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FUNDY DENTAL COMMUNITY PROJECT - Program Description

Executive Summary

The Fundy Dental Community Project (FDCP) is a program initiated by local dentists to provide basic dental services to motivated, low-income youth and adults to complete a treatment plan aimed at treating their current dental disease. This program was developed to establish a healthy oral condition in qualified patients, and provide them with the education necessary to maintain their improved oral health status.

Patients involved in this program are chosen through an application process which includes an assessment of their current dental condition, financial status and desire to restore their oral health. A complete examination and appropriate radiographs will be taken to develop an individual treatment plan,

Objectives of this project:

1. Facilitate the treatment of basic dental services to motivated, and qualified low-income families who would otherwise not seek preventative dental care due to financial constraints
2. Educate patients about the etiology of dental disease so that a change in habits can facilitate the patients maintaining a healthy dentition for the rest of their lives
3. Increase public awareness on the impact of poor oral health on individual patient's well-being and general overall health

Additional goals of this project:

1. Recognize the dentists involved in this program for the charitable treatment they provide
2. Provide a template program that other like-minded dentists can use to implement in their own community where such a need exists

Limitations of the Fundy Dental Community Program:

- The dental treatment and services in the FDCP program is not free of charge, but rather patients must pay a nominal fee based on a rate per hour, which is different than a traditional fee-for-service model
- Not all persons that cannot afford preventative dental care will be eligible for this program
- All basic dental services are included, however, major dental services and certain treatment options may not be available through FDCP
- Only a limited number of applicants can be processed during a given period of time
- Services provided through FDCP are limited to treatment of the immediate presenting problem and the treatment plan developed and communicated to the patient at the time of enrollment.

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Acceptance into the 'Fundy Dental Community' Program

The Fundy Dental Community project (FDCP) is a program in the Annapolis Valley developed to help patients in need gain control of their dental health. Local dentists will provide basic dental services at a significantly reduced cost to eligible patients that are motivated to change their current oral condition.

Patients are selected based on three criteria (motivation, dental need and financial constraints). A detailed application form must be submitted in full to Fundy Dental Centre. The Federal Low Income Levels are used to confirm true financial need, but patients must also have significant dental disease to be eligible for this program. The three basic criteria to accept patients into FDCP include:

1. **Personal.** A complete application form and personal statement must be submitted with all the necessary detail and supplemental information included
2. **Financial Considerations.** Applicants must submit information from CRA Notice of Assessments NOAs that confirm true financial constraints that prevent regular preventative dental services
Federal Low income levels are used as a cut-off for treatment in FDCP:

o 1 person – \$25,338	o 2 persons – \$31,544
o 3 persons – \$38,780	o 4 persons – \$47,084
o 5 persons – \$53,402	o 6+ persons – \$60,228
3. **Dental Needs.** Applicants must have significant dental disease that has a negative impact on their general health or employment status. For applicants requiring only minimal restorations or presenting with minor dental disease, education will be provided on how to reduce the risk of progression of their dental condition. Significant dental disease to confirm eligibility in FDCP includes any of the following:
 - 8 or more teeth affected (multiple restorations required – anterior or posterior)
 - Multiple extractions necessary (5+ teeth removed, based on gross caries or periodontal disease)
 - Missing or fractured anterior teeth that pose a barrier to employment

Patients that are accepted into the FDCP program will have a treatment plan developed to restore their mouth to a healthy condition. Appointments will be scheduled as in a typical dental practice setting; however, the cost of treatment will be based on a nominal fee per hour of dental service. Patients will be educated on how their dental health became an issue and will be shown how to maintain their healthy mouth for the future.

Patients have one year to complete this treatment and will be dismissed from the program once the presenting problems have been corrected. Subsequent dental treatment is the responsibility of the patient in a general practice setting.

Patient Application Form

Interested patients must complete an application form (see Appendix A) for this program. The application is intentionally comprehensive to establish the patient's desire and motivation to improve their dental health. A \$50 treatment planning fee is to be paid upon delivery of the completed application for it to be reviewed and to schedule the consultation appointment. This is a non-refundable cost for all eligible applicants, which provides the benefit of a comprehensive oral examination by a dentist and all necessary radiographs to develop an appropriate treatment plan.

As part of the application process, prospective patients must agree to each of the program policies and rules, and initial each line to verify such.

The application form will request the following information:

- I. Personal Information, Medical and Dental History Questionnaire
 - Fundy Dental Centre standard health information form
- II. Confidential Financial Information
 - Copies of last two years Notice Of Assessment (NOA) from Canada Revenue Agency (or specific lines disclosed) from the patient and their spouse or common law partner or parent
 - Federal Low Income Cut-Offs are used as a guide for qualifying applicants
- III. Personal Statement Form
 - How has your dental condition negatively affected your life?
 - What are you hoping to achieve by restoring your oral health?
- IV. Personal Reference Form
 - Any adult non-relative can act as a personal reference
 - Personal Reference Template Form to be filled out
 - Details the ways the applicant's oral health has negatively affected their life
 - A description of the applicant's need and desire to be provided, and whether or not the personal reference would recommend the patient for treatment in FDCP
- V. Program Rules & Policies
 - The applicant must agree to all of the program rules and policies by initialing each line
- VI. Treatment Expectations
 - Patients are made aware of the scope of treatment provided under this program

Consultation and Treatment Plan

Prospective patients that are approved through the written application form will be contacted about scheduling an appointment for a dental consultation to review the details of “Fundy Dental Community Project” program. Once the applicant agrees to the FCDP policies and rules, the appropriate radiographs will be taken and a comprehensive examination will be completed by a dentist in the program.

Treatment plans will be sequenced based on the following:

- relief of pain and/or sources of infection
- necessary extractions completed
- hygiene appointment(s) for scaling, prophylaxis and education
- root canal treatment, and minor restorations completed
- acrylic prostheses fabricated
- splint therapy if necessary

Treatment plans will be sequenced according to the above protocol. Individual appointments will be organized by specific service and time required for treatment. The treatment plan will be reviewed and approved by a program leader and a FDCP Patient Assessment Form completed. This will then be used in the patient qualification process to determine the level of patient financial assistance required.

Application approval into the program – the applicant meets all of the assessment criteria (personal, dental need and financial constraints)

Applications reviewed by the Board of Directors – one or more of the assessment criteria are not met, but special circumstances are present, which may allow for approval into the program

FDCP Program Policies

Below are the Rules and Policies of the FDCP Program to which a successful applicant must agree before treatment is rendered.

Applicants. Applicants agree to provide accurate information to the best of their ability (personal, medical, dental and financial data). There are no age limits to apply for treatment in the FDCP Program other than patients must be over 15 yrs old (patients younger than this should have preventative and basic dental care performed at a general dentist office under the current MSI dental program with GSC).

Appointments. The applicant acknowledges that many other patients are waiting for treatment in the limited FDCP appointment times, and as such all scheduled appointments must be respected. It is mandatory for patients to be present for a scheduled appointment in this program - applicants may be dismissed from the program if they do not comply. A courtesy reminder call will be given in advance of the appointment time, but patients are responsible to keep all scheduled appointments even if they cannot be reached by FDCP staff the day before. Rescheduling an appointment is allowed if 48 hours' notice is given.

Patient Payment. Once applicants are qualified and placed into an appropriate category, they will be contacted about the balance they will be responsible for at each appointment. Payment for each appointment is received by FDCP at the time of scheduling, and may not be reimbursed if the patient does not show for their scheduled appointment without appropriate notice.

Treatment Plan. The applicant acknowledges the scope of treatment provided by this FDCP program. Other treatment options may be discussed, even if they cannot be provided under the constraints of this program. Successful applicants have one year to complete the proposed treatment (based on the date of the initial examination and radiographs), otherwise their status in the program will expire and will be reconsidered only upon re-application, under special circumstances (subject to approval by the FDCA Board of Directors).

Treatment restrictions. Dental disease and necessary treatment is an ongoing phenomenon. Subsequent treatment needs related to work completed in FDCP are not eligible once patients have been dismissed from the program.

One-Time Program Acceptance. This program is meant to relieve patients from pain and help them gain control of their dental disease. There is no recall aspect or long term treatment planning with the current scope of the FDCP program. Patients that have successfully completed their treatment with FDCP are encouraged to find a dentist in their area and to have regular preventative dental services in a general practice setting.

Emergencies. The Fundy Dental Walk-in Clinic is run as a separate entity to the FDCP program. Patients that have yet to be formally qualified for the FDCP program are treated in the same manner as the general population in the Emergency Clinic. If a successful applicant has a dental emergency while awaiting their scheduled appointment, they are able to have the single emergency treatment completed under their FDCP eligible category. Qualified applicants cannot use the Walk-in Emergency clinic model to have their FDCP approved treatment plan completed, these appointments have specific scheduled times.

Hygiene. *All applicants must have at least one hygiene appointment.* This includes a discussion to help the patient understand how the patient/applicant found themselves in their current situation. Dental disease is preventative, and the proper education and tools will be provided so patients can reduce their risk of progression of dental disease in the future. Patients acknowledge the above statement, agree to disclose appropriate personal and social factors that have contributed to their current state of dental health, and will actively work to avoid preventable dental disease in the future (ie nutritional changes and improve oral hygiene habits).

Free scaling upon patient dismissal. Before graduating from the program FDCP patients can have a final scaling appointment at no charge with follow-up radiographs and recall exam to confirm they are dismissed from the FDCP in good oral health.

Non-compliance. Patients that do not comply with a basic level of personal oral hygiene may be disqualified from this program. Any inappropriate behaviour or abusive language toward health care providers or staff can disqualify an applicant from this program. Patients will not receive reimbursement of funds if they are disqualified from the FDCP Program (application fee and/or scheduled appointment deposits).

Records. Applicants consent to supplementary photography, filming, x-rays, and additional professional staff observing the procedure as deemed appropriate. Any clinical records taken in this FDCP Program and specific case details may be included in future patient presentations and media content, provided the identity of the patient is not revealed.

Dal Dental Students. FDCP has a partnership with Dalhousie University. Fourth year dental students and graduated dentists in the general practice residency rotate through Fundy Dental throughout the year. Applicants agree that some treatment may be scheduled with Dalhousie dentists on rotation at the clinic.

Questionnaire. Patients are to complete a post-treatment questionnaire upon request.

Scope of Treatment Provided

The Fundy Dental Community program is designed to provide patients with limited income general preventative dental services and basic restorative treatment. Many treatment options (crowns, bridges, cast partial dentures, implants etc...) will not be provided through this program. Other than in special circumstances, the following dental services are provided in FDCP:

Extractions. A major aspect of this program is to relieve patients from sources of pain and infection. Teeth that require removal are included in this program, whether simple uncomplicated extractions or surgical removal of impacted teeth. Our dentists are all general dentists, however, and teeth that require removal by a Oral and Maxillo-Facial Surgeon will not be eligible under this program.

Hygiene and Education. Once sources of pain and potential infection are removed, patients are required to have their teeth cleaned before other fillings are completed. This service is provided, as well as a significant amount of time will be taken to discuss how the patient/applicant found themselves in their current situation. Dental disease is preventable and the proper education and tools will be provided so patients can reduce their risk of progression of this disease in the future.

Minor Restorations. White filling (composite) and metal fillings (amalgam) are provided, as deemed appropriate by the dentist developing the treatment plan with the patient's preferences considered.

Root Canals. This option allows patients to save a tooth that otherwise would have to be extracted. Patients who qualify for this program are eligible to have anterior teeth, bicuspid and first molars retained with this option. A tooth must be restorable without immediate crown fabrication to qualify under this program. Second and third molars are not eligible for RCT in this program.

Direct Posts and Build-ups. Occasionally after root canal treatment a tooth requires a post and large filling to restore its shape and function. Direct posts with composite and amalgam cores will be provided when the tooth has predictable restorability.

Partial Dentures. Many people function well with missing teeth. However, missing front teeth (canine to canine) can often be a barrier to employment. Acrylic partial dentures to replace missing anterior teeth are eligible under the FDCP program.

Complete Dentures. Immediate dentures are an eligible procedure under the FDCP program for patients that have lost all their teeth in a single arch. *New complete dentures are not an eligible procedure.*

Sedation. One reason patients avoid dental treatment is due to anxiety. Sedation options are provided with this program.

Appliances. In special circumstances, custom appliances can be eligible in this program (retainers, night guards, mouth guards).

Fundy Dental Walk-in Emergency Clinic

Fundy Dental Centre is a non-traditional dental practice that functions primarily as a walk-in clinic for dental emergencies. The intention is to provide an option for patients to receive definitive treatment for any true dental emergency the day the problem is acute. A true dental emergency is defined as severe pain, trauma, infection, swelling or bleeding. If a patient arrives at Fundy Dental Centre during our business hours with any of the above complaints, then the option of definitive treatment is guaranteed that day.

This practice provides treatment for those patients that currently do not have a dentist as well as those who are unable to book an appointment with their existing dentist during their emergent odontogenic issue. Fundy Dental Centre has established a mutually beneficial relationship with the other dental offices in the Annapolis Valley. This clinic does not have a recare, or hygiene program, and will not seek to build a patient base, but rather deal with the acute issues as they arise and send clinical notes and radiographs back to the patient's regular dentist for appropriate continuing care.

The Fundy Dental Community program will function as a separate entity within the Fundy Dental Centre building. The emergency clinic will still run as a regular 'fee for service' dental practice providing care for the general population while the FDCP pilot program is in effect. Accepted applicants in FDCP that experience a true dental emergency, however, are able to use the walk-in emergency clinic with the reduced rate according to their appropriate payment category.

Social Assistance Program Details

Currently at Fundy Dental Centre patients that qualify for Income Assistance receive a reduced rate for the patient portion of the dental treatment provided within the scope of the Quick Card program

This is one of the underserved populations the Fundy Dental Centre office is already trying to assist in removing barriers to dental treatment. Those patients that qualify for income assistance and are currently active in the MSI/GSC program have some dental coverage in this program, which is limited to emergency care at 65-70% of the NSDA fee guide. Even with some coverage the patient co-payment is often difficult for these individuals to pay the cost to receive the treatment they require.

Fundy Dental Centre does not provide free treatment for these patients on social assistance; however, a nominal fee is attached to each procedure (\$5 per exam/x-ray, and \$10 per tooth extraction). We believe all three parties (government, FD office, and the patients) have a role to play in relieving these patients of their immediate dental issues

Corporate Sponsorship Program

The cost of providing dental treatment is expensive for numerous reasons (high overhead costs, equipment, supplies, staff etc...). To have a sustainable long term program for motivated, and deserving low income families, additional support will be required from outside resources.

The Corporate Sponsorship aspect of this program will be an important endeavor, but also mutually beneficial to both the program and the sponsor. All sponsors will be acknowledged for their financial donations by having their name included on a plaque that will be displayed in the waiting room of Fundy Dental Centre, and advertising contact information included on the FDCP corporate sponsorship website (www.fundydental.com/corp-sponsors).

All sponsorship dollars contributed to the Fundy Dental Community Program will be treated appropriately and only used in the program as outlined below (Treatment Provided). Monies donated to FDCP cannot be used to profit the dentists involved with the project, or transferred into the general operations of Fundy Dental Centre (associated walk-in emergency clinic).

Below are the general details for this aspect:

- **Registered Charity (Fundy Dental Community Association)** – FDCA is setup as a separate entity from Fundy Dental Centre and will operate as a charitable non-profit organization within the dental clinic building.
- **Funds Received** – all monies received will go into a specific account designated for this program. Money cannot be transferred from this account without it being attached to a specific patient that has qualified for the FDCP program and received their appropriate treatment
- **Auditable Account** – Patient names will not be attached to specific transactions (privacy considerations), however, chart numbers will be included for independent verification
- **Tax Receipts**– all corporate donations are tax deductible and can be used as a business write-off
 - **Individual sponsors – add blurb about charitable status**
- **Treatment Provided** – monies in this account will be used for a few specific aspects of the program, but will not be used to cover general expenses. The specific situations include:
 - Patients with private dental insurance that do not have the ability to cover the balance of treatment themselves. These patients will be required to pay a nominal fee, but the remaining amount will be covered by dollars in the corporate sponsorship account. This balance cannot be written off by the dental company providing treatment as the insurance companies view this act as a form of insurance fraud. This third party payment will be a means to allow patients in this category appropriate treatment (*pending approval*).
 - Lab fees – this program will not generate enough income to cover expenses of the laboratory fees for some partial and complete dentures. The expense for these treatments will come from Corporate Sponsor dollars.
 - Patients with limited ability to cover overhead treatment costs (as described for Category A patients) and delay treatment because of this fee may have funds transferred from this account if there is a significant balance (under special circumstances)

- Private Donor giving money to a specific applicant

Sponsorship Acknowledgement:

A. Donor	≤\$49
B. Friend	\$50 - \$99
C. Patron	\$100 - \$249
D. Silver Sponsor	\$250 - \$499
E. Gold Sponsor	\$500 - \$999
F. Platinum Sponsor	\$1000 - \$4999
G. Long Term Sponsor	≥\$1000+/year
H. Partner	\$5000 +

Fundraising Target

Health care costs are extremely high, and because dental services are not included in our government public health program many people avoid preventative dental care. FDCP will be implemented as a pilot project in 2016, but to become a long term sustainable program fundraising will be an essential component of this endeavor. The primary expense to be covered by the fundraising efforts will be those associated with dental prosthesis laboratory fees (dentures and appliances). If additional funds are raised, above those required to meet the needs of the laboratory costs, then that money will be used to reduce the rate patients will be required to pay in FDCP Patient Eligibility Category A (reduce from \$100/hr to \$80 for example).

Lab Fee:

The projection for the first year of treating patients in the FDCP program is that there will be a need for 20 immediate complete dentures (CDs), and 35 acrylic partial dentures to replace missing anterior teeth – based on processing 300-400 patients in one year. Complete dentures have a laboratory cost of approximately \$1050 ($\1050.00×20 dentures = \$21,000), and acrylic partial dentures can generate a lab fee of \$420 ($\420.00×35 partial dentures = \$14,000).

TARGET FUNDRAISING AMOUNT = \$35,000 to cover the associated laboratory fees

Use of additional funds:

In an ideal world, the qualified patients in this program would only have to pay a nominal fee for each appointment (\$10-\$20) instead of the necessary overhead recovery cost required (\$100/hr).

Dentist Cost: Five Dentist times /week x 4 hours x \$100 / hr = \$2000 / week * 40 weeks / yr

Hygiene Cost: Two Hygiene times / week x 5 hours x \$50 / hr = \$500 / week * 40 weeks / yr

DREAM TARGET = \$100,000 + \$35,000 to provide a significantly reduced rate of dental treatment in the FDCP Program for the motivated, low income patients that qualify

As outlined by the executive direction of the project, all monies donated to the Fundy Dental Community Association will be received into a registered charity account. No funds can be transferred from the FDCP program into the general operations of the Fundy Dental Centre or to profit the dentists involved in the program.

Funds raised above and beyond the Dream Target, or any remaining funds if the pilot project is aborted, will go toward an appropriate local charity designated by the FDCA Board of Directors.

Partners of FDCP

Partnering with FDCP will not hold any specific financial obligations (although contributions will be accepted and received into the Corporate Sponsorship account). Partners will give recognition to the importance of this project and acknowledge the need in the community for the work provided by the dentist involved with this program.

Support for this project will be requested from a number of groups:

- Related dental organizations (AVDS, NSDA, PDBNS, CDA, NSADH, NSDAA)
- Related government organizations (DCS, Local Hospitals, Public Health, MLA)
- Related community organizations (Business development, People Worx, Rotary/Lions Clubs)

Partnership with Dalhousie University Dental School. Faculty at Dalhousie University Dental School were consulted about the Fundy Dental Community Project and were very supportive of this initiative in a private practice setting. In addition to providing support and suggestions to revise the draft version of this program description, it was also agreed that students at Dalhousie would participate in FDCP. In August 2016, General Practice Residency dentists (Graduate Program at Dalhousie) started one week rotations in the emergency clinic at Fundy Dental Centre, the walk-in clinic. Beginning in the 2017-18 school year, fourth year dental students in the Public Health elective will have rotations at Fundy Dental to gain experience in a private practice setting, and also participate in FDCP. The dentists working in the clinic have part-time faculty status with Dalhousie University.

Promotion & Public Awareness

There is a significant need for reduced fee dental services in the general population. Initially this program will seek patients that are already dealing with medical issues exacerbated by their current state of dental health. Contact will be made with local family physicians and Annapolis Valley dentists for their own recommendations of patients that might benefit from this program.

Specific media outlets will be contacted about the nature of the Fundy Dental Community program to see if there is public interest in this story.

No specific advertising dollars are available to promote this initiative at this time.

Pledge of the Dentist Participants

The dentists initiating this project have visions that this will be a long term venture, but due to the novel nature of this endeavor and the high costs involved with providing dental services, the length of time that the Fundy Dental Community program exists, as outlined above, is unclear. These dentists do, however, commit to the following:

- Time commitment – At least 2 days each week will be designated as dentist treatment time at Fundy Dental Centre (15 hrs minimum, 20hrs target), and 1 day each week will be designated as hygiene treatment time at the facility (6 hrs minimum, 10 hrs target)
 - At least 40 weeks each year will have the above designated treatment times for “Fundy Dental Community” patients
- Dentist Responsibilities – all of our qualified dentists agree to the following for our patients:
 - Comprehensive examinations and records taken (digital photos and x-rays)
 - Determine an appropriate treatment plan under the Scope of Treatment established for the FDCP program
 - All treatment options will be discussed with the patient
 - Some options are not available within this program, but patients will be made aware of all options (ineligible benefits can be treated at the patients’ discretion at NSDA fee guide costs, or other dental offices)
 - Provide high quality dental care
 - Educate the patient on the etiology of dental and periodontal disease so the patient can take control of their own dental health in the future



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APPENDIX 1 – FDCP Application Form

Part 1 - PERSONAL INFORMATION

Birth date: _____ Health Card No. _____
 Name: _____ Address: _____
 Town: _____ Prov: _____ Postal Code: _____ email: _____
 Occupation: _____ Employer: _____
 Home Phone: _____ Work Phone: _____
 Parent / Guardian (if under 18) or Next of Kin: _____ Phone: _____
 Marital Status: _____ # of Family Members (adults & dependents): _____
 Family Doctor: _____ Town: _____
 Do you qualify for government assistance with dental care? Yes / No Social Assistance, NIHB, Veteran's Affairs
 Do you have Private Dental Insurance? Yes / No Can we send claims electronically for you? Yes / No
 Please provide details of your insurance plan to our receptionist, and if there is secondary coverage through a spouse

DENTAL HISTORY

What is your major dental complaint? _____
 Do you have a regular dentist? Yes / No Name: _____ Town: _____
 Do you seek regular preventative dental care? Yes / No Last Dental Visit Date: _____
 Have you had issues with dental treatment in the past? please explain _____
 Do visits to the dentist make you nervous? (circle one) Not at all / Somewhat / Moderate / Very / Extremely
 How did you hear about this office? Location / Website / Yellow Pages / Facebook / Twitter / Radio Ads
 Please circle one option Friend / Dentist / Doctor / ER / Social Services / FDC Program / Other

MEDICAL HISTORY

Are you in good health? Yes / No
 Have you had a physical exam in the past 6 months? Yes / No Do you smoke? Yes/ No How long? _____
 Do you drink more than 10 alcoholic beverages per week? Yes / No
 Do you have any allergies? Please list: _____
 Are you taking any medications? Please list or provide a copy: _____

 Are there medical conditions that you are being treated for at this time? _____

Do you have a history of, or present issue with, any of the following? Abnormal Heart Condition Diabetes
 Heart Attack Prolonged Bleeding or Disorder Asthma Breathing Issue Liver/Kidney Disease Cancer / Tumor
 High Blood Pressure Migraines Hives Stroke Psychiatric Treatment Major Injury STD/HIV/AIDS Drug Abuse

Other _____

Are any of the above uncontrolled or require further information? _____

To the best of my knowledge, all preceding answers are true and correct. Please inform your dentist of any change in health or medications. Also, please review our **Privacy and Consent Statement** in the waiting area.

Signed: _____
 Date: _____

<u>Office Only</u>	
HR: _____	Exam: _____
BP: _____	X-ray: _____

Part 2 - FINANCIAL INFORMATION FORM

Please provide the Net Income for the applicant in each of the 2 most recent years, as well as any significant other (spouse, partner, common law), or that of all parents and guardians of any applicant twenty-two (22) yrs of age or younger. This information is shown on the Canada Revenue Agency (CRA) Notice of Assessment (NOA) form – **Please provide one copy of ‘Page 2’ of each NOA form and attach to this application form or provide to the FDCP staff processing the application.**

Please be advised that this information will remain confidential and will only be used by the FDCP staff and Board of Directors to evaluate the financial need of the family. The working sheet below is provided as a template for applicants to determine if they may be eligible for treatment under the FDCP financial restrictions. This page does not have to be submitted with the applications (NOAs alone will suffice).

PATIENT /Parent/Guardian #1

Taxable Income from last year (Line 260) _____

Minus: Total Tax Payable from last year (Line 435) _____

Equals: After Tax Income from last year: _____

Taxable Income from prior year (Line 260) _____

Minus: Total Tax Payable from prior year (Line 435) _____

Equals: After Tax Income from prior year: _____

Parent/Spouse/Guardian #2

Taxable Income from last year (Line 260) _____

Minus: Total Tax Payable from last year (Line 435) _____

Equals: After Tax Income from last year: _____

Taxable Income from prior year (Line 260) _____

Minus: Total Tax Payable from prior year (Line 435) _____

Equals: After Tax Income from prior year: _____

Parent/Guardian/Significant Other #3

Taxable Income from last year (Line 260) _____

Minus: Total Tax Payable from last year (Line 435) _____

Equals: After Tax Income from last year: _____

Taxable Income from prior year (Line 260) _____

Minus: Total Tax Payable from prior year (Line 435) _____

Equals: After Tax Income from prior year: _____

Part 4 - Personal Reference Form

We require a personal reference from someone who knows the applicant well. Any adult non-relative can act as a personal reference. This might be a colleague, co-worker, community or religious leader. A relative/guardian of the applicant cannot provide a personal reference.

Please give a copy of this page and the next to the person providing the personal reference. It provides a brief outline of the “Fundy Dental Community Project” and the expectations of the personal reference.

“Fundy Dental Community Project” (FDCP) is a pilot program initiated by local dentists to provide basic dental services to motivated, low-income youth and adults on a one-time basis to treat their dental disease. This program has been developed to establish a healthy oral condition in qualified patients, who would otherwise not receive treatment, and provide them with the education necessary to maintain their improved oral health status. Dental treatment is provided by participating dentists who have offered to donate their services to this worthwhile program. We are asking for your input to help us determine if the applicant has the appropriate desire and eligibility for this program.

Your personal information should include the following (or complete the subsequent page attached):

1. Name of the applicant
2. Your name
3. Your position/occupation
4. Your address
5. Your phone number
6. Your e-mail address
7. Your relationship to the applicant
8. How long you have known the applicant
9. The way(s) you think the applicant is affected by his/her teeth and smile
10. Your description of the applicant’s desire
11. Whether you would recommend the applicant for treatment through FDCP

Please limit the personal reference to one page. You should sign the personal reference, seal it in an envelope, sign it again over the seal of the envelope and return it to the applicant for submission to the program.

Thank you for your help with this application. If you have any questions about the program or the personal reference, please visit www.fundydental.com/community or contact us by e-mail at: fundycommunity@bellaliant.com

Part 4 - Personal Reference Form

Applicant Name: _____
 Reference Name: _____
 Address: _____
 Town: _____ Prov: _____ Postal Code: _____
 email: _____ Home/ Cell Phone: _____ Work Phone: _____
 Occupation: _____ Employer: _____
 Relationship to the Applicant: _____
 How Long Have you know the applicant? _____ yrs

What ways do you think the applicant has been affected by his/her teeth (dental health)?

Please provide a description of the applicant's nature or desire to improve their oral health:

Do you recommend the applicant for treatment in this program at this time? YES / NO (please circle)

Signed: _____ Date: _____

Please seal this reference in an envelope, sign it again over the seal of the envelope and return it to the applicant for submission to the program.

Thank you for your help with this application. If you have any questions about the program or the personal reference, please visit www.fundydental.com/Community or contact us by e-mail at: FundyCommunity@bellaliant.com

APPENDIX 2 – Patient Assessment Form

Fundy Dental Community Assessment Form

FDCP Committee Member			
Applicant Name			
Date of Birth		Chart Number	
Address / Town			
Insurance Status			

Combined Family Income	
Number of Dependents	
Federal LICO level	

Applicant's Statement (score 1-10)	How well does the applicant's statement demonstrate a desire to receive treatment?	
Reference's Statement (score 1-10)	How well does the reference's statement the applicant is worthy for treatment through FDCP?	
Dental Examination (score 1-10)	To what degree is the applicant's dentition socially/economically handicapping?	

Treatment Plan Overview:

Comments:	Special Circumstance for Deficient Applications:

Accepted for Treatment Y / N	Reviewed by Board of Directors Y / N	B/D Accepted Y / N
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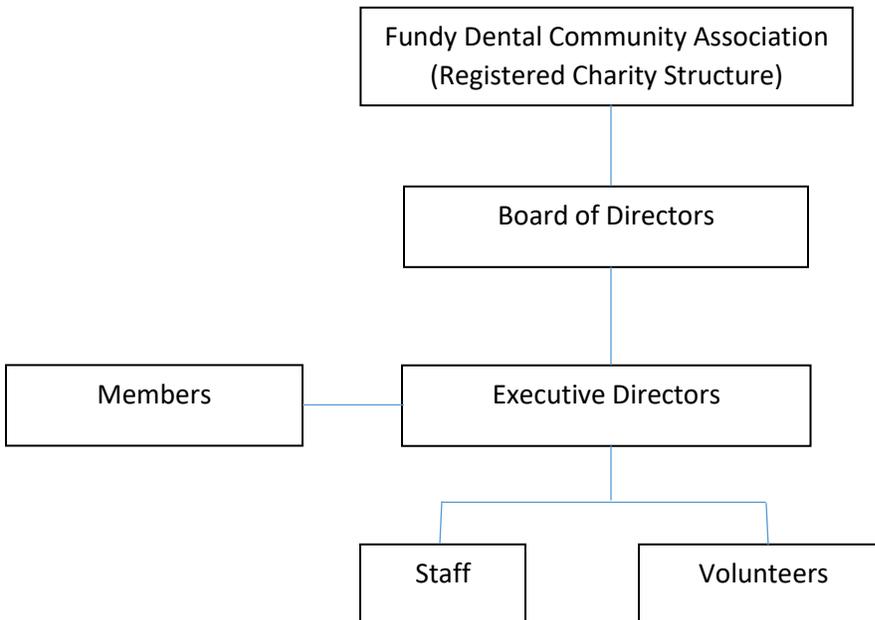
Patient Category Assigned: _____ Date: _____

Signed Committee Member _____ FDCP Program Leader: _____

APPENDIX 3 – Federal Low Income Cut Offs (Updated each Calendar Year)

		Canada (map)		
		Low income cut-offs after tax, 1992 base ²		
Community size ⁴	Family size	2014	2015	2016
		Current dollars		
Rural areas	1 person	13,188	13,335	13,525
	2 persons	16,051	16,230	16,461
	3 persons	19,987	20,211	20,498
	4 persons	24,934	25,213	25,571
	5 persons	28,394	28,711	29,119
	6 persons	31,489	31,841	32,294
	7 persons or more	34,585	34,972	35,469
Population 100,000 to 499,999	1 person	17,050	17,240	17,485
	2 persons	20,750	20,982	21,281
	3 persons	25,839	26,128	26,499
	4 persons	32,236	32,596	33,060
	5 persons	36,707	37,118	37,646
	6 persons	40,709	41,165	41,750
	7 persons or more	44,711	45,211	45,854
Population 500,000 and over	1 person	20,160	20,386	20,675
	2 persons	24,536	24,811	25,163
	3 persons	30,553	30,895	31,334
	4 persons	38,117	38,544	39,092
	5 persons	43,404	43,890	44,514
	6 persons	48,136	48,675	49,367
	7 persons or more	52,869	53,460	54,220

APPENDIX 4 – FDCA Structure



Board of Directors: composed of at least three dentists, one staff at Fundy Dental Centre and three community members.

Executive Directors: President, Vice-President, Treasurer, Corporate Secretary. The executive directors all sit on the Board of Directors

Members: Fundy Study Club (registered study club with the Provincial Dental Board of Nova Scotia), which currently consists of seven dentist members, as well as those invited into the society

Staff: One full time staff (dental assistant) will be employed for the Fundy Dental Community Program

Volunteers: Staff of local dental offices and community members who may be involved in the semi-annual Annapolis Valley Dental Society 'Cares' initiatives

APPENDIX 5 – FDCP Program Flow Chart

