

Legislation Details (With Text)

File #:	19-0254	Version:	1	Name:	Dental Director Report
Type:	GC Agenda Item	Status:		Status:	Filed
File created:	2/4/2019	In control:		In control:	Lake County Community Health Center Governing Council
On agenda:		Final action:		Final action:	2/14/2019
Title:	Dental Director's Report				
Sponsors:					
Indexes:					
Code sections:					
Attachments:					

Date	Ver.	Action By	Action	Result
2/14/2019	1	Lake County Community Health Center Governing Council	presented	

Dental Director's Report

Infection Control Updates

We recently conducted waterline testing for all of the practice sites and await the results of our efforts. Our goal is a 100 % pass rate. We recently updated our instrument and sterilization policy and await final approval of the draft. We plan to roll the updated policy out to staff later in the month. There will be new workflows introduced at our next staff meeting.

Dental Quality Improvement Team

This team consists of the full-time dental providers. This year we aim to return to our focus of quality assurance within the department. We recently reviewed our operations plan which consists of operational activities conducted throughout the year. Some of the operational items included in the plan are:

- When problems are identified that may adversely affect staff performance or patient well-being, they are put through a mechanism by which they are reviewed, prioritized and resolved, e.g., staff meetings, department meetings. Resolution of the problem is the ultimate responsibility of the Dental Director.
- Competency evaluations for Dental Assistants shall be developed by the committee. Upon approval, there will be an in-service training to review with Dental Staff expectations and areas of which competency testing will be conducted. Competency testing will occur at least two times per year.
- The Dental Department staff shall engage in LCHD/CHC Clinical Operations health outcome Key Performance Indicators (KPI) that will be measured and improved as identified. Each month, operational data will be compared to national benchmarks to identify opportunities for improvement (if there is a national benchmark that corresponds to a measure). KPI development will include and not be limited to clinical outcomes, patient satisfaction, and fiscal/operational. The department may also be required to develop and run CQI projects.
- The Dental Team will work in conjunction with the Clinical Compliance Team in the assurance of compliance in standards set forth as related to sterilization and infection control. Activities will include but are not limited to staff competencies, staff trainings, audits as other activities as deemed necessary.

Departmental Productivity FY 2018

We ended the year at 90% as a department. On several occasions we closed either office sites or dental chairs due to waterline testing results or watermain breaks. We did endure staffing issues this past year.

Staffing

We have had an open dental assistant position at the Northshore location for the past 3 months. This has been a difficult position to fill. More recently, I was notified by the Office Manager at the site that we may have secured an applicant for the position. Moreover, we are moving staff to cover the Zion site. We hope that our staffing issues stabilize in the near future. The recent office closures due to the cold weather will impact our January numbers. Finally, I have been working with Dr. Zun on operational issues and new program initiatives.

None, for information only.