

IN THE MATTER OF  
KATHY FRANCIS, D.D.S.

Respondent

License Number: 16491

\* BEFORE THE MARYLAND  
\* STATE BOARD OF DENTAL  
\* EXAMINERS

\* Case Number: 2022-011

\* \* \* \* \*

**CONSENT ORDER**

In or around September 2020, the Maryland State Board of Dental Examiners (the “Board”) opened an investigation of **KATHY FRANCIS, D.D.S.** (the “Respondent”), License Number 16491. Based on its investigation, the Board determined that it has grounds to charge the Respondent with violating the Maryland Dentistry Act (the “Act”), Md. Code Ann., Health Occ. (“Health Occ.”) §§ 4-101 *et seq.* (2021 Repl. Vol.).

The pertinent provisions of the Act provide:

**Health Occ. § 4-315**

- (a) *License to practice dentistry.* – Subject to the hearing provisions of § 4-318 of this subtitle, the Board may ... reprimand any licensed dentist, place any licensed dentist on probation, or suspend or revoke the license of any licensed dentist, if the ... licensee:
- (16) Behaves dishonorably or unprofessionally, or violates a professional code of ethics pertaining to the dentistry profession;
  - (30) Except in an emergency life-threatening situation where it is not feasible or practicable, fails to comply with the Centers for Disease Control’s [“CDC”] guidelines on universal precautions[.]

Prior to the Board issuing disciplinary charges, the Respondent agreed to enter this public Consent Order consisting of Findings of Fact, Conclusions of Law, and Order.

## FINDINGS OF FACT

The Board makes the following Findings of Fact:

### **I. LICENSING BACKGROUND**

1. At all times relevant, the Respondent was and is licensed to practice dentistry in the State of Maryland. The Respondent was originally licensed to practice dentistry in Maryland on July 13, 2017 under License Number 16491. The Respondent's license is current through June 30, 2023.

2. At all times relevant, the Respondent practiced at a dental practice located at 10010 Reisterstown Road Unit 60 Owings Mills, Maryland 21117 (the "Office").

### **II. COMPLAINT**

3. On or about September 21, 2020 the Board received a complaint alleging, among other things, that there were substandard infection control practices at the Office. Based on the complaint, the Board initiated an investigation of the Office's compliance with CDC guidelines.<sup>1</sup>

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<sup>1</sup> The Centers for Disease Control and Prevention ("CDC") is a federal agency dedicated to designing protocols to prevent the spread of disease. The CDC has issued guidelines (the "CDC Guidelines") for dental offices which detail the procedures deemed necessary to minimize the chance of transmitting infection both from one patient to another and from the dentist, dental hygienist and dental staff to and from the patients. These guidelines include some very basic precautions, such as washing one's hands prior to and after treating a patient, and also sets forth more involved standards for infection control. Under the Act, all dentists are required to comply with the CDC guidelines, which incorporate by reference Occupational Safety and Health Administration's ("OSHA") final rule on Occupational Exposure to Bloodborne Pathogens (29 CFR 1910.1030). The only exception to this rule arises in an emergency which is life-threatening *and* where it is not feasible or practicable to comply with the guidelines.

### III. INFECTION CONTROL INSPECTION

4. Due to allegations of potential infection control issues at the Office, on or about May 3, 2021, a Board-assigned infection control inspector (the "Board Inspector"), along with a Board investigator visited the Office and conducted an infection control inspection.

5. The personnel present during the inspection included the Respondent, a registered dental hygienist (the "RDH"), a diagnostic radiographic technician, a dental assistant, a laboratory technician, an office manager, and two patient service representatives. The practice owner was not present during the inspection.

6. As part of the inspection, the Board Inspector utilized the publicly available Centers for Disease Control and Prevention ("CDC") Infection Prevention Checklist for Dental Settings. Based on the inspection, the Board Inspector made the following findings regarding the Office's compliance with the CDC Guidelines:

#### **Section I: Policies and Practices**

**I.1 Administrative Measures** – The Office did not have infection control policies established for the practice. There were no practice specific policies or procedures established for this practice. There were no individual appointed to coordinate an infection control program and no annual training or policies.

**I.2 Infection Prevention Education and Training** – The Office did not have training offered to any of the employees of this practice upon hire, annually, or when new tasks or procedures affect the employees occupational exposure or according to state or federal requirements. There were no records to maintain of any kind.

**I.3 Dental Health Care Personnel Safety** – The Office did not have an exposure control plan for the facility. Dental Health Care Personnel ("DHCP") were not formally trained on the Occupational Health and Safety ("OHSA") bloodborne pathogens standard. The Office

did not have documentation in regards to a written policy for CDC recommendations for vaccines, evaluation, and then follow up.

**I.4 Program Evaluation** - The Office did not have written documentation that discusses written policies and procedures for the evaluation and monitoring of an infection prevention program.

**I.5 Hand Hygiene** - All supplies necessary for adherence to proper hand hygiene for routine dental procedures was available, however no supplies could be found for performing surgical scrub technique, including antimicrobial soap and alcohol based hand scrub. There was no documentation that dental health care practitioners were trained in regards to hand hygiene including handwashing, hand antisepsis and surgical hand antisepsis.

**I.6 Personal Protective Equipment (PPE)** – There was an insufficient supply of disposable gowns noted. The Office did not have bonnets, face shields, utility gloves, or sterile surgical gloves available.

**I.7 Respiratory Hygiene/Cough Etiquette** - The Office did not have signs offering face masks for patients and there were no face masks at the front desk for use by the patients.

**I.8 Sharps Safety** – The Office's did not have written policies, procedures, or guidelines for exposure prevention and postexposure management.

**I.9 Safe Injection Practices** - The Office's did not have written policies, procedures, or guidelines for safe injection practices.

**I.10 Sterilization and Disinfection of Patient Care Items and Devices** – The Office did not have written policies or procedures regarding cleaning and reprocessing of reusable instruments. There was no documentation of training of DHCP with regards to reprocessing of reusable dental instruments upon hire, annually, or whenever new equipment or processes are introduced. There was no documentation of training of DHCP to ensure appropriate use of PPE and appropriate selection of PPE. There is no documentation that routine maintenance is performed according to manufacturers' instructions and documentation by written maintenance records. There were no written policies or procedures in place outlining dental setting response in the event of a reprocessing error.

**I.11 Environmental Infection Prevention and Control** – The Office did not have written policies or procedures available for the routing cleaning and disinfection of environmental services.

**I.12 Dental Unit Water Quality** - The Office did not have policies and procedures in place for maintaining dental unit water quality that meets the United States Environmental

Protection Agency ("EPA") standards for drinking water for routine dental treatment output water.

## **Section II: Direct Observation of Personnel and Patient-Care Practices**

**II.1 Hand Hygiene is Performed Correctly** – Hand hygiene was completed when hands were visibly soiled.

**II.2 Personal Protective Equipment (PPE) is Used Correctly** – None of the DHCP were wearing disposable gowns. The Respondent wore a KN95 mask but the other DHCP only wore level 3 surgical masks. No DHCP wear any type of face shield or glasses with side shields and the Inspector never observed changing of masks between any patient treatments.

**II.3 Respiratory Hygiene/Cough Etiquette** - The Office did not have signs offering face masks for patients and there were no face masks at the front desk for use by the patients.

**II.4 Sharps Safety** – The Office did not have engineering controls to prevent injuries. The Inspector observed that work practice controls were violated.

**II.5 Safe Injection Practices** - No deficiencies were observed regarding safe injection practices.

**II.6 Sterilization and Disinfection of Patient Care Items and Devices** – The Office did not have documentation regarding spore testing. The workflow processing area did not exhibit a single loop concept.

**II.7 Environmental Infection Prevention and Control** – The Office did not use surface barriers on the computer keyboard or mouse. The outside of instrument packages were found on a work tray that also contained dirty, non sterile instruments and a dirty handpiece. No logs, invoices, or documentation could be provided to support the need for regulated medical waste to be handled and disposed of according to local, state, and federal regulations. No DHCP wore appropriate PPE during environmental cleaning.

**II.8 Dental Unit Water Quality** – There was no one in the office even aware of the requirements for dental unit water quality to ensure that the water meets EPA regulatory standards for drinking water.

7. Based on the observations made by the Board Inspector, the Respondent failed to ensure compliance with CDC Guidelines at the Office.

## CONCLUSIONS OF LAW

Based on the foregoing Findings of Fact, the Board concludes as a matter of law that the Respondent's conduct, as described above, constitutes violations of the Act as cited above, specifically: the Respondent's conduct as described above, including but not limited to failing to ensure compliance with the CDC Guidelines at the Office as described above, constitutes: behaves dishonorably or unprofessionally, or violates a professional code of ethics pertaining to the dentistry profession, in violation of Health Occ. § 4-315(a)(16); and failing to comply with Centers for Disease Control's guidelines on universal precautions in violation of Health Occ. § 4-315(a)(30).

## ORDER

It is, on the affirmative vote of a majority of the Board, hereby:

**ORDERED** that the Respondent is **REPRIMANDED**; and it is further

**ORDERED** that the Respondent is fined in the amount of **ONE THOUSAND DOLLARS (\$1000)**, due within sixty (60) days to the Board;

**ORDERED** that the Respondent shall be placed on **PROBATION** for a period of **TWO (2) YEARS** under the following terms and conditions:

1. During the probationary period, the Respondent shall perform infection control evaluation of any dental facility in Maryland where the Respondent provides dental care on a quarterly basis to ensure that the dental facility is in full compliance with CDC Guidelines;
2. The Respondent shall provide a report, including photo attachments, to the Board within ten (10) business days of the date of each infection control evaluation, including any deficiencies found and corrective actions taken;

3. The Respondent shall ensure that any deficiencies found during the infection control evaluation be corrected within (10) business days;
4. If the Respondent is unable to ensure that deficiencies are corrected within ten (10) business days, the Respondent shall immediately report to the Board as to the reason corrective actions were not taken;
5. The Respondent shall, at all times, practice dentistry in accordance with the Act, related regulations, and shall comply with CDC and Occupational Safety and Health Administration's ("OSHA") guidelines on infection control for dental healthcare settings, including enhanced COVID-19 related precautions; and
8. Prior to petitioning for termination of probation, the Respondent shall successfully complete a Board-approved in-person four (4) credit hour course(s) in infection control protocols, presented by a board-approved instructor, which may not be applied toward her license renewal.
9. Prior to petitioning for termination of probation, the Respondent shall successfully complete a Board-approved in-person two (2) credit hour course(s) in ethics, presented by a board-approved instructor, which may not be applied toward her license renewal.
10. The terms and conditions of this Consent Order shall continue to be effective should the Respondent changes to a different dental practice.

**AND IT IS FURTHER ORDERED** that if the Respondent is practicing dentistry outside of the State of Maryland, that the terms of probation in this order shall be tolled until the time when the Respondent returns to practice dentistry in Maryland. If the Respondent returns to practice dentistry in Maryland, she shall immediately notify the Board in writing and the terms of probation in this Consent Order shall take effect on the first day of her return to practice; and it is further

**ORDERED** that the Respondent shall at all times cooperate with the Board, any of

its agents or employees, and with the Board-assigned inspector, in the monitoring, supervision and investigation of the Respondent's compliance with the terms and conditions of this Consent Order, and it is further

**ORDERED** that, unless otherwise ordered by the Board for early termination of probation, after a minimum of one (1) year of aggregate practice in Maryland, the Respondent may submit a written petition to the Board requesting termination of probation. After consideration of the petition, the probation may be terminated through an order of the Board. The Board shall grant termination if the Respondent has fully and satisfactorily complied with all of the probationary terms and conditions and there are no pending investigations or outstanding complaints similar to the violations found in this Consent Order; and it is further

**ORDERED** that if the Respondent allegedly fails to comply with any term or condition of probation or this Consent Order, the Respondent shall be given notice and an opportunity for a hearing. If there is a genuine dispute as to a material fact, the hearing shall be an evidentiary hearing before the Board. If there is no genuine dispute as to a material fact, the Respondent shall be given a show cause hearing before the Board; and it is further

**ORDERED** that after the appropriate hearing, if the Board determines that the Respondent has failed to comply with any term or condition of probation or this Consent Order, the Board may reprimand the Respondent, place the Respondent on probation with appropriate terms and conditions, or suspend or revoke the Respondent's license to practice dental hygiene in Maryland. The Board may, in addition to one or more of the sanctions




set forth above, impose a civil monetary fine upon the Respondent; and it is further

**ORDERED** that the Respondent is responsible for all costs incurred in fulfilling the terms and conditions of this Consent Order; and it is further

**ORDERED** that, unless otherwise specified in this Order, the Effective Date of this Consent Order is the date on which the Consent Order is executed by the Board Executive Director; and it is further

**ORDERED** that this Consent Order is a public document pursuant to Md. Code Ann., Md. Code Ann., Gen. Prov. §§ 4-101 et seq. (2014).

1/17/2024  
Date

  
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Robert. R. Windsor, D.D.S., Board President  
Maryland State Board of Dental Examiners

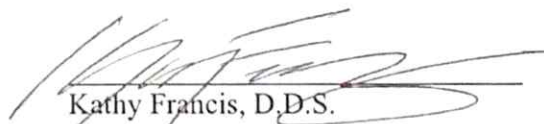
CONSENT

By this Consent, I, Kathy Francis, D.D.S., agree and accept to be bound by this Consent Order and its conditions and restrictions. I waive any rights I may have had to contest the Findings of Fact and Conclusions of Law.

I acknowledge the validity of this Consent Order as if entered into after the conclusion of a formal evidentiary hearing in which I would have had the right to counsel, to confront witnesses, to give testimony, to call witnesses on my own behalf, and to all other substantive and procedural protections as provided by law. I acknowledge the legal authority and the jurisdiction of the Board to initiate these proceedings and to issue and enforce this Consent Order. I also affirm that I am waiving my right to appeal any adverse ruling of the Board that might have followed any such hearing.

I sign this Consent Order after having had the opportunity to consult with counsel, and I fully understand and comprehend the language, meaning and terms of this Consent Order. I voluntarily sign this Order and understand its effect.

11/11/24  
Date

  
Kathy Francis, D.D.S.  
Respondent

NOTARY PUBLIC

STATE OF New Jersey

CITY/COUNTY OF: Camden

I HEREBY CERTIFY that on this 11 day of January 2024,  
before me, a Notary Public of the State and County aforesaid, personally appeared Kathy  
Francis, D.D.S., and gave oath in due form of law that the foregoing Consent Order was  
his voluntary act and deed.

AS WITNESS, my hand and Notary Seal.

Notary Public

Aashka

My commission expires: April 21, 2028

Aashka  
Aashka Patel  
Commission # 50209337  
Notary Public, State of New Jersey  
My Commission Expires  
April 21, 2028