

## Flowchart of Infection Control Areas of Non-Compliance

### 1) Unsafe needle or Sharps handling

#### Example Infractions:

- Two handed needle capping
- Sharp left protruding from cassette
- Fingers used to handle sharp
- Bur, or piezo tip not removed, or left uncovered when not in use
- Contaminated sharp used to trim prosthetic item
- Needle left uncapped
- PRACTishield unused or used incorrectly
- Sharpening contaminated instrument
- Retracting w fingers (exposure cause)

### 2) Incomplete or improper personal protective equipment (PPE)

#### Example Infractions:

- Missing PPE (no mask, gloves, gown, glasses or side shields)
- Improper PPE (lab coat/gown in restroom, dining room, lecture hall or office)
- No heavy duty gloves when necessary
- No safety glasses on the patient
- Inadequate or poorly fitting PPE
- Shield mask/ eye protection not in proper position

### 3) Contaminated equipment or instrument use

#### Example Infractions:

- Use of item not properly cleaned or sterilized
- Use of item that was the source of a BBP exposure
- Single exposure to patient or co-provider

### 4) Contamination of clean surfaces or sterile items

#### Example Infractions:

- Failure to perform hand hygiene
- Pt caregiver or family member in tx area during tx
- Touching areas outside of immediate tx area w gloves
- Clean or sterile items used for pt care stored in open areas/open containers
- Packages sterilized instruments not properly sealed prior to processing
- Impressions placed on sink or counter (not inside headrest cover)
- Contamination secondary to missing equip. barriers
- Lab coat or gown worn in restroom
- Instruments opened prior to pt arrival

### 5) Food, beverages, or grooming in clinic area (unless in an emergency)

#### Example Infractions

- Food or drink in clinical treatment area (unless in emergency situations)
- Food or drink storage in clinical refrigerator, or clinical cabinets
- Grooming in treatment area (brushing hair, teeth, putting in contacts)

### 6) Inappropriate or incomplete waste disposal (regular, hazardous, or infectious)

#### Example Infractions:

- Sharp not placed in sharps container
- Sharps container over-filled
- Amalgam scraps not recycled
- Biohazardous trash put in 'regular' trash - *unused small red biohazard bags, as well as unbloodied disposable patient care items like gloves are placed in large red bags (per UMB policy), exception-- unbloodied disposable clinic coats/gowns go in specially labeled bins (per SOD policy)*
- Liquid filled syringe in sharps container
- 'Regular trash' such as boxes or paper towels in biohazard bins

### 7) Failure to follow cleaning and disinfection protocol

#### Example Infractions:

- Instruments not removed and/or operatory not cleaned and/or disinfected
- Failure to maintain dental unit (suction H<sub>2</sub>O lines, fine filter, traps)
- Failure to close disinfectant wipes after use
- Contaminated item adjustment (impression or prosthetic item must be rinsed/disinfected prior to adjusting (rinse well before placing in pt.'s mouth)

### 8) Failure to keep clinical areas clear of clutter (non-direct care items)

#### Example Infractions:

- Items on top of dividers
- Items on top of cabinets
- Items not related to immediate care on clinical countertop

### 9) Failure to BBP exposure protocol

#### Example Infractions:

- Failure to stop tx immediately after stick felt
- Failure to remove exposure cause from tx area
- Gloves discarded w/o a leak check (if no obvious glove tear or puncture)
- Failure to report exposure in a timely manner
- Failure to comply with any required follow-up

## ❖ Consequences of Non-Compliance with State (MOSH, and Federal (OSHA/CDC), and University (UMB) Regulations:

- **Depend on the severity of the infraction and/or repeat non-compliance**
  - **inappropriate or incomplete waste disposal 'of sharps' infractions require a meeting with the Associate Dean of Clinical Affairs, even for first time infractions**
- **2<sup>nd</sup> infraction:** notification of clinical supervisor, if not already aware; remedial training and meeting with the Dean of Clinical Affairs, if severity of the infraction warrants
- **3<sup>rd</sup> infraction:** meeting with the dean of Clinical Affairs, and possible suspension of clinic privileges