

**RDC Mobile Dental Clinic
Memorandum of Understanding**

A Memorandum Of Understanding (MOU) between:

Provider Name: RDC Mobile Dental Clinic

and _____, **Superintendent**

of _____, **School/School District**

The purpose of this MOU is to define and outline the responsibilities of

The RDC Mobile Dental Clinic and _____
(Health Care Provider) (School District/Organization)

to provide dental health services at the school site & school district listed above.

The school/organization agrees to provide the following support to the project staff at this site:

FACILITIES: Space for dental services that will include room for:

- *Chairs & dental unit
- *Access to water/sink & toilet facilities
- *Sterilization set-up

EQUIPMENT & SUPPLIES:

- *At least one telephone for contacting the dental personnel

PROGRAMMATIC COMPONENTS: Assistance with:

- *Obtaining parental consent forms
- *Accommodating parental presence (if requested) during dental procedures
- *Assist in distribution of communication materials relating to the school-based dental program

The RDC Mobile Dental Clinic will provide the following:

THROUGH ON-SITE SERVICES: (for enrolled students only – with parental consent)

- *Primary & preventive dental health services for children according to Dental Health Guidelines
- *Referral and follow-up for needed dental care

SIGNATURES:

Chief Health Care Officer

Date: _____

Superintendent of School District/ School Principal

Date: _____