

Expanding infection prevention consultative visits to dental facilities in Washington State through public health expertise



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CATEGORY: **Epidemiology and Laboratory Capacity (ELC)**

The Washington State Department of Health developed a training plan aimed at increasing the number of infection preventionists able to support infection control where dentistry is provided.



The “What”

In 2021, the Washington State Legislature updated the Washington Administrative Code (WAC) 246-817-660 to “establish requirements for infection control where dentistry is provided.” Following enactment of this legislation, dental facilities need current and evidence-based infection prevention recommendations to ensure compliance with the revised WAC.

Prior to November 2021, the Washington State Department of Health (WADOH) Healthcare-Associated Infections and Antimicrobial Resistance (HAI/AR) Section program had one infection preventionist (IP) who supported dental facilities with infection prevention education and outreach. Using Epidemiology and Laboratory Capacity for the Prevention and Control of Emerging Infectious Diseases (ELC) funding, WADOH developed a training plan document and activities to increase the number of HAI/AR IPs able to support dental infection prevention activities.

The infection prevention and control (IPC) program covers a large area and includes many rural and underserved communities. The IP team had limited ability to travel and were primarily tasked with responding to COVID-19 outbreaks in healthcare settings. This initiative allowed for the ability to train IPs located across a large geographic area, using existing resources and limiting travel.

The first cohort was trained by a WADOH HAI/AR employee with dental infection prevention expertise. Additionally, WADOH partnered with a local dental assistant program through a centrally located community college, who provided access to a skills training lab and tactile experiences in a simulated dental setting. This



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helped the WADOH IP team become familiar with the dental equipment and the design and flow of sterile processing areas.

A training plan document was designed to allow WADOH dental IP trainees to access assigned documents and recorded presentations through hyperlinks, which provided a self-paced preparatory stage and allowed a system for tracking students' progress through the program. Quizzes were introduced to measure students' pre- and post-program knowledge. The practical stage involved visiting a dental assistant training program lab to allow students to familiarize themselves with the equipment, operatory flow, and other topics specific to the dental setting. Students were also encouraged to shadow, co-lead, and when ready, lead a dental Infection Control Assessment and Response (ICAR).

The “So What”

The first cohort started in November 2021 and included four (4) WADOH IPs who completed the program. They are now conducting consultative infection prevention site visits to dental offices across Washington State.

Participants demonstrated an increased knowledge through participation, and the program has expanded ICAR services offered to the dental providers in the State. The training program has allowed staff, who are assigned to regional areas, to provide proactive and response-based infection prevention support to the Washington State dental community.

The “Now What”

The second cohort is scheduled for July 2023 and will also include participants from local health jurisdictions, Critical Access Hospitals, and Ambulatory Care Infection Preventionists who have expressed interest in providing similar services. WADOH has shared the training program with other HAI programs across the United States and plans to continue to collaborate with other HAI programs in this work. This IP training plan provides

a model for an introductory course series that can be implemented with existing educational resources by other IPC specialty areas.

Continued funding is imperative for the sustainability of this program. This includes retaining WADOH staff, ensuring access to educational resources (e.g., training labs, subject matter experts), and expanding partnerships.

Key contributors to this project include Sara Podczervinski, Washington State Department of Health.