

IN THE MATTER OF	*	BEFORE THE MARYLAND
STEVEN W. HAYWOOD, D.D.S.	*	STATE BOARD OF
Respondent	*	DENTAL EXAMINERS
License Number: 10713	*	Case Number: 2017-036

\* \* \* \* \*

**CONSENT ORDER**

On or about July 19, 2017, the Maryland State Board of Dental Examiners (the "Board") charged **STEVEN W. HAYWOOD D.D.S.** (the "Respondent"), license number 10713, under the Maryland Dentistry Act, codified at Md. Code Ann., Health Occ. I ("Health Occ.") §§ 4-101 *et seq.* (2014) (the "Act").

Specifically, the Board charged the Respondent with violating the following provisions of the Act:

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 ... unprofessionally;
  - (28) 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....;

On or about April 18, 2018, a Case Resolution Conference (CRC) was held at the Board's offices. Subsequently, the Board and the Respondent agreed to enter into this Consent Order in order to resolve the Charges.

## FINDINGS OF FACT

1. At all times relevant hereto, the Respondent was licensed to practice dentistry in the State of Maryland. The Respondent was initially licensed on October 30, 1989. His license will expire on June 30, 2019.

2. At all times relevant hereto, the Respondent maintained an office for the private practice of dentistry located at 108 W. Timonium Road, Suite 200, Timonium, MD 21093 (the "Office"). The Respondent is also licensed to practice dentistry in Pennsylvania and has operated a dental office in that State.

### Complaint

3. On or about September 14, 2016, the Board received a complaint (the "Complaint") from an individual (the "Complainant") who identified herself as a registered dental hygienist who was previously employed at the Office.

4. In the Complaint, the Complainant indicated that the Office failed to implement certain sanitation protocols designed to prevent the spread of infection including, *inter alia*: sterilization protocols, use of personal protective equipment (PPE) and hand hygiene protocols, waste management protocols, and solution labeling issues.

5. Based on the Complaint, the Board initiated an investigation regarding the Respondent's compliance with CDC guidelines.<sup>1</sup>

6. In furtherance of the investigation, the Board assigned an expert in infection control protocols (the "CDC Expert") to conduct an inspection of the Office.

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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.

### Office Inspection

7. On or about September 30, 2016, the CDC Expert, accompanied by a Board investigator, conducted an inspection of the Office to determine whether the Respondent was complying with the CDC guidelines.

### Expert Report

8. Following the inspection, the CDC Expert was able to complete a report (the "Expert Report") regarding the Respondent's compliance with CDC Guidelines at the Office.

9. In the Expert Report, the CDC Expert noted a number of violations of the CDC Guidelines, including: failure to maintain an appropriate infection control manual and records at the Office (the Respondent maintains his primary office in Pennsylvania, approximately 26 miles from the Office, where he kept such documentation), disinfection and sterilization practices, personal protective equipment practices, waterline policy, and waste removal documentation.

10. The CDC Expert included the following inadequacies:

- Spore testing of sterilizers performed monthly rather than weekly;
- Non-sterilized slow speed handpiece motors;
- Drawer for storage had unwrapped sterilized instrument cassettes;
- The Respondent did not immediately produce spore testing logs for sterilizers, however, he maintained these records in online form and produced them subsequently;
- Sterilizer maintenance logs were not immediately apparent to the CDC Expert, although they were provided subsequently;<sup>2</sup>
- Sterile and non-sterile instruments stored together;

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<sup>2</sup> It appears that the logs were taped to the side of the machine, and so not immediately evident.

- Not every operatory had a sharps container;
- While the Respondent's employee was cleaning a room following patient treatment, a potentially contaminated needle was left for a brief time on a countertop before it was disposed in a sharps container. Sharps should be appropriately disposed of as soon as possible, as the Respondent's own policies indicated;
- Evidence of initial and annual employee training, Hepatitis B vaccination for employees, biohazard waste management records, and occupational exposure policies not immediately available because the Respondent maintained them at his Pennsylvania office 26 miles away, as stated above;
- Multiple expired products displayed (the Respondent discarded these when notified, stating that they were for advertising purposes and were not for patient use);
- The office lacked a written Waterline Management Policy;
- Bacterial testing of waterlines was deficient;
- Dental hygienist provided care with no protective eyewear;
- Employee hand hygiene was inconsistent after glove removal; and
- At least once, a dental hygienist failed to use heavy utility gloves when handling contaminated instruments.

11. Approximately one week after the inspection, the Respondent emailed the Board's investigator and stated that he had taken steps to address the deficiencies noted by the CDC Expert during the inspection and had counseled his employees based on the inspection's findings. He also attached several documents related to staff training and health records that he was unable to produce during the inspection.

## CONCLUSIONS OF LAW

The Respondent's conduct as described above, including but not limited to failing to comply with the CDC Guidelines as described above, constitutes: behaving unprofessionally, in violation of Health Occ. I § 4-315(a)(16); and failing to comply with Centers for Disease Control's guidelines on universal precautions in violation of Health Occ. I § 4-315(a)(28).

## ORDER

Based on the foregoing findings, it is, by a majority of a quorum of the Board, hereby:

**ORDERED** that the Respondent is **REPRIMANDED**; and it is further  
**ORDERED** that the Respondent is fined in the amount of **\$5000**; and it is further  
**ORDERED** that the Respondent shall be placed on **PROBATION** for a period of **TWO (2) YEARS** under the following terms and conditions:

1. The Respondent shall be subject to quarterly unannounced onsite inspections by a Board-assigned inspector in order to evaluate his compliance with the Act and infection control guidelines.<sup>3</sup> If the first four quarterly inspections are completed without substantial violations of the CDC Guidelines being found by the inspector, as determined solely by the Board, inspections shall occur biannually thereafter, rather than quarterly. The Board-assigned inspector shall be provided with copies of the Board file, the Consent Order, and any other documentation deemed relevant by the Board;
2. The Respondent shall provide to the Board-assigned inspector a schedule of his office's regular weekly hours of practice and promptly apprise the inspector of any changes;
3. The Board-assigned inspector shall provide reports to the Board within ten (10) business days of the date of each inspection and may consult with the Board regarding the findings of the inspections;

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<sup>3</sup> The inspections shall evaluate the Respondent's compliance with the CDC Guidelines and OSHA's rule on bloodborne pathogens and shall consist of an evaluation generally equivalent in scope to the CDC's published "Infection Prevention Checklist for Dental Settings."

4. The Respondent shall, at all times, practice dentistry in accordance with the Act;
5. At any time during the period of probation, if the Board makes a finding that the Respondent is not in compliance with CDC guidelines, the Respondent shall have the opportunity to correct the infractions within seven (7) days and shall be subject to a repeat inspection within seven (7) days to confirm that the violation has been remedied; and
6. Within six (6) months of the Consent Order, the Respondent shall successfully complete a Board-approved in-person course equivalent to at least six (6) hours of continuing education (CE) credit in infection control protocols.

And it is further

**ORDERED** that no part of the training or education that the Respondent receives in order to comply with this Consent Order may be applied to his required continuing education credits, 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 the Respondent shall be responsible for all costs incurred under this Consent Order; and it is further

**ORDERED** that after a minimum of two (2) years from the effective date of the Consent Order, the Respondent may submit a written petition to the Board requesting termination of probation.<sup>4</sup> After consideration of the petition, the probation may be terminated through an order of the Board. In addition, the Respondent shall have the right to petition the Board for termination of probation upon the sale of his ownership interest in

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<sup>4</sup> The petition shall consist of a written letter to the Board requesting that the Board lift the probation.

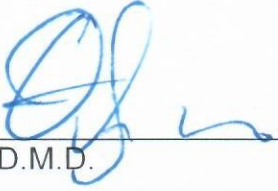
the Office. The Board shall grant termination if the Respondent has fully and satisfactorily complied with all probationary terms and conditions and there are no pending investigations or outstanding complaints related to the findings of fact in this Consent Order; and it is further

**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 dentistry 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;

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

5/10/19  
\_\_\_\_\_  
Date

  
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Arthur C. Jee, D.M.D.  
President  
Maryland State Board of Dental Examiners

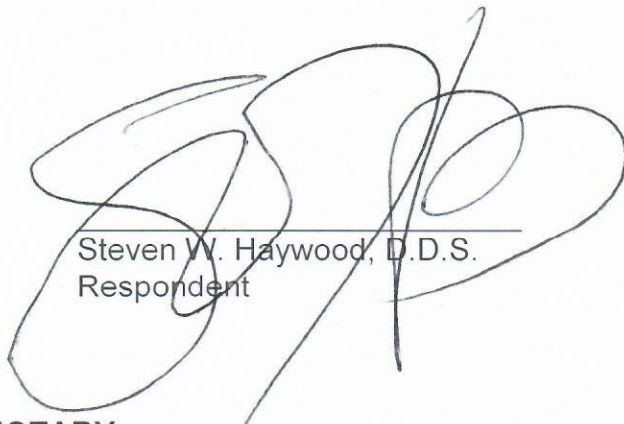
**CONSENT**

By this Consent, I, Steven W. Haywood, 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 consulted 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.

30 April 2018  
Date

  
Steven W. Haywood, D.D.S.  
Respondent

**NOTARY**

STATE OF Pennsylvania



CITY/COUNTY OF: York

I HEREBY CERTIFY that on this 30<sup>th</sup> day of April 2018,  
before me, a Notary Public of the State and County aforesaid, personally appeared Steven  
W. Haywood, 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

*Ann M. Frey*

My commission expires:

