

Infection Prevention and Control Policy

Statement of intent

This policy should be read in conjunction with Infection Prevention Procedures (M 257B). For the safety of our patients, visitors and team this practice follows the latest guidelines and research on infection prevention. We comply with the England: HTM 01-05 'essential quality requirements'. We take Universal Precautions for all patients, to minimise all of the known and unknown risks of cross infection.

Decontamination

We follow the latest decontamination guidelines from the Department of Health, England. Stored instruments are protected against recontamination. The treatment rooms and all equipment are decontaminated appropriately between patients and at the end of every clinical session. Defects found during the cleaning of equipment are immediately reported to the Decontamination Lead. Full details of our decontamination procedures are found in (M 257B).

This practice meets the Best Practice Requirements of the Department of Health Guidelines on infection prevention and control HTM 01-05.

Immunisation

Staff involved in decontamination and clinical work have evidence of: current immunisation against Hepatitis B, routine vaccinations and appropriate health clearance checks.

Items sent to the laboratory and equipment sent for repair

All items despatched to the laboratory are washed and disinfected after removal from the mouth and items received from the laboratory are washed and disinfected prior to fitting. Equipment is decontaminated before being sent for repair.

Instruments

Whenever possible we utilise single-use instruments, which are always disposed of after use on a patient.

Inoculation injury

To minimise the risk of blood borne viruses all staff are trained in avoidance and management of an inoculation injury. Post Exposure Prophylaxis is available if necessary. Staff at risk of blood-borne virus exposure have an occupational health examination.

Legionella control

The practice takes all reasonable measures to minimise the risk of exposure of staff, patients and visitors to legionella in accordance with existing guidance. The practice carries out regular legionella risk assessment, water tests and audits. Flushing of hot and cold water outlets is routinely undertaken by the practice, the water management procedures in (M 257LB) are followed. Records of all legionella control activities are maintained and reviewed at the Annual Management Review.

Personal hygiene

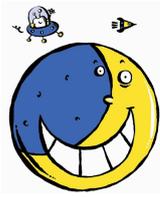
All staff maintain a high standard of personal hygiene including hand hygiene and follow techniques outlined in M 257G, restricted wearing of jewellery, and clean clinical clothing as outlined in M 257B.

Personal Protective Equipment

All team members follow the guidelines for personal protective equipment in M 257B. These include masks, gloves, protective eyewear, clinical attire and suitable shoes.

Spillage

Clinical staff are trained in how to manage an accidental spillage of a hazardous substance and how to follow our emergency arrangements.

**Waste**

Waste is carefully handled and disposed of by appropriate carriers according to current regulations As outlined in M 269.

Water quality

Dental unit waterlines undergo disinfection, flushing and maintenance to minimise the risk of bio-contamination. Practice water is inspected and tested as necessary to maintain water quality.

Training

Each member of the team undergoes regular training and review and has a responsibility to ensure a safe working environment for all. Training includes the principles of infection prevention, the use of decontamination equipment and materials, the daily inspection and testing of equipment and the maintenance of records

Audit

We audit and review infection prevention procedures every six months with the aim of a continual improvement in standards and to update this policy and procedures as necessary

Signature: Nici Hopkins

Date: 24th September 2020

Name: Nici Hopkins

Decontamination Lead - Kasia Porebska

