

Miami-Dade County Ryan White Program

Oral Health Care Standards

Standard 1: Oral health care providers shall ensure that all staff has sufficient education, knowledge, skills and experience to competently serve the HIV/AIDS client population: initial orientation and training for new staff shall be provided and all staff shall participate in ongoing HIV/AIDS trainings.

	Standards of Care	Measure
Standard 1.1	All oral health care staff will possess appropriate licenses, credentials and expertise; experience working with HIV/AIDS clients is desirable.	Copy of current license for each staff person, with provider number, as required by Florida law: copies of current required operational licenses as required by Florida law. Documentation of work experience (letters of recommendation, work references, etc.)
Standard 1.2	Policies and procedures.	Written policies and procedures manuals.
Standard 1.3	Newly hired staff will receive orientation within one month of hire, including training on Ryan White Program eligibility and service requirements.	Documentation of completed orientation on file including documentation of training on Ryan White Program eligibility and service requirements.
Standard 1.4	Ongoing annual HIV/AIDS staff training.	Documentation of all completed annual trainings on file.

Standard 2: Clients receiving services meet Ryan White Program eligibility requirements and are informed of their rights per Ryan White Program standards.

	Standard	Measure
Standard 2.1	Ryan White Program client eligibility screening and demographics present.	Proof of HIV status, financial eligibility, permanent residency in Miami-Dade County OR Current (not > 6 mos.) Ryan White Program Certified Referral.

Miami-Dade County Ryan White Program Oral Health Care Standards

		Demographics include at a minimum: address, phone number, emergency information, age, race/ethnicity and gender.
Standard 2.2	Ryan White Program required documents present, signed, and dated.	Signed and dated Consent to Release and Exchange Information in the SDIS OR current (not > 6 mos.) Ryan White Program Certified Referral; <u>documentation that SDIS Notice of Privacy Practices was provided.</u>
Standard 2.3	General Consent for Treatment	Signed general consent for treatment present

Standard 3: All clients shall have a completed initial medical history with updates as appropriate; medical conditions and allergies are noted; an oral health history is taken.

	Standard	Measure
Standard 3.1	Initial Comprehensive Medical History	There is an initial comprehensive medical history including medications and conditions affecting diagnosis and management of oral health care. The initial comprehensive medical history is signed and dated by the client and dentist.
Standard 3.2	Medical History is updated as appropriate.	Medical history is updated every 6 months or at the next appointment after six months.
Standard 3.3.	Medical conditions and allergies are noted.	Medical conditions and/or medications requiring an alert are flagged. Allergies or NKA are noted.
Standard 3.4	An oral health history is taken.	Oral health history is taken that includes problems with or reactions to anesthesia, specific or chief complaints (if any), problems with previous treatment (if any).

Miami-Dade County Ryan White Program

Oral Health Care Standards

Standard 4: Documentation across providers shall reflect, at a minimum, services provided, treatment plans, examinations, charting grids, informed consents, refusal of treatment, and periodontal maintenance.

	Standard	Measure
Standard 4.1	Treatment assessment and planning.	<p>Completed treatment plan is in the progress notes OR a treatment plan form is completed.*</p> <p><i>*If clients access oral health services for episodic care only, documentation in treatment notes will reflect clients were advised to return for examination and a treatment planning appointment. If client does not present for this appointment, documentation in client's chart of advice to return for planning may serve as treatment plan.</i></p>
Standard 4.2	Documentation reflects services provided.	<p>Documentation, at a minimum, includes:</p> <ul style="list-style-type: none"> Date of service Tooth number, if appropriate Service description Anesthetic used including strength and quantity Materials used, if any Prescriptions or medications dispensed, including name of drug, quantity and dosage Education provided Signature and title
Standard 4.3	<p>A comprehensive examination is provided*</p> <p>*Not applicable for episodic care, follow up, or problem-focused examinations.</p>	<p>Comprehensive Examination includes:</p> <ul style="list-style-type: none"> Cavity charting Complete periodontal exam or periodontal screening record

Miami-Dade County Ryan White Program

Oral Health Care Standards

	<p>OR</p> <p>A problem-focused oral examination is performed.</p>	<p>Documentation of restorations & prosthesis Full mouth radiographs Pre-existent conditions Disease presence Structural anomalies Oral hygiene Instruction Prescriptions or medications Dispensed including name of drug, quantity and dosage Education provided</p> <p>Problem-focused examination includes: Chief complaint is documented Problem-focused evaluation is performed Prescriptions or medication Dispensed include name of drug, quantity, and dosage Radiographs as necessary Specific oral treatment plan Education provided Return for further evaluation documented</p>
<p>Standard 4.4</p>	<p>Charting grids are completed as appropriate.</p>	<p>Charting of the examination findings/treatment is completed in the appropriate tooth grids.</p>
<p>Standard 4.5</p>	<p>Informed specific consents are present for each oral surgery procedure.</p>	<p>A signed, informed, specific consent is present for all oral surgery procedures that includes the risks, benefits, alternatives and consequences of not having the procedure.</p>
<p>Standard 4.6</p>	<p>Refusal of treatments/radiographs is documented.</p>	<p>Client refusal for treatment/radiograph is documented (form or in progress note) with DDS signature, client signature or initials and date; <u>signature and date of witness are present.</u></p>

Miami-Dade County Ryan White Program

Oral Health Care Standards

		Reason for DDS refusal to perform a requested treatment is documented; signature and date of witness are present.
Standard 4.7	<p>Periodontal maintenance is regularly performed.*</p> <p>*Not applicable for clients who are “No shows” AND “No show” is documented; not applicable for episodic care.</p>	Periodontal maintenance is performed according to the treatment plan or at the next appointment, if later than six months.

Standard 5: Client care and referrals shall be coordinated with other care providers, as appropriate.

	Standard	Measure
Standard 5.1	<p>Treatment provided for oral opportunistic infection (when indicated) is coordinated with client PCP.*</p> <p>*Not applicable if no oral OI Dx/treatment documented.</p>	Documentation reflects treatment provided for oral OI and coordination with PCP.
Standard 5.2	<p>Referral and coordination of care.*</p> <p>*Not applicable if no condition documented and no referral made.</p> <p>Tobacco use and referral.*</p> <p>*NA for clients not using tobacco products.</p> <p>Nutritional problems and referral.*</p> <p>*Not applicable when no indication of nutritional problems.</p>	<p>Documentation in client record of the condition and referral to a specific specialty or ancillary service provider.</p> <p>Documentation of heavy tobacco use and referral to a tobacco counseling program.</p> <p>Documentation of nutritional problems and referral to a nutritionist for nutritional counseling.</p>

Miami-Dade County Ryan White Program Oral Health Care Standards

Standard 6: Clients shall receive education in preventive oral health practices; tobacco, and nutritional counseling as appropriate.

	Standard	Measure
Standard 6.1	<p>Education will be provided in preventive oral health practices¹ including hygiene, nutritional education² as related to oral health care and education, as appropriate, concerning tobacco use³.</p> <p>¹Not applicable for episodic care.</p> <p>²Not applicable for episodic care.</p> <p>³Not applicable if no indication of tobacco use; not applicable for episodic care.</p>	<p>Documentation of education in preventive oral health practices including hygiene is provided every six months or at next appointment if later than six months.</p> <p>Documentation of nutritional education as related to oral health.</p> <p>Documentation of education, as appropriate, concerning tobacco use.</p>