

Party A & Party B

Agreement Period: October 1, 2019- June 30, 2020

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This is a Memorandum of Understanding (MOU) between Party A & Party B.

#### I. <u>Purpose</u>

The purpose of this agreement is to prevent the problem of widespread dental disease and access to dental care services for school age children. Party A will deliver preventive dental service for 3<sup>rd</sup> grade students at following elementary schools: Elementary Avenue 1, Elementary Avenue 2, and Elementary Avenue 3.

Category	Party A	Party B	
Partnership Point of	Project Director	School Nurse	
Contact			
Program Operations	1. PARTY A staff contacts the school	Principal & secretary participate in the	
	nurse/secretary to schedule initial	initial meet.	
	meet with the principal and secretary	2. Principal & secretary share information	
	at each school.	with other staff involved in the process,	
	2. Share the forms (principal & secretary	especially the 3 <sup>rd</sup> grade teachers.	
	introduction letter, parent	3. Coordinate dental screening day and	
	introduction letter, screening opt-out	sealant days.	
	consent, dental educational	4. Provide school bell schedule.	
	handouts, dental treatment consent,	5. Inform PARTY A of any field trip or other	
	dental report, aftercare instructions).	school activities that would affect dental	
	3. Explain the process of conducting	services.	
	dental screening and providing	6. Teachers bring students to dental	
	preventive dental services.	screening area and provide	
	<ol><li>Coordinate dental screening day and sealant days.</li></ol>	support/crowd-control during the screenings.	
	5. Deliver adequate quantity of forms.	7. Teacher sends students, as requested by	
	6. Dental screening and preventive	PARTY A staff, to receive dental services	
	dental services will be delivered at	where the portable dental equipment is	
	school during school hours only.	set-up.	
	7. Create dental screening schedule.	8. Share dental screening schedule with	
	8. Deliver preventive dental services.	teachers.	
	9. Coordinates recheck & retention	9. Coordinates recheck & retention check.	
	check days for each school.		
Services	Provide school-based preventive	1. Provide space for <b>Dental Screening Day:</b>	
	dental services to students at	a. Semi-private space with	
	Elementary Avenue 1, Elementary	adequate lighting to	
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Avenue 2, and Elementary Avenue 3.



	<ol> <li>Dental services include dental sealants, fluoride varnish application, cleaning and polishing of teeth and individual oral hygiene instructions.</li> <li>Maintain dental equipment in good working conditions.</li> <li>Bring dental equipment and dental supplies to each school site.</li> </ol>	accommodate one class at a time.  b. PARTY A will retain space until all classes have been screened (1/2 to full day of school)  c. Provide two tables, four chairs, and a trash can.  d. Access to the office by phone or close physical proximity (to call classes if they have not arrived @
		appointed screening time)  2. Provide space for <b>Dental Sealant Days</b> :  a. <i>Private space</i> minimum 12' X 10'  with adequate lighting  b. Room is required until all  students have completed  treatment. Approximate  duration is 1 – 8 days.  c. Provide one table, two chairs and  a trash can.  d. Two electric outlets are required.  e. Water source is preferred in the  room but can be next door.  f. Phone or walkie-talkie to  communicate with secretary or  classrooms to call students for  appointment time.  g. Room must be locked when  dental equipment is not in use.  Office staff shall unlock the room
Emergency Dental Care Coordination	<ol> <li>To provide care coordination for students in immediate need of dental services, PARTY A will partner with Dental Care Coordinators (DCC). DCC will be solely responsible for dental care coordination.</li> <li>If a student has need of urgent dental care, dental care coordinator will refer child to a dentist within 48 hours.</li> <li>When student needs routine dental work a care coordinator will refer child to a dentist within 2 weeks.</li> </ol>	at beginning of each day.  1. If possible, inform PARTY A if student is a special needs child or has a chronic disease condition such as asthma or seizure disorder.



Medical Emergency  Distribution & Collection of forms	<ol> <li>Provide life support care protocol as per American Heart Association guidelines including calling 911.</li> <li>Alerting school office staff of the emergency.</li> <li>Maintain confidentiality of all students.</li> </ol>	<ol> <li>Provide any pertinent medical information or any devices such as an inhaler if needed.</li> <li>Contact emergency contact person for affected individual.</li> <li>Provide class list data to PARTY A 2-3 weeks prior to dental screening day.</li> </ol>
Collection of forms	<ol> <li>Comply with HIPAA regulations.</li> <li>Collect opt-out forms before providing dental screening for each class.</li> <li>Hand-out the packets to each teacher after screening. Packet includes the dental screening results of the students, dental educational materials and dental sealant consent forms.</li> <li>Collect dental sealants consent forms from the main office approximately 2-3 days after dental screening.</li> </ol>	<ol> <li>Office staff distribute forms to teachers.         <ul> <li>Teachers distribute parent introduction letters, opt-out consents prior to dental screening or on date recommended by PARTY A.</li> <li>Collects the opt-out and return it the school main office a day before the dental screening.</li> <li>Distributes dental screening result report and dental sealant consent to appropriate student at the end of the screening day.</li> <li>Teachers collect completed and signed treatment consents to the main office.</li> <li>If additional consent forms are received after original pick-up, please turn it into the main office or to PARTY A staff.</li> </ul> </li> </ol>
Data Collection	<ol> <li>Collects data for dental care needs of each student participating in dental screening.</li> <li>Owns all clinical records.</li> <li>Keep track of dental services provided for each student.</li> <li>Share student contact information that needs dental care coordination with a care coordinator.</li> <li>PARTY A will provide results of dental screening day and dental sealant days to the school the principal and secretary.</li> </ol>	<ol> <li>Provide class list data to PARTY A 2-3 weeks prior to dental screening day.</li> <li>Names of students in need of dental care will be given to school office staff.</li> </ol>



Quality Assurance	1. PARTY	A staff will visit each school	1.	Ensure the process is followed for	
	after d	elivering forms to ensure the		distributing forms and supply all	
	forms	were distributed to students		required items for the services.	
	and to	ensure PARTY A will be able to		·	
	provid	e services as scheduled.			
	2. PARTY	A staff will recheck the status			
		lents in need of immediate			
		care at the screening visit.			
Miscommunication		mmunications of scheduling for	1.	Miscommunications of scheduling for	
		screening and dental sealant		dental screening and dental sealant	
		gathering of consent forms or		days, gathering of consent forms or	
	_	class data of the students will		proper class data of the students will be	
		olved by mutual agreement.		resolved by mutual agreement.	
		A will be respectful of school	2	Party B will be respectful of PARTY A	
		nd school property.	۷.	staff and equipment.	
Insurance &		arty will be responsible for	1	Each party will be responsible for their	
Indemnification	-	wn general liability insurance	1.	own general liability insurance and	
indeminication		edical liability insurance.		medical liability insurance.	
		r as permitted by law, Party B	2	Insofar as permitted by law, Party B shall	
		ssume the defense and hold	۷.	assume the defense and hold harmless	
		ess Party A, its Board of		the Party A, its Board of Supervisors, and	
	· ·	visors, and nay of its officers,		nay of its officers, agents or employees	
	_	or employees from any		from any liability, damages, costs or	
	· ·	y, damages, costs or expenses		expenses of any kind whatsoever,	
	=	kind whatsoever, including		including attorneys' fees, which may	
		eys' fees, which may arise by		arise by reason of any harm to person(s)	
		of any harm to person(s) or		or property received or suffered by	
		ty received or suffered by		reason of the sole fault or negligence of	
		of the sole fault or negligence		Party B, its officers, agents or	
		ry B, its officers, agents or		employees.	
	emplo		3.	Insofar as permitted by law, PARTY A	
		r as permitted by law, PARTY A		shall assume the defense and hold	
		ssume the defense and hold		harmless Party B and/or any of its	
		ess Party B and/or any of its		officers, agents or employees from any	
		s, agents or employees from		liability, damages, costs or expenses of	
	•	bility, damages, costs or		any kind whatsoever including attorney's	
	=	ses of any kind whatsoever		fees which may arise by reason of any	
		ng attorney's fees which may		harm to person(s) or property received	
		y reason of any harm to		or suffered by reason of the sole fault or	
		ı(s) or property received or		negligence of PARTY A, its officers,	
		ed by reason of the sole fault or		agents or employees.	
		ence of PARTY A, its officers,	4.	It is the intent of PARTY A and Party B	
	agents	or employees.		that where negligence or responsibility	
				for any harm to person(s) or property is	



4.	It is the intent of PARTY A and Party B
	that where negligence or
	responsibility for any harm to
	person(s) or property is determined
	to have been shared, the principles of
	comparative negligence shall be
	followed, and each party shall bear
	the proportionate cost of any liability,
	damages, costs or expenses
	attributable to that party.

determined to have been shared, the principles of comparative negligence shall be followed, and each party shall bear the proportionate cost of any liability, damages, costs or expenses attributable to that party.

#### II. TERMINATION &NOTICES:

a. This MOU and the relationship created hereby may be terminated by either party at any time for any reason upon thirty (30) day's written notice to the other. Notices are effective upon receipt.

#### III. REVISION & ADDITION

a. If both parties decide that the services need to be revised, then that can be accomplished at any time during the agreement period. This MOU can be revised through amendments in writing signed by authorized representatives of both parties.

IN WITNESS WHEREOF, the parties hereto have executed this MOU as of the day and year first above written.

Party A		Party B	
By: _Signature	Date:	By: _Signature	Date:
Name:		Name:	
(Printed)		(Printed)	