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Is Your Dental Practice **'Inspection Ready'?**

Top 20 Concerns in an Office Audit.

In lieu of the recent news headlines of dental offices being audited in Ontario, dental teams have had to reflect upon their current Infection Prevention and Control (IPAC) practices and written polices to not only ensure they are meeting dental regulatory standards and guidelines but as well those of the Public Health of Ontario. maxill has developed a Q &A to review the top 20 concerns in an office audit.

1. When is spore testing and logging (biological indicators) required?

Public Health Ontario (PH) and the Royal College of Dental Surgeons of Ontario (RCDSO) both state daily spore testing is required for best practice. CDC states weekly.

2. Is a Class 5 chemical integrator (steam strip) required for each load?

Every sterilizer needs to be monitored at every load with a minimum Class 5 integrator. A Class 5 is an indicator known as an 'Integrator' designed to react to all critical sterilization parameters (temp, pressure, time) and are recommended to be inserted into the chamber in a 'challenging' location for the steam to penetrate. This is the chemical test that is being logged for quality assurance sterilization monitoring. It can be viewed as your leading control strip that oversees the entire chemical testing process. In Canada, Class 5 Integrators are now also found on the biological indicator vials as an adjunct. A common misunderstanding is to use a chemical strip once a day or once in the morning and once in the afternoon; a strip is needed for each and every load. Any office using less than a Class 5 as a lead and not performing and logging chemical testing is not meeting best practice.

3. Are both an internal and external indicators needed on sterilization bags?

All instruments must be bagged or wrapped with a Class 1 indicator on the outside (external) and a Class 4 or 5 on the inside (internal). Most bags are manufactured as a Class 4 internal and the office can also place a Class 5 inside the pouch. Remember that the Class 5 integrator works with the mechanical and biological sterilization monitoring.

4. Is it required to use a Class 5 chemical integrator inside instrument cassettes?

Same concept as above information with the bagging system that applies to wrapped cassettes. Often short cuts are taken and a piece of sterilization tape is placed inside the cassette. Sterilization tape is a Class 1 meaning it has no parameters of sterilization it reacts to, it is only a visual that the package was processed. Class 2 is for Bowie-Dick testing for the pre-vacuumed not gravity displacement sterilizer. Class 3 is a single parameter measurer, either temperature, time or pressure. Class 4 is a multi- parameter that groups two out of the three parameters. Class 5 measures all parameters and is then graduated to be called an 'integrator'. Class 5 is best practice for inside cassettes. What about a class 5 inside bags? Depending on the geographical area some PH representatives are rec'd a class 5 to be place in all bags. Other areas are stating if there is a printer system on the sterilizer monitoring the mechanical activity then a class 4 is sufficient as an internal and a class 5 strip need not be placed inside each bag. Please contact the PH representative in the geographical location of the practice.

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5. What needs to be included in logging of mechanical quality assurance?

There are three required methods of sterilization monitoring: 1. Mechanical (the gages read on the dashboard of the sterilizer) 2. Chemical (testing the parameters of steam penetration leading to sterilization but not confirming sterilization) 3. Biological (testing sterilization, the only means of confirming sterilization). For record keeping compliance each test must be logged to prove its occurrence as well as corrective action should there be a sterilization failure. Mechanical is observed with each load and logging must include every load ran in each sterilizer as well as who placed the load in and who removed it. Ideally the sterilizer should be equipped with a printer as this is a complete mechanical log. Chemical must be performed for each load with a new strip each time and logged. Biological needs to be performed daily and logged.

6. Does the hard surface disinfection need to be broad spectrum? What are kill times?

Read your labels carefully for surface disinfection liquid / wipes to be effective they must have a broad spectrum claim. Broad spectrum means the solution can kill bacteria, fungus, tuberculosis and viruses, it is then labelled as being bactericide, fungicide, tuberculocide and virucide. Note that the term tuberculocidal is often used interchangeably with mycobactericidal. Should any of these claims be missing it will not kill enough pathogens to keep clients safe in the dental office. The next consideration is kill times. Ideally all 4 broad spectrum claims need to killed in 1 minute. Many hard surface disinfectants fall short on both broad spectrum and only have 3 out of the 4 claims and longer time kills exceeding 1 minute. When testing the efficacy of a surface disinfectant the 'worse' virus is typically chosen as a benchmark measure. In microbiology terms this translates to a microorganism that has a protein layer (enveloped) verses a lipid layer (non-enveloped), the protein layer is hard to kill hence the chosen microorganism to be the benchmark. If it can kill the 'worse' microorganism it will kill everything else that is easier to eliminate. Tuberculosis and polio are the most common benchmark organisms? Why? They are the hardest to eliminate with their enveloped protein layer.

7. Can 4 x 4 gauze be used to make an in office disinfectant wipe?

Manufacturer's containers must hold manufacturers products for hard surface disinfection spray and wipes. Home -made labels and in-office containers with saturated 4 x 4 gauze are not acceptable as the gauze material reacts with the chemicals altering the chemicals to a much less effective level.

8. Do all instruments need bagging or wrapping?

All instruments must be bagged or wrapped post cleaning and dried before packaging. Once sterilized the bag or wrapping can only be opened at point of patient care. This means no loose instruments being processed in an unwrapped cycle. All loads must be processed as wrapped with appropriate material for the full sterilization and drying cycle. Inspectors from PH will inspect the bags and wrap for wicking and water stains. A damp bag or wrap is a permeable membrane for the transfer of microorganisms and contaminates the instruments.

9. Are Sharps containers needed in each operatory?

This is an OHSA and PH regulation. All sharps must be place in an appropriate sharps container at point of us. Each operatory mush have its own sharps receptacle.

10. What PPE needs to be worn in sterile bay when processing instruments?

This is an OHSA and PH regulation. During the re-processing of instruments full PPE must be worn to include puncture resistance gloves, mask, gown and face shield. Protective eyewear can also be worn with the masks that include a visor shield. The area between the mask and eyewear must be covered when re-processing instruments. Uniforms are considered PPE as well as shoes. Shoes must be left at the office and uniforms changed after the clinical 'shift' is completed. Uniforms are to be carried home and laundered by themselves with care taken not to cross contaminate the bag. A gown is also to be worn during any treatment that creates aerosols.

11. Are written IPAC polices and record of training required?

Regardless of PH inspections, written IPAC polices has been a standard with all regulatory bodies and OHSA. An IPAC manual needs a policy with an appointed IPAC Representative. The rep is the coordinator of training as well as initial and regular inspections and review and update of scientifically accepted measures to ensure the written policies are being followed. The manual must include consequences of not adhering to the policies. The policies must be made available to clients should they ask to see them.

12. What is an ultrasonic bath test and when is it required?

The ultrasonic bath is relied upon to remove debris in instrument re-processing. Its efficacy must be measured to ensure it is functioning. This is performed with a specific ultrasonic bath indicator test inserted in the bath with no instruments and is evaluated. This must be performed weekly and logged. Note that logging documents are to be stored as QA proof for 10 years as per RCDSO and CDHO.

13. Are masks required at office entrance/ front desk for clients with coughs and/or flu like symptoms to wear while in reception area?

This is part of the new CDC cough etiquette guidelines as well as PH recommendations. The public is already accustom to this in a medical setting where people with symptoms of cough or flu are asked to where a mask in order to minimize the spread of microorganisms. Dental offices need to have a sign stating this for clients to read and offering a mask. All offices need to place a box of mask in the reception area and or entrance into office.

14. Can instruments 'touch' one another in their packages when being prepared for sterilization?

The fine print of the directions for use of sterilizers state that instruments need to be sterilized without touching one another. This concludes to allocating one instrument per bag or initiating a cassette system for the grouped kits. PH prefers 'small packs' meaning instruments cannot be jammed into a bag. Should there be more than one instrument in a bag the bag would need to be laid out in the sterilizer tray flat and the instruments rolled apart.

15. Do mirrors need to be disassembled?

All instruments that are threaded or snapped into place and can be dismantled, then require to be disassembled. For example: threaded mirror head on a mirror handle, slow speed hand piece, straight hand piece.

16. Do hinged instruments need to be in open positon to be sterilized?

All hinged instruments need to be in an open position placed in a bag that allows the instrument to NOT touch the inside parameters of the bag/pouch. The handles of the instrument need to enter the bag first as when being opened the 'sharp' end cannot be the end opened. This is part of a risk management to reduce sharp injuries.

17. Do the packaged instruments need to be labelled?

All packs whether a wrapped cassette or bagged instruments need to have the following labelling: sterilizer number if more than one sterilizer, date sterilized, load number and staff member initials. This data cross references the logs from mechanical, chemical and biological sterilization monitoring. Why all the labelling? This is part of a risk management to safeguard in the case of a sterilization failure to be able to recall the packs that were part of the failing cycle.

18. Can a scrub brush be used to clean instruments?

According to OHSA the office is to minimize risks for injury. Many offices no longer use a scrub brush to scrub soiled instruments. However, if the office still uses scrub brushes their activity needs to be logged that includes having the brush sit in a high level disinfectant when not in use and eventually be discarded or if heat tolerable, than sterilized. Simply said a soiled brush cannot be used over and over.

19. Do I need a closed lid to transport my instruments from the operatory to the sterilization room?

During the transportation of soiled instruments it is potential to encounter an injury. To prevent such an injury soiled instruments must be transported in a closed lid container. Ideally a locking tray mechanism. For organization, the locking trays can be color coded per operatory or procedure. The transportation system includes closed containers as well for the return of the sterilized instruments to the operatory. All soiled 'garbage' must be discarded at point of use and not be transported to sterile bay.

20. Are there certain locations allowed for hand washing?

Only a sink that is deemed 'clean' can be used as an official handwashing sink. For example the sink that the instruments are rinsed from the ultrasonic cannot be a handwashing sink. The office needs to be evaluated for what sinks will be labelled as a handwashing station or not. Soap used for handwashing must be antibacterial/antimicrobial. The hand disinfectants must have an NPN number or DIN number.

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