Background
The barriers to care for patients with special needs are well documented. Difficulty in finding a dentist is a major barrier. ECU School of Dental Medicine’s Community Service Learning Centers are committed to providing care for this population. Community dwelling patients are integrated into the daily clinic schedule in a “Mainstream” approach. This approach is designed to improve the AEGD and Pre-Doc trainees confidence and experience in delivering advanced oral health services, specifically in areas of behavior control and medical complexity. When incorporated into the trainees future practice, it will improve access to care and alleviate the burden of more expensive hospital and specialty dental programs that have long waiting lists.

Methods
- Review of all encounters between 1 July 2019 to 29 February 2020 at two of the eight ECU SoDM CSLC’s to determine nature and number of patients seen that require modification of treatment due to special needs as determined by our Subject Matter Experts (SME) who calibrate and confirm criteria and data

- Case Definition of individuals with special needs
  - "Which patients are we tracking?"
    1. Patients with ASA Class III
    2. Adults 65+ years with multiple medical problems ASA II or above
    3. Adults > 69 years regardless of ASA Class
    4. Any patient with ID, DD, ambulatory issues, cognitive disorder

-Other factors to track
  1. Polypharmacy 1) > 5 and > 10
  2. Payor Class (Medicaid, Sliding Fee Scale, Insurance, Private Pay
  3. Living Conditions* (LTC or institution, independent, Family Cohabitation)
  4. Type of procedure and provider for each encounter
  5. General Demographics

* Study revealed weakness in system that inadequately tracked living condition data and will be addressed in future efforts.

AEGD residents and students were asked to complete pre rotation and post rotation surveys about their special care dental experiences.

Special Care patients receive care similar to all patients across SoDM. Eighty percent of procedures consist of diagnostic, preventive and restorative in AHK and EC compared with 71% across the school.

Trends for the recently introduced survey show students and residents to have great interest in seeing patients with complex medical and dental findings. The survey asked which areas of special patient care students and residents would like more exposure. Several common themes that emerged included communicating with patients with special care needs and dental management of patients with intellectual and physical disabilities, patients with cognitive impairment and geriatric patients.

Conclusions
- Many Patients with Special Needs are successfully cared for by dental students in our CSLC model.
- Students and Residents are eager to treat more complex patients when given proper support.
- Continued collaboration for development for training standards in Special Care and Geriatric Dentistry is needed.

Acknowledgements
Accreditation Standards for Advanced Dental Education Programs in Advanced Education in General Dentistry Standard 2.1
Accreditation Standards for Dental Education Standard 2-25