2023 OSAP ANNUAL CONFERENCE





# Achieving Safety Culture in Dentistry and Why it Matters

Joseph Castellano, DDS

American Academy of Pediatric Dentistry

June 2, 2023





### Disclosure Statement

Joseph Castellano, DDS

I have no relevant financial relationships to disclose.

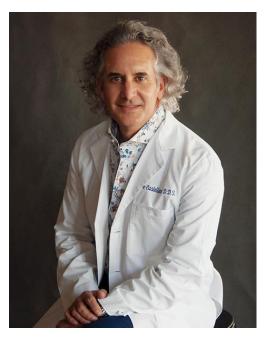


### **Learning Objectives**

- Identify your most important safety objectives as an organization or group
- Assemble essential and applicable resources on safety
- Describe the breadth of safety issues in a dynamic care environment
- Do a safety culture assessment of your organization, including a quantitative evaluation



### Welcome



Joseph Castellano, DDS

Dr. Joe Castellano is the partner in a private practice in Laredo, Texas. He is a graduate of the University of Texas Dental Branch in Houston and completed his one-year residency in advanced general dentistry and later a two-year residency to specialize in the field of pediatric dentistry. Both residencies were completed at the University of Texas Health Science Center in San Antonio, Texas. Dr. Castellano is board certified and an assistant Clinical Professor for the Department of Developmental Dentistry at UTHSC-SA Dental School. He is also a graduate of the AAPD Leadership Institute and the AAPD Advanced Leadership Institute. Dr. Castellano is a fellow of the American College of Dentists and past president of the AAPD.







## Part 1: The Beginning

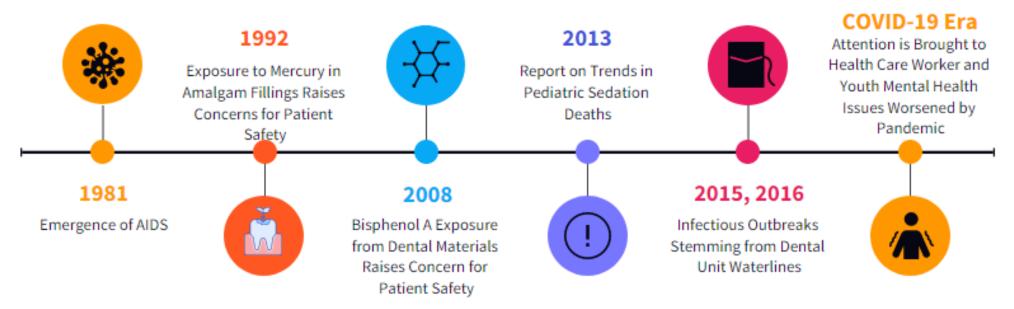
**A Safety Impetus for Organized Dentistry** 





### Red Flags in Dentistry

### SHORT HISTORY



### How the AAPD Responded to Sedation Deaths

- Macro level review and analysis
- Review of training standards
- Collaborative guidelines with AAP
- Establishment of minimal experiences and training for residents, and
- Ongoing CE training for practitioners
- Establishment of a sedation committee
- Regular review of CODA dental education standards

Behavior Guidance for the Pediatric Dental Patient

## PHYSICIANS ENDORSE GUIDELINES FOR DEEP SEDATION AND ANESTHESIA DURING DENTAL PROCEDURES FOR KIDS

Guidelines for Monitoring and Management of Pediatric Patients Before, During, and After Sedation for Diagnostic and Therapeutic Procedures

Charles J. Coté, MD, FAAP • Stephen Wilson, DMD, MA, PhD • American Academy of Pediatric Dentistry • American Academy of Pediatrics

Dental Anesthesia Incident Reporting System (DAIRS)







# Safety Committee is Formed to Assess Safety in Dentistry and Educate Members

"We don't know what we don't know."

#### **VISION**

To champion the safest possible oral health care delivery system to protect the health and well-being of patients and their providers. The mission of the Committee is to apply the diverse resources of the AAPD in aiding dentists to create a culture of safety for both patients and providers in the dental setting. This is done by building and incorporating systems of safety into all aspects of the delivery of oral health.

# Safety Committee is Formed to Assess Safety in Dentistry and Educate Members

### Top concerns at the time:

- Sedation
- •
- •
- •



## Safety Issues in a Dynamic Environment

### Adverse Events in Pediatric Dentistry: An Exploratory Study

Jean Marie Calvo, DDS, MPH¹ • Enihomo Obadan-Udoh, DDS, MPH, Dr. Med. Sc.² • Muhammad Walji, BS, MS, PhD³ • Elsbeth Kalenderian, DDS, MPH, PhD⁴

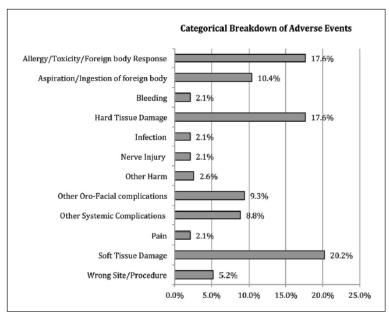


Figure 2. Categorical breakdown of adverse events by percent (%) of total AEs identified in interviews and surveys.

#### Conclusions

This study developed the first ever inventory of pediatric dental adverse events, identifying 168 unique AEs known to be occurring in pediatric dentistry. Based on the study's results the following conclusions can be made:

- A significant proportion of pediatric dentists are aware of recent mild, reversible, or permanent AEs affecting their patients.
- A small but poignant number of pediatric dentists indicated that their patients faced moderate to severe AEs.

Calvo JM, Obadan-Udoh E, Walji M, Kalenderian E. Adverse Events in Pediatric Dentistry: An Exploratory Study. Pediatr Dent. 2019 Nov 15;41(6):455-467. PMID: 31882032.



# Safety Issues in a Dynamic Environment: Patient

- Allergy/toxicity/foreign body response
- Aspiration/ingestion of foreign body
- Bleeding
- Hard tissue damage
- Infection (due to procedure)
- Nerve injury
- Other harm
- Other oro-facial complications
- Other systemic complications
- Pain
- Soft tissue damage
- Wrong site/procedure

- Transmissible infections
- Over-use of medications like Tylenol
- Microbial resistance
- Violence
- Mental health
- Consent issues
- Cybersecurity
- Radiation
- Accidents on site
- Post-sedation side effects
- Post nitrous nausea
- Post-op pain from clamps and nicked tissue



### Joint Commission Safety Reports 2022-23

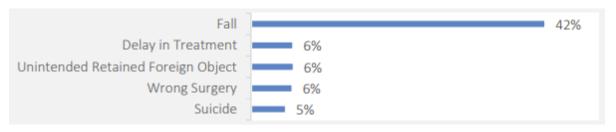


# 2023 Ambulatory Health Care National Patient Safety Goals

- -Identify patients correctly
- -Prevent infection
- -Use medications safely
- -Improve health care equity
- -Prevent mistakes in surgery

https://www.jointcommission.org/-/media/tjc/documents/standards/national-patient-safety-goals/2023/npsg\_chapter\_ahc\_jul2023.pdf

#### **Leading Sentinel Events, 2022**



Event Types	N	% of Tota
Fall	611	429
Delay in treatment	89	69
Unintended retention of a foreign object	88	69
Wrong surgery*	85	69
Suicide	73	59
Assault/rape/sexual assault/homicide	60	49
Fire/burns	49	39
Perinatal event	33	29
Self-harm	30	29
Medication management	30	29

<sup>\*</sup>Wrong surgery includes wrong site, wrong procedure, wrong patient, and wrong implant.

The Joint Commission Sentinel Event Data 2022 Annual Review



# ECRI Report Cites A Lack of Reporting Failed Medical Devices

#### ECRI Top 10 Safety Concerns for 2023

#### The List for 2023

- 1. The pediatric mental health crisis
- 2. Physical and verbal violence against healthcare staff
- Clinician needs in times of uncertainty surrounding maternal-fetal medicine
- Impact on clinicians expected to work outside their scope of practice and competencies
- 5. Delayed identification and treatment of sepsis
- 6. Consequences of poor care coordination for patients with complex medical conditions
- Risks of not looking beyond the "five rights" to achieve medication safety
- 8. Medication errors resulting from inaccurate patient medication lists
- 9. Accidental administration of neuromuscular blocking agents
- 10. Preventable harm due to omitted care or treatment



https://www.ecri.org/top-10-patient-safety-concerns-2023-special-report

#### ECRI Top 10 Health Technology Hazards for 2023

#### The List for 2023

- 1. Gaps in Recalls for At-Home Medical Devices Cause Patient Confusion and Harm
- 2. Growing Number of Defective Single-Use Medical Devices Puts Patients at Risk
- Inappropriate Use of Automated Dispensing Cabinet Overrides Can Result in Medication Errors
- Undetected Venous Needle Dislodgement or Access-Bloodline Separation during Hemodialysis Can Lead to Death
- Failure to Manage Cybersecurity Risks Associated with Cloud-Based Clinical Systems Can Result in Care Disruptions
- 6. Inflatable Pressure Infusers Can Deliver Fatal Air Emboli from IV Solution Bags
- 7. Confusion Surrounding Ventilator Cleaning and Disinfection Requirements Can Lead to Cross-Contamination
- 8. Common Misconceptions about Electrosurgery Can Lead to Serious Burns
- Overuse of Cardiac Telemetry Can Lead to Clinician Cognitive Overload and Missed Critical Events
- 10. Underreporting Device-Related Issues May Risk Recurrence

https://www.ecri.org/top-10-health-technology-hazards-2023-executive-brief

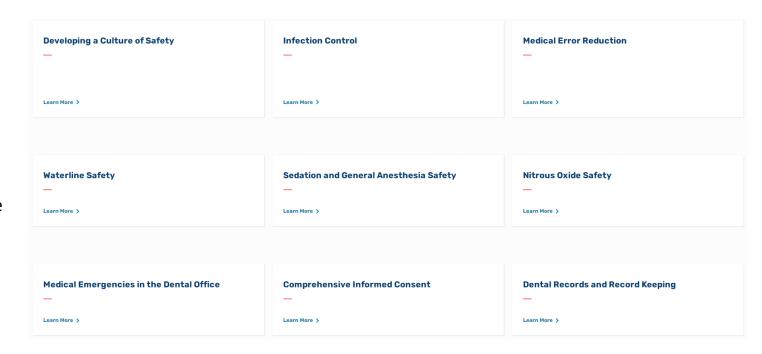


### A Safety Toolkit for Dentistry

AAPD Safety Committee reaches consensus that members should be aware of key issues critical to safety in dentistry and creates toolkit following Delphi process and literature search.

### **Key issues**

- Developing a culture of safety
- Infection control
- Medical error reduction
- Waterline safety
- Sedation and general anesthesia safety
- Nitrous oxide safety
- Medical emergencies in the dental office
- Comprehensive informed consent
- Dental records and record keeping
- Office design safety
- Personnel security
- IT security





### A Safety Toolkit for Dentistry

### **Developing a Culture of Safety**

This topic is the touchstone of all other safety topics and actions. Safety culture is the attitude, belief and value of an organization that safety should be prioritized and risks to negative health effects be minimized. Additionally, this topic covers surveillance activities and quality improvement.

Practice Tools	~
Scientific Documentation	~
Training Tools	~
Library	~
https://www.aand.org/resources/member/safety-toolkit/developing-a-culture-of-safety/	

### A Safety Toolkit for Dentistry

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#### **Practice Tools**

Policy on Patient Safety (AAPD)

Patient Safety Curriculum Guide: Multi-Professional Edition (WHO)

Survey on Patient Safety Culture (AHRQ)

An Algorithm-Based Approach for Behavior and Disease Management in Child (Research Article)

https://www.aapd.org/resources/member/safety-toolkit/developing-a-culture-of-safety/



# How the AAPD is Trying to Arm its Providers and Protect Patients in a Dynamic Environment

- Symposium: Hidden Threats and Safe Practices: Steps to creating a safe dental home, 2019
- Safety Toolkit, 2020
- Integrating safety across Academy
  - Policies and Best Practices
  - Pediatric Dentistry Today
  - Podcasts
  - E-News
  - Website
  - AAPD Annual Meeting, Biennial Safety Program
- PEARS Endorsement
- Partnerships, AAOMS, Quad A (formerly AAAASF), OSAP
- Little Teeth Chat Discussion Forum Safety Special Interest Group
- Safety in Pediatric Dental Care Delivery: Curriculum for Pediatric Dentistry Residency Programs





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Policy on Pediatric Dental Office Security Background and Intent

Latest Revision

How to Cite: American Academy of Pediatric Dentistry. Policy on patient safety. The Reference Manual of Pediatric Dentistry. Chicago, III.: American Academy of Pediatric Dentistry; 2022:176-80.









### WebDonuts.com



## Part 2: COVID-19

How the AAPD looked at risk and mitigation during COVID-19



### COVID-19 Outbreak Closes Dental Practices

Update: Public Health Response to the Coronavirus Disease 2019 Outbreak — United States, February 24, 2020

Weekly / February 28, 2020 / 69(8);216-219

On February 25, 2020, this report was posted online as an MMWR Early Release.

Daniel B. Jernigan, MD<sup>1</sup>; CDC COVID-19 Response Team (VIEW AUTHOR AFFILIATIONS)

Severe Outcomes Among Patients with Coronavirus Disease 2019 (COVID-19) — United States, February 12–March 16, 2020

Weekly / March 27, 2020 / 69(12);343-346

Coronavirus Disease 2019 in Children — United States, February 12–April 2, 2020

Weekly / April 10, 2020 / 69(14);422-426

Characteristics of Health Care Personnel with COVID-19 — United States, February 12–April 9, 2020

Weekly / April 17, 2020 / 69(15);477-481

Geographic Differences in COVID-19 Cases, Deaths, and Incidence — United States, February 12–April 7, 2020

Weekly / April 17, 2020 / 69(15);465-471

Hospitalization Rates and Characteristics of Patients Hospitalized with Laboratory-Confirmed Coronavirus Disease 2019 — COVID-NET, 14 States, March 1–30, 2020

Weekly / April 17, 2020 / 69(15);458-464

### Many dental procedures considered 'non-essential' during COVID-19 crisis

BY MARY OTTO | MARCH 24, 2020

Dental providers across the U.S. are being urged to limit most services in response to the COVID-19 pandemic.

The Centers for Medicare & Medicaid
Services (CMS) on March 18 recommended that clinicians and hospitals
delay non-essential dental, medical and
surgical procedures not only to reduce
the spread of disease but also to conserve personal protective equipment
(PPE) for frontline health care workers
responding to the virus outbreak.



PHOTO: NAVAL SURFACE WARRIORS VIA FLICKE

https://healthjournalism.org/blog/2020/03/many-dental-procedures-considered-non-essential-during-covid-19-crisis/

### Re-emergence

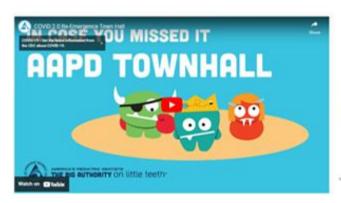
Pedo Teeth Talk and Newly Erupted Podcasts: Conversations on Safety in Pediatric Dentistry

Taking care of yourself, your mental health and wellbeing, With Dr. Sheela Raja, August 2020

All you need to know about infection control. With Dr. John Molinari, March, March 2020

#### Safety Townhalls

- Sound Science for Reopening Your Practice, April 27, 2020
- Mental Health & Taking Care of You, August 26, 2020





### **COVID-19 Update/Coronavirus Update**

CDC Guidance for Providing Dental Care During COVID-19 Updated (April 9, 2020) Grassroots Effort to Reverse SBA Guidance on EIDL and PPP Loans (April 6, 2020) AAPD COVID-19 Update for (April 3, 2020) ADA Recommends Only Emergency/Urgent Procedures Through April 30 and Releases Interim Guidance for Reducing Risk of COVID-19 Transmission (April 2, 2020) Update on New Infection Control Guidance from the CDC (March 27, 2020) COVID-19 Update (March 20, 2020) COVID-19 Update (March 17, 2020) Latest from AAPD on COVID-19 (March 16, 2020) A Message from Dr. Kevin Donly, AAPD President & Dr. Paul Casamassimo, Chief Policy Officer for AAPD (March 12, 2020)



## Looking Beyond Re-emergence

#### Are Surface Disinfectants Safe?

By Paul S. Casamassimo, D.D.S., M.S.

The COVID-19 pandemic brought to light numerous issues from telehealth to infection control to personal and patient mental well-being. Early in the pandemic, with transmission still shrouded in confusion and a lack of data, infection by contact, also termed "fomite transmission," was among vectors thought to be important. Months of data collection and analysis diminished the importance of contact transmission compared to droplets, aerosols, and personal distancing, but the original concerns prompted some practices to implement more rigorous protocols, some of which were homegrown.

### Helping Healers Heal: Resiliency Resources for Now, Later, & Long Term

#### **Learning Objectives:**

- Understand the crucial link between workforce wellness, quality, patient safety, and sustained wellbeing both personally and professionally
- Deploy the Helping Healers Heal (H3) framework to develop a holistic workforce wellness culture for you and your team
- Apply learning about the current challenges and climate that impacts workforce wellness and how to leverage the 8 dimensions of wellness to foster a supportive approach and work environment

#### Addressing Hidden Dangers for Children

Paul S. Casamassimo, D.D.S., M.S. Andrew Vo, D.D.S., M.S. Maureen P. Casamassimo, B.A., M.A.

Seeing threats to children in the media, like trafficking and errant shootings in dangerous neighborhoods, is becoming commonplace. While we focus on our part of the pediatric health paradigm, our commitment to safety as pediatric health providers extends beyond the oral cavity to opportunities to help a child by surveillance of possible threats when we interact with them and families.

Check out the latest from colleagues in dentistry and others in health care on the challenges faced in our demanding and often stressful roles. Access tools for creating work-life balance and resources to support you for a rewarding, fulfilling career.



Occupational Well-Being	*
COVID-19 Takeaways	*
Working Toward Balance	*
Guarding Against Burnout	*
Practicing Resilience & Mindfulness	•
Clinical Workplace Stressors	•
Clinical Workplace Stressors	•





"He's accident prone... he just poked himself in the eye with his safety-glasses!"

## Part 3: A Safety Curriculum

Safety in Pediatric Dental Care Delivery:

Curriculum for Pediatric Dentistry Residency Programs



### Safety Concepts and Tools in Dental Programs

"Safety Training in US Pediatric Dentistry Advanced Education Programs: A Survey of Program Directors"

Types and Impacts of Adverse Events in Pediatric Dentistry Programs	N	%
Total	28	100
What types of adverse events have your residency program experienced over the last five years?	N	%
Diagnostic error(s) have let to patient harm (i.e., failure to premedicate, wrong patient, failure to radiograph, unplanned admission, allergic response)	8	29%
Treatment error(s) have let to tissue damage, excessive pain or bleeding, unplanned admission or ED visit (i.e., wrong site or tooth treated, medication mishap such as sedation or local anesthetic complication or medication overdose, ingested/aspirated foreign object)	18	64%
Prevention error(s) have resulted in harm (i.e., parent/guardian medical event during treatment such as fainting or tripping or falling)	7	25%
System error(s) have resulted in harm (i.e., events related to the facility such as failure of electrical and gases or toxic spill, activation of EMS)	1	4%
Other errors (team member injury such as needle stick or exposure to chemicals, breach of medical/dental records, radiographs attached to the wrong chart, etc.)	21	75%
In the last five years, has an adverse event or "near miss" led to a change in any standard operating procedure in your residency program?	N	%
Yes	12	43%
No	15	54%
Not sure	2	7%
If yes, please share example	7	25%



### Safety Concepts and Tools in Dental Programs

"Safety Training in US Pediatric Dentistry Advanced Education Programs: A Survey of Program Directors"

#### How could the AAPD help support your safety education efforts?

Provide specific educational modules	72%
Provide a reading list for literature review	65%
Other (CE, seminar, symposium, safety templates)	10%

**Conclusion:** Although the program directors feel safety education is important, programs do not sufficiently address safety education and look for support to help integrate safety measures into education.



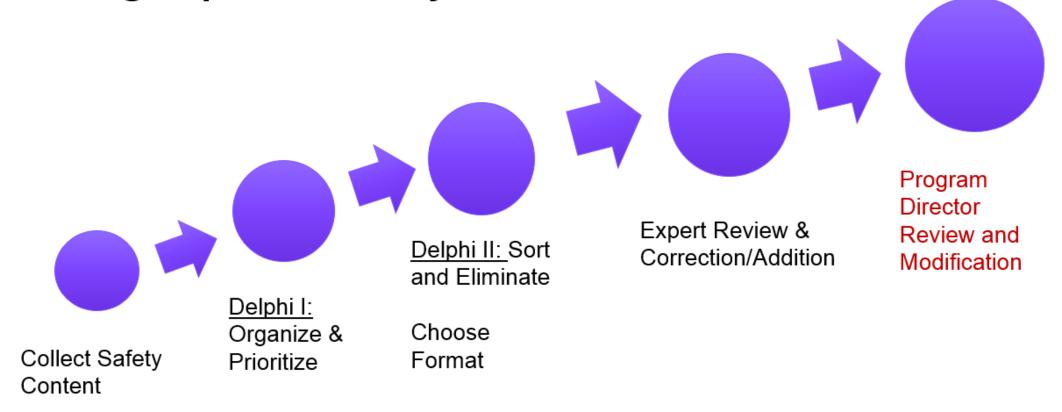
### Safety in Pediatric Dental Care Delivery: Curriculum for Pediatric Dentistry Residency Programs

- 1. Support pediatric dentists as they strive to create the safest possible environment for dental care delivery to protect the health and well-being of patients, their teams, and themselves as providers
- 2. Provide foundational information about safety science and principles of safety, and guidance on fostering a safety culture
- 3. Flexible design to meet the needs of various settings and program types, including those in hospitals, dental schools, and health centers



## Developing a Safety Curriculum: The Process

A task group of the Safety Committee was involved:



# Safety in Pediatric Dental Care Delivery: Themes and Objectives

Themes	Objectives
1. Fostering a Culture of Safety	Describe the rationale for and use of basic safety tools in healthcare
2. Principles of Safety in Healthcare	Identify the essential components of a culture of safety in healthcare
3. Communication	Practice communication strategies with dental teams and patients and families that promote safe environments
4. Documentation & Reporting	Employ tools for preventing, documenting, and reporting adverse events and near misses in the clinical setting
5. Safety in Clinical Practice	Demonstrate the ability to self-assess current safety practices at the individual, team, and organizational level



# Suggested Materials for Each Theme + Library

Theme	Example suggested material
Culture of Safety	PSNet Patient Safety Primer: Culture of Safety
Principles of safety	Adverse Events in Pediatric Dentistry: An Exploratory Study
Communication	SBAR Tool: Situation-Background-Assessment- Recommendation
Documentation and Reporting	An Adverse Event Trigger Tool in Dentistry: A New Methodology for Measuring Harm in the Dental Office
Safety in Pediatric Dental Practice	Guidance for Performing Root Cause Analysis (RCA) with Performance Improvement Projects (PIPs)
Library	<u>Dental Patient Safety in the Military Health System: Joining Medicine in the Journey to High Reliability</u>





"Don't tell me how to work safely!
I've been at this job for five years!"



## Part 4: Emerging Issues



### **Current & Emerging Issues**

- COVID-19 & Infectious Disease
- Protecting the Health & Safety of Children
- Office Infection Control
- Occupational Health & Well-Being for the Dentist and Dental Team
- Climate and Environmental Impacts on the Health & Safety of Children



### **Product Design & Innovation Safety**



### **Medical Device Recalls**

Evaluation of Safety Concerns with Certain

Dental Devices Used on Adults – FDA Safety

Communication

Pulse Oximeter Accuracy and Limitations: FDA Safety Communication

The dangers of dental devices as reported in the Food and Drug Administration Manufacturer and User Facility Device Experience Database

Nutan B. Hebballi, BDS, MPH • Rachel Ramoni, DMD, ScD • Elsbeth Kalenderian, DDS, MPH, PhD • ...

Joel M. White, DDS, MS • Ram Vaderhobli, DDS, MS • Muhammad F. Walji, PhD ♣ ☑ • Show all authors

## Advancing Equity in Medical Device Development for Children

Florence T. Bourgeois, MD, MPH<sup>1,2</sup>; Juan C. Espinoza, MD<sup>3,4</sup>

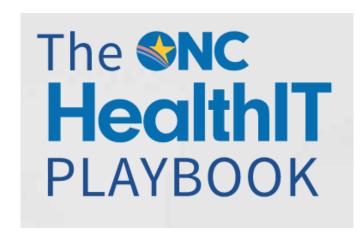
» Author Affiliations

JAMA Pediatr. Published online April 24, 2023. doi:10.1001/jamapediatrics.2023.0790





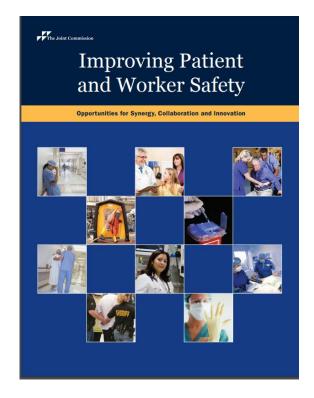
# Disaster Management, Cybersecurity, Personnel Exposure Issues





Emergency and Disaster Recovery Planning in the Dental Office





Occupational Reproductive Hazards for Female Surgeons in the Operating Room

A Review https://jamanetwork.com/journals/jamasurgery/article-abstract/2757728



#### Climate & Environmental Impacts



#### Climate Change and Children's Health and Well-Being in the United States Report

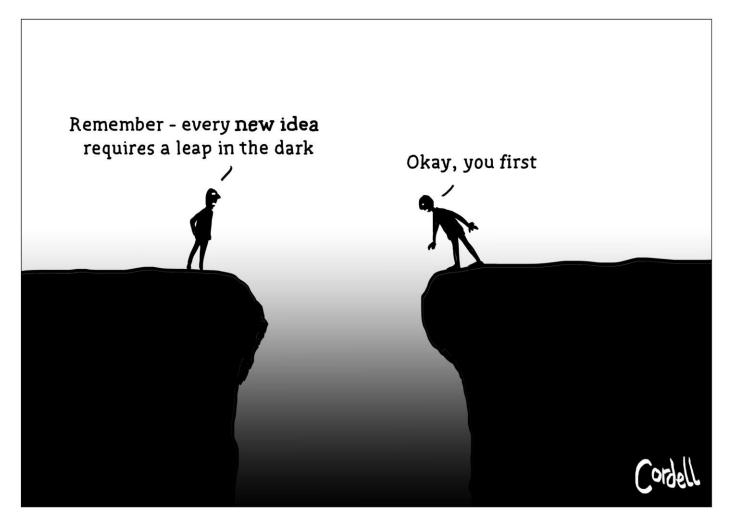


# Increasing Climate Stressors Expected to Impact Health and Safety of Children

- -Extreme heat
- -Air quality
- -Changing seasons
- -Flooding
- -Infectious Diseases

https://www.epa.gov/cira/climate-change-and-childrens-health-and-well-being-united-states-report?utm\_medium=email&utm\_source=govdelivery





CartoonStock.com

# Part 5: Bringing Safety Culture into Your Practice

Ways to create a safety culture in your organization



## Joint Commission 11 Tenets of Safety Culture

- 1. Apply a transparent, nonpunitive approach to reporting and learning from adverse events, close calls and unsafe conditions.
- 2. Use clear, just, and transparent risk-based processes for recognizing and distinguishing human errors and system errors from unsafe, blameworthy actions.
- 3. CEOs and all leaders adopt and model appropriate behaviors and champion efforts to eradicate intimidating behaviors.
- 4. Policies support safety culture and the reporting of adverse events, close calls and unsafe conditions. These policies are enforced and communicated to all team members.
- 5. Recognize care team members who report adverse events and close calls, who identify unsafe conditions, or who have good suggestions for safety improvements. Share these "free lessons" with all team members (i.e., feedback loop).





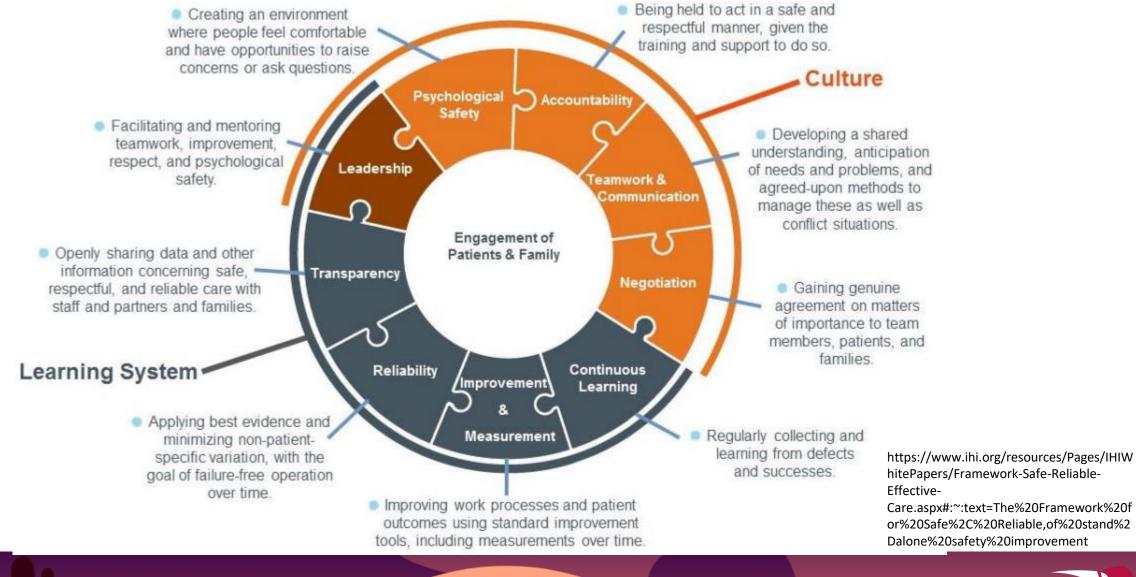
#### 11 Tenets of Safety Culture

- 6. Determine an organizational baseline measure on safety culture performance using a validated tool.
- 7. Analyze safety culture survey results from across the organization to find opportunities for quality and safety improvement.
- 8. Use information from safety assessments and/or surveys to develop and implement unit-based quality and safety improvement initiatives designed to improve the culture of safety.
- 9. Embed safety culture team training into quality improvement projects and organizational processes to strengthen safety systems.
- 10. Proactively assess system strengths and vulnerabilities, and prioritize them for enhancement or improvement.
- 11. Repeat organizational assessment of safety culture every 18 to 24 months to review progress and sustain improvement.



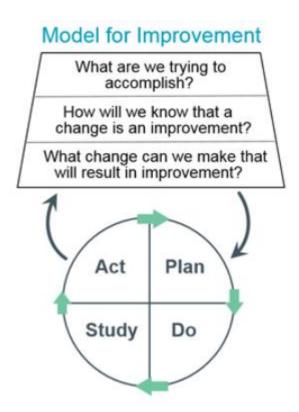


#### Framework for Safe, Reliable, and Effective Care — with Descriptive Detail for the Components





### Model for Improvement



Institute for Healthcare Improvement (IHI), How to Improve



### **Evaluating Patient Safety Culture**



Agency for Healthcare Research and Quality

#### Medical Office Survey on Patient Safety Culture

AHRQ sponsored the development of the Medical Office Survey on Patient Safety Culture in response to requests for a survey in this setting. This survey is designed specifically for outpatient medical office providers and other staff and asks for their opinions about the culture of patient safety and health care quality in their medical offices.

#### **Reporting Patient Safety Events**



#### **Key Components of an Effective Event Reporting System**

- 1. Institution must have a supportive environment for event reporting that protects the privacy of staff who report occurrences
- 2. Reports should be received from a broad range of personnel
- 3. Summaries of reported events must be disseminated in a timely fashion
- 4. A structured mechanism must be in place for reviewing reports and developing action plans

https://www.ahrq.gov/sops/surveys/medical-office/index.html

https://psnet.ahrq.gov/primer/reporting-patient-safety-events



# Examining Personnel Impact on Patient Centered Care

Burnout Among Health Care Professionals: A Call to Explore and Address This Underrecognized Threat to Safe, High-Quality Care

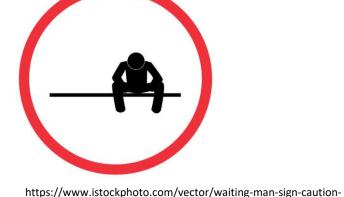
By Lotte N. Dyrbye, Tait D. Shanafelt, Christine A. Sinsky, Pamela F. Cipriano, Jay Bhatt, Alexander Ommaya, Colin P. West, and David Meyers

July 5, 2017 | Discussion Paper

Burnout, engagement, and dental errors among U.S. dentists.

December 22, 2021

Yansane A, Tokede O, Walji MF, et al. J Patient Saf. 2021;17(8):e1050-e1056.



road-symbol-sign-and-traffic-symbol-design-concept-vector-gm1124604511-295293053

Impact of burnout, secondary traumatic stress and compassion satisfaction on hand hygiene of healthcare workers during the COVID-19 pandemic

Qian Zhou, Xiaoquan Lai, Zhaoyang Wan, Xinping Zhang 🔀, Li Tan 🔀



#### Resources/References

- <u>11 Tenets of a Safety Culture</u> (The Joint Commission)
- AAPD Safety in Dentistry
- AAPD Safety Toolkit
- AAPD Current & Emerging Issues in Pediatric Dentistry
- AAPD Oral Health Policies & Recommendations
- AAPD Policy on Patient Safety
- AAPD Research & Policy Center (RPC Rundown)
- Adverse Events in Pediatric Dentistry: An Exploratory Study
- Behavior Guidance for the Pediatric Dental Patient
- Burnout Among Health Care Professionals: A Call to Explore and Address This Underrecognized Threat to Safe, High-Quality Care
- Burnout, Engagement, and Dental Errors Among U.S. Dentists
- Climate Change and Children's Health and Well-Being Report (EPA)



#### Resources/References

- Characteristics of Health Care Personnel with COVID-19 United States, February 12–April 9, 2020
- Coronavirus Disease 2019 in Children United States, February 12–April 2, 2020
- <u>Current Priorities of the U.S. General Surgeon: Health Care Worker Burnout</u>
- Emergency Planning and Disaster Recovery in the Dental Office (ADA)
- ECRI Top 10 Health Technology Hazards for 2023
- ECRI Top 10 Safety Concerns for 2023
- <u>2023 Ambulatory Health Care National Patient Safety Goals</u>
- <u>Framework for Creating Safe, Reliable and Effective Care</u> (Institute for Healthcare Improvement)
- Geographic Differences in COVID-19 Cases, Deaths, and Incidence United States, February 12—April 7, 2020
- <u>Hospitalization Rates and Characteristics of Patients Hospitalized with Laboratory-Confirmed Coronavirus Disease 2019 COVID-NET, 14 States, March 1–30, 2020</u>
- How to Improve (Institute for Healthcare Improvement)
- Impact of burnout, secondary traumatic stress and compassion satisfaction on hand hygiene of healthcare workers during the COVID-19 pandemic



#### Resources/References

- Joint Commission Sentinel Event Data 2022 Annual Review
- Many dental procedures considered 'non-essential' during COVID-19 crisis
- Medical Office Survey on Patient Safety Culture (AHRQ)
- Physicians Endorse Guidelines for Deep Sedation and Anesthesia During Dental Procedures for Kids
- <u>Reporting Patient Safety Events</u> (PSNet)
- The ONC Health IT Playbook
- Occupational Reproductive Hazards for Female Surgeons in the Operating Room A Review
- <u>Improving Patient and Worker Safety: An Opportunity for Synergy, Collaboration, and Innovation</u> (The Joint Commission)
- <u>Journal of the American Dental Association, September 2015 Issue</u>
- Severe Outcomes Among Patients with Coronavirus Disease 2019 (COVID-19) United States, February 12–March 16, 2020





## Questions?



## Thank you!

Joseph Castellano, DDS jcastellanodds@msn.com



**AAPD.ORG** 



