



Continuity of Dental Care: Comparing Community Outreach Program Referrals to Direct Service Clinic

Gavin To, DDS, Esther Levine Pincus, DMD
New York University Department of Pediatric Dentistry

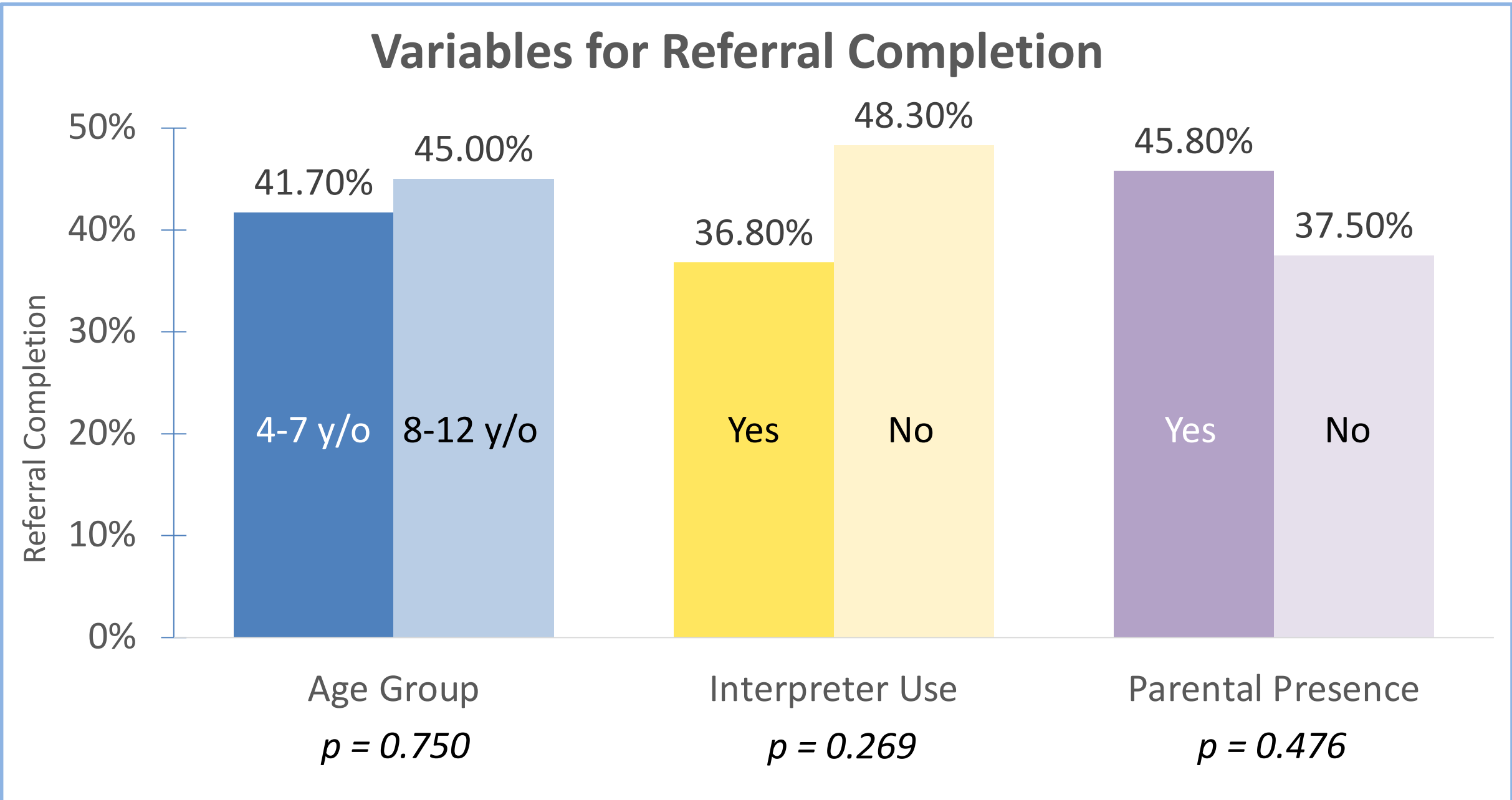
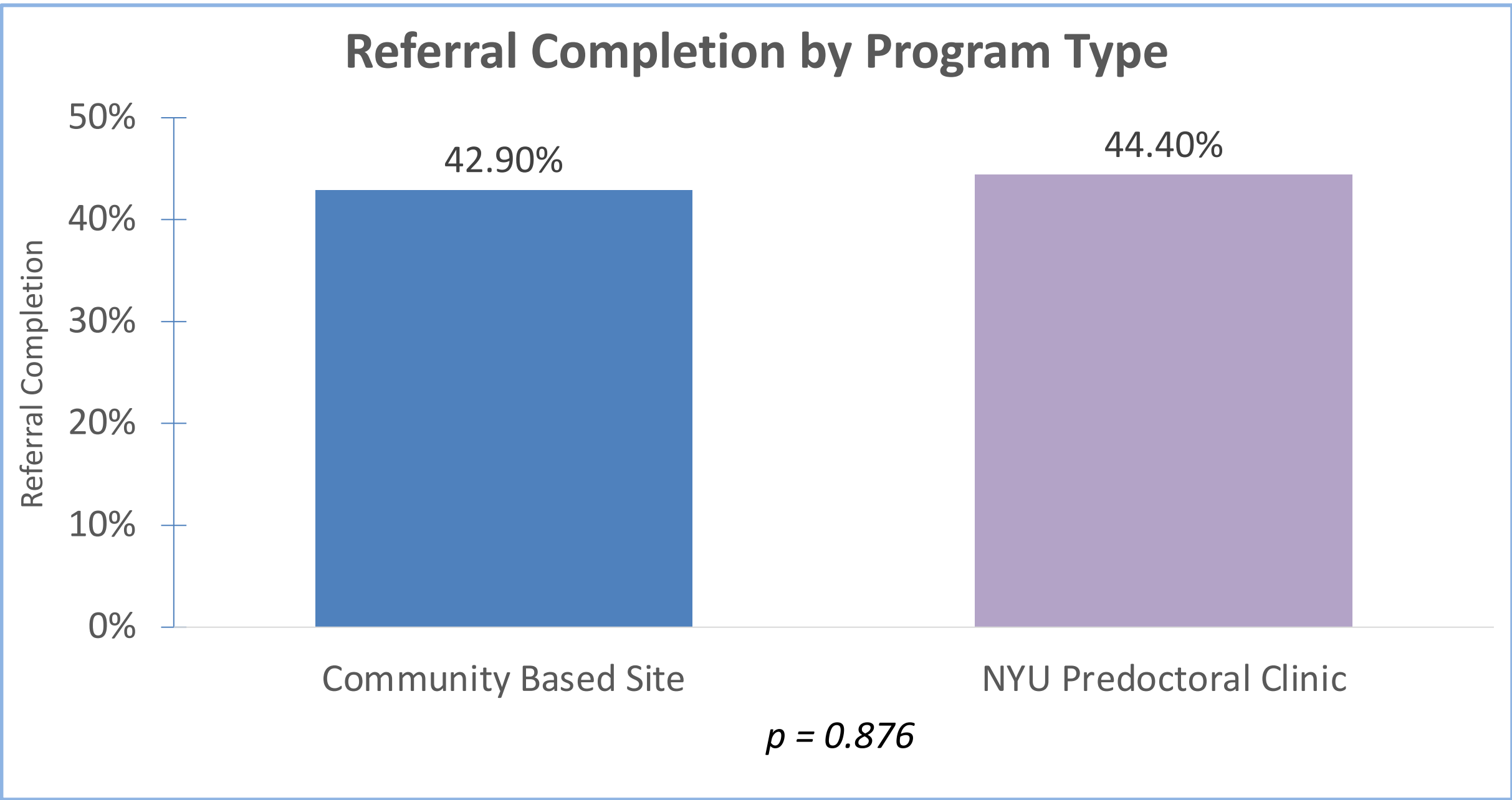
Introduction/Background

Access to dental care remains a critical issue for underserved populations. Community based dental programs, such as NYU's "Bringing Smiles Comprehensive Care," deliver oral healthcare directly in NYC public elementary schools using portable equipment. As needed, cases may be referred to a traditional clinical setting. The purpose of this retrospective chart review is to compare referral processes to NYU's postdoctoral pediatric dental clinic from two different clinics: (1) the community based "Bringing Smiles Comprehensive Care" program and (2) the NYU predoctoral pediatric dental clinic, identifying ways to enhance referral efficiency and children's access to necessary dental treatment.

Methods

Two age-matched pediatric cohorts records were analyzed, using patient charts from September 1, 2022, to June 30, 2024. One cohort included patients referred from the community based site, "Bringing Smiles Comprehensive Care," to NYU's postdoctoral pediatric clinic, and the other included patients referred internally from NYU's predoctoral to postdoctoral pediatric clinic. Records were reviewed to assess referral completion rates within three months and to collect data on parental presence and interpreter use at initial exams. Chi-square tests evaluated associations between these variables and treatment attendance.

Table 1: Referral Completion (Community based site vs. Direct Services Clinic)			
Program Type	Completion (No)	Completion (Yes)	Total
Community based site	57.1% (24)	42.9% (18)	43.8% (42)
NYU predoctoral clinic	55.6% (30)	44.4% (24)	56.3% (54)
Total	56.3% (54)	43.8% (42)	100% (96)
Chi-Square	$X^2 = 0.024$	$p = 0.876$	



Results

A total of 96 pediatric patient records were analyzed: 56.3% referred from the predoctoral clinic and 43.8% from the community based site. Overall, 43.8% completed the referral by attending a treatment appointment within three months. Completion was slightly higher from the predoctoral clinic (44.4%) than the community site (42.9%), but not statistically significant. Age grouping showed no significant differences. Interpreter use was documented in 39.6% of visits; those without interpreters had higher completion rates, though not significant. Parental presence was noted in 75% of cases and was associated with higher completion, but again, not statistically significant. Overall, no variables showed a significant association with referral completion.

Conclusions

This retrospective chart review found no significant difference in referral completion rates between pediatric patients referred from the community based "Bringing Smiles Comprehensive Care" site and those from the NYU predoctoral clinic. Age, interpreter use, and parental presence were also not significantly associated with referral completion within three months. Despite these findings, the modest completion rate underscores ongoing challenges in care continuity for underserved children. Future efforts should explore additional barriers—such as socioeconomic factors, transportation, and caregiver education—to improve access to comprehensive dental care.