

# Ohio Department of Health COVID-19 Interim Guidance for ODH-Funded School-Based Sealant Programs (Revised)

#### Introduction

The Oral Health Program (OHP), Ohio Department of Health (ODH) remains committed to supporting its School-Based Sealant Programs (SBSPs) in providing dental sealants to children from lower income families who are at higher risk for tooth decay or have limited access to dental care. This preventive procedure remains an important strategy that contributes to the overall health of students.

The purpose of this document is to provide ODH-funded SBSPs with interim guidance to follow as they re-enter schools this school year to provide dental sealants. Except as noted in this document, ODH-funded SBSPs should continue to follow the guidance in the ODH School-Based Dental Sealant Program Manual.

The interim guidance was developed using the expertise of members of the Ohio SBSP Ad-Hoc Workgroup and nationally recognized experts in sealant placement in a school setting. Ad-Hoc Workgroup members are listed at the end of this document. Using an evidence-based approach, the committee met on several occasions to discuss changes that are needed to provide dental sealants in a safe manner for students, teachers, school staff and SBSP teams.

SBSPs must comply with local <u>Ohio Public Health Advisory System</u> guidelines and advisories and stay informed of school district policies and recommendations to determine when to initiate or resume dental sealant placement. SBSPs must include school leaders and local health department officials when making plans to re-enter schools.

During 2020, the U.S. Centers for Disease Control and Prevention (CDC) released initial and revised guidelines for providing dental care in clinical settings. In December 2020, CDC released guidelines specifically for school-based sealant programs and asked the Organization for Safety, Asepsis and Prevention (OSAP) to develop more detailed recommendations for infection control and prevention for school programs to supplement the CDC guidance. OSAP released these recommendations in February 2021.

The ODH guidelines have been revised based on this newest information and reflect what is known today about COVID-19. In addition to the guidance from CDC and the recommendations from OSAP, SBSPs should stay abreast of guidelines issued by local, state and national agencies and organizations,

e.g., their local health department, the Ohio State Dental Board (OSDB), and the Occupational Safety and Health Administration (OSHA) as guidelines issued by these entities may change over the course of the school year. The ODH OHP will make further modifications to this interim guidance document as needed.

Due to the risks associated with aerosol-generating dental procedures, during the 2020-21 school year, ODH-funded SBSPs will switch to using a flowable glass ionomer cement (GIC) to seal teeth using a modified technique that does not create aerosols. Portable dental equipment that mechanically supplies air and water and provides high-volume evacuation (HVE) is not permitted to be used until further notice.

#### **Before Sealant Placement**

It is critical that the SBSP teamwork with the principal and/or school nurse in each building to be fully informed of the building's policies and procedures for safely providing services.

Each SBSP notebook kept on site with the team should contain the most current version of the Ohio Department of Health COVID-19 Interim Guidance for ODH-funded School-Based Sealant Programs. Links to detailed background information are provided in the guidance; teams must review this information before starting to work in schools. In addition, teams should keep copies of their agency's COVID-related policies and procedures in their notebook on site, including those on reporting illness or exposure to COVID-19 to their local health department and records needed for contact tracing.

In addition, the SBSP must have written policies describing how the SBSP will implement the following requirements:

## SBSP Team Member Self-Assessment

Staff entering the schools must demonstrate an understanding of COVID-19 symptoms and participate in symptom checks along with demonstrating a clear understanding of isolation and quarantine requirements to ensure they are providing services with the utmost safety.

Sealant team members (the registered dental hygienist (RDH) and the dental assistant (DA)) must conduct a daily COVID-19 symptom assessment, including a temperature check, prior to arriving at the school to work in the morning. A team member who is symptomatic or has a temperature reading >100°F cannot provide direct services or administrative duties and must not report to a school.

- At time of publication, <u>COVID-19 symptoms include</u>:
  - o Fever or chills
  - Cough
  - Shortness of breath or difficulty breathing
  - o Fatigue
  - Muscle or body aches
  - Headache
  - New loss of taste or smell

- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- o Diarrhea

If a sealant team member is symptomatic or has had close contact with a person with suspected or confirmed COVID-19 within the last 14 days, the team member must immediately contact their supervisor and follow any procedures required by their employer, and contact the school(s) in which they have been working. The team member should also contact their health care provider. Refer to the CDC guidance on when to quarantine for additional guidance.

If symptoms arise while at a school, the team member must immediately isolate and depart the building as soon as possible, informing their supervisor and school administration. A team member who has confirmed or suspected COVID-19 cannot return to work until they have met the <a href="CDC guidance for medical professionals returning to work">CDC guidance for medical professionals returning to work</a>.

#### **Student Assessment**

- Prior to arriving at the school, the team must review the school's COVID-19 symptom reporting
  policy on reporting any student who is exhibiting possible signs of illness, including an elevated
  temperature or other symptoms per CDC guidance.
- Carefully review each student's health history. Before seeing a child with special health care
  needs (e.g., one with cystic fibrosis, pediatric cancer, or an autoimmune disorder), determine if
  high risk conditions or special health care needs require modification of assessment and
  treatment. The team should confer with the school nurse and the child's parent/guardian as
  needed to determine the modifications that should be made. See the section below on Personal
  Protective Equipment for additional guidance.
- Prior to the student sitting in the dental chair, the RDH or DA must assess the student for symptoms and take the student's temperature. The temperature must be recorded under the Notes section on the student's Patient Record. A student who is beginning to show symptoms or has a temperature reading ≥100°F should not be assessed for sealants or receive sealants.

## Location of SBSP Work Area

- In conjunction with school personnel, teams should carefully consider the best options for the location of their designated work area. The area should be a well-ventilated space away from other students, teachers, and staff, e.g., a stage, conference room or unused classroom. Do not set up in a hallway, cafeteria, gymnasium, library, or other area that has significant traffic flow.
- If the SBSP has more than one team operating at the school, it preferable that each team be assigned separate work areas. If the work area must be shared, position the teams as far apart as possible, preferably in opposite corners of the space, but at a minimum, 6 feet apart.
- If teams must share a work area and their workspaces cannot be at opposite corners of a large space (e.g., gymnasium), or the workspaces can't be a minimum of 6 feet apart, teams must create a semi-enclosed "pod" around each workspace by using material such as a clear shower curtain, plastic sheeting, or 3-walled popup tents (with or without top canopy). Any reusable materials should be able to withstand exposure to cleaning and disinfection products.

- Each work area must have good ventilation. If the work area has limited ventilation (e.g., a small office, no windows that can be opened) or if the SBSP creates a semi-enclosed pod, an enhanced ventilation system such as a portable HEPA air purifier should be used to increase air exchange.
- When using a HEPA air purifier, follow OSAP recommendations for use:
  - o The student's head should be oriented at the rear of the pod, opposite the entrance.
  - The air purifier should be placed behind the student's head, across from the dental care worker(s). Ensure the dental care worker(s) are not positioned between the unit and the student's mouth.
  - Position the unit to ensure that it does not pull or push potentially contaminated air into
    or past the breathing zone of the dental worker(s). Some HEPA systems may allow
    exhausting the HEPA-cleaned air out of the rear of the pod, thus creating a protective
    directional airflow.
  - The SBSP team must ensure that there is sufficient clearance at the top of the pod so that it does not interfere with the fire suppression system (generally a minimum of 18 inches is recommended but check with school personnel).
- The sealant team should choose a work area with hard flooring. Discuss the cleaning schedule
  for the floors with the school administration. If the floor will not be cleaned by school staff
  immediately after the sealant team has finished working at the school, the team should clean
  and disinfect the floor before leaving.
- If the only available work area has carpeting, cover the carpet prior to set up. A large sheet of plastic, taped down, may be used. Make sure the covering does not create a trip hazard. Dispose of the cover when finished at the school.

#### **Traffic Flow**

- Only sealant team members and one student should be in each work area(s) designated for tooth assessment and sealant application. Only one student may be brought to each work area at a time. Social distancing must be maintained when accompanying a student to and from the work area.
- Sealant team members should wear a mask that covers their nose and mouth at all times while
  in the school setting. If a sealant team member is transporting students between classrooms
  and the treatment area, they should remove all PPE, other than a mask. A gown should not be
  worn when transporting students to and from the work area.
- A student must wear a face covering when walking to the work area and keep it on until their screening/sealant placement begins. Once the tooth assessment/sealant placement is completed, the student must don their face covering before exiting the chair and walking back to class.
- The hands of the sealant team members and the student must be washed with soap and water for at least 20 seconds before and after each sealant screening/application contact, <u>consistent</u> <u>with CDC guidance</u>. If handwashing is not available, the team and student must use an alcoholbased hand sanitizer with at least 60% alcohol.

## **During Sealant Placement**

#### Personal Protective Equipment (PPE)

The sealant team must wear appropriate PPE while conducting tooth assessment and sealant placement. These items include:

- Level 1, 2 or 3 surgical mask or N95 mask\*.
- eye protection (goggles, or a face shield that covers the front and sides of the face; note that safety glasses are not an acceptable form of eye protection as they may have a gap between the eyewear and the face).
- disposable touch protective isolation gown that is knee-length, ties in the back, and has elastic at the wrist; and,
- disposable, non-sterile, latex-free gloves.
- \* Please note that because GIC will be placed without the use of the air/water syringe, aerosols will not be generated and an N95 mask is not required nor recommended. Be aware that if a SBSP team member wishes to use an N95 mask, it can only be used in the context of a comprehensive respiratory control program, which includes fit testing. Consult <a href="OSHA guidelines">OSHA guidelines</a> for details.

The CDC does not specify in its guidance which level of surgical mask to use. The decision on which level mask to use is based on the amount of anticipated spatter. Because splashing or spattering of blood or other body fluids is not anticipated during tooth assessment or placing sealants, a Level 1, 2 or 3 surgical masks can be used. More information about the choice of surgical mask can be found in a webinar offered by the American Dental Association and OSAP.

SBSPs must be able to purchase all PPE and ensure that it is available to SBSP staff. SBSPs without adequate PPE must suspend work in the schools until PPE is available. <u>Access the Ohio PPE Buyer's</u> Guide for information on purchasing PPE.

#### Changing PPE

- The face mask does not need to be changed between students but must be changed when it becomes visibly soiled or damp, or when the face shield is removed (e.g., when taking an extended break or for lunch).
- The goggles or face shield must be changed or disinfected when it becomes visibly soiled or wet.
- The disposable touch protective isolation gown must be changed when it becomes visibly soiled or wet, when taking an extended break, or for lunch. It should be discarded in the trash.
- Gloves must be changed between students.
- Before seeing a child with special health care needs (e.g., a child with cystic fibrosis, pediatric
  cancer, or an autoimmune disorder), don <u>new</u> PPE (mask, gown, and gloves) and disinfect the
  goggles or face shield.
- Please see the <u>CDC guidance on the correct procedures for donning and doffing PPE</u>. While
  these guidelines were written for use in a healthcare facility (e.g., a hospital), much of the
  guidance is relevant for SBSP team members.

All used PPE must be disposed of when leaving the school for the day. Check with the school
administrator to find out if the trash can be left on site or whether the SBSP team must take it
with them.

# **Required Paperwork**

- SBSP teams may choose to keep all paperwork outside of the workspace (i.e., not at chairside) to reduce the potential for contamination.
- Another option is to use a laminated dental chart at chairside and transfer information to the student's chart when the student is dismissed. The laminated chart must be wiped down before the next use.

### Modified Application Technique for Glass Ionomer Cement Placement

Both the CDC and the OSAP recommend that aerosol-generating dental procedures, including the use of an air/water syringe, be avoided. According to the <a href="CDC Guidance for Dental Settings">CDC Guidance for Dental Settings</a>, dental health care workers should "avoid aerosol generating procedures whenever possible, including the use of high-speed dental handpieces, air/water syringe, and ultrasonic scalers." <a href="OSAP recommendations">OSAP recommendations</a> echoes that of CDC; aerosol-generating procedures are (to be) "avoided whenever possible." OSAP goes on to say that dental health care workers should "avoid/minimize the use of handpieces, lasers, air/water syringes at the same time, air polishing and ultrasonic scalers unless medically necessary." Switching to GIC will allow SBSP teams to assure parents, school administrators, teachers, and students that sealants will be provided in the safest manner possible.

ODH-funded SBSPs will use a flowable GIC to seal molars following the modified application technique (without mechanically applied air/water and HVE). SBSPs can choose the brand of flowable GIC they wish to use and are advised to <u>follow the manufacturer's instructions for use</u>. The steps listed below are intended to be a <u>general</u> outline of the procedure.

- Use a dampened cotton roll, swab, gauze square, dry toothbrush, or the explorer to gently
  remove any debris from the grooves of the teeth that need to be sealed. Please note that teams
  should plan to bring dixie cups and bottles of water for their water source if they will not have
  access to a nearby sink. When setting up for each student, water should be poured into a fresh
  dixie cup; this will be the water supply to be used during sealant placement.
- 2. Position the child's head to avoid salivary pooling on the working side. Place cotton rolls, with or without cotton roll holders. Cotton rolls can be supplemented with a Dri-Aid shield over the parotid duct openings opposite the upper first permanent molars. Some programs also place these shields between the tongue and the lingual cotton roll.
- 3. Apply the tooth conditioner onto the tooth according to the manufacturer's instructions. Wipe the teeth clean with a dampened cotton swab or roll.
- 4. Using the applicator gun, activate the GIC capsule by pushing in the button. Then, immediately place the capsule in the titrator for a mix.
- 5. Remove the mixed GIC capsule and place it back into the applicator gun. Set the timer according to the manufacturer's instructions. That is the working time before the GIC sets.

- 6. Apply the GIC to the prepped tooth surface(s) using the applicator gun or a wet, gloved finger.
- 7. Immediately take a dampened cotton swab to spread the GIC into the grooves and smooth it out. The GIC is set after the timer beeps.
- 8. Some manufacturers recommend Vaseline or a product-specific coating for moisture control until the GIC completely sets. Follow the manufacturer's instructions for the last step.

If the SBSP has trouble doing dental sealant application according to this current guidance or difficulty obtaining adequate PPE, the SBSP must notify the ODH Oral Health Program by contacting Shannon Cole at Shannon.Cole@odh.ohio.gov.

# **Following Sealant Placement**

- The sealant team must clean/disinfect as they would following a typical sealant
  assessment/application session for each student. Refer to the Infection Control section starting
  on page 8 of the <u>School-Based Dental Sealant Program Manual</u> for procedures to follow.
- The hands of both the sealant team members and the student must be washed with soap and water for at least 20 seconds after sealant assessment/application contact, consistent with CDC guidance. If handwashing is not available, the team and student may use an alcohol-based hand sanitizer with at least 60% alcohol.

#### **Additional Resources**

## <u>National</u>

- Ventilation in Schools and Child Care Programs
- CDC's Public Health Guidance for Community-Related Exposure (for individuals exposed to others with known or suspected/ possible COVID-19)
- Operating Schools During COVID-19: CDC's Considerations

# Ohio

- Ohio Public Health Advisory System
- Ohio Department of Education "Reset/Restart Education" webpage
- Ohio Department of Education Planning Guide for Ohio Schools and Districts
- Ohio Department of Health: COVID-19 Health and Prevention Guidance for Ohio K-12 Schools

#### PPE Vendor Information

# Ohio Emergency PPE Makers' Exchange

The Ohio Emergency PPE Makers' Exchange, launched by the Ohio Manufacturing Alliance to Fight COVID-19, is an online marketplace where organizations that need personal protective equipment (PPE) and related equipment can find a wide selection offered by Ohio manufacturers. This online exchange offers PPE and related equipment for health care workers, first responders, and small businesses. It's especially well-suited for organizations that may have lower-volume needs, such as nursing homes, police departments, and small business employers. The Alliance has screened to the best of its ability for only Ohio manufacturers, but it has not vetted each product and vendor. The Alliance also has created this list of practical information manufacturers need to be thinking about and do today to prepare for COVID-19.

### <u>JobsOhio PPE Database</u>

Several Ohio companies are working to increase the supply of in-demand medical PPE. JobsOhio has partnered with OMA, the Administration, and our Regional Network partners to assist. A list of manufacturers, distributors, and potential contract manufacturers to connect with these resources is available through JobsOhio's Ohio Safe. Ohio Working website.

• In addition to the resources available via the Ohio Manufacturing Alliance and JobsOhio, the Ohio Development Services Agency and the Ohio Department of Administrative Services has compiled another list of vendors providing various PPE.

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