

Journal

OF THE COLORADO DENTISTS

Give Kids a Smile Day To Do's

- Register online
- Mark GKAS on schedule
- Staff meeting to discuss
- Make a plan to recruit patients
- Contact schools to visit
- Assign a staff member to oversee
- See pg. 8 in this issue



Your Guide to Giving Kids A Smile

For the past 10 years, Give Kids a Smile Day (GKAS) has had a strong presence in Colorado. On a united front, Colorado dental professionals have donated millions of dollars in dental treatment to kids who are in need of dental attention but without means to afford care.

2013 will mark the 11th year of this nationwide charitable American Dental Association GKAS program – a day of free treatment and education for deserving children. Observing so many years of success by local dental offices, the **CDA is making some changes to GKAS starting in 2013.**

- In an effort to empower offices to embrace GKAS more on their own, the CDA is encouraging dental offices to organize their GKAS event from start to finish. The CDA will *not* be recruiting patients for individual dental offices participating in GKAS. Rather we welcome you to reach out to your community to find deserving patients for GKAS (churches, schools, community centers, etc. are great places to look). Starting in 2013, patient recruiting will be the responsibility of the individual GKAS dental offices. This is a great way to establish relationships with your community leaders.
- All this said, the CDA is still happy to post your GKAS program on the CDA Website, upon request, to help you with your GKAS promotional efforts. If you would like your event posted online, please contact Nikki Williams at nikki@

cdaonline.org with the following information: dentist's name, office address, phone number for appointments and bilingual capability. When your GKAS schedule is full, contact the CDA and your event will be removed from the site.

- Lastly, there will not be any reporting requirements by the CDA in 2013. The ADA has a reporting function on their Website that we encourage you to use, however, you will not be required to complete superbills or school reporting forms for the CDA.

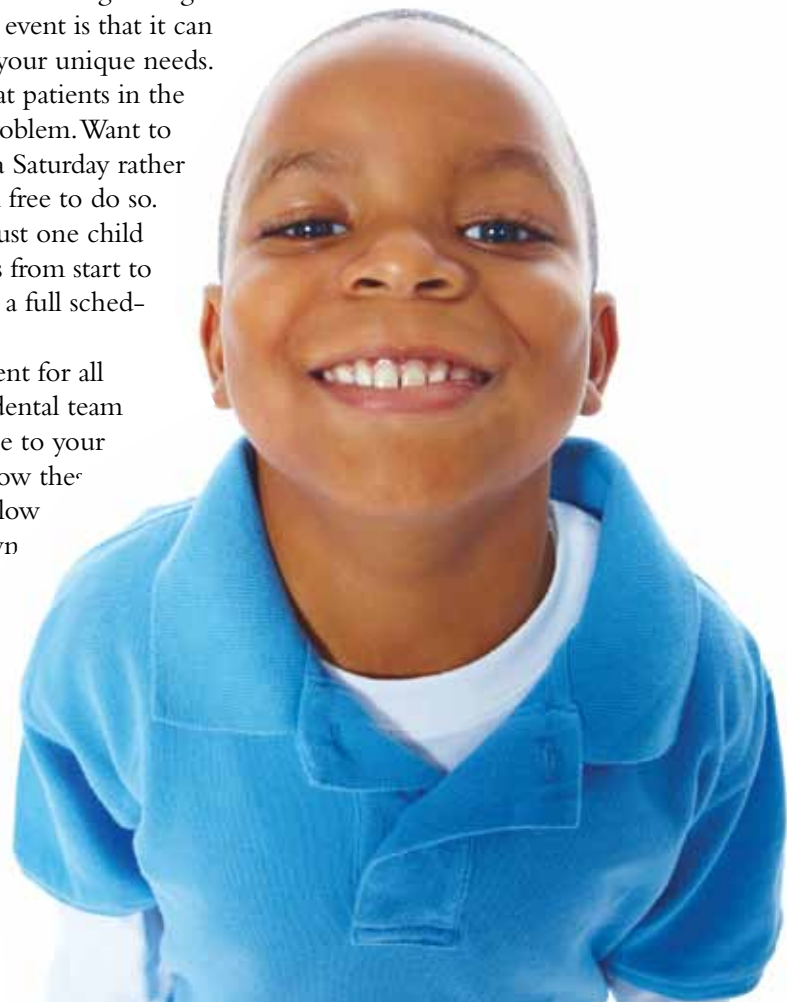
Planning a GKAS program is easy and the best part about organizing your own GKAS event is that it can be tailored to fit your unique needs. Only want to treat patients in the morning? No problem. Want to treat patients on a Saturday rather than Feb. 1? Feel free to do so. Hoping to treat just one child with severe needs from start to finish rather than a full schedule? Great idea!

GKAS is an event for all members of the dental team and a great service to your community. Follow the planning steps below to create your own successful GKAS program:

**October/
November:**

Save the date and add it to your patient

schedule: Feb. 1, 2013 – Give Kids a Smile Day. Regardless of your activity, whether in the office or off site, marking down the date not only serves as a reminder, but also tells your staff not to schedule the normal patient load that day. Next, think about the type of GKAS activity you'd like to participate in: treating patients in your office, treating patients offsite at a nearby clinic, going to schools to give presentations, etc. Consider all your options and select activities that best suit you and your dental practice. If your activity involves more than just your partici-



pation, organize a staff meeting, and discuss ideas and goals for the event:

- How will we schedule patients that day?
- How many patients should we schedule?
- Will the patients be pre-identified or will we have a first-come, first-served event?
- What hours am I/are we available that day?
- Where should we recruit deserving patients? Who can contact Boys and Girls Clubs, and other organizations with access to low-income families who could benefit from our event?
- Do we have bilingual capability in the office or do we know someone who could help if need be?
- What schools or community centers are nearby that would be interested in an oral health presentation?

Of course, **don't forget to register for GKAS at www.ada.org/givekidsasmile**. The ADA's GKAS online registration process takes about 10 minutes.

December:

Now that you're registered, it's time to start solidifying your plans.

- If you are treating patients in your private office, begin contacting Boys and Girls Clubs, United Way, Head Start programs, school nurses and/or church organizations to recruit patients. These programs will be able to locate children without insurance from low-income families who could use your generous services. Explain to your contact how many children you're able to treat and the details of your event. Make sure that they know that GKAS is a Friday event, so they can work with their families regarding transporta-

tion, etc. December is also a good time to think about the option of providing patient goody bags, waiting room entertainment/activity sheets/toys, etc.

- If you are visiting schools or community centers to give educational presentations, start contacting teachers and program coordinators to offer your services and to set-up a class/group presentation. It is important to contact schools before the end of the year (winter break) so teachers can include you in their 2013 lesson plans. The CDA has many education resources online including lesson plans and activity sheets at www.cdaonline.org/gkas.
- If you're treating patients at the CU School of Dental Medicine, make sure that the CDA is aware of your interest to volunteer at the school. The CDA will make the arrangements for you and will contact you in January with further details.

January:

One-month countdown! Now is the time to secure all of your plans for patients and presentations. If you're seeing patients in your office, schedule your patients at this time and don't forget to obtain a good contact number to confirm their appointments at least once. Events of this nature unfortunately produce a

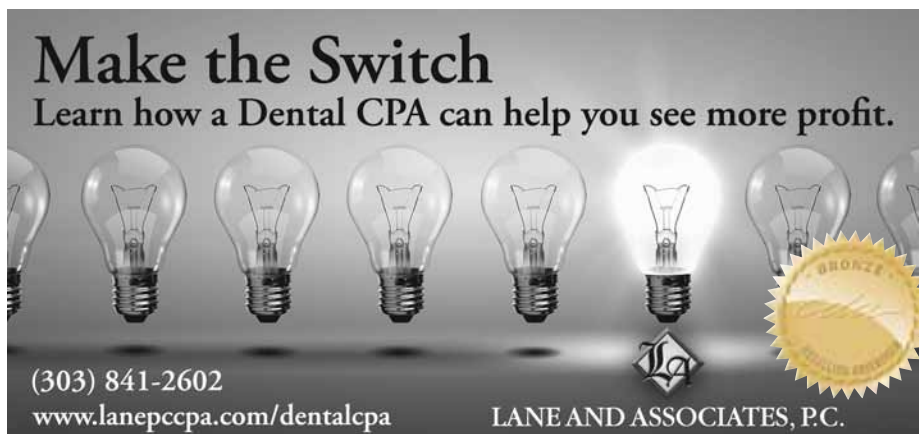
If you would like to treat patients at the CU School of Dental Medicine for GKAS on Friday, Feb. 1, please contact Molly Pereira at molly@cdaonline.org or 303-996-2844. We will provide patients to treat, instruments to use and a third year dental student to assist you.

"no-show" factor due to transportation issues, time away from jobs and other unanticipated issues. For this reason, consider booking a few extra patients or even double-booking patients for your event. While this could result in a very busy day, it will more likely result in a day of great success, and fulfilled patients and dental staff members.

February:

Give Kids a Smile Day is on Feb. 1. Approach your day with a little added flexibility. This is a unique program that provides a great deal of good for the families it is able to serve.

By following this timeline, you'll find it easy to plan a successful GKAS event. More importantly, you'll be giving Colorado kids something to smile about. 🍷



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How Other Colorado Dental Offices Recruit Patients for GKAS:

I visit our school district's Website, where it lists contact information for the district's schools (ours includes e-mail addresses, which makes communication easy). I look for the contact information for the school or health office, and send an e-mail to every school nurse, daycare and pre-school in the area. The nurses do all the hard work by sending an e-mail blast to their students' families. Believe it or not, the middle schoolers are the ones who have responded to the e-mail first. My next step is to contact the WIC Program, Department of Human Services, and child support enforcement offices to give them information to pass on to families that could benefit from this event. Lastly, I reach out to battered women and homeless shelters. We have found that most of our patients come from the schools or the WIC office.

*-Brenda McNulty, office manager
Dr. Layne Benzley, Castle Rock,
Colo.*

Our goal for GKAS is to find the highest need children in our area who could benefit from treatment. Our challenge was to find a way to qualify kids using existing resources in our community to avoid families taking advantage of a charitable program. We reach out to social workers, Head Start programs, school nurses, teachers, pediatric physician offices, family resource programs, etc. These professionals know the kids and families best, and can help us determine the level of need.

Step One: The first week of January, I send out a letter and our referral forms to the agencies/parties mentioned above. I offer a follow-up phone call to any new referring sources.

Step Two: I sift through the referrals and call parents to make appointments for their children. I stress that this is a one-time opportunity to make sure the parents understand the importance of keeping their appointment.

Step Three: I schedule both doctor teams in the morning with patients that we are fairly sure need restorative treatment. I schedule the hygienists with as many 40-minute time blocks as we can fit. Later in the day, we filter kids over to treatment from hygiene, as needed. Last year, we saw kids from 8 a.m. to 1 p.m. and then had a team pizza party.

Step Four: On GKAS, we set up our waiting room to be more kid friendly. We create tables with activities, parent handouts, etc. Our basic approach is to get as much care and education to each child as possible.

Follow up: If we have a child with additional restorative needs than we can meet that day, we either refer them to KIND or we offer to do the work ourselves at no charge. We pick and choose these patients and families carefully. We make sure to communicate that if they fail to show at an appointment, they will not be given another one. We have very low failure rates for these appointments.

*-Amber Wissing, financial and marketing administrator
Dr. Jay Heim and Dr. Corey Johnson, Glenwood Springs, Colo.*



We have been involved with GKAS since it was established. The turning point for us that made our program really successful was contacting a social worker at a local middle school. She embraced the program and facilitated bringing deserving students to our office in a school bus. This relationship has made for a very productive and satisfying GKAS over the years. It's easy to fill your schedule when you network with neighborhood schools!

-Dr. Damien Mulvany and Dr. Mark Novelen, Englewood, Colo.

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GKAS gives you the advantage of treating patients in your own office. Working in a familiar environment with your own staff is convenient, less stressful, and more efficient, and you can schedule patients at your pace. Our office treats GKAS patients throughout the month of February, rather than on just one day. We call local pediatricians to find GKAS patients. They are a great source to find deserving families and it promotes goodwill with our medical colleagues. GKAS patients are seen initially so we can establish a treatment plan and assess their ability to cooperate for treatment. Then we are able to efficiently schedule the care and make a real impact. Seeing them multiple times allows us to establish a relationship and really enforce the message of home care and prevention.

-Dr. Nelle Barr, Dr. Betty Barr and Dr. Sean Whalen, Westminster, Colo.

A couple of years ago, I started calling all of the elementary schools in our area that we thought would most benefit from GKAS. The school receptionist would always suggest that I talk with the school nurse. I now have an established relationship with one nurse who is always my first contact in mid-December. I let her know the date of GKAS and the number of kids we can treat for the day. She knows the kids and families who need help, and refers them to our office for appointments.

*-Peggy Jolly, business manager
Dr. Geoffrey Engelhardt, Fort Collins, Colo.*

We block GKAS day for our docs way ahead of time and have an extra hygienist in the schedule for nothing but GKAS patients. We then contact a local school district nurse and let her know how many appointment spaces are available. About three weeks out, I look at the schedule and if there are still several openings, I contact schools in the area and tell them about GKAS. I ask them to consider offering this opportunity to kids who they know are underprivileged. The schedule usually fills up pretty quickly after that. We also allow our staff to contact families in their communities that have kids who would qualify.

-Cindy Martin, office manager; Dr. Bob Murphy, Dr. Julie Brown, Dr. Paul Sica and Dr. David Welden, Boulder, Colo.