



Santa Barbara County Education Office

4400 Cathedral Oaks Rd, PO Box 6307, Santa Barbara, CA 93160-6307
Telephone: (805) 964-4711 • FAX: (805) 964-4712 • sbceo.org

Susan C. Salcido, Superintendent of Schools

Spring 2025 Annual Oral Health Assessment District Reporting

Education Code Section 49452.8

How many schools in your district offer Kindergarten? _____

How many of those schools submitted KOHA data? _____

Please list the schools who did not submit KOHA data: _____

If you are submitting for one school only and not the entire district, please indicate the following:

School District and Campus: _____

1. The total number of students in the district, by school, who are eligible for the oral health assessment requirement (i.e., the number of kindergarten students plus the number of first grade students who did not attend public school kindergarten): _____
2. The total number of students presenting proof of an assessment: _____
3. The total number of students that presented a waiver for unable to find dental office accepting dental insurance plan: _____
4. The total number of students that presented a waiver for the purpose of financial burden: _____
5. The total number of students that presented a waiver for unable to take time off or the dentist does not have convenient office hours: _____
6. The total number of students that presented a waiver for lack of adequate transportation: _____
7. The total number of students that presented a waiver for reasons of non-consent by parents: _____
8. The total number of students that presented a waiver for other reasons not listed: _____



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9. The total number of students that did not return either proof of an assessment or a waiver to the school: _____
10. The total number of On-Site Dental Screenings Opt Out: _____
11. The total number of students that were found to have untreated decay: _____
12. The total number of students that were found to have had caries experience: _____
13. The total number of students with no obvious problem found: _____
14. The total number of students with early dental care recommended: _____
15. The total number of students with urgent care needed: _____
16. The total number of parents notified that student has an urgent dental care need: _____
17. The total number of students with a follow-up appointment scheduled: _____
18. Did the child receive needed treatment? The total number of Yes: _____
19. Did the child receive needed treatment? The total number of No: _____
20. Did the child receive needed treatment? The total number of "I Don't Know": _____
21. The county/district/school code of the school: _____

The **Annual Oral Health Assessment Report** is requested for each district within Santa Barbara County. Districts are responsible to submit their Annual Oral Health Assessment Report directly to Santa Barbara County Education Office (SBCEO). After receiving each district's data, our office submits the information directly to the California Dental Association for processing. ***Please submit your Spring 2025 data to SBCEO by June 6, 2025.***
If you have any questions, please call, or email me.
Thank you, Julie.
(805) 964-4710 ext. 4402 jflores@sbceo.org

Please Return to: Julie Flores
Oral Health Bilingual Health Advocate
Health Linkages
jflores@sbceo.org