2014 Annual Health and Safety Program Review and Update

In order to maintain our goal of providing a safe and healthy place in which to work and receive health services, the Health & Safety Program for our office will be reviewed and updated at least annually. The following checklist will be completed annually to insure that each aspect of our program is current and in compliance with the CDC Guidelines, Bloodborne Pathogen and Hazard Communication Standards.

DATE

___1 Exposure Control Plan reviewed and updated as appropriate including risk assessment of infectious disease i.e. TB, HBV, HCV, and HIV/AIDS.

___2 Each employee has completed a HB Vaccination form and Confidential Employee Medical Record. Records maintained term of employment, plus 30 years.

___3 Standard Precautions are followed by all staff with at risk exposure determinations.

___4 Appropriate personal protective equipment (PPE) is provided when handling hazardous chemicals, blood or other potentially infectious material (OPIM), and power equipment. [includes Masks, Eye protection, Gloves, Clinic Jackets]

___5 Sterilization of reusable devices is verifiable and complies with current professional standards. Extra-oral equipment is, at least disinfected and/or barrier protected.

___6 A protocol for maintenance of dental unit waterlines is followed to insure water quality. At least a baseline water quality test has been done per April 2012 ADA guidelines.

___7 Chemical Information List reviewed and resubmitted to Maryland Department of the Environment as appropriate.

___8 Updated Chemical labeling system reviewed. Chemical labels for all hazardous chemicals are legible and current to 2013-2016 OSHA updates.

___9 Safety Data Sheets (SDS) are available for all our hazardous chemicals and filed in the SDS appendix of the manual or available on the internet.

___10 Evacuation Plan for the office is posted and familiar to the entire staff.

___11 Emergency equipment (oxygen, ambu bag, medicaments, fire extinguisher) is readily available, in good working order, and located in areas known to employees

___12 Each employee has received initial training for our entire program, and re-training in accordance with the annual review and update. The Training Program Checklist and Training Record have been completed for each of these training sessions.

___13 A Hazard Assessment of the office has been conducted. Any faulty equipment and/or materials have been repaired/replaced as appropriate.

___14 Each employee knows when and how to follow our Post-exposure Protocol.

___15 Radiographic equipment is registered with MDE, 6 months of negative dosimetry tests are on record, and preventive maintenance report submitted annually.

___16 Each employee has had opportunities to provide input regarding safety improvements for equipment and policies, including needle safety.

Signatures

Reviewer: ________________________________ Date: _____________

Employer: ________________________________ Date: _____________

2010 by Melissa J. Mulreany, DDS (301)421-1997
MJM Health Training Concepts