

COMMONWEALTH OF MASSACHUSETTS

DEPARTMENT OF CORRECTION - HEALTH SERVICES DIVISION

103 DOC 640 - DENTAL SERVICES

TABLE OF CONTENTS

640.01	Definitions.....	2
640.02	General Policy.....	2
640.03	Organization of Dental Services.....	4
640.04	Initial Orientation & Screening	4
640.05	Dental Services - Facilities With On-Site Dentists..	5
640.06	Dental Services - Facilities Without On-Site Dental Services	7
640.07	Transfer Procedures.....	8
640.08	Co-payment for Dental Services.....	8
640.09	Grievance Procedures.....	9
	Attachment A - Receipt for Dental Prosthesis.....	10

MASSACHUSETTS DEPARTMENT OF CORRECTION	DIVISION: HEALTH SERVICES
TITLE: DENTAL SERVICES	NUMBER: 103 DOC 640

PURPOSE: The purpose of this policy is to establish guidelines for the provision of dental services to inmates of the Department of Correction.

REFERENCES: MGL C124 § 1 (a), (c), and (q); MGL C127 § 117;
ACA Standard: 3-4343, 3-4344, 3-4345, 3-4347, 3-4350, 3-4358, 3-4378
NCCHC Standard: P-32, P-38, P-40

APPLICABILITY: Staff **PUBLIC ACCESS:** Yes

LOCATION: DOC Central Policy File/Facility Policy File
Health Services Division Policy File/Inmate Library

RESPONSIBLE STAFF FOR IMPLEMENTATION AND MONITORING OF POLICY:
Deputy Commissioner of Classification, Programs and Reentry Services
Assistant Deputy Commissioner of Clinical Services
Superintendent
Contractual Dental Director

EFFECTIVE DATE: 02/21/2005

CANCELLATION: This policy cancels all previous Department policy statements, bulletins, directives, notices, rules, or regulations regarding dental services in the Department of Correction.

SEVERABILITY CLAUSE: If any article, section, subsection, sentence, clause or phrase of this policy is for any reason held to be unconstitutional, contrary to statute, in excess of the authority of the Commissioner or otherwise inoperative, such decision shall not affect the validity of any other article, section, subsection, sentence, clause or phrase of this policy.

640.01 Definitions

Assistant Deputy Commissioner of Clinical Services:
The executive staff person who reports to the Deputy Commissioner of the Classification, Programs and Reentry Divisions. The duties of the ADC include, but are not limited to the management of the Health Services Division, the development of health care policies and the oversight of the Department's health services contracts. The ADC is the designated Correctional Health Authority as provided by 103 DOC 601.01.

Program Dental Director: A dentist designated by the Medical Contractor, with the approval of the ADC, to oversee the dental component of the Program.

Medical Contractor: The vendor that contracts with the Department of Correction to provide Medical Services.

Dentist(Community): - Dentist approved by the Division of Health Services and Contractual Clinical Provider Group to provide supplemental dental care as medically necessary.

Dental Emergency: Any acute dental problem that cannot be deferred until a routine appointment.

640.02 General Policy

Each Superintendent shall establish written procedures for inmate access to both routine and emergency dental services. Dental services may be provided on-site, off-site in the community, or at another Department facility, in accordance with the guidelines of this policy.

1. Matters of dental judgment are the sole province of the contractual medical provider and the responsible dentist.
2. All contractual dentists shall maintain a dental records system that meets the requirements of 103 DOC 607, Medical Records.

3. Each facility shall provide the following general levels of dental care:

- a. Dental services compliant with correctional community standards shall be available to all inmates upon request and scheduled by the facility dentist. Arrangements for any non-emergency procedure that cannot be provided on-site shall be subject to the prior approval of the Contracted Dental Director;
- b. Emergency dental services shall be available to all inmates on-site and/or off-site as deemed necessary;
- c. Prosthodontia services, including full dentures, partial dentures, and repair of dentures will be made available. Prosthodontia devices shall be entered on the Medical Restrictions/Special Needs screen within IMS;
- d. Dental consultations through on-site clinics, or specialty clinics at the Lemuel Shattuck Hospital Outpatient Department will be made available;

Consultation schedules shall be entered in IMS on the Inmate Schedule screen detailing on-site medical visit (internal) versus off-site hospital/medical trip (external) by contractual health care personnel;

- e. Whenever possible, necessary oral surgery services will be provided through the Lemuel Shattuck Hospital. All non-emergency oral surgery referrals other than to Lemuel Shattuck Hospital shall be subject to the prior approval of the Contractual Dental Director. Contractual dentists shall be responsible for the preparation of patients for oral surgery and for post operative treatment.

- f. Inmates admitted with pre-existing orthodontic devices shall have the orthodontics maintained in accordance with community standards.

640.03 Organization of Dental Services

The Contractual Dental Director shall report to the contractual vendor Program Director for administrative supervision. The Contractual Dental Director shall be the clinical overseer of all Contractual dentists. This individual shall be a licensed dentist in the Commonwealth of Massachusetts.

1. All dentists providing services to inmates in the custody of the Department shall be licensed in the Commonwealth of Massachusetts.
2. At the request of the Assistant Deputy Commissioner of Clinical Services, all dentists shall undergo a peer review on an annual basis by a designated dentist or dental agency chosen by the Assistant Deputy Commissioner of Clinical Services. Documentation of this review shall be provided to the DOC Health Services Division.
3. Each facility dentist shall be responsible for the clinical supervision of any dental hygienists or dental assistants providing services in the facility. All dental hygienists and dental assistants shall be registered, certified or licensed as required by Massachusetts General Laws and the Massachusetts Board of Registration in Dentistry.

640.04 Initial Orientation and Screening

Each Superintendent shall establish procedures for the provision of an initial dental orientation and dental screening as outlined below.

1. Upon arrival at any Department facility, each inmate will be provided with facility procedures for gaining access to dental services. This will

become part of the Inmate Health Orientation (see 103 DOC 630, Medical Services).

2. The DOC Medical Entrance Screen (103 DOC 630) shall include an inquiry and observation into current dental problems. A dental screening to include instruction in oral hygiene will be conducted, by trained healthcare staff, within 7 days. Inmates will be referred to the facility dentist on an emergency basis if deemed appropriate by the individual performing the screening.

640.05 Dental Services - Facilities with On-Site Dentists

Each Superintendent with on-site dental coverage shall establish procedures for the provision of dental services in accordance with the guidelines below:

1. The following inmates will be provided with a dental examination, supported by x-rays if necessary, within thirty (30) days of admission to the facility:
 - a. new commitments;
 - b. parole violators;
 - c. inmates returned from escape;
 - d. Federal detainees

Where documentation is available that the above inmates received a dental examination, by the contractual provider, within the previous three months, this initial dental examination will not be required.

2. Inmates who desire to see the dentist may submit a request slip. When the slip is received, it will be triaged by medical staff within 24 hours and inmates will be placed on the dentist's list (unless s/he is already on the list) or seen on an emergency basis as deemed appropriate by the responsible dentist. All dental sick slips shall be filed in the dental section of the inmates medical record. The results of examinations and treatment plans shall be recorded on the dental

treatment record in the inmate medical record. Treatment plans will be provided by priority in accordance with dental protocols, utilized by the dental contractor, and with a treatment plan developed by the treating dentist. Treatment plans will be supported by x-rays as appropriate.

3. Inmates shall be seen for Dental Services as follows:

Immediately for Emergency/Urgent Care: Individuals requiring treatment for the relief of acute oral and maxillofacial conditions characterized by trauma, infection, pain, swelling or bleeding which are likely to remain acute or worsen without intervention.

Within 30 days for Interceptive Care: Individuals requiring early treatment for the control of extensive subacute dental or oral pathosis. This level of care should include restoring carious teeth, sedative fillings, gross debridement of symptomatic areas, extractions, long-term management of periodontal disease, and endodontic and prosthodontia procedures needed to retain or restore essential masticatory function. A treatment plan will be developed and placed in the dental section of the inmate's medical record.

Within 60 days for Corrective Care: Individuals requiring treatment for chronic dental and oral pathosis and for the restoration of essential function. A treatment plan will be developed and placed in the dental section of the inmate's medical record.

4. Whenever a prosthesis is lost, it will be replaced if it has been determined that the loss of the prosthesis was not due to the inmates negligence. This determination will be made by making an internal assessment and review of all Incident Reports regarding the matter. In addition, an inmate shall sign a receipt for Dental Prosthesis form that the Contractual

Dental Provider will manage. The dental staff will also counsel the inmate during this process and will also sign the form. The form will then be placed in the dental record. (Attachment A)

In cases where loss of a prosthesis is due to the inmate's negligence, with clear and complete supporting documentation affirming that the loss or damage was due to inmate negligence, and the inmate requests a replacement prosthesis to be fabricated, s/he shall be responsible for the laboratory expenses to replace it. The Assistant Deputy Commissioner of Clinical Services shall be notified in all cases.

640.06 Dental Services - Facilities Without On-Site Dental Services

Each facility which does not have on-site dental coverage shall establish procedures for access to dental services in accordance with the guidelines below:

1. Access to dental services shall be available to inmates upon request and upon approval of the Contractual Dental Director. Each facility shall have a designated dentist located in the nearby community or at a nearby facility.
2. Inmates shall have access to the levels of dental services as specified in Section 640.01 and 640.04 of this policy.
3. In facilities where a contractual dentist is not readily available, contractual health service staff shall arrange to use a community dentist on an emergency basis only. Any further appointments and treatment will be provided in accordance with community standards and, when possible, with the prior approval of the Contractual Dental Director. Whenever possible, the Contractual Dental Director shall have a facility dentist examine the inmate for a professional opinion or arrange for treatment to be carried out at a Department facility.

4. Facility staff shall also advise the inmate and the community dentist both verbally and in writing that the Health Services Division shall not be responsible for the payment of dental services. The Contractual Medical Provider is responsible for all payments provided by a community dentist.
5. Whenever a prosthesis is lost, it shall be handled in the same manner as described in 640.05(4).

In cases where loss of a prosthesis is due to the inmate's negligence, with clear and complete supporting documentation affirming that the loss or damage was due to inmate negligence, and the inmate requests a replacement prosthesis to be fabricated, s/he shall be responsible for the laboratory expenses to replace it. The Assistant Deputy Commissioner of Clinical Services shall be notified in all cases.

640.07 Transfer Procedures

Upon transfer of an inmate to another Department facility, his or her dental record and any prosthetic appliance in process (if applicable) shall be forwarded to the receiving facility or to the facility dentist who will be the treating dentist. This will be achieved by the Contractual Dental Director developing and maintaining a tracking system of all inmates in this category. Dental records shall be placed in the inmate's health record and transferred with the inmate in accordance with Department Medical Records Policy, 103 DOC 607.

640.08 Co-payment for Services

The applicable dental co-payment fee will be assessed in each instance of a self initiated dental visit, by an inmate to whom this policy is applicable pursuant to the provisions of 103 DOC 763. (Inmate Medical Co-Payments)

640.09 Clinical Grievance Mechanism

The Contractual Medical Provider has a system in place which addresses the process of informal and formal (written) inmate grievances concerning Health Services.

Receipt for Dental Prosthesis

Name of Patient: _____

DOB: _____ ID. No: _____

Name of Institution: _____

Date Received: _____

Type of Dental Prosthesis: _____

Pre-Authorization No: _____

I verify that I have received the dental prosthesis as above, I understand that I am fully responsible for the care of this item, I further understand that I may be required to pay for any repair or replacement.

Signature of Patient

Signature of Dentist