

## Private mobile dental services and the Child Dental Benefits Schedule

### Position Summary

ADA NSW does not support private mobile dental services providing dental treatment to children in a school setting.

ADA NSW does not consider that private mobile dental vans are a best practice model for providing dental services to children under the Child Dental Benefits Schedule (CDBS).

ADA NSW advises all parents to seek the services of their private local dentist or their public NSW Government Local Health District clinic for dental treatment.

Parents, guardians or carers should always be present at children's dental appointments, to give informed consent to planned dental care and to ensure they understand any treatment costs. This also ensures the best use of the child's entitlements under the CDBS.

ADA NSW urges school principals to recommend that parents make use of the CDBS through their local private dentist or public dental health clinic.

ADA NSW strongly believes that children receive the best care through regular attendance at a trusted local dental clinic, which adheres to strict infection control guidelines and has dental practitioners available for ongoing prevention, treatment and follow-up care.

ADA NSW does not endorse, or provide accreditation for, any private companies providing mobile dental treatment to children.

### Background

1. Dental treatment provided by mobile dental vans is not "free".
2. Treatment is provided under the Child Dental Benefits Schedule (CDBS), a Commonwealth Government scheme providing up to \$1,000 of Medicare-funded dental care to eligible children aged 2 to 17 years.
3. The CDBS is means tested and available to children whose families receive Family Tax Benefit A, or certain other government payments.
4. The CDBS provides capped funding for essential diagnostic, preventive and restorative dental care for many Australian children who might not otherwise be able to access care.
5. Eligibility is determined solely by Medicare, not by the dentist.
6. The \$1,000 CDBS entitlement is available for certain procedures over two consecutive calendar years.
7. Once a child's CDBS entitlement is claimed for services provided by a mobile dental van, it may mean that further care cannot be provided by other dentists when required, without additional costs to the family.

8. ADA NSW promotes the CDBS as a significant opportunity to improve the oral health of many under-served Australian children, and for the dental profession to contribute to this goal.
9. Every registered dentist/dental specialist with a Medicare Provider number, can choose to provide treatment under the CDBS.
10. One mobile dental van company has been found guilty of the unlicensed x-raying of thousands of children to whom they were offering dental services.

**Parents, legal guardians or legally-entitled carers should:**

1. Seek the services of a local private dentist or their public NSW Government Local Health District clinic for dental treatment.
2. **Always be present at children's dental appointments**, to ensure as far as possible that the treatment the child receives is both relevant and necessary, and that **only services actually provided** are being claimed from Medicare. This is important to ensure that the best use of the child's entitlement under the CDBS.
3. Be present at children's dental appointments to ensure informed consent to treatment is given and that treatment costs are understood (informed financial consent).
4. Ensure that informed consent to treatment, and informed financial consent, are both provided on the actual day of treatment, on the prescribed form and once treatment has been discussed and agreed upon.
5. Be aware of who is intending to provide the dental services to the child (dentist or dental practitioner) and, preferably, their name.
6. Ensure that the person who provided the care is available should follow-up or emergency care be required.
7. Ensure that children are comprehensively examined by a registered dentist/dental practitioner **before any x-rays are taken**. X-rays are not routinely taken as part of a dental appointment. X-rays should only be carried out by staff who are licensed to operate x-ray equipment, and only when recommended by a dentist/dental practitioner to assist clinical diagnosis.
8. Be satisfied that appropriate infection control measures are followed. Dental care should be provided in a clean, dirt-free environment, along with appropriate disposal of sharps and other contaminated items, and adequate sterilisation of reusable instruments. If concerned, seek assurance from the registered dental practitioner in attendance that all appropriate national standards and infection control guidelines are being followed.
9. Ensure that any dentist, company or organisation offering dental services under the CDBS is willing to fulfill all legal requirements and, in particular, be available for appropriate follow-up care.

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