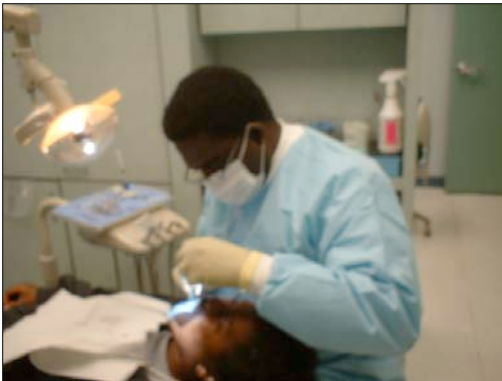


# Fort Washington Dental Clinic

Project Renewal, Inc.



*Providing Free Quality Preventive,  
Ongoing and Emergency Oral Health  
Care for the Homeless*



**Dr. Hamad Skinner, D.D.S.**

**Dentist at the Fort Washington Dental Clinic, Project Renewal  
Assistant Professor of Clinical Dentistry, Columbia University**

The logo graphic consists of a vertical black line intersecting a horizontal black line. To the left of the vertical line, there are three overlapping squares: a yellow one at the top, a red one in the middle, and a blue one at the bottom. The text 'Project Renewal, Inc.' is positioned to the right of the vertical line, in a bold blue font.

# Project Renewal, Inc.

Since 1967, Project Renewal, Inc. has been committed to renewing the lives of the chronically homeless living in New York City. We are the only organization to provide *all* the tools homeless need to get off the streets and live independently in the community, including:

- **Mobile Medical & Psychiatric Service**
- **5 NY-State Licensed Primary Care Clinics**
- **Model Residential Programs**
- **Education & Employment Services**
- **Permanent Housing**



# Health Care at Project Renewal

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- Health care is at the core of Project Renewal's progression of services. Our medical department provides integrated psychiatric and primary care for homeless men and women living in shelters or on the streets.
- Recovering health, including oral health, is the first step in the process of rehabilitation.



# Oral Health in the Homeless:

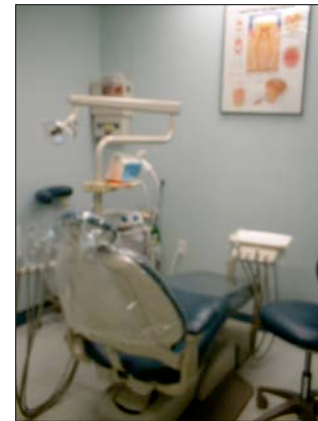
## *An Urgent Need for Accessible Oral Health Care*

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- The homeless are **12 times** more likely to present with serious dental problems than the general population.
- Of 300 patients surveyed at Project Renewal, **none** reported regular preventive oral health care.
- Our patients suffer from drug abuse, mental illness, transience, wariness of institutions, and lack of insurance.
- Many are diabetic or suffer other chronic physical illness. Others are living with AIDS.
- Many of our patients are edentulous. Edentulism seriously hinders daily living – smiling, eating, talking, nutrition, and general sociability are compromised.

# Launching a National Model for Accessible Oral Health Care for the Homeless

- **Recruitment and hiring of our dentist proceeded only after client input from the Patient Advisory Board.**
- **In July 2003, Project Renewal opened the doors to the first free-standing dental clinic to offer a full range of preventive, ongoing, and emergency oral health care services for homeless and Indigent New Yorkers, regardless of insurance status or ability to pay.**
- **The dental clinic is integrated with the primary care clinic at Fort Washington.**
- **We operate the clinic in partnership with the Columbia University School of Dental and Oral Surgery.**



# Service Provision & Capacity

1,000 patients served over 4,000 visits annually

## ***Our dentist provides:***

- Diagnostic services
- Restorative dentistry
- Removable and fixed prosthodontics
- Endodontic care
- Minor oral surgery
- Oral Cancer Screening

## ***Our hygienist provides:***

- Oral hygiene care
- Personalized instruction in oral hygiene self-care
  - Prophylaxis
- Root plane & scale with anesthesia
- Diagnosis of periodontal conditions

# Our Facilities



# Our Facilities





# Retaining Patients for Comprehensive Care

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- The chronically homeless patients we serve are often suffering from substance abuse, mental illness, transience, and unemployment. They can be difficult to retain for completion of comprehensive dental care and treatment plans.
- Some only receive episodic care, often due to incarceration or psychiatric hospitalization.
- A treatment plan is created for each patient during his or her initial visit.



# Completed Treatment Plans

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- In 2005, **96%** of patients with comprehensive oral exams completed a treatment plan within 12 months.
- In 2006, that number rose to **100%**, exceeding our HRSA target of 60% two years in a row.



# Retaining Patients for Comprehensive Treatment

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- As of August 2006, **93%** of appointments made with our hygienist to treat periodontal disease were kept.
- **92%** of appointments made with Dr. Skinner for endodontic care were kept.
- **80%** of total appointed patients showed up.
- In 2005, we saw over **1,900** patients



# Ensuring Access and Completion of Treatment

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*How do we obtain strong statistics about return visits for a marginalized population facing multiple barriers to access and care?*

- **Integration** of dental and primary care
- **Training** all primary care staff at our 5 primary care sites, including mobile sites, to make dental referrals
- **Dental outreach**
- **Referral partnerships**
- **Incentives**, incl. Metrocards, toothbrushes, toothpaste, tongue cleaners, sugar-free lollipops, etc.
- **FREE TRANSPORTATION** via our dental shuttle to the clinic, significantly increasing patient population and follow-up appointments

# Ensuring Access and Completion of Treatment

*How do we obtain strong statistics about return visits for a marginalized population facing multiple barriers to access and care?*



- Comprehensive care for all, **regardless** of ability to pay
- **Experienced, sensitive, competent** staff, both in our primary care locations and at the dental clinic.
- According to a March 2006 **Patient Satisfaction Survey**,
  - **100%** of respondents said the dental staff are polite and helpful
  - **87%** ranked Quality of Care **5 out of 5**



# Edentulism

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Many homeless patients are edentulous.

Edentulism affects all aspects of daily life.

Effects are worsened by life on the street.

- Appearance
- Ability to smile
- Mastication (→ poor nutrition)
- Pain
- General sociability



# Edentulism

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# Treating Edentulism in a Homeless Population

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- Years of edentulism leads to a resorbed alveolar ridge. Homeless patients have been chewing on their gums for so long that the fabrication of dentures becomes very difficult.
- For now, we have a protocol to send patients who need surgical implants to the Oral Surgery Department of Harlem Hospital (an affiliate of Columbia).
- It is our goal to begin to eradicate edentulism in this population by hiring specialist to work with our dentist to place and restore implant prostheses on-site.



# Administration & Staffing

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- Health Services Administrator
- Director of Primary Care
- Dentist
- Dental Hygienist
- Dental Assistant
- Medicaid Entitlements Personell
- Clerical Staff
- Evaluation Supervisor
- Dental Program Evaluator
- Information Systems Manager



# Quality Assurance at Fort Washington Dental Clinic

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- Chart reviews for Quality Assurance Reports
- Quarterly Quality Assurance Committee meeting
- Patient Satisfaction Surveys
- Project Renewal's Patient Advisory Board
- Close partnership with **Columbia University School of Dental and Oral Surgery**, which provides clinical supervision and serves as specialty referral backup



# Sources of Funding

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- HRSA provides \$162,000
- The William Randolph Hearst Foundation provides \$100,000
- Some Medicaid reimbursements



# Resolving Disparities in Oral Health Among Homeless and Indigent Populations

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## **KEY FACTORS IN FORT WASHINGTON'S SUCCESS:**

- Outreach
- State-of-the-art facilities
- Integration with primary care
- Sensitivity to population's needs
- Transportation
- Incentives
- Organizational partnerships
- Awareness of mental illness, substance abuse, and hardships faced by street & sheltered homeless
- Treatment for patients with AIDS
- The successful restoration of our edentulous patients



# Conclusions

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For homeless men and women, oral health care is necessary to baseline physical health.

Essential functions like eating, smiling, and sociability are hindered by untreated oral conditions and must be addressed as part of any rehabilitation.

Cultural sensitivity and awareness of the unique barriers this population faces are critical to a successful services delivery model like the Fort Washington Dental Clinic.