PERSONAL ACCOUNT

An eye-opening redeployment

By Thomas Turner, Foundation Dentist, Leicester



ublic Health England provide an essential, but little understood role in managing disease and public health incidents. Throughout the COVID-19 pandemic the role of Public Health England has been more important than ever; it has truly been in the spotlight and they have had to recruit more staff and volunteers to help rise to the challenge of the pandemic.

I have been fortunate enough to be involved through redeployment as a tier one operational cell practitioner within the East Midlands. This has included assisting with the management of the much-publicised outbreak and lockdown within Leicester. As a part of this role we receive referrals from the tier two test and trace service and numerous other sources about potential or confirmed COVID-19 outbreaks within workplaces, care homes, healthcare settings and public places. We then work to identify the extent of the outbreak, reasons for it occurring and put a management plan in place to prevent the situation escalating. This includes activities such as arranging further testing, risk assessing, providing advice and escalating complex situations. We also provide advice to members of the public, businesses and healthcare settings about the various guidelines in place and how to manage the risk within their respective setting.

Before taking up the role I was initially quite apprehensive due to my limited understanding of public health and about the impact I could have with helping the pandemic response, when compared to continuing to work in my practice. Nevertheless, the experience has proved to be rewarding and eye opening. It has also changed my perceptions not only on public health, but on dentistry and healthcare in general. Throughout this role I have noticed some clear patterns and trends which I would like to share with you.

Within healthcare we follow personal protective equipment, infection control and COVID-19 guidelines rigorously with patients. However, amongst colleagues some of us adopt a more relaxed approach. There may be many reasons for this, however, the consequences of this are more apparent now than ever. It has been eye opening to see how quickly COVID-19 can spread throughout a healthcare workforce. Not only does this risk

having seen the other side of the argument I can now see the necessity of it, in trying to return our lives back to normal as soon as possible. I have also been impressed by how the guidance is constantly reviewed and updated based on emerging evidence of this still relatively new virus.

I have also developed a more appreciative view on what public health is and just how much work and effort goes into managing disease within populations. At times I have been disheartened by how we have to limit certain aspects of our care based on cost and local measures. However, throughout this role I have seen how funding and resources are allocated to where they are needed most through the needs of the population. I have now developed a more pragmatic approach to healthcare and an appreciation of how resources are allocated based on evidence to

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the health of patients and colleagues, it also affects the service we can offer and patient confidence in our policies.

Throughout the pandemic the dental workforce has been frustrated by the guidance around the pandemic, the financial impact and our ability to provide care for our patients. It has been interesting to see how other industries and workforces have also become disheartened by the pandemic and how the guidance has impacted their ability to provide their services. Despite this, through undertaking this role I have seen the benefits and importance of the guidance. It has been interesting to see how settings which strictly follow the guidance keep COVID-19 under control and limit any positive cases. Whereas, workplaces which do not, quickly see their cases rise into double figures and face repeated outbreaks. Initially, I found the guidance impractical, however,

have the greatest benefit for the population.

This role has also provided me with the skills to better advise and risk assess patients in practice. My decisions on whether to see a patient in person or over the phone in these times are now more evidence-based. I am also more confident in understanding policies surrounding COVID-19 in the practice environment. I also feel my colleagues at Public Health England have benefitted from our assistance, clinical knowledge and unique input. The interprofessional engagement through various redeployments has highlighted just how the dental team can work with and learn from other healthcare professionals. As a young dentist this has completely changed how I view many aspects of healthcare including my own clinical judgement. I hope this interprofessional engagement continues throughout the pandemic and beyond.