Mobile Dental Service – Frequently Asked Questions

1. **How do I make an appointment for a home/residential care visit?**

Please contact our reception on (03) 9877 8035 or [admin@drkerrie.com.au](mailto:admin@drkerrie.com.au) to arrange an initial consultation to assess and discuss your dental needs. This may be in person or via telehealth.

Our registration form and medical questionnaire can be downloaded from our website. We also a request a copy of the patient's:

* Current medical history summary
* Drug chart
* Advanced care directive, Behavioural support plan, Oral and dental care plan (if available)

We may need to contact you or your medical practitioners for further information to assist with treatment planning. For those who are unable to handle their own affairs, we will contact their medical and financial decision makers for consent.

1. **How are appointments arranged?**

Our receptionists will be in contact to let you know the day we can attend. Other parties such as your medical decision maker or accommodation provider will also be notified. We try to give as much notice as possible. The appointments will be re-confirmed two more times - on the day before the visit and on the morning of the dental visit. This is because circumstances can change suddenly (e.g. nursing homes going into lockdown due to influenza).

We are unable to give an exact appointment time, as we often visit several places in one day. Appointments do not have a set duration as we need to communicate with residential care staff, document the visit in progress notes, pack and unpack, and travel between facilities.

Carers and other support persons (e.g. family members) will be contacted approximately 30-60 min before the appointment if a patient needs to be given medication before their dental treatment, or if a support person wishes to attend at the appointment.

1. **What facilities do you need on the day of the appointment?**

* Free parking in close proximity for ease of loading and unloading equipment.
* Staff assistance to locate the patient, reposition the patient if necessary, provide documentation and for other help and discussion as needed.
* A clean room with adequate space, privacy, bench space and electricity.
* Access to nearby tap water.
* Patients need to be seated comfortably with head support. A tilt and recline wheelchair, princess/tub/fall-out chair, high backed armchair, or adjustable bed are suitable. *A normal wheelchair is not suitable.*

1. **What happens at the first consultation?**

The initial consultation will normally include:

* a medical, dental and social history review
* oral examination
* a report outlining your dental condition, preventive care advice, treatment options, risks and costs, and long-term care recommendations
* discussion of the treatment plan and oral health instructions with relevant decision makers, carers and medical practitioners
* documentation of the consultation in the patient’s progress notes in residential care
* x-rays as required
* cleaning of the teeth

Often, x-rays and cleaning are required for a thorough examination to be completed. These are not included in the consultation fee.

Non-urgent treatment is not usually provided on the initial consultation visit.

We will contact you by phone or letter to discuss the treatment options. Once a treatment plan is formulated, we can provide a written quote. The medical decision maker and the financial power of attorney will be asked to sign off on the treatment plan.

If the patient isn’t cooperative during the initial consultation, or if oral hygiene is poor, it may not be possible to fully determine treatment needs until after treatment has commenced.

We may need to make additional arrangements for medication, x-rays or blood tests to be ordered prior to treatment.

1. **What is the parent company of your service (if applicable), and who are the principals?**

The Special Needs Dental Team is owned by Dr Kerrie Punshon.

1. **Is this a public or private sector dental service?**

This is a private sector dental service.

1. **What types of dental services may be provided to patients during the dental visit?**

We can provide examination, cleaning, x-rays, application of topical remineralising agents including silver fluoride, fillings, extractions and impressions. Crowns, bridges, root canal treatments and surgical/sectional extractions need to be provided in a dental clinic.

1. **What payment options do you offer?**

You will be sent an invoice following the dental visit. This can be paid by cash, credit card, cheque or electronic transfer. You can claim a rebate from your private health insurance provider, but we are not a preferred provider. You will need to bring your card to our Blackburn clinic if you wish to claim via HICAPS. We accept DVA, TAC and Workcover. We are unable to accept vouchers from public dental schemes.

1. **What level of public liability and professional indemnity insurance is held by your business?**

Every dentist and specialist at SNDT has individual professional indemnity and public liability insurance.

1. **Will the names of visiting practitioners be made available to the centre prior to any visits so that Australian Health Practitioner Regulation Agency (AHPRA) registration can be verified?**

Yes

1. **For each person from the mobile dental service that will be attending the centre, will proof of a Police Check be provided before the visit?**

Every dentist and specialist at SNDT has undergone a police check. This can be provided on request.

1. **Do your clinicians currently hold Radiation Use Licenses and, and will evidence of these be made available to the centre prior to any visits?**

Every dentist and specialist at SNDT has a radiation use licence. This can be provided on request.

1. **Please describe your processes for obtaining informed consent from parents/guardians, obtaining medical histories, and for patient matching.**

When a new patient registers with our practice, we request signed consent for release of medical history information. We require written copies of medical history information, medication charts and specialist reports as our patients often have complex health conditions. Medical histories are updated regularly.

Following the initial consultation, we will provide the patient or their medical/financial decision makers with a dental report (including the patient’s dental condition, treatment options, risks and long-term care recommendations), consent form and a quote. Further discussion will take place over the telephone as needed.

For patients who are unable to self-consent and do not have an appointed decision maker, we will contact the Office of the Public Advocate for advice.

If further treatment needs are found at follow-up appointments, consent may be obtained verbally or in writing depending on the decision-maker’s preference and the complexity of treatment needed.

We verbally verify the patient’s identity with the patient or a staff member.

1. **What techniques does your service use when providing care for people who have dental treatment fear or anxiety?**

We take a slow and gentle approach towards our patients including people who have dental treatment fear or anxiety. We mainly use “behavioural” support techniques which can vary depending on the person’s level of understanding.

Some people benefit from an oral medication to help relax them. This will be discussed with the medical decision maker, and the appropriate type of drug and dose will be decided with the patient’s medical practitioner.

We can offer Nitrous Oxide at our Blackburn clinic, and General Anaesthesia at a private hospital.

1. **If treatment is needed at the first visit, how will consent be obtained if the patient cannot consent to their own treatment? How is patient follow-up arranged if additional appointments are needed? In which location(s) are follow-up appointments offered?**

If treatment is needed at the first visit, we will contact the patient’s medical and financial treatment decision makers by phone. If we are unable to contact them, we will provide advice on managing the patient’s condition until consent can be obtained.

Follow-up appointments are usually for further home visits. We can also offer appointments at our Blackburn clinic. We will coordinate further appointments with patients, family members and carers as needed. Contact can be made by telephone or email.

1. **Please describe your patient referral process. What provisions do you make for patient handover to either a public or private provider? Which dentists/dental specialists would you refer patients to if this occurs? Do you provide a written referral, and are records of treatment and any radiographs made available?**

We can provide a referral letter to other public or private care providers as required. This will include treatment records and radiographs. If you do not have a preferred provider we can make a recommendation depending on your location and needs.

1. **What provision do you make for follow-up if there are problems with treatment?**

As part of the consent process, we will discuss the risks of treatment including the likelihood of success. Unfortunately there are often factors that are difficult to control which will affect the longevity of dental treatment including how well the patient is able to cooperate with the dental procedure, oral hygiene, diet, medications that reduce salivary flow, gastric reflux, grinding, and swallowing disorders that cause food retention in the mouth.

We provide post-operative care advice to carers/staff after a dental procedure, verbally and in their progress notes. Patients having extractions will be given written post-operative care instructions including our contact details. We may need to make a follow-up appointment to review healing.

Please do not hesitate to contact our Blackburn clinic if there are any immediate concerns following dental treatment. The follow-up management will depend on the nature of the problem.