201 KAR 8:581. Charity dental practices.

RELATES TO: KRS 313.254(8)
STATUTORY AUTHORITY: KRS 313.021, 313.060(1), 313.254(8)
NECESSITY, FUNCTION, AND CONFORMITY: KRS 313.021(1) requires the board to exercise all of the administrative functions of the Commonwealth in the regulation of the profession of dentistry, KRS 313.060(1) requires the board to promulgate administrative regulations relating to dental practices, and KRS 313.254(8) requires the board to promulgate administrative regulations relating to the charitable practice of dentistry. This administrative regulation establishes requirements for charitable dental practices.

Section 1. Minimum Documentation Standards for All Dental Patients of a Charitable Dental Practice. Each patient record for a dental patient of a charitable dental practice in the Commonwealth of Kentucky shall include at a minimum:

1. The patient’s name;
2. The patient’s date of birth;
3. The patient’s medical history;
4. The patient’s dental history;
5. The patient’s current medications from all healthcare providers;
6. The date of current treatment;
7. The diagnosis;
8. The treatment options presented to the patient;
9. The tooth number and surfaces to be treated, which shall be included in the progress notes;
10. The patient's current pulse and blood pressure reading;
11. Informed consent by the patient; and
12. Signature or initials of the provider.

Section 2. Documentation of Infection Control Procedures. All charitable dental practices in the Commonwealth of Kentucky shall adhere to the universal precautions outlined in the Guidelines for Infection Control in Dental Health-Care Settings published by the Centers for Disease Control and Prevention and shall retain documentation proving that:

1. All workers have been educated in the charitable dental practice or post-disaster clinic procedures for infection control;
2. All workers involved in patient treatment of have received a Hepatitis B vaccination or have signed a waiver;
3. A policy is in place requiring all staff involved in clinical patient care to wear a fresh set of gloves for each patient;
4. A policy is in place to assure all staff change gloves between patients;
5. A policy is in place to assure all staff wears protective clothing during patient care;
6. A policy is in place to assure all staff wear masks during procedures that may involve spatter;
7. The charitable dental practice contains the necessary supplies to comply with this administrative regulation;
8. All hand-pieces are sterilized following each patient treatment by one (1) of the following means:
(a) Autoclave;
(b) Dry heat; or
(c) Heat or chemical vapor;
(9) There is routine verification that sterilization methods are functioning properly;
(10) Individual burs, hand instruments, and rotary instruments are either discarded or sterilized following each use;
(11) A policy is in place that addresses the disinfection of all operatory equipment and surfaces between patients;
(12) All surfaces that are difficult to disinfect shall be covered with a non-penetrable barrier;
(13) A policy is in place requiring that all non-penetrable surfaces are changed between patients;
(14) Disinfectant is used, including the name and type of the disinfectant;
(15) A policy is in place that describes a separate place for the cleaning, disinfecting, and sterilization of items, with a mechanism of separation from the patient treatment area that may be:
(a) An enclosed instrument table;
(b) Curtains or wall separation; or
(c) Bagging of the instruments;
(16) A policy is in place that provides for the protection of dental records, charts, and radiographs from biohazards while those items are in the patient treatment area, or if no protection exists, charts shall be readily reproducible with limited effort; and
(17) An agreement exists with an agency to properly dispose of all medical waste and biohazardous material, including sharps, instruments, and human tissue.

Section 3. Infection Control Inspections. (1) The board or its designee may perform an infection control inspection of a charitable dental practice utilizing the Infection Control Inspection Checklist.
(2) A charitable dental practice that is found deficient upon an initial infection control inspection shall not be allowed to continue until the clinic coordinator provides proof to the board that the charitable dental practice is in compliance.

Section 4. General Requirements for Charitable Dental Practices. All charitable dental practices in the Commonwealth shall comply with the following requirements:
(1) The clinic coordinator, who shall supervise and oversee all charitable dental practice functions, shall be a Kentucky licensed dentist;
(2) There shall be a functional radiograph machine on site;
(3) Follow-up care provisions shall be in place for each patient requiring follow-up care;
(4) A written blood-borne pathogen exposure control plan shall be kept on site;
(5) A sharps stick protocol shall be followed in which:
(a) The entity that will collect specimens shall be identified prior to the start of the event; and
(b) The laboratory that will perform blood work analysis shall be identified prior to the start of the event;
(6) Post-operative instructions shall be delivered to the patient prior to the patient leaving;
(7) A dentist shall not supervise more than six (6) students in a charitable dental practice or post-disaster clinic;
(8) All procedures shall be concluded by the end date of the charitable dental practice unless a Kentucky licensed dentist has stated in writing that the licensee shall complete the procedure in a timely manner at his practice;
(9) All charitable dental practices shall notify the board no less than thirty (30) days prior to
the start of an event of the dates, locations, and host of the event;

(10) A charitable dental practice shall provide the names and license numbers of all participating dentists and dental hygienists no later than fifteen (15) days post-event;

(11) A prescription for a narcotic shall not be written during an event unless approved by a designated dental prescription coordinator who shall hold a full license to practice dentistry in the Commonwealth of Kentucky. The prescription shall be approved if it is medically appropriate;

(12) A written emergency medical response plan shall be kept on site; and

(13) All charitable dental practices larger than forty (40) chairs shall have at least one (1) portable oxygen tank and emergency response (ER) kit[Basic Life Support (BLS) ambulance] on site for the duration of the event.

Section 5. Registered Dental Assistants and Auxiliary Personnel. (1) For the purpose of a charitable dental practice an individual performing a duty in the charity event, other than a licensed dentist or licensed dental hygienist, shall be restricted to the duties of a dental auxiliary; and

(2) A radiograph shall not be taken unless the person performing the x-ray has met the requirements of 201 KAR 8:571.

Section 6. Incorporation by Reference. (1) The following material is incorporated by reference:

(a) "Guidelines for Infection Control in Dental Health-Care Settings", December 2003; and

(b) "Infection Control Inspection Checklist", July 2010.

(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Kentucky Board of Dentistry, 312 Whittington Parkway, Suite 101, Louisville, Kentucky 40222, Monday through Friday, 8 a.m. to 4:30 p.m. This material is also available on the board’s Web site at http://dentistry.ky.gov.

JEFF ALLEN, Executive Director

APPROVED BY AGENCY: April 15, 2019

FILED WITH LRC: April 15, 2019 at noon

PUBLIC HEARING AND PUBLIC COMMENT PERIOD: A public hearing on this Amendment shall be held on May 24 at 9 a.m. Eastern Time at the Kentucky Board of Dentistry, 312 Whittington Parkway, Suite 101, Louisville, Kentucky 40222. Individuals interested in being heard at this hearing shall notify this agency in writing by five workdays prior to the hearing of their intent to attend. If no notification of intent to attend the hearing is received by that date, the hearing may be cancelled. This hearing is open to the public. Any person who wishes to be heard will be given an opportunity to comment on the proposed Amendment. A transcript of the public hearing will not be made unless a written request for a transcript is made. If you do not wish to be heard at the public hearing, you may submit written comments on the proposed Amendment. Written comments shall be accepted through May 31, 2019. Send written notification of intent to be heard at the public hearing, or written comments on the proposed Amendment to the contact person below.

CONTACT PERSON: Jeff Allen, Executive Director, Kentucky Board of Dentistry, 312 Whittington Parkway, Suite 101, Louisville, Kentucky 40222, phone (502) 429-7280, fax (502) 429-7282, email jeffrey.allen@ky.gov.

REGULATORY IMPACT ANALYSIS AND TIERING STATEMENT
Contact Person: Jeff Allen

(1) Provide a brief summary of:
   (a) What this administrative regulation does: This administrative regulation establishes requirements for charitable dental practices.
   (b) The necessity of this administrative regulation: KRS 313.254(8) requires the board to promulgate administrative regulations relating to the charitable practice of dentistry.
   (c) How this administrative regulation conforms to the content of the authorizing statutes: KRS 313.021(1) requires the board to exercise all of the administrative functions of the Commonwealth in the regulation of the profession of dentistry, KRS 313.060(1) requires the board to promulgate administrative regulations relating to dental practices, and KRS 313.254(8) requires the board to promulgate administrative regulations relating to the charitable practice of dentistry.
   (d) How this administrative regulation currently assists or will assist in the effective administration of the statutes: This administrative regulation details the requirements for the charitable practice of dentistry.

(2) If this is an amendment to an existing administrative regulation, provide a brief summary of:
   (a) How the amendment will change this existing administrative regulation: This amendment updates the tests and equipment necessary for the charitable practice of dentistry.
   (b) The necessity of the amendment to this administrative regulation: This amendment is necessary in order to bring the administrative regulation up-to-date with the current best practices in the field of charitable dentistry.
   (c) How the amendment conforms to the content of the authorizing statutes: The amendment updates the tests and equipment necessary for the charitable practice of dentistry, and KRS 313.254(8) requires the board to promulgate administrative regulations relating to the charitable practice of dentistry.
   (d) How the amendment will assist in the effective administration of the statutes: The amendment ensures that the regulation of the charitable practice of dentistry is up-to-date and aligned with best practices in the field.

(3) List the type and number of individuals, businesses, organizations, or state and local governments affected by this administrative regulation: This regulation will affect the approximately 200 dentists currently registered to perform charitable dentistry in Kentucky as well as any licensed dentists who register to do so in the future. This amendment is not expected to affect number of dentists performing charitable dentistry.

(4) Provide an analysis of how the entities identified in question (3) will be impacted by either the implementation of this administrative regulation, if new, or by the change, if it an amendment, including:
   (a) List the actions that each of the related entities identified in question (3) will have to take to comply with this administrative regulation or amendment: Each entity will be required to record each patient’s pulse and maintain an ER kit and portable oxygen tank on site at an event if their charitable dental practice houses more than 40 chairs, rather than a BLS ambulance.
   (b) In complying with this administrative regulation or amendment, how much will it cost each of the entities identified in question (3): Charitable dental practices housing more than 40 chairs will save money as a result of the amendment’s requirement to maintain an ER kit and portable oxygen tank on site at an event, rather than a BLS ambulance. No costs will be accrued as a result of the amendment.
   (c) As a result of compliance, what benefits will accrue to the entities identified in question (3): Charitable dental practices housing more than 40 chairs will save money as a result of the amendment’s requirement to maintain an ER kit and portable oxygen tank on site at an event,
rather than a BLS ambulance. Additionally, the amendment’s requirement to record each patient’s pulse will result in enhanced diagnostic ability.

(5) Provide an estimate of how much it will cost the administrative body to implement this administrative regulation:
   (a) Initially: No cost.
   (b) On a continuing basis: No cost.

(6) What is the source of the funding to be used for the implementation and enforcement of this administrative regulation? Not applicable.

(7) Provide an assessment of whether an increase in fees or funding will be necessary to implement this administrative regulation, if new, or by the change if it is an amendment: No.

(8) State whether or not this administrative regulation established any fees or directly or indirectly increased any fees: No.

(9) TIERING: Is tiering applied? No; this amendment impacts all similarly situated practitioners equally.

**FISCAL NOTE ON STATE OR LOCAL GOVERNMENT**

(1) What units, parts or divisions of state or local government (including cities, counties, fire departments, or school districts) will be impacted by this administrative regulation? None.

(2) Identify each state or federal statute or federal regulation that requires or authorizes the action taken by the administrative regulation. KRS 313.021, 313.060(1), 313.254(8).

(3) Estimate the effect of this administrative regulation on the expenditures and revenues of a state or local government agency (including cities, counties, fire departments, or school districts) for the first full year the administrative regulation is to be in effect.
   (a) How much revenue will this administrative regulation generate for the state or local government (including cities, counties, fire departments, or school districts) for the first year? None.
   (b) How much revenue will this administrative regulation generate for the state or local government (including cities, counties, fire departments, or school districts) for subsequent years? None.
   (c) How much will it cost to administer this program for the first year? No cost.
   (d) How much will it cost to administer this program for subsequent years? No cost.

Note: If specific dollar amounts cannot be determined, provide a brief narrative to explain the fiscal impact of the administrative regulation.

Revenues (+/-): None.
Expenditures (+/-): None.
Other explanation: Not applicable.