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OPERATING AN EFFECTIVE COMPLIANCE PROGRAM AS AN IMMUNE SYSTEM, NOT A POLICE FORCE (P10)

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THE OVERLOOKED ALLY: DENTAL COMPLIANCE IS CENTRAL TO EVERYONE'S SAFETY

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Introduction

When people think of patient safety risks, the operating room often comes to mind—not the dental chair. Yet, overlooking dentistry in compliance planning exposes not only dentists and the communities they serve to significant risks, but also the dental team itself. The U.S. Department of Health and Human Services Office of Inspector General's (OIG) guidance makes it clear: dental leadership must have a seat at the compliance table.

In its November 2023 *General Compliance Program Guidance*, OIG underscored that "entities should incorporate quality and patient safety into their compliance programs."[1] This isn't just a recommendation; it's a wake-up call. Dentistry can no longer operate in parallel to broader organizational safety efforts. It must be embedded in them. Oral health is integral to overall health.

To develop a truly resilient and responsive compliance program, organizations must welcome input from clinical leaders across the continuum of care. This includes dental and medical professionals, alongside experts in quality improvement, patient safety, infection control and prevention, risk management, and internal audit. Their collective insight is essential to crafting compliance work plans, conducting thorough risk assessments, and building systems that identify and correct problems before they cause harm.

This article offers healthcare compliance professionals an introductory roadmap to bringing dentistry into the fold—helping organizations close critical information gaps, strengthen oversight, and foster a true culture of safety.

Promoting a culture of safety

Building a blame-free environment

The Joint Commission defines a safety culture as "the sum of what an organization is and does in the pursuit of safety."[2] In 2017, the Joint Commission described 11 tenets of a safety culture:

1. Apply a transparent, nonpunitive approach to reporting and learning from adverse events, close calls, and unsafe conditions.
2. Use clear, just, and transparent risk-based processes for recognizing and distinguishing human and system errors from unsafe, blameworthy actions.
3. Organizational leaders adopt and model appropriate behaviors and champion efforts to eradicate intimidating behaviors.
4. Policies support a safety culture and the reporting of adverse events, close calls, and unsafe conditions. These policies are reinforced and communicated to all team members.

5. Recognize care team members who report adverse events and close calls, who identify unsafe conditions, or who offer good suggestions for safety improvements. Share these "free lessons" with all team members (i.e., feedback loop).

6. Determine an organizational baseline measure on safety culture performance using a validated tool.

7. Analyze safety culture results from across the organization to find opportunities for quality and safety improvement.

8. Use information from safety assessments and/or surveys to develop and implement unit-based quality and safety improvement initiatives to improve the culture of safety.

9. Embed safety culture team training into quality improvement projects and organizational processes to strengthen safety systems.

10. Proactively assess system strengths and vulnerabilities, then prioritize them for enhancement or improvement.

11. Repeat organizational assessment of safety culture every 18 to 24 months to review progress and sustain improvement.[3]

Incorporating dentistry into a culture of safety starts with shared definitions and expectations. At its core, such a culture prioritizes transparency, psychological well-being, and continuous learning — principles that must extend beyond hospitals and operating rooms into all venues where dentistry is practiced.

Quality and patient safety oversight should be woven into compliance processes across all departments.[4] For dentistry,

this includes creating systems that encourage event reporting without fear of punishment, enabling timely root cause analysis, and sharing learnings across clinical teams. A blame-free environment is not free of accountability; it's a space where concerns are raised early, investigated fairly, and addressed systematically.

Consider the actions of the Federal Aviation Administration investigating causes and offering probable solutions to near misses and/or adverse incidents in the airline industry. Pilots read such reports as "the fifth gospel," which contributes to air travel being one of the safest modes of transportation available. Learn from the experience of others without having to experience the adverse event yourself!

Collaboration among compliance, dental leadership, infection control, and risk management teams is essential. Such interaction can identify latent risks specific to dental settings and address them proactively, such as sterilization failures, dental waterline contamination, and sedation safety concerns. Compliance programs should include written protocols and dental-specific indicators within monitoring systems, and engage dental providers and staff within multidisciplinary safety initiatives, such as adverse event reviews or near-miss reporting forums. By embedding dental team members in safety and compliance infrastructure, organizations send a clear message: patient safety is everyone's responsibility, and dentistry is a significant part of that mission.

Why dentistry gets overlooked — and why that's risky

Despite serving millions of patients each year across public and private care settings, dental programs are often excluded from enterprise-level safety planning and compliance structures. This lack of oversight often stems from legacy assumptions that dentistry operates separately from medical care; such a siloed mindset creates blind spots, which can lead to serious patient and organizational harm.

Compliance programs should include written protocols and dental-specific indicators within monitoring systems, and engage dental providers and staff within multidisciplinary safety initiatives.

Dental settings face unique regulatory, clinical, and operational risks, including infection control failures, improper use of radiography, lapses in sedation protocols, and breakdowns in sterilization procedures. In many organizations, these risks go unnoticed as dental is not fully represented in compliance planning, internal audit functions, or event review committees. Without clear reporting pathways and standardized risk assessments, early warning signs may be missed until a sentinel event or regulatory finding forces action.
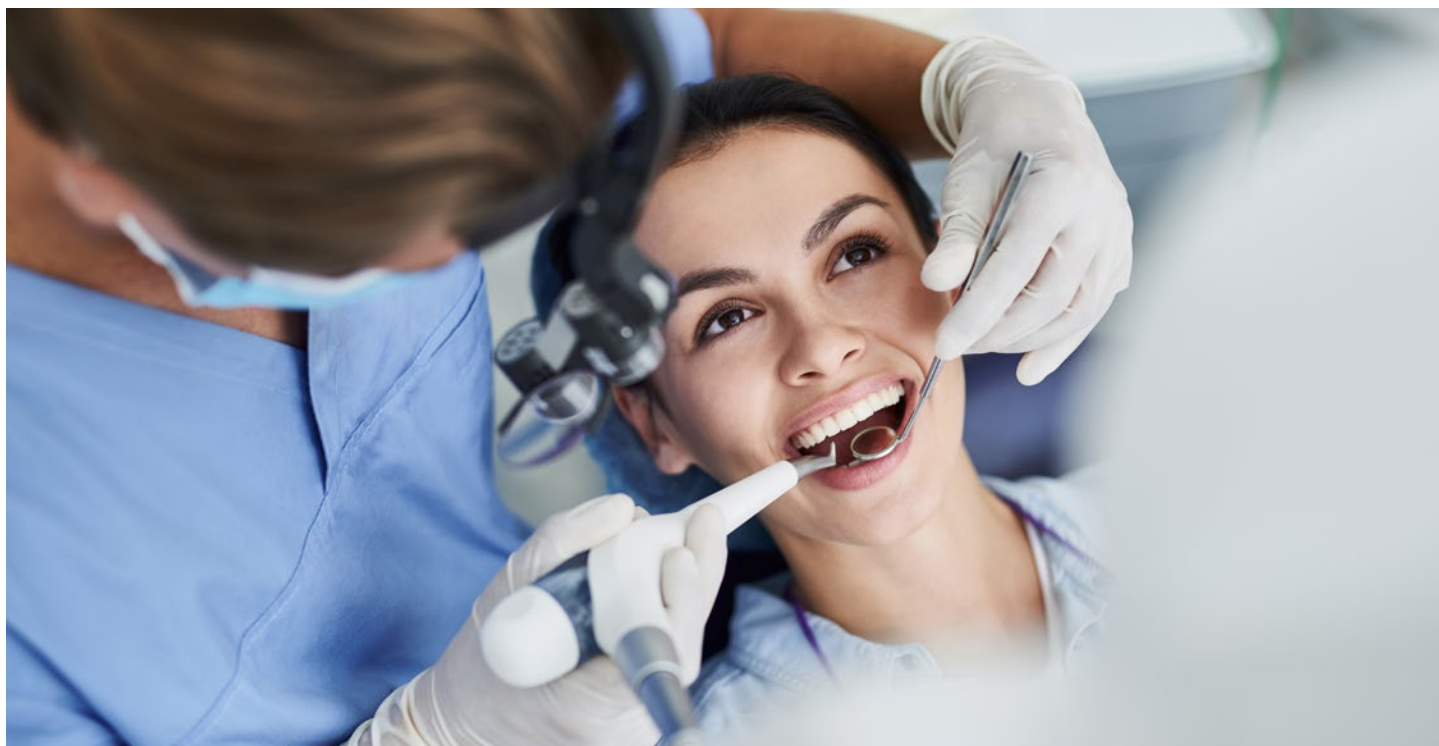
Dental team members are often left out of training and communication loops that reinforce a culture of safety across an organization. When safety policies do not reflect the realities of dental care—or when compliance processes feel irrelevant or burdensome—engagement suffers, and so does accountability.[5]

Ignoring dentistry in compliance efforts is not just a missed opportunity; it's a measurable liability. Closing this gap begins with recognizing that dental teams are integral to the patient care continuum and must be treated as such in all areas of safety, risk, and regulatory oversight. When dentistry is excluded, organizations miss critical learning opportunities that would benefit the entire organization and those it serves.

Steps to integrate dental into the compliance fabric
First and foremost, integrating dentistry into overall healthcare compliance means changing the mindset of the dental profession. Many dentists hesitate to report adverse incidents or near misses for fear of increasing liability and embarrassment to themselves and their practices. How can one move beyond individual safety practices to a more systemic approach to protecting the dental team and those they serve? What can one learn from other healthcare disciplines that have been working on their own cultures of safety for over three decades? What steps can be taken to ensure that the team is providing the safest dental experience? What is the role of transparency in such a culture of safety?

Bringing dental fully into compliance and safety operations requires moving towards deliberate, systems-level integration. This is not about applying a one-size-fits-all approach, but rather inviting dentistry into the organization's existing compliance structures in ways that reflect the unique clinical and regulatory realities of oral healthcare.

Patient Safety Organizations
The Patient Safety and Quality Improvement Act of 2005 led to the establishment of Patient Safety Organizations (PSOs). These organizations analyze data reported by clinicians and provide feedback to promote learning and minimize patient risk. The Agency for Healthcare Research and Quality maintains a database of listed PSOs that meet the requirements of the Patient Safety Act.

Currently, there is one PSO that focuses solely on dental and oral health. The Dental Patient Safety Foundation (DPSF) is an independent, not-for-profit organization whose mission is to improve safety and quality of dental care—regardless of specialty—by collecting, aggregating and analyzing information about patient safety events.[6] As a PSO, the DPSF complies with the Patient Safety

Rule, which legally protects and maintains the confidentiality of all disclosures.

Conclusion

By taking the steps outlined in this article, organizations can move beyond compliance checklists and build an integrated, responsive system that supports dental teams as full partners in protecting patients, colleagues, and institutional integrity. The integration of dentistry into compliance and patient safety frameworks is not just a matter of fairness; it's a strategic imperative. Dental settings face real and complex risks. When those risks go unmonitored, organizations expose themselves to preventable harm, regulatory scrutiny, and reputational damage.

Elevating dental professionals into the core of safety, quality, and risk management efforts sends a clear and powerful message that every provider, in every care setting, plays a significant role in safeguarding patients and their teams. This acknowledgment strengthens interprofessional trust, improves system-wide learning, and reinforces the organizational culture of accountability and transparency.

As the healthcare landscape continues to evolve and oversight bodies emphasize a more holistic approach to safety and compliance, there has never been a better time to bring oral health to the overall healthcare table. Doing so will close longstanding gaps, reduce liability, and ensure safer, high-quality care for every patient.

The following takeaways offer practical steps for compliance professionals to close gaps and strengthen enterprise-wide safety and oversight. 🅲🆃

Additional resources

Julie Morath and Thomas Gallagher, "Communicating with Patients When Things Go Wrong in Dentistry, American Dental Association,

on-demand webinar, current as of January 2022, *https://ada.org/education/continuing-education*.

Steve Geiermann, "We Don't Know; What We Don't Know!" webinar, March 20, 2024, *https://vimeo.com/925592147/0cc109df41*.

Steve Geiermann, "Dental Practice: Aren't We Safe Enough!" webinar, April 30, 2025, *https://vimeo.com/108.036.9338/31072497a9*.

Steven P. Geiermann, "Quality Improvement and Risk Management Within a Culture of Safety in Dentistry," *Journal of the California Dental Association* 52 , no. 1 (2024): Article 2376786, *https://doi.org/10.1080/19424.396.2024.2376786*.

Endnotes
1. U.S. Department of Health and Human Services, Office of the Inspector General, *General Compliance Program Guidance*, November 2023, 76, https://oig.hhs.gov/documents/compliance-guidance/1135/HHS-OIG-GCPG-2023.pdf.
2. 2The Joint Commission, "The essential role of leadership in developing a safety culture," Sentinel Event Alert, Issue 57, March 1, 2017, revised June 18, 2021, https://digitalassets.jointcommission.org/api/public/content/cfa5dc127d794e419c4fbc6c8fdc0ce1?v=a0813303.
3. John Gregory, "Joint Commission releases 11 tenets of safety culture in new alert," Health Exec, March 2, 2017, https://healthexec.com/topics/healthcare-management/healthcare-quality/joint-commission-releases-11-tenets-safety-culture.
4. U.S. Department of Health and Human Services, Office of the Inspector General, *General Compliance Program Guidance*, November 2023, 76.
5. Bernardo Perea-Pérez et al., "Patient safety in dentistry: dental care risk management plan," *Medicina Oral Patologia Oral y Cirugia Bucal* 16, no. 6 (2011): e805–e812, https://doi.org/10.4317/medoral.17085.
6. Dental Patient Safety Foundation, "DPSF: Dental Patient Safety Foundation," brochure, accessed August 14, 2025, https://www.dentalpatientsafety.org/wp-content/uploads/2018/11/DPSF-Brochure.pdf.

Takeaways

◆ Integrate dental leadership into compliance, risk management, and patient safety planning to ensure comprehensive oversight across all care settings.

◆ Conduct joint safety/compliance rounds with a fully integrated team to proactively identify risks and reinforce shared accountability in clinical dental environments.

◆ Strengthen infection control and quality initiatives by involving dental professionals who can actively contribute unique insights during planning, execution, and evaluation phases.

◆ Utilize the Dental Patient Safety Foundation to report critical data on dental safety events to inform system-wide risk mitigation strategies.

◆ Include dentistry in organization-wide compliance frameworks to close safety gaps, reduce liability, and strengthen protections for patients and the dental team alike.