-4.3-1.15 (Medical Record).
4. Residents shall have an annual dental examination to include prophylaxis, oral/perioral examination, and radiographs, as indicated. The counselor is responsible for notifying the health services staff for a pre-release physical, giving enough advance notice for a dental examination if needed.

4.07-4.2 Treatment

1. Dental care shall be provided to each resident under the direction and supervision of a dentist licensed in the State of Virginia.
 - a. Emergency care shall be triaged by the on-duty or on-call dentist. The determination of the location of services shall be the responsibility of the dentist, based on severity of the dental injury or complaint.
 - b. Actual practice shall demonstrate continuity of care to include community referral when indicated.
2. Prompt initial care, follow-through, documentation, and referral to outside agencies shall be completed as needed by the dentist.
3. Oral hygiene instruction shall be given within fourteen (14) days of admission by the dental assistant or dentist and documented in the medical record. A nurse trained by the dentist may also provide the oral hygiene instruction, if the dental assistant or dentist are not available. Generally, the instruction shall occur at the time of the examination or initial radiographs.

4. Conditions classified as high priority shall receive first priority for treatment. The dental department shall maintain a schedule for follow-up HP and MP.
5. Services for conditions classified as low priority shall be provided as time and resources permit.
6. Every effort shall be made to restore teeth consistent with community standards. This shall include the use of permanent restorations and the avoidance of temporary restorations or extraction of teeth whenever possible. This shall be done according to a treatment protocol approved by the dentist.
7. Periodontal, endodontic, and prostodontic services shall be provided according to a dental standard of practice and approved by the Health Services Administrator.
8. As necessary, dental treatment shall be performed under local anesthesia except in the case of an allergy to all commonly used local anesthetics. General anesthesia shall not be utilized by the dental department.
9. The use of fluorides shall be determined by the dentist.

4.07-4.3 Access to Dental Care

1. A new dental examination is not required when a resident is transferred between DJJ facilities. Residents transferred within DJJ shall continue to receive dental care, as needed, including an annual examination.
2. Dental work and annual examinations shall be scheduled by the dental assistant in coordination with the nursing staff. The nurse in the receiving facility shall create a list of all newly arrived residents for the dental assistant. The dental assistant shall review the new residents' dental records during the next scheduled dental clinic and shall then schedule the resident for dental services as needed.
3. In the event of an emergency, the nurses shall contact the dental provider, medical provider, Local Health Authority, and shift commander. A new on-call list of medical and dental providers shall be posted monthly in the health services center. If the provider determines the situation to be an emergency, the resident shall be transported to an appropriate hospital emergency room.
4. Treatment of the resident's dental complaints beyond the scope available at the facility shall be referred to outside dental services, as determined by the dentist. Referrals shall be documented on the Medical Consultation Report form in accordance with VOL IV-4.3- 5.03 (Community Medical Referrals).

4.07-4.4 Resident Refusal of Dental Care

The dentist shall explain the necessary treatment to the resident. Each resident shall sign the Dental Treatment Consent Form (Attachment #2) prior to initiating the treatment. If the resident refuses treatment, the dentist shall follow the procedures set forth in HSOP VOL IV-4.3-6.01 (Informed Consent and Parental Notification).

1. The refusal and counseling shall be documented by the dentist in the dental section of the medical record.
2. The resident shall be scheduled for his/her annual examination, regardless of prior refusal of treatment.
3. A resident who refuses examinations and treatment shall not be routinely scheduled for follow-up. However, the resident may request to be rescheduled for dental care at any time and treatment shall be rendered at the next appropriate dental clinic as determined by the urgency of the dental care needed.

4.07-4.5 Prosthesis and Orthodontic Devices

Dental prosthetic and orthodontic devices are available to the resident as determined by the dentist and in accordance with HSOP VOL IV-4.3-5.14 (Prosthetics). DJJ does not routinely provide orthodontic devices, but assists in maintaining already applied hardware. If the mouth hardware (e.g., braces) require follow-up, the dental assistant shall notify the resident's parent or guardian who shall be responsible for payment.

4.07-4.6 Dental Floss

Routinely dental floss shall not be available to residents but shall be provided when determined necessary for a specific and documented dental need. The resident shall be instructed in its use by the dentist, dental assistant, or nurse. Dental floss shall be issued by security series staff to the resident in lengths of twelve (12) inches and then collected and disposed of by the security staff after each use.

4.07-5.0 RESPONSIBILITY

The Local Health Authority and Superintendent shall be responsible for implementing this procedure.

4.07-6.0 INTERPRETATION


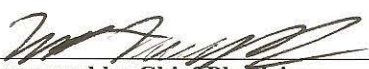

The Health Services Administrator and Deputy Director of Residential Services shall be responsible for the interpretation and the exception approval to this procedure.

4.07-7.0 CONFIDENTIALITY

All procedures and bulletins are DJJ property and shall only be used for legitimate business purposes. Any redistribution of the documents or information contained in the procedures or bulletins shall be in accordance with applicable state and federal statutes and regulations and all other DJJ procedures. Any unauthorized use or distribution may result in disciplinary and/or criminal action, as appropriate and applicable.

4.07-8.0 REVIEW DATE

This procedure shall remain in effect until rescinded or otherwise modified by the appropriate authority.

Approved by Director: 	Date: 5/20/16
Approved by Health Services Administrator: 	Date: 5/27/16
Approved by Chief Physician: 	Date: 6/9/16
Effective Date: July 14, 2016	Office of Primary Responsibility: Health Services; Division of Residential Services
Supersedes: January 19, 2016	Forms: Dental Examination; Dental Treatment Consent Form