Cigna Dental Periodic Quality Assessment (PQA) Facility Review

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A. Ac	A Cressibility: A U N/A Z Z * Unsatisfactory Reason (only if answered *U*) or Comments								
A	U	N/A		Ø	* Unsatisfactory Reason (only if answered "U") or Comments It appears that emergency appointments are not offered within 24 hours or within such lesser time as may be				
					medically necessary.				
0	0		1.24 Hour Emergency Contact System? Active after hours mechanism (Answering machine, answering service, cell phone, or pager) available for 24hour per day/ 7 day per week contact or instructions for contacting emergency contact.		It appears that there is no after hours emergency system in place (i.e., answering machine, answering service, cell phone, or paging available 24/7).				
					It appears that the after hours emergency system may not be effective (i.e., inadequate information provided on how to reach the dentist, messages not accessed in a timely manner).				
_	0		2. Reasonable appointment scheduling for plan members? Cigna Dental standard: 4 weeks or less; State		Specify the unsatisfactory wait time:				
0	0		Specific standards: AZ = 9 weeks;NJ = 10 days;TX = 3 weeks; VA = 2 weeks						
0	0	0	3. CA ONLY - (all other states mark N/A): Language Assistance Program and Documents are present?		Check: ☐ Arabic ⊂ Armenian ─ Bengali ⊂ Cantonese or Mandarin □ Farsi/Persian ─ German □ French □ Hindi □ Korean □ Russian Simplified Chinese □ Khmer □ Hindi □ Korean □ Russian □ Lao □ Vietnamese □ Other non-English (list in Comments)				
B. Fa	cility 8	& Equip	oment						
Α		N/A		Ø	* Unsatisfactory Reason (only if answered "U") or Comments				
					It appears that the exterior and common areas of the building are not well maintained.				
0	0		1. Clean, safe, neat and well maintained? Verification made that facility and equipment are clean, safe and in	0	It appears that the office, waiting areas, treatment rooms and/or restrooms are not always clean and well kept.				
			good repair.	0	The equipment and/or furniture does not always appear to be in good working order.				
					It seems that pre-measured amalgam capsules are not always used for mercury hygiene.				
			2. Compliance with mercury hygiene, safety regulations?						
					It appears that amalgamator machines do not always have proper covers.				
0	0				It appears that bulk mercury / amalgam scraps are not always stored in sealed unbreakable containers.				
				٥	The office does not appear to have a mercury spill kit available with the use of bulk mercury.				
0	0	0	3. Nitrous oxide recovery system? Verification that nitrous oxide equipment is clean, safe and in good repair.						
					It appears that lead aprons are not always available, in good condition, and/or not used appropriately to allow for thyroid protection.				
0	0		4. Lead apron? (with thyroid collar for patient)		Thyroid collars are not always available, in good condition, and/or used appropriately.				
	U *		cedures & Equipment	Ø	* Unsatisfactory Reason (only if answered "U") or Comments				
	_				The office does not appear to have a written plan to handle medical and/or other emergencies.				
0	0		 Written Emergency Protocols for fire and/or natural disasters? 	•	Emergency exits are not always accessible and well marked.				
					There appears to be an inadequate emergency medical kit. Items missing:				
0	0		 Medical Emergency Kit on site? Medical emergency kit should be easily accessible and labeled with an inventory of contents, All required and non-required drugs (per JADA 2010 article) are current. Staff should be 		There appear to be items that are expired within the emergency medical kit. Items expired:				
			aware of location of kit. Recommend staff in-service training for general use of contents.		It appears that the emergency medical kit is not readily accessible.				
\vdash					There appears to be no portable oxygen tank available for emergencies.				
				•	There appears to be no positive pressure device available.				
				•	It appears that the positive pressure device is not attached to the portable oxygen tank.				
0	0		3. Portable oxygen supply available? Portable oxygen supply tank / ambu- bag for medical emergencies should	•	The positive pressure device does not appear to be readily available for emergencies.				
			be available.	•	The portable oxygen tank for emergencies must be separate from a N2O/O2 unit.				
				•	The portable oxygen tank appears to be empty.				
				•	The staff appears to need training in use of the portable oxygen tank.				

	D. Sterilization & Infection Control								
A	U *	N/A		Ø	* Unsatisfactory Reason (only if answered "U") or Comments The staff appears to need training in sterilization and infection control procedures and protocols.				
0	0		 Sterilization and infection control protocols followed? Verify sterilization and infection control procedures are in place. Verify staff trained in sterilization and infection control procedures and protocols. 	Ľ	The staff appears to need training in sterilization and intection control procedures and protocols.				
0	0	0	2. CA only - Protocols posted for sterilization procedures?		(CA only) Protocols not conspicuously posted. Dental Board of California. (DPA Section 1680dd, January 1993)				
A	U.	N/A		D	"Unsatisfactory Reason (only if answered "U") or Comments It appears that all items used intra-orally are not always appropriately cleaned prior to sterilization.				
					It appears that all items used intra-orally are not always appropriately sterilized after each use.				
					It appears that film holder devices are not always sterilized or disinfected appropriately between use.				
					Ultrasonic cleaners do not appear to be utilized or utilized on a regular basis.				
0	0		4. All instruments and hand-pieces properly cleaned, sterilized, and stored?		It appears that ultrasonic cleaners are not always kept covered during use.				
					It seems that sterifized instruments are not always stored in sealed containers, bags, wraps or appropriate trays prior to use.				
					It appears that disposable instruments are not always properly disposed of after use.				
					CA Only - It appears that the sterilized instruments are not always kept in sealed bags that are appropriately dated.				
D. St	eriliza	tion &	Infection Control - Continued		It seems that an EPA registered sterilant/disinfectant is not always used for high level disinfection.				
					It seems that the EPA registered sterilant/disinfectant is not always being used in accordance with the				
0	0	0	5. Log kept monitoring changing of sterilization solution?		manufacturer's guidelines.				
					It seems that the EPA registered sterilant/disinfectant solutions are not always changed at recommended intervals.				
					It appears that there is no log to monitor the changing of the EPA registered sterilant/disintectant solutions at recommended intervals.				
					It seems that protective gloves and/or masks are not always used by the staff in direct delivery of patient care.				
					It seems that gloves and/or masks are not always changed when appropriate.				
0	0		6. Staff wears appropriate personal protective equipment?		It appears that the appropriate staff is not always wearing laboratory jackets/coats or disposable protective clothing.				
					It appears that laboratory jackets/coals are not always appropriately laundered or disposed of.				
					It appears that the appropriate staff is not wearing protective evencear to protect eyes when splatter and splash of body fluids is anticipated and a chin-length face shield is not chosen.				
					It seems that disposable covers are not always used for handles, switches, headrests and bracket tables, wherever possible, and properly disposed after each use.				
0	0		7. Proper and adequate use of barrier techniques?		It appears that environmental surfaces are not always appropriately disinfected with an EPA approved solution.				
					It appears that environmental surfaces are not always appropriately disinfected between patients and at the end of the day.				
0	0	0	 CA ONLY - (all other states mark NIA): Hand-pieces and waterlines flushed appropriately? Operatory unit waterlines shall be flushed between each patient for 20 seconds and in the morning before use for at least 2 minutes. 						
					It appears that laboratory pumice is not always disposed of after each use.				
0	0		 Infection control and cross contamination prevention procedures followed in the office and laboratory? 		It appears that laboratory ragwheels and laboratory burs are not always washed and autoclaved after each use.				
					It appears that items such as impressions, jaw relation records, casts, prosthetic restorations and devices which have been in the patient's mouth are not always rinsed and disinfected prior to delivery to dental laboratory.				
E. Si	upplem	nental (Duestions						
А О	0	N/A	1. Dentist and/or appropriate staff have current CPR certification?	Ø	" Unsatisfactory Reason (only if answered "U") or Comments				
0	0		2. Blood pressure cuffs/sphygmomanometer in office?						
0	0	0	State Specifics TX ONLY - (all other states mark N/A): Diagnostic imaging machines are registered and inspected according to state law?						
0	0		4. Sharps properly disposed of in appropriate sharps container?						
0	0		5. Hepatitis vaccination available for clinical staff in office, or a waiver signed?						
0	0	0	6. Dental hygiene staff are certified and licensed per state regulations?	╞					
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