3.3.2.2 Dental Care – Reception Center (E)

(a) Policy
Each California Department of Corrections and Rehabilitation (CDCR), Reception Center (RC) patient who qualifies, as defined in Sections (c)(1)(A) and (B) below, shall receive a dental screening by a dentist as part of the RC classification process. A dentist shall assign a Dental Priority Classification (DPC) and identify urgent dental needs. Timely treatment of Emergency and/or DPC 1 dental conditions shall be provided.

(b) Purpose
To provide patients with continuity of health care and to identify and provide timely treatment for those patients with Emergency and/or DPC 1 dental conditions.

(c) Procedure

(1) Dental Screening in Reception Centers
(A) Within 60 calendar days of a patient’s arrival at an RC:
1. A dentist shall perform a dental screening on each newly arriving patient, including new commitments and parole violators.
2. The patient shall receive education on oral hygiene which is included in the Patient Orientation to Health Care Services.

(B) Patients who received a dental screening at an RC or a comprehensive dental examination at a Mainline Facility within the past six months need not receive a new RC dental screening except as determined by the attending dentist. This includes patients who have paroled and are rearrested as well as those who transfer from one RC to another.
1. When in the professional judgment of a CDCR dentist a patient does not need to receive a new RC dental screening, the patient shall retain the most recently assigned DPC.
2. The dentist shall document the patient’s DPC on the CDCR 237-C, Dental Progress Notes, or CDCR 237-C-1, Supplemental Dental Progress Notes, and shall indicate the method of assigning the DPC as via chart review.
3. Patients who do not receive an RC dental screening according to the process described above do not need to complete and sign a CDCR 7423, Notification of Reception Center Dental Screening.

(C) Dental screenings shall be documented on a CDCR 237-A, Reception Center Dental Screening, and shall include but not be limited to:
1. A panoramic radiograph unless one has been taken by CDCR within the past 12 months.
2. A screening of the head and neck as well as the hard and soft tissues of the oral cavity with a mouth mirror and adequate illumination, which includes at least:
   a. A cancer screening.
   b. Charting of a patient’s existing diseases and abnormalities (e.g., dental decay or other oral pathology).
3. Noting the presence and condition of prosthetic appliance(s).
4. Assigning and recording a DPC for each dental service area, (i.e., periodontics, restorative, endodontics, oral surgery, prosthodontics), as well as an overall DPC that reflects the patient’s most urgent dental need.

(D) The dentist performing the RC screening shall:
1. Review the screening findings with the patient and advise him or her of any Emergency and/or DPC 1 conditions.
2. Inform the patient of any DPC 2, 3, or 5 dental needs and provide him or her with a CDCR 7423 to complete and sign if he or she could benefit from dental care.
3. Document on a CDCR 237-C or CDCR 237-C-1 (Subjective, Objective, Assessment, Plan, Education [SOAPE] format not required):
   a. Any radiograph(s) taken during the RC dental screening.
   b. That an RC dental screening was completed and the results reviewed with the patient who was then advised of, as well as offered treatment for, any Emergency and/or DPC 1 conditions.
   c. Abnormal conditions noted from the head and neck screening and any required follow-up.
   d. Whether the patient elected to receive or refused treatment of any existing Emergency and/or DPC 1 conditions. (Reference the Health Care Department Operations Manual [HCDOM], Section 3.3.5.7, Patient’s Right to Refuse Treatment, for requirements concerning a refusal).
   e. The purpose of the next encounter if one is scheduled or needs to be scheduled.
f. A brief entry indicating that the process described in Section (c)(1)(D)2 was followed if the patient has DPC 2, 3, or 5 dental needs.
g. The patient’s overall DPC.

4. Follow the procedure outlined in the HCDOM, Section 3.3.5.3(c)(3)(A) if the patient requires and has requested treatment of any Emergency and/or DPC 1 conditions.

5. Follow the procedure outlined in the HCDOM, Section 3.3.5.3(c)(3)(B) if the patient does not wish to receive treatment of his or her Emergency and/or DPC 1 conditions.

6. Indicate the patient’s DPC on a CDCR 128-D, Dental Priority Classification Chrono, for each patient screened.

(E) Dental staff shall:
   1. Only perform screening duties within their scope of licensure.
   2. Follow the procedure outlined in the HCDOM, Section 3.3.2.3(c)(3) if the patient refuses the:
      a. RC screening.
      b. Panoramic radiograph.
   3. Follow the procedure outlined in the HCDOM, Section 3.3.6.1(c)(2)(B) regarding placing forms in the dental section of the patient’s health record.
      a. Maintain a tracking system of RC dental screenings to include:
         1) Patient name and CDCR number.
         2) Date RC screening was completed.
         3) Overall DPC.

(F) The Health Program Manager III or designee at each institution shall be responsible for tracking RC dental screenings.

(G) The Office Technician or designated dental staff shall schedule an encounter for patients that qualified for but did not have a panoramic radiograph taken for any reason other than a “Refusal.” Efforts shall be made to schedule the encounter within ten business days of discovering that the patient did not have a panoramic radiograph taken.

(H) The Health Program Specialist I or designee shall compile data regarding RC screenings for inclusion in the monthly statistics sent electronically to the Division of Health Care Services, Inmate Dental Services Program, headquarters staff.

(I) When dental staff becomes aware that a patient has transferred to a Mainline Facility without undergoing an RC dental screening, dental staff at the receiving assigned institution shall schedule the patient for a face-to-face triage encounter to see if the individual has any emergent or urgent dental needs. Dental staff shall also follow the process outlined in the HCDOM, Section 3.3.5.9(c)(3)(D) regarding comprehensive dental examination eligibility notification. Dental staff shall not schedule the patient for an RC dental screening.

(2) Dental Treatment in RCs
   (A) Dental treatment provided to RC patients shall be limited to the treatment of Emergency and DPC 1 dental conditions.
   (B) RC patients shall initiate access to dental services as outlined in the HCDOM, Sections 3.3.5.1(c)(1)(A); 3.3.5.3(c)(3)(A); 3.3.5.14(c)(4)(A); and 3.3.5.14(d)(1)(C) and (D).
   (C) At the end of every treatment encounter for an RC patient, the dentist shall offer him or her a subsequent treatment encounter unless the patient’s DPC changes to a DPC 2, 3 or 4. (The procedure outlined in the HCDOM, Section 3.3.5.3(c)(2)(B) does not apply to most RC patients).
   (D) Patients who remain on RC status at an RC for 90 calendar days or longer may be eligible to receive DPC 2 care (excluding prosthetics) on a case by case basis.
   (E) Patients remaining on RC status at an RC for 180 calendar days or longer shall be notified within ten business days after completion of the 180 calendar days that they are eligible to receive an initial comprehensive dental examination performed by a dentist. (Reference the HCDOM, Section 3.3.2.3(c)(1)).

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