Nuts and Bolts of School-Based Oral Health Delivery and Planning

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Who is OSHA

- Occupational Safety and Health Act of 1970, Congress created the Occupational Safety and Health Administration (OSHA) to assure safe and healthful working conditions for working men and women by setting and enforcing standards and by providing training, outreach, education and assistance.

- Concerned with Employee/Employer Relationship
  - Volunteers –
    - Not in Federal Standard, but State Plans can vary
    - Other Regulatory Agencies

- State vs. Federal Enforcement
  - State Plans must set workplace safety and health standards that are "at least as effective as" as OSHA standards.
  - 22 State Run Plans
General Duty Clause 5 (a) (1) Requires an employer to furnish its employee’s employment and a place of employment which are free from recognized hazards that are causing or are likely to cause death or serious physical harm to his employees.

- Recognition of the hazard by the employer’s industry
- Common sense

### Top 10 Cited Standards

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<th>Standard</th>
<th>Description</th>
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<tr>
<td>1910.1030</td>
<td>Bloodborne Pathogens</td>
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<td>1910.1200</td>
<td>Hazard Communications</td>
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<td>1910.0305</td>
<td>Wiring Methods, Components, and Equipment for General Use</td>
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<td>1910.0151</td>
<td>Medical Services and First Aid</td>
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<td>1910.0141</td>
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<td>1910.0157</td>
<td>Portable Fire Extinguishers</td>
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<td>Ionizing Radiation</td>
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<td>1910.0101</td>
<td>Compressed Gases</td>
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<td>1910.0022</td>
<td>Walking Working Surfaces</td>
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</table>
Hazard Assessment - ANNUALLY

- Required Annually
- “Wall to Wall” Inspection
- Statement of Certification
- Date
- Signature of Person Completing Assessment
- Site Specific
- Establish Safety Objectives
- Update Programs to Reflect Hazard Assessment
- Prioritize Hazard List
- Update Regularly
- Perform Routine Assessments
Routine Assessments - MONTHLY

- Identify hazards as they arise
- Safety Equipment Checks – even if maintained by the school
  - Fire Protection Systems
  - Egress Paths
  - Eyewash Station
  - Electrical Hazards
  - Water Damage
  - Trip Hazards
Site Specific Written OSHA Programs

- Bloodborne Pathogens
  - Exposure Determination
  - Contaminated Linens
    - Lab Jackets/Cover Gowns
- Regulated Waste
  - Sharps Containers
    - Pick-up/Disposal Frequency
  - Transport
    - Department of Transportation
- Safer Medical Devices
  - Needlestick Safety & Prevention Act
- Hepatitis B Vaccination
  - Three Injection Series with a Titer Test
  - Declination
- Exposure Incident Management

- Hazard Communication
  - Hazardous Chemicals
  - MSDS/SDS
  - Labeling

- Personal Protective Equipment
  - What is provided
  - How to use

- Respiratory Protection
  - Airborne Diseases
  - Hazardous Chemicals
  - Additional Respiratory Precautions
Site Specific Written OSHA Programs

- Radiation Safety
  - Monitoring
  - Shields

- Emergency Action Plan
  - Workplace Violence
    - Active Shooting Event
  - Bomb Threat
  - Fire Safety
  - Natural Disasters
  - Bioterrorism

- Ladder Safety

- Laser Safety
  - Laser PPE
  - Plume Evacuation

- Lockout/Tagout
  - Exclusive vs. Non-Exclusive Control

- Machine Guarding
  - Not just lab equipment

- Injury & Illness Prevention Program
  - State Specific
  - All encompassing
    - Emergency Action Plan
    - Evacuation Plan
    - Internal Disaster
    - External Disaster
    - Injury & Illness Reporting
Written Infection Control Program

- Review/Revise Annually
  - Reflect changes in technology to eliminate or reduce exposure to infectious agents
  - Document evaluation of available technology that will eliminate or reduce exposure to infectious agents

- State Adoption of Guidelines
  - Guidelines for Infection Control in Dental Healthcare Settings --- 2003
Infection Control Risk Assessment

- Who is at risk
  - DDS/DMD/MD
  - RDH, RN, LPN
  - RDA/CDA/DA, CST/ST
  - Sterilization
  - Front Desk

- What types of risk do they incur
  - Bloodborne
  - Airborne

- What diseases are specific to my area
  - Disease Management

- Do I have seasonal exposure to certain infectious agents
Written Infection Control Program

- Must address
  - Exposure risks
  - Prevention strategies, infection control policies/procedures
- Sterilization processes
  - Sterilization flow
  - Use-dilution, material compatibility, storage, shelf-life, and safe-use disposal
  - Sterilization documentation
  - Proper packaging
  - Quality control
- Injury management and location of facility
- Facility maintenance
- Environment of care management
- Work area restrictions
- Disease/illness return to work restrictions
Injury Management

- Immediately available
- Free of charge to employee
- Is a work related Injury (worker’s compensation)
  - Report to work comp carrier
  - Know where to send the employee for treatment
  - Complete Reporting Paperwork
- OSHA 301
- OSHA 300/300 SHARPS
  - Exempt Industries – 6212 – Office of Dentists
  - State Plans can still require this
- Certain Injuries must be reported to OSHA
  - all work-related fatalities within 8 hours
  - inpatient hospitalizations
  - amputations
  - losses of an eye
Training Requirements

- Free of charge
- During working hours
- Prior to assignment where occupational exposure may take place
- As responsibilities and/or procedures change
- Upon observed lapses in technique/procedure
- At least annually thereafter
- Site Specific
- Interactive
  - Trainer – Question and Answer Session
- Training Outlines
  - Topic Specific
  - Specific Guidelines for Content of Outlines and Training Records
Regulated Waste

- means liquid or semi-liquid blood or other potentially infectious materials;
- contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed;
- items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling;
- contaminated sharps;
- and pathological and microbiological wastes containing blood or other potentially infectious materials.
Sharps Containers

- Mounting Guidelines
  - Standing workstation: 52 to 56 inches above the standing surface of the user
  - Seated workstation: 38 to 42 inches above the floor on which the chair rests
  - Secured to prevent tipping and falling
- Sharps Disposal
  - Treated Medical Waste
  - Mail-Back Systems
Healthcare Worker Immunizations

Healthcare workers (HCWs) are at risk for exposure to serious, and sometimes deadly, diseases. If you work directly with patients or handle material that could spread infection, you should get appropriate vaccines to reduce the chance that you will get or spread vaccine-preventable diseases. Protect yourself, your patients, and your family members. Make sure you are up-to-date with recommended vaccines.

Healthcare workers include physicians, nurses, emergency medical personnel, dental professionals and students, medical and nursing students, laboratory technicians, pharmacists, hospital volunteers, and administrative staff.

- **Hepatitis B**
- **Influenza** - Annually
- **MMR** – Measles Mumps Rubella
- **Tdap** – Tetanus Diphtheria and Pertussis
- **Varicella** – Chicken Pox
Infection Control Evaluation

- Transportation of Instruments
  - Clean and Dirty
  - Labeled Containers
  - DOT/State/County Regulations

- Storage of Equipment
  - Locked Cabinets

- Sterilization Processes
  - Solutions
  - Packaging
  - Quality Control
  - Single-Use Only

- Carpeting/Upholstery
  - Avoid using carpeting and cloth-upholstered furnishings in exam rooms, dental operatories, laboratories, and instrument processing areas
Instrument Classification

- **Low/Intermediate Level Disinfection (HBV/HIV or Tuberculocidal Claim)**
  - Non critical items
    - Touch intact skin but not mucous membranes
  - Clinical contact surfaces

- **High Level Disinfection**
  - Heat **sensitive** semi critical items
    - Semi-Critical: May contact mucous membranes or non intact skin but do not penetrate soft tissue

- **Sterilization**
  - All heat tolerant semicritical and critical items
    - Critical: Penetrate mucous membranes or contact bone, the bloodstream or other normally sterile tissues of the body
Biological Indicators/Spore Tests

- Weekly at minimum
- For every sterilizer!!!
- Full load
- If failure – needs three passes
Dental Waterlines

- **Management**
  - **Treat/Maintain**
    - Every bottle
  - **Shock**
    - Follow manufacturer’s instructions
  - **Test**
    - Follow manufacturer’s instructions
    - State guidelines
    - 3 consecutive months then quarterly

\[(<500\text{cfu/ml per CDC/ADA/EPA})\]