



SOUTH SAN ANTONIO INDEPENDENT SCHOOL DISTRICT

Agenda Item Summary

Meeting Date: July 17, 2024

Agenda Section: Consent

Agenda Item Title: MOU between South San Antonio ISD and Brident Dental & Orthodontics for the 2024-2025 school year

From/Presenters: Ms. Millicent Marcha, Chief Academic Officer & Mrs. Rebecca Herrera if applicable

Description: The purpose of this Memorandum of Understanding (MOU) is to establish a collaborative working relationship between the parties involved, South San Antonio ISD and Brident Dental. This partnership aims to provide a well-being program that addresses the needs of Head Start/Early Childhood students and their families, ensuring access to preventative oral health care services.

The objectives of this MOU are to define the scope of the agreement and outline the specific roles and responsibilities of each party. This collaborative effort seeks to support the overall well-being of the target population by addressing their oral health care needs.

Historical Data: South San Antonio and Brident Dental & Orthodontics have been in partnership and servicing the SSAAISD community since the 2019-2020 school year.

Recommendation: Approve the Memo of Understanding between South San Antonio ISD and Brident Dental & Orthodontics for the 2024-2025 school year.

Purchasing Director and Approval Date:

Funding Budget Code and Amount: No compensation or exchange of funds between parties as a result of MOU

Goal: 3, 4, 5



SOUTH SAN ANTONIO INDEPENDENT SCHOOL DISTRICT

HEAD START DEPARTMENT

1450 Gillette Boulevard . San Antonio, Texas 78224 . (210) 977-7051 . Fax (210) 334-6701

South San Antonio ISD
Early Childhood/Head Start
1450 Gillette Blvd.
San Antonio, Texas 78224

Memorandum of Understanding

Service Provider:
Brident Dental & Orthodontics
6700 S. Flores
San Antonio, Texas 78221

1. PURPOSE:

The goals of this Memorandum of Understanding (MOU) are to establish collaborative working relationships with community providers to link services and resources between Head Start ages three to five children and their families to ensure access to and preventative oral health care.

2. TERM AND TERMINATION

- 2.1. Term: The term of this MOU is for a period of one (1) year from the Effective Date and may be extended upon the written mutual agreement of the Parties. School Beginning July 2024 through July 2025
- 2.2. Termination: Either Party may terminate this Agreement with thirty (30) days written notice to the other Party.

3. TARGET POPULATION:

- Head Start three to five enrolled preschool children
- First Grade students
- Requiring preventative oral health care
- Requiring a detailed dental exam with x-rays
- Needing dental follow-up treatment
- Referral for specialist
- Dental emergencies
- Dental Screenings

4. SCOPE OF AGREEMENT AND SERVICES TO BE PROVIDED BY PROVIDER:

- Brident Dental will render proof of insurance. A copy must be included with signed agreement.
- Dental record authorization form.
- Services may only be provided to Head Start 3-5 children that have Head Start authorization for services with SSAISD, First Grade children at any SSAISD
- Dental exams with mirror and light can be administered on-site at school campuses

5. IN-KIND:

- Participate in the SSAISD Health Advisory Committee

- Participate in Give Kids a Smile events
 - Provide services at Medicaid rates.
- Offer families discounted plans and financing options
- Provide health education training to parents and staff.
- Provide educational health screenings to children at centers.
- Provide copy of screening outcomes to Head Start Health Manager and school Nurse for first grade

6. REQUIREMENTS AND OBLIGATIONS OF PARTIES

6.1 BRIDENT DENTAL WILL UPHOLD THE FOLLOWING STANDARDS OF CONDUCT AND DO THE FOLLOWING:

- Brident Dental will respect and promote the unique identity of each child and family and refrain from stereotyping on the basis of gender, race, ethnicity, culture, religion, or disability.
- Brident Dental will follow program confidentiality policies (see attached) concerning information about children, families and staff members.
- No child will be left alone or unsupervised while under Brident Dental's care.
- Brident Dental must obtain parental consent prior to services being provided.
- Brident Dental will use positive methods of guidance and will not engage in corporal punishment, emotional or physical abuse, or humiliation, nor employ methods of discipline that involve isolation, the use of food as punishment or reward, or the denial of basic needs.
- Brident Dental will take pictures of the children with parent consent and school disclosures

6.2 RESPONSIBILITIES OF HEAD START:

- SSAISD Head Start will be responsible for Head Start ages three to five enrolled children with DENTAL RECORD form and written authorization for services.
- SSAISD will distribute and collect forms for all first grade children with parent consent to screenings
- Referrals must be initiated by the Health Manager, Specialist or Family Service Facilitator.
- When a child needs to be referred to another dentist, the referral must be given through the Head Start Health Manager, Nurse or affiliate.
- Copy of children's dental insurance to be provided to Brident Dental.(parent discloses on form)
- A Minimum of 35 children is required per campus

7. FINANCIAL

- 7.1. This MOU contains no exchange of funds, commitment of funds or exchange of services or products for consideration as between the Parties. Each Party shall bear its own costs and expenses incurred in the performances of its services or obligations under this MOU.**

8. ADDITIONAL TERMS:

- 8.1 Each Party will appoint a person to serve as the official contact and coordinate the activities of each organization in carrying out this MOU. The initial appointees of each organization are:

For South San Antonio ISD: Name: Rebecca Herrera
Address: 1450 Gillette Blvd, SA, TX 78224
Email: rebecca.herrera@southsanisd.net
Number: (210) 977-7051

For Brident Dental: Name: Tina Gutierrez
Address: 6700 S. Flores
Email: tmgutierrez@brident.com
Number: 210-264-0085

- 8.2 **Notice:** Any notice required or permitted to be given under this MOU by one Party to the other Party shall be in writing and shall be addressed to the other Party at the address specified below. Notice shall be deemed to have been given immediately if delivered in person or upon receipt if mailed to the recipient's address specified below.
- 8.3 **Jurisdiction/Venue:** This MOU and all duties and obligations arising pursuant this Agreement shall be governed by the laws of the State of Texas.
- 8.3 **Entire Agreement; Amendment:** This MOU, including the Exhibits hereto, constitutes the entire agreement of the parties with respect to the subject matter hereof and supersedes all prior and contemporaneous agreements and proposals, whether oral or written. There are no promises, terms, conditions or obligations other than those contained herein. This MOU may be modified only in a writing signed by both parties.
- 8.4 **Independent Contractors:** For purposes of this MOU, the parties are independent contractors and not partners, joint venturers or otherwise affiliated and neither party has the right or authority to bind the other party in any way. Neither party hereto is an agent or legal representative of the other parties for any purpose. Neither party shall enter into any contracts in the name of, or on behalf of the other party.

Both parties understand and accept that this Memorandum of Understanding and any invoices or files associated with it are subject to any Federal, State, or Local audits

BY SIGNING BELOW, THE PARTY AGREES TO THE TERMS OUTLINED ABOVE AND CONFIRMS THAT HE/SHE IS DULY AUTHORIZED TO SIGN ON BEHALF OF THE PARTY. THE AGREEMENT SHALL BECOME BINDING AS OF THE EFFECTIVE DATE.

SOUTH SAN ANTONIO ISD

WESTERN DENTAL SERVICES, INC. (BRIDENT DENTAL AND ORTHODONTICS)

By: _____

By: Tina Gutierrez

Printed Name: Henry Yzaguirre

Printed Name: Tina Gutierrez

Title: Superintendent of Schools
South San Antonio ISD

Title: Director of Community Engagement and
Strategic Alliances

Date:

Date: 4/24/2024