Establishing the Role of Infection Control Coordinator (ICC) in the Dental Care Setting

- **7-week Planning Guide to Take Ownership of the ICC Role**

  This planning guide outlines the key steps to establish the infection control coordinator in the dental care setting. The planning guide is customized by filling in the name of the dental practice, the intended infection control coordinator and establishing the targeted weeks for task completion.

  Use of this planning guide is supported by additional resources from OSAP’s *Infection Control in Practice: TEAM HUDDLE™* publications (June, August and October issues, 2015) to assist the dental healthcare professional in understanding and establishing the role of Infection Control Coordinator (ICC). Here you will find:

- **Summary of Key Duties of the Infection Control Coordinator:**

  Two charts, excerpted from the June and August 2015 issues of *Infection Control in Practice: TEAM HUDDLE*, provide the dental healthcare professional with a summary of some key duties to better understand the role of the infection control coordinator and how the job benefits patients and the dental practice.

- **Sources of Learning about Regulatory Standards and Guidelines:**

  This chart, excerpted from the October issue of *Infection Control in Practice: TEAM HUDDLE*, provides the ICC with links to references that describe necessary regulatory standards and guidelines, and provides links to educational tools and training resources.
7-week Planning Guide to Take Ownership of the ICC Role
Establishing the Role of the Infection Control Coordinator (ICC) in the Dental Setting

| Practice name: ____________________________________________________________________________ | YEAR: |
| Future Infection Control Coordinator (ICC) name: ____________________________________________ |

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**TASK**

- Prepare a job description unique to your employment
- Prepare list of how the ICC role benefits patients, practice & staff
- Prepare a list of initial IC needs based upon observations
- Propose the position of ICC and its benefits to employer: gain approval
- Confirm with employer when to announce ICC position to staff
- Seek sources of necessary IC training: review OSHA standards/regulations and CDC guidelines
- Establish an ICC training plan, identify IC assessment tools/checklists: confirm with employer
- Team meeting to enroll commitment to the ‘Safest Dental Visit™’
- Schedule a start date to begin infection control program assessment

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**SUCCESS STRATEGIES FOR THE INFECTION CONTROL COORDINATOR**

### Some Duties of the Infection Control Coordinator

#### Maintain Appropriate Regulatory and Guidance Documents

- **OSHA 29 CFR Standards:**
  - *Bloodborne Pathogens (1910.1030);*
  - *Hazard Communication;*
  - *Electrical (1910 Subpart S);*
  - *First Aid (1910.151);*
  - *Emergency Action Plans (1910.38);*
  - *Sanitation (1910.141);*
  - *Design and Construction Requirements for Exit Routes (1910.36);*
  - *Compressed Gas (general requirements) (1910.101);*
  - *Fire Prevention Plans and Fire Safety (1910.39 and Subpart L);*

- **OSHA’s “Job Safety and Health, It’s the Law” poster #3165 (required to be posted in the facility);**

- **CDC’s Guidelines for Infection Control in Dental Healthcare Settings – 2003;**

- **State and Local Safety Regulations.**


#### Prepare and Maintain Written Plans and Documents

- **OSA-required**
  - exposure control plan that is updated at least annually and to reflect any new policies or procedures*
  - hazard communication program that is updated with each new hazardous chemical*
  - list of all hazardous chemicals present in the practice*
  - an SDS for each hazardous chemical in the practice*
  - emergency action and fire prevention plan*

- **CDC’s written tuberculosis infection control plan.**

- **Develop the CDC-recommended written personnel health program for the office staff that includes:**
  - policies, procedures, and guidelines for education and training; immunizations; exposure prevention and post-exposure management; medical conditions, work-related illness, and associated work restrictions; contact dermatitis and latex hypersensitivity; and maintenance of records, data management, and confidentiality.*

- **Establish referral arrangements with qualified health-care professionals to ensure prompt and appropriate provision of preventive services, occupationally related medical conditions, and post-exposure management with medical follow-up.**

- **Prepare a list of emergency contact information to help manage staff injuries, sterilizer failures, supplies/equipment/instrument/utility problems.**

#### Generate/Update/Maintain Logs of Safety-Related Records

- **OSHA-required medical records for each employee with the potential for occupational exposure.**
  (Records are to contain the social security number; hepatitis B immunization status and related medical records including the dates of vaccinations and the healthcare professional’s written opinion; all records related to previous post-exposure evaluations including all the information provided to the evaluating professional and the evaluating professional’s written opinion. These records are confidential, but the ICC can work with the employer to make sure they have been kept, are current, and their location is known. They need to be maintained at least for the duration of employment plus 30 years and be readily available if an occupational exposure occurs.)*

- **OSHA bloodborne pathogens training records.**
  (To include the name and job title of the trained person; the date of the training; the content/summary of the training; the name and qualifications of the trainer. To be maintained for 3 years.)

- **Manifets from any medical waste haulers.**

- **Verification of any on-site sterilization of regulated medical waste prior to disposal.**

- **Radiographic equipment certifications.**

- **Fire extinguisher certifications.**

- **Sterilization monitoring records (for mechanical, chemical, and biological monitoring).**

- **Equipment maintenance logs.**

*check your state and local regulations
Provide/Support Safety Training

- Ensure that a written Exposure Control Plan exists in the office and that it is reviewed and updated at least annually and used in training sessions.
- Provide or arrange for safety training of new employees (e.g., bloodborne pathogens; hazard communication; emergency evacuation plans and routes; location of eyewash stations and of important documents [e.g., OSHA standards, safety data sheets (SDS), exposure control plan, hazard communication program]).
- Confirm that temporary staff have received the OSHA-required bloodborne pathogens training from their primary employer.
- Provide additional special training (unique to the facility) to temporary staff (e.g., emergency evacuation plans and routes; location of eyewash stations and personal protective equipment; location of important documents [e.g., OSHA standards, SDSs, exposure control plan, hazard communication program]).
- Provide or arrange for at least annual update training related to OSHA’s Bloodborne Pathogens Standard.¹
- Confirm that the cleaning crew is aware of potential hazards in the facility (e.g., sharps containers, medical waste containers, instruments and sterilizers in the instrument processing area). If sterilizers are operated after hours, place a “HOT” sign on them.
- Inform regular and temporary employees of new chemicals, procedures, products, and equipment in the facility; institute any related training required; and update office safety documents and records (e.g., exposure control plan, hazard communication program, SDSs, training records).
- Emphasize the importance of the facility’s “culture of safety” during all safety training situations. The Department of Defense and the Department of Health and Human Services’ Agency for Healthcare Research and Quality have developed a free training program designed to improve the quality, safety, and efficiency of health care. This resource is available at: http://www.ahrq.gov/professionals/education/curriculum-tools/teamstepps/instructor/fundamentals/index.html
- Post signs in the sterilizing room and posters on the bulletin board as reminders of safe practices.
- Make safety a routine part of team huddles and the more extensive staff meetings.

Other Duties

- Maintain products/equipment needed to accomplish office safety (e.g., PPE, disinfectants, cleaning and sterilization equipment, eyewash stations).
- Maintain logs for equipment repair and maintenance.
- Decontaminate/label equipment and dental laboratory items to be shipped/repaired.
- Ensure all those taking x-rays are properly certified.
- Maintain evacuation routes, smoke alarms, and exit signs.
- Periodically check electrical cords for signs of wear.
- Monitor general cleanliness of the office.
- Ensure proper handling of contaminated laundry.
- Ensure proper/safe storage of hazardous materials, compressed gases, and any food/drinks.
- Manage all of the SDSs and establish their location along with the required list of hazardous chemicals present in the facility.⁵
- Ensure waste management and disposal meet all local and federal regulations.
- Monitor/Evaluate infection control compliance as recommended by the CDC.¹
Some Tools and Resources for the Infection Control Coordinator

**Vaccination Reminder**

- Flu season is upon us. It’s very important for all healthcare providers to be vaccinated annually against influenza. Vaccination is the best way to prevent the flu, and if you’re not infected, you won’t spread it to your patients and loved ones. The CDC offers information about the influenza vaccine at [http://www.cdc.gov/flu/about/season/flu-season-2015-2016.htm](http://www.cdc.gov/flu/about/season/flu-season-2015-2016.htm). OSAP members can log-in at [www.OSAP.org](http://www.OSAP.org) and find talking points on the flu vaccine at the ‘OSAP Knowledge Center’ under ‘National Dental Infection Control Awareness Month’, ‘Patient Talking Points’.

**Guidelines and Regulations**

- Safest Dental Visit™ Kit for Dental Practices: [http://www.osap.org/?page=SDVKitDtlPractice](http://www.osap.org/?page=SDVKitDtlPractice)
- CDC’s infection control recommendations for dentistry: [http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5217a1.htm](http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5217a1.htm)

**Education and Training**

- From Policy to Practice: OSAP’s Interactive Guide to the CDC Guidelines: [http://www.osap.org/?CDCGuidelinesCourse](http://www.osap.org/?CDCGuidelinesCourse)
- If Saliva Were Red – a cross contamination video: [http://www.osap.org/?page=ISWR1](http://www.osap.org/?page=ISWR1)
- CDC’s on-line training on the Guidelines for Infection Control in Dental Health-care Settings–2003: [http://www.cdc.gov/oralhealth/infectioncontrol/guidelines/slides/001.htm](http://www.cdc.gov/oralhealth/infectioncontrol/guidelines/slides/001.htm)

**Infection Control/Safety Publications**

- OSAP. *Infection Control In Practice*. Over 100 issues discussing virtually all aspects of dental infection control and safety. (Free for members)