

## WE NEED SPECIFICS FOR INFECTION CONTROL

I am a dental nurse working in Kent. I am emailing you as I have a suggestion for an article.

With the ever changing CQC legislation, we at our practice have been putting a lot of consideration into how we store materials in our drawers. However, during discussions we have had differences of opinion on how far we should take this with regards to cross infection control. We eventually decided to store everything that we can in separate sealed pots. For example: wedges, re-useable burs, articulating paper, polishing disks etc. Our thinking behind this is that it must be far more hygienic to have these things covered in the drawer as opposed to loose and uncovered.

At the start of an appointment for obvious reasons the plan is that we get everything out of the drawer that we are likely to need. If necessary we would go back into the drawer during treatment and remove the needed item with tweezers, or remove our gloves and look for the item. However, as things such as wedges are stored in pots we now grab the pot with tweezers and tweezer a wedge out. At end of session we would wipe the pot over and pop it back in the drawer.

It has been suggested by a couple of team members that maybe this is slightly over-kill and we could simplify the drawers by not covering X-ray film packets, wedges and burs and just having them loose in the draw dividers.

After rather extensive research I can't seem to find too much guidance on the matter. The advice is all very general - get out everything you may need before treatment starts and use tweezers for retrieving additional items. We would like to see an article that's more specific. I hope you can help.

**Stephanie Ivinson**



*Ed's note:  
Thank you to  
Stephanie for this suggestion  
for an article. I am pleased to  
announce that an article focusing on the  
specifics of storing and accessing materials in  
the dental surgery has now been commissioned  
and will appear in the winter issue of Vital on  
23 November 2013.*

## THE WORLD OF TOOTHVILLE

This picture (right) is by dentist Dr Ian Davis, creator of The World of Toothville.

In 2009, Dr Davis had a desire to produce dentally related pictures for his newly refurbished dental surgery and came up with a novel idea: if teeth were the size of a house or a car, how would they be treated?

In such a world, teeth would need builders, decorators and other tradesmen, requiring ladders, cranes and scaffolding to complete their work.

Dr Davis explains: 'My first image was of a decorator on a ladder painting a tooth white. I thought the idea had real potential. Then I went running to my technician next door to get a spare porcelain veneer and I then produced the images of a veneer being placed with a crane. The response from my staff and patients was very positive and by December 2009 I found myself on the centre pages of the London *Metro*'.

Toothville has since become well recognised and has been on the BBC website. There has been a demand for merchandise and Dr Davis has recently tried his hand at writing comics.

Visit [www.toothville.com](http://www.toothville.com) or follow on Twitter @toothtweets.



## WHAT ARE THE BENEFITS OF REGISTRATION?

It's that time of year again when we all moan and groan about having to pay for GDC registration and indemnity insurance. Every member of our team gets angry about this every year and when you work out the percentage increase it's no wonder. In the five year period since GDC registration began for DCPs, there has been a massive 60% increase in the fees. On top of that, our indemnity insurance has increased a whopping 98% since registration started five years ago. How can these increases be justified? Surprisingly, none of us have had a 60-98% wage increase.

We have been informed by various articles that registration is a great benefit to our profession. From the point of view of every nurse here, and I would presume every nurse working in a small general practice, we have no idea what benefits these are! Our patients get exactly the same fabulous care that they had before registration. We as nurses are no more respected for being registered. The only benefit that we can see is that it is a great money spinning opportunity.

Also, several of us are working part time or, as in one case, only work one half day in surgery each week and yet we still have to pay the full registration and indemnity fees. Surely there could be a rate for part time and a rate for full time workers? We have previously written to the GDC and to our defence organisation regarding reduced fees for part time workers but nothing positive came from that. This also has a knock on effect when practices are trying to employ

part time staff. We as a practice have had some difficulty lately as we are trying to find someone to cover maternity leave but we only need cover for two days a week. Very few nurses want to pay for full registration just to work two days a week. Surely a reduced fee would help to accommodate all those nurses that no longer want to work full time but would work part time if it was financially viable? A lot of the nurses who would want part time work are the more senior nurses who have vast experience in the dental industry; surely as a profession, we can't afford to lose this invaluable knowledge because it's not financially viable for these people to work part time hours? Whilst we are on the subject (again we have experienced this in our practice), why do nurses who are off work for maybe up to a year on maternity leave, still have to pay full GDC registration? Surely a reduced fee would also apply in this situation?

It would be interesting to see what other *Vital* readers think.

At least we are all having a great summer. Now that is something to be happy about.

**Debbie, Becky, Ally, Penny and Pippa**

*More information on the GDC's Annual Retention Fee (ARF) can be found at: [www.gdc-uk.org/dentalprofessionals/fees/pages/arf-faqs.aspx](http://www.gdc-uk.org/dentalprofessionals/fees/pages/arf-faqs.aspx). In August the GDC requested the final report from the Annual Retention Fee policy review task and finish group - more news in future issues.*