



***Minimum Service Delivery Standards
For
Dental Clinics***



SINDH HEALTHCARE COMMISSION

Quality Care for All

Introduction:

Primary purpose of a dental health facility is to provide safe and quality care to each patient including general and specialized services. The dental facility must strive to provide services to meet the need of patients and community it serves. The main objective of producing these Minimal Service Delivery Standards is to provide a common understanding of what is expected from the dental facility to assure provision of uniform and consistently high-quality service across province of Sindh. It is expected that practitioners will utilize the minimal standards to evaluate their facility and plan for improving the quality of care and assure patient safety in line with global and national best practices.

Standard Development Process

- ↓ Review of available standards and development of draft MSDS
- ↓ Stakeholder consultative meeting with representatives of public and private sector to review draft MSDS
- ↓ Incorporation of recommendations of consultative meeting
- ↓ Formation of Technical Working Group to finalize draft
- ↓ Final draft reviewed by Technical Expert
- ↓ Approval by BOC
- ↓ Gazette notification and Stakeholder consultation meeting for dissemination

Scope

These standards are applicable to following categories of Dental Health Facilities as registered with Sindh Health Care Commission:

- **Dental Clinic-** Independent dental unit of individual or group practice by General Dentist (BDS)/Dental Specialist; single or multiple chairs. All preventive and general dentistry procedures within scope of qualification may be performed.
In such independent setting, procedures must be limited to local anesthetic use; Post-graduate dentists may utilize conscious sedation (CS) for no-risk patient subject to requirements given in appendix.
- **Dental Hospital-** Larger independent dental facility providing all specialties of dental care under one roof including day care/ambulatory procedure; multiple chairs. Post graduate dentists may provide ambulatory day surgery to low risk patients and may utilize conscious sedation (CS) subject to requirements given in appendix.
- **Dental Section of a Hospital/Teaching Hospital-** Dental section is included in scope of services of main hospital; General Dentistry and specialized services including high risk patients, maxillofacial/ trauma surgery with support from main hospital can be provided; hospital must fulfill requirements as per SSDS for Hospitals

All standards are applicable as per declared scope of services.

Scope of services of all above categories may include but not limited to following specialized domains which should be clearly stated in the application for licensure:

- Preventive Dentistry/ Dental Public Health
- Periodontics
- Endodontics
- Orthodontics

- Prosthodontics
- Pediatric Dentistry
- Oral diagnosis and oral medicine
- Dental Radiology
- Dental Aesthetics/ Cosmetic Dentistry and implants
- Oral and maxillofacial surgery
- Geriatric Dentistry

Normative References:

Normative references are those documents that contain material that must be understood and used to implement the standard and are an indispensable resource when applying the standards. In the absence of any National document, following reference document may be reviewed:

- MSDS and Reference Manual for Dental Clinics, Punjab Health Care Commission

Summary of MSDS:

S.No.	Domain	Standards	Measurable Criteria
1	Responsibilities of management (ROM)	4	13
2	Facility Management and Safety (FMS)	3	14
3	Human Resource Management (HRM)	3	6
4	Information Management System (IMS)	1	6
5	Quality Assurance (QA)	2	5
6	Access, Assessment and Continuity of Care (AAC)	1	4
7	Care of Patients (COP)	3	10
8	Management of Medications (MoM)	2	8
9	Patient Rights and Education (PRE)	4	6
10	Infection Control (IC)	3	18
	Total	26	90

Responsibilities of Management (ROM)

<u>Standard-1:</u>
The responsibilities of management are defined and management complies with regulations
Measurable Criteria <ol style="list-style-type: none"> 1.1 There is a designated focal person/clinic manager looking after non-technical tasks; (minimum requisite qualifications intermediate or proficiency certified by employer) 1.2 Financial records of clinic are maintained in hard or soft format (Salaries, utility bills, maintenance, purchasing, consultation charges etc for review by SHCC team)
<u>Standard 2:</u>
The clinic is identifiable as an entity and is easily accessible
Measurable Criteria <ol style="list-style-type: none"> 2.1 The Dental Clinic is registered / licensed with the SHCC and certificate is displayed 2.2 The clinic is identifiable with name and SHCC registration/license number on the sign board/s. 2.3 Patient/client has an easy access to the Clinic (wide/non-slip surface/wheelchair accessible by Ramp/Lift/ alternate mechanisms) 2.4 Door plate/s clearly displays name, qualification/s, PMDC No of the dental surgeon/s 2.5 Consultation hours/days of each provider are displayed.
<u>Standard 3:</u>
The healthcare service provider/s at the clinic is/are suitably qualified
Measurable Criteria <ol style="list-style-type: none"> 3.1 Valid PMC Registration Certificate of dental surgeon/s is/are displayed and Copy of all qualifications are available. 3.2 The dental service provider provides services within defined scope of qualifications
<u>Standard 4:</u>
Clinic premises support the scope of work/services
Measurable Criteria <ol style="list-style-type: none"> 4.1 The size/premises of the dental clinic is as per recommendation in appendix and must include <ul style="list-style-type: none"> ▪ Furnished waiting area for 3-5 patients ▪ Reception desk ▪ Dental unit ▪ Storage Cabinets for instrument and dental material ▪ Area for sterilization ▪ Backup power source ▪ Drinking water ▪ Clinic is well ventilated/lighted ▪ Flooring/walls/roofing are cleanable and sealed ▪ Toilet facility (In or near clinic when clinic duration/waiting time exceeds 2 hours is strongly recommended) 4.2 The dental clinic has adequate arrangements for the privacy of patients such as Screen between dental chairs 4.3 Necessary equipment to support declared scope of service is present and functional 4.4 Clinic infrastructure is suitably maintained and in good repair

Facility Management and Safety (FMS)

<u>Standard 5:</u>
The dental clinic staff is aware of, and complies with, the applicable laws, rules, regulations, bylaws and facility inspection requirements under the applicable codes
Measurable Criteria <ol style="list-style-type: none"> 5.1 The clinic management is conversant with the applicable/relevant laws and regulations such as SHCC, PMDC, PNRA, Fire Safety and building construction law and regulations 5.2 The management ensures implementation of applicable laws and regulations and incorporates amendments/updates when available 5.3 The management intimates any change in scope of services, address or services provider/s etc to SHCC
<u>Standard 6:</u>
The clinic management assures the safety of staff and patient
Measurable Criteria

<p>6.1 The staff has the knowledge about early detection and containment of fire and non-fire emergencies and relevant training is provided</p> <p>6.2 Arrangements to combat fire (preferably appropriate chemical fire extinguisher) and non-fire emergencies are in place</p> <p>6.3 The clinic has list of contact numbers of medico legal authorities, concerned police stations, ambulance/rescue services and social services organizations</p> <p>6.4 The clinic assures safety of patient and staff from radiological exposure during x-ray as per PNRA (Recommendations: Necessity based usage, minimal radiation dose, Regular Maintenance of equipment, Use of highspeed film E/F; apron for intraoral/pan x-ray adding thyroid collar for periapical/bitewing x-ray; collimation, lead walling)</p> <p>6.5 The clinic assures safety of staff from radiological exposure during x-ray (Regular maintenance of equipment, barrier/shielding, distance, personal dosimeter as appropriate)</p>
<p><u>Standard 7:</u> The clinic has a program for management of dental and support service equipment</p>
<p><u>Measurable Criteria</u></p> <p>7.1 The equipment corresponds to scope of services in type and quantity</p> <p>7.2 Complete inventory of equipment is available.</p> <p>7.3 Equipment is periodically inspected, serviced and calibrated to ensure functioning</p> <p>7.4 Annual maintenance log and service log is available.</p> <p>7.4 The use and maintenance of specialized/radiology equipment conforms to manufacturer standards</p> <p>7.5 Safe water is available for use in every dental chair</p>

Human Resource Management (HRM)

<p><u>Standard 8</u> There is documented personnel record of dental surgeon/s and staff</p>
<p><u>Measurable Criteria</u></p> <p>8.1 Personnel record/credentials of all professional and ancillary staff of the clinic are maintained</p> <p>8.2 Valid Professional licensures are available and maintained</p>
<p><u>Standard 9</u> The employees joining the dental clinic/practice are oriented to the environment, respective sections and their individual jobs</p>
<p><u>Measurable Criteria</u></p> <p>9.1 Each regular/part time/ancillary employee, student and voluntary worker is appropriately oriented to the dental clinic/relevant section/unit/service and program policies and procedures</p> <p>9.2 There is a job description (JD) present for each regular/part time employee and he/she is made aware of the JD</p> <p>9.3 Performance evaluations/feedback are based on the JDs in larger clinic setups</p> <p>9.4 Each regular/part time employee is made aware of his/her rights and responsibilities and patient rights and responsibilities</p>

Information Management System (IMS)

<p><u>Standard 10:</u> Patient's clinical record is maintained at the dental clinic (paper based or electronic)</p>
<p><u>Measurable Criteria</u></p> <p>10.1 Every patient's record has a unique identifier and particulars for identification</p> <p>10.2 There is an individual designated for maintaining records and only authorized person/s make entries in the record</p> <p>10.3 Every record entry is dated and signed</p> <p>10.4 The record provides an up-to-date and chronological account of patient care</p> <p>10.5 Dental charts/impressions are present for each intervention</p> <p>10.6 Patient records are maintained and secured in hard or soft format (Recommended to keep record of paediatric patients until age 25; Adult patients for upto 5 years)</p>

Quality Assurance/ Improvement (QA)

Standard 11:

The clinic identifies key indicators to monitor the inputs, processes and outcomes which are used as tools for continual improvement

Measurable Criteria

- 11.1 Mechanism for regular monitoring of appropriate patient assessment process is present and in use
- 11.2 Mechanism for regular monitoring of safety and quality control of equipment and the diagnostic services is present and in use
- 11.3 There is a patient feedback mechanism available
- 11.4 There is an adverse event/incident reporting mechanism and record is available

Standard 12:

Sentinel events are assessed and managed.

Measurable Criteria

- 12.1 The clinic assesses and manages sentinel events and record of same is available (A sentinel event is an unexpected patient safety occurrence causing death, permanent or severe temporary harm to patient in course of health service provision)

Assessment and Continuity of Care (ACC)

Standard 13

Declared service/s conform to respective standards

Measurable Criteria

- 13.1 The declared services are available
- 13.2 The declared services are as per the applicable quality standards
- 13.3 Dental laboratory services where present, conform to the respective standards
- 13.4 Dental radiological diagnostic services, if being provided, conform to the respective safety standards and PNRA certificates are available (Mandatory for OPG)

Care of Patients (COP)

Standard 14

The clinic has well-established patient management system

Measurable Criteria

- 14.1 The clinic has an established registration and patient guidance process
- 14.2 The clinic has referral SOPs
- 14.3 The clinic has list of contact numbers of the referral facilities
- 14.4 Standard best practice and Ethical practice is evident from the patient record

Standard 15

The clinic has essential arrangements/SOP for providing care to emergency case/outcome

Measurable Criteria

- 15.1 The clinic has essential arrangements to deal with adverse clinical outcome and medical emergency (basic life support training/life-saving drugs, emergency numbers, knowledge of referral facilities)

Standard 16

The clinic provides essential dental services including preventive care and health education

Measurable Criteria

- 16.1 General dentistry services are provided within scope as defined by relevant Council
- 16.2 Specialized services are provided after requisite training which is recognized by certifying body/ relevant council
- 16.3 Dental health education is provided as per national/international guidelines
- 16.4 Preventive services are provided as per national/international guidelines
- 16.5 The management addresses social and community responsibilities through health education in catchment population

Management of Medications (MOM) Dispensing

Standard 17
Prescribing practices conform to best practice standards
Measurable Criteria
17.1 Standards for prescription writing are followed
17.2 Prescriptions are clear, legible, dated, named and signed
17.3 Prescriptions are provided to the patients
17.4 Record of prescription is maintained as copy or entered in patient record
Standard 18:
Storage and dispensing/usage of drugs conforms to national and indicated guidelines
Measurable Criteria
18.1 Medicines/disposables/dental materials are stored as per guidelines
18.2 Medicines/disposables/dental materials are clearly labelled
18.3 Expiry dates are labelled and checked prior to usage & administering
18.4 Dispensing is by an authorized person

Patient Rights/Responsibilities and Education (PRE)

Standard 19:
There is a system for awareness/education of patients and attendants regarding the Charter of Rights and Responsibilities for compliance
Measurable Criteria
19.1 The Charter of Rights and Responsibilities are displayed and patients/families are guided on it
Standard 20:
There is a system for obtaining consent for treatment
Measurable Criteria
20.1 The dental surgeon obtains verbal consent from a patient before examination
20.2 The clinic has listed those situations/procedures where specific informed written consent is required from a patient or family and corresponding consent forms are available
Standard 21:
Patients and families have a right to information about expected costs
Measurable Criteria
21.1 The patient/family is informed about the expected cost of treatment
Standard 22:
Patients and families have a right to refuse treatment and lodge a complaint
Measurable Criteria
22.1 Patients and families have a right to refuse the treatment
22.2 Patients and families have a right to complain and there is a mechanism to address the grievances (Complaint box/SHCC complaint form)

Infection Control (IC)

Standard 23:
The clinic has infection control SOPs aimed at reducing/eliminating risk to patients, visitors and care providers
Measurable Criteria
23.1 The infection control plan is documented which aims at preventing and reducing risk of nosocomial infections
23.2 The clinic has designated individual and defined responsibilities for infection control and waste management activities
23.3 The clinic has appropriate type and quantity of consumables for standard precautions and disinfection of surfaces/equipment
23.4 All patients are considered infectious and adequate measures are taken to prevent infection transmission; known cases of blood/saliva transmissible infections are kept last on list
23.5 There is a needle-stick injury protocol present and displayed

<u>Standard 24</u> There are documented procedures for sterilization activities in the clinic
<i>Measurable Criteria</i> 24.1 There is adequate space and equipment available for sterilization 24.2 Record of sterilized instrument packs is available 24.3 Sufficient quantity of sterilized packs is available as per daily requirement 24.4 Sterilization protocol is available and displayed at relevant location 24.5 There is an established procedure for recall in case of breakdown in the sterilization system
<u>Standard 25</u> There are documented procedures for waste management activities in the clinic
<i>Measurable Criteria</i> 25.1 ALL staff involved in the creation, handling and disposal of dental/clinical waste receive regular training and ongoing education in the infection control and safe handling of dental waste 25.2 There is SOP available for managing biological clinical waste 25.3 There is SOP available for managing metallic waste medications 25.4 There is SOP and sharps bin available for managing sharps waste 25.5 There is SOP available for managing excess/expired/leftover medication/chemicals waste 23.6 Color coded bins are available and used appropriately for waste collection 23.7 Waste is safely disposed as per infectious waste guidelines 23.8 A B class vacuum based autoclave is present and functional

References

1. Minimum Service Delivery Standards, Reference Manual Dental Clinics, Punjab Healthcare Commission
2. Islamabad Healthcare Regulatory Authority, Minimum Service Delivery Standards for Dental Clinics
3. General Dental Council UK, Standards for Dental Teams
4. Directorate General of Private Health Establishments (DGPHE), Ministry of Health, Sultanate of Oman. General Dental Clinic Requirements
5. NSQHS Standards Guide for Dental Practices and Services, 2015. Australian Commission on Safety and Quality in Health Care.
6. Joint Commission International Accreditation Standards for Ambulatory Care 4th Edition: Applicable standards for Dental Clinics

Appendix 1

Dental Clinic Size Recommendation

The actual size of dental clinic will depend upon the scope of services offered, number of dental chairs and patient foot fall. Minimum recommended space requirements for a dental clinic with single dental chair is as follows:

Area Designation		Recommendation
Common Area	Space for reception, waiting area, toilet etc.	Sufficient to comfortably seat waiting patients and movement of staff
Operatory Area	Space for complete Dental Chair unit	Ideally 12 x 8.5 ft for single dental unit including platform and cabinets; 10 x7 for each additional chair with 9 ft ceiling height; floor area should be obstruction free
Ancillary Area	Space for sterilization, bio medical waste and storage	Sufficient for managing processes without obstruction and assuring infection prevention

Appendix 2

Dental Clinic Human Resource Recommendation

Following is recommended Human Resource for a Dental Clinic in numbers sufficient to manage work load, efficiently provide declared scope of services and upkeep of clinic:

Position	Qualification	Registering Body
General Dentist (GD)	BDS	PMDC
Dental Specialist	Postgraduation	PMDC*
Dental Hygienist	BSDH	None **
Dental Assistant / Auxiliary	Certificate Course or Diploma	None**
Dental technician (for Dental Lab)	BS Dental Technology	None**
Non- Technical Support Staff	As deemed sufficient for JD	None
Cleaner/Housekeeping staff	As deemed sufficient for JD	None
Security guard	As deemed sufficient for JD	None

*Certificates and diplomas not registerable with PMDC must be from internationally recognized bodies and verifiable

**Scope of service of Dental Hygienist, Assistant and Technician is limited to preliminary assessment, preparation of patient and assisting procedures under supervision of qualified dentist until a professional registering body is established and their scope is clearly defined

Appendix 3

Recommendation for Use of Anesthesia in Dental Procedures

Facility Setting	Type of Anesthesia	Patient Status	Requirements
Clinic	Local Anesthesia	All patients	Training on <ul style="list-style-type: none"> • BLS • Management of allergic reaction/syncope Availability of <ul style="list-style-type: none"> • Emergency pharmacological interventions • Equipment for Venous access • Equipment for emergency airway management
Dental Hospital	Conscious Sedation	Healthy No risk patients; Low risk adults with mild systemic illness deemed safe for anesthesia with precautions	<ul style="list-style-type: none"> • Written informed consent for specified procedure • Pre-sedation risk assessment, history and examination • Fasting for elective procedures (2-4-6) • Availability of Monitoring and resuscitation equipment • Availability of trained person • Availability of anesthetist till completion of procedure and recovery • Documented MOU with a hospital for emergency transfer • Transport arrangement/ambulance for urgent transfer of patient (for duration of procedure and recovery)
Hospital	CS/Deep Sedation/General Anesthesia	Systemic and chronic illness; Maxillofacial/trauma surgery	<ul style="list-style-type: none"> • Fully equipped OT, recovery and resuscitation mechanism as per SSDS for Hospitals • Written informed consent for specified procedure • Pre-sedation risk assessment, history and examination • Fasting for elective procedures (2-4-6) • Availability of anesthetist till completion of procedure and recovery