

Drake Dental Practice Infection Control Statement

Infection control is of prime importance in this practice. It is essential to the safety of our patients, our families and us. Every member of staff will receive training in all aspects of infection control, the following policy and HTM 01-05 **must** be adhered to at all times. If there is any aspect that is not clear, please ask Michelle Drew or Ahasan Khan. It is essential you understand it.

1. All staff must be immunised against diphtheria , hepatitis B ,pertussis, poliomyelitis, rubella, TB and tetanus. They must have their hepatitis B seroconversion checked. For those that do not seroconvert, medical advice and counselling is required. This also applies to those who cannot be immunised because they are immunosuppressed, for example those taking steroids for asthma. In these cases it may be necessary to restrict clinical activities.
2. The practice provides PPE. Protective clothing, gloves, eyewear and masks which must be worn by dentists, therapists and nurses during all operative procedures. The Sterilisation nurse is additionally provided with aprons and heavy duty gloves for decontamination purposes. Clothing worn in clinical areas should not be worn outside the practice premises at any time.
3. Before donning gloves , hands should be washed with the antibacterial liquid soap following the procedure shown by each handwashing sink. They must then be disinfected with alcohol gel between each patient, should they become sticky or contaminated then they should be washed using the liquid soap once more. A new pair of gloves must be worn for each patient.
4. All instruments once the sharps have been removed are to be transported to the decontamination room in the lidded rigid container. Before sterilisation instruments are cleaned in the washer disinfectors or manually if there is failure of the washer disinfectors. All instruments that have been potentially contaminated must be sterilised.
5. Sterilised instruments should be stored on lidded trays in the Decon room (maximum 1 week) or in the designated storage cupboard in each surgery for 1 day or if pouched they can be stored in the surgery for up to 1 year. All pouches must be stamped daily.
6. All working areas used for each treatment must be cleaned and disinfected after each patient using either the safe R surface on a clean lint free cloth, alcohol wipes or non alcohol wipes if stainless steel. All dental unit water lines should be flushed for 20-30 seconds between each patient and 2 minutes at the beginning of each session.
7. Needles should be re sheathed only by the clinician using the re sheathing device. Sharps should be removed by the clinician and disposed of in the yellow sharps container .Matrix bands should be dismantled using the mosquito forceps. Needles, scalpel blades, LA cartridges , burs etc should be disposed of in the yellow sharps container. This must be labelled and never more than two thirds full. Safe sharps are available in all surgeries should the clinician wish to use them.
8. All clinical waste should be placed in the yellow bins provided, then transferred to the yellow sacks at the end of the day. The yellow sack should be double bagged and securely fastened then stored in the waste store room once it is two thirds full
9. In the event of an inoculation injury the policy displayed in each surgery should be followed. The incident should be reported in the accident book(AK surgery) and discussed/ assessed by the principals. Letter proformas to be given to the patient.
10. Any accidental spillages involving blood, saliva or mercury should be reported to Michelle Drew or Ahasan Khan. Correct policies and procedures should be followed for safe clean up and disposal.
11. Anyone developing a reaction to a chemical, material or gloves must inform Michelle Drew or Ahasan Khan immediately.
12. All staff will observe total confidentiality in all information relating to patients of the practice . See practice manual and decontamination folders for all relevant policies and surgeries for set up and shut down procedures.

Created by M Drew 6/12/2014 Reviewed 25/3/2015 & 25/3/2016 & 16/03/2017 & 6/12/2017&6/3/2018,9/3/2019& 24/3/2020 Review date March 2021.

Reviewed March 2021
Next review march 2022