



Dental Public Health State Activity Submission Form

ASTDD’s goal in collecting information about successful state Dental Public Health activities (e.g., practice, program, service, event, or policy) is to share this information with other states, territories, and stakeholders who may be interested in implementing similar activities. We thank you for your time and willingness to share your experiences.

Please complete the form below and return to Lori Cofano, ASTDD Best Practices Project Coordinator, at lcofano@astdd.org

FIRST CONTACT PERSON FOR INQUIRIES	
Name:	Shailee Gupta, DDS
Title:	Chief Dental Officer
Agency/Organization:	St. David’s Foundation
Street:	1303 San Antonio St., Suite 500
City, State, Zip Code:	Austin TX 78701
Phone:	(512) 879-6225
Email:	sgupta@stdavidsfoundation.org
SECOND CONTACT PERSON FOR INQUIRIES	
Name:	Erica Castillo
Title:	Senior Dental Operations Officer
Agency/Organization:	St. David’s Foundation
Street:	1303 San Antonio St., Suite 500
City, State, Zip Code:	Austin TX 78701
Phone:	(512) 879-6232
Email:	ecastillo@stdavidsfoundation.org

STATE DENTAL PUBLIC HEALTH ACTIVITY (e.g., practice, program, service, event, or policy) Minimum=300 Maximum=500	
Activity title:	St. David’s Foundation Dental Program
State/Territory:	TX
Summary overview, which may include the following:	
<ul style="list-style-type: none"> Objectives Rationale Personnel Key partners Costs & sustainability 	
<p>St. David’s Foundation Dental Program provides free dental care to children in Title I Schools in three counties in Central Texas. Dental services include cleanings, sealants, fluoride varnish, fillings, and extractions. We are exploring adding silver diamine fluoride as well as stainless steel crowns (SSCs) and pulpotomies. St. David’s Foundation Dental Program currently has nine mobile dental vans located in four different regions within the school districts we serve. Clinical staff consist of ten dentists, four dental hygienists and nineteen dental assistants, as well as fifteen operations staff.</p> <p>Dental care is provided on the school campus to help minimize the time a student misses school and parents taking time off work. There is no cost to parents for any of the dental care provided. We also provide extended dental care to</p>	

students who we are unable to treat on the mobile vans, through our Complex Care Program (CCP). The CCP consists of general dentists and specialists in the community who have agreed to provide dental care to students referred to them at fifty percent of the cost. St. David's Foundation (SDF) reimburses the provider for the remainder of the cost. Therefore, the parent does not have to pay for their child's dental care.

Lessons learned (Successes and **Challenges**):

Receiving the input from the community would be important. Asking families what their challenges are to try to help with their overall health. Having the buy-in from everyone you will be working with is a must have. Incentivizing teachers and schools in collecting consent forms can work in your favor. We gift teachers with gift cards for their assistance and schools with an overall check for funds to use towards improving their school campus. Teachers are extremely busy and anything we can offer them is genuinely appreciated.

Early on, there was some push back from the local pediatric dentists, and through further, deeper conversations, we were able to get them to understand the majority of students we were serving, didn't have access to dental care or could not afford the care. We were there to provide the treatment needed to get the child out of pain and help set them up for a healthier oral health future.

TO BE COMPLETED BY ASTDD	
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