#### Miller, Diane M. (CDC/NIOSH/EID)

From:

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Sent:

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To:

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Subject:

183 - Draft National Healthcare and Social Assistance Agenda

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Attachments: OSAP.NORA.input.doc

In the event the online form submission does not work, I also am attaching a word document with our input.

Thank you. Therese Long

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OSAP - promoting safe oral healthcare globally for 25 years. Visit <a href="www.OSAP.org">www.OSAP.org</a> for infection prevention resources and check out OSAP's new "Safety Mall".

PLEASE CONSIDER THE ENVIRONMENT BEFORE PRINTING THIS EMAIL. MOTHER EARTH WILL THANK YOU!

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# OSAP Comments on Draft National Healthcare and Social Assistance Agenda NIOSH Docket 183 Submitted 10/30/09

The Organization for Safety and Asepsis Procedures (OSAP) has a vested interest in advancing and promoting health and safety research to foster a safe environment for dental professionals and patients. OSAP is dedicated to promoting infection control and safety policies and practices supported by science and research to the global dental community. This nonprofit association helps dental practitioners close the gap between policy and practice by providing relevant publications, innovative educational tools and programs, answers to infection control and safety questions, and much more. The dental workforce consists of many team members including dentists, dental hygienists, dental assistants, and dental laboratory technicians. OSAP also helps educators, researchers, companies and patients with their dental infection control and safety needs.

OSAP fully supports the National Healthcare and Social Assistance Research Agenda and is committed to advancing the agenda's goals through key partnerships in the dental community. OSAP can contribute to advancing protection to caregivers and at the same time ensuring patient safety.

It is important for dentistry to respond and be included in the Healthcare and Social Assistance Research Agenda. OSAP is an oral healthcare leader in infection prevention and safety and has developed a research agenda that is closely aligned with the Healthcare and Social Assistance agenda. Oral healthcare is an independent discipline within the subsector of Ambulatory Healthcare Services (621) that presents unique occupational risks and health challenges under each of the strategic goals listed in the Healthcare and Social Assistance agenda. There are a number of issues that are unique to this predominantly private practice setting.

OSAP believes the Healthcare and Social Assistance Research Agenda (HCSA) is well-designed and specific. OSAP has suggestions for the Social Assistance Sector Council to further include dentistry with its unique challenges in the agenda. Following are suggestions for the council's consideration:

Strategic Goal 1: Safety and Health Programs with respect to the following goals: 1.4, 1.5, 1.7, 1.8, and 1.9.

OSAP has many existing resources to aid in advancing these goals. Some of these resources include web-based educational modules, training toolkits, and relationships with OSAP members who currently are conducting research in infection control and safety. OSAP is willing to be the liaison between these resources and the HCSA council to develop a safety culture toolkit for dental settings, including a safety climate survey (Activity/Output Goal 1.4.2) as well as develop and test effective teaching tools and strategies to promote a safety culture (Activity/Output Goal 1.4.6).

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OSAP is willing to work on efforts to increase health and safety programs for workers in all states (Intermediate Goal 1.7) and optimize a safety culture in oral healthcare organizations. OSAP has identified some potential barriers to the implementation of effective programs (Intermediate Goal 1.8). The majority of dental practitioners work in small solo or group private practice settings run as "small businesses" which leads to fragmentation of efforts and difficulty in monitoring compliance. In tough economic times such as this, it can be difficult to finance the expenses associated with implementing proper safety programs. OSAP is instrumental in disseminating evidence-based cost-effective information to the dental community. One strategy to facilitate dissemination of safety culture information is to incorporate training into ongoing certification and continuing education programs for professionals, and to ensure that all dental, dental hygiene, dental assisting, and nursing schools incorporate educational programs into their curricula.

### Strategic Goal 2: Musculoskeletal Disorders (MSDs)

OSAP strongly suggests including dentistry within this overall goal. Much of the current language is focused on nursing and lifting. Dentistry has its own unique factors in MSDs, for example, repetitive strain injuries (RSI's) such as carpal tunnel syndrome, thoracic outlet syndrome, tendonitis, rotator cuff injuries, and many other neck, back, and shoulder injuries. The design of ergonomically correct dental equipment should be addressed within Activity/Output Goal 2.2.4 and practitioner's resistance to change in Activity/Output 2.2.10. Resistance to change may stem from the high expense of purchasing ergonomically correct dental equipment and from practitioner's lack of knowledge.

### Strategic Goal 3: Hazardous Drugs and Other Chemicals

OSAP strongly suggests including dentistry within this overall goal. Like other healthcare settings, dental facilities such as dental offices and dental laboratories, also work with a variety of chemical agents and materials including cleaning and disinfecting agents, chemical sterilants, anesthetic gases, surgical smoke (electrosurgery/laser plumes), natural rubber latex, mercury, tissue preservatives, noise, ionizing and non-ionizing radiation, asbestos, impression materials, and gypsum. Many of them are unique to dentistry; for example, dental materials such as methyl methacrylate, amalgam, composite resin, lasers, curing lights, acid etch, disinfectants, sterilization products, and x-ray processing chemicals such as developer and fixing agents. OSAP is instrumental in disseminating information to the dental community and could be a resource for researchers to advance the Healthcare and Social Assistance Research Agenda (Activity/Output Goals 3.1, 3.3, 3.3.2, 3.3.3).

### Strategic Goal 4: Sharps Injuries

OSAP strongly agrees with all components of this goal. OSAP is willing to work on efforts to increase mandatory annual sharps and bloodborne pathogens training for workers in all states (Activity/Output Goal 4.3.2, 4.4, and 4.6, 4.6.1, 4.6.4). OSAP has anecdotally identified some potential barriers within this goal such as fear, attitude, cost, and time especially for workers in

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"small businesses" such as private dental practices. OSAP has many existing resources to aid in advancing this goal.

**Strategic Goal 5: Infectious Diseases** 

OSAP strongly agrees with all components of this goal. OSAP is willing to work on efforts to increase compliance with recommended vaccinations (Activity/Output Goal 5.2). OSAP strongly suggests including dentistry within Activity/Output Goal 5.1.3. Dental treatment generates high volumes of aerosols in the office from handpieces and ultrasonic units. Some barriers to Strategic Goal 5 are similar to those listed above in Goal 4. OSAP strongly agrees that Intermediate Goals 5.4, 5.7, 5.9, and 5.11 are very important and relevant to dentistry. Many of the components of Strategic Goal 5 are directly in alignment with OSAP's research agenda.

OSAP membership includes leading investigators who are conducting research to understand mechanisms and determinants of routes by which infectious diseases are transmitted in dental settings, as well as improving approaches to worker vaccinations, improving hand hygiene, improving disinfection and decontamination, identifying and responding to highly infectious exposures, research and adopting best practices for personal protective equipment (PPE), designing strategies to facilitate appropriate work practices and incorporate protective engineering controls, and improving post-exposure prophylaxis.

The use of respirators in dentistry is relatively low, with most being used in the hospital dental setting (urgent care for patient's with TB and H1N1) (Activity/Output Goal 5.10.3). Research is greatly needed in dentistry with regard to Activity/Output Goal 5.11. Many dental offices have carpeted treatment rooms in their facilities. Facility designers need to be aware of the risks when designing dental treatment rooms. Dentistry needs to be included within Activity/Output Goal 5.11.14. The dental unit has unique water lines that can pose a risk of developing pathogenic biofilms. Much research has been done in this area already and should be included in the agenda.

OSAP's insight to the unique factors within dentistry and comments for addition to the agenda should help in advancing health and safety research. Overall, OSAP fully supports the Healthcare and Social Assistance agenda and is hopeful that collaboration will bring about safer practices.