

## Dental team members must take an active role in infection control, reports **Kate Craig**

CDs have a legal duty of care to protect the health and safety of patients. Every practice should have a written infection control policy and provide training to each member of staff so they are confident and competent.

While sterilisation, pre-sterilisation and the use of single use items feature strongly in the BDA's newly revised guidelines on infection control, dental team members need to also consider infection control issues closer to home. Uniform washing, personal hygiene and fashion accessories all have an impact on effective infection control.

Nurses, hygienists and therapists are in close contact with patients and this is a two-way interchange. The uniform is at the frontier of this interaction and should prevent team members from spreading infective agents to patients, family and friends.

Surgery clothing should be made of a material that can be machine-washed with a suitable detergent at 65°C for 10 minutes

and should not be worn outside the practice. Changing facilities should be provided in practices and staff members must have at least one spare uniform.

Good personal hygiene is vital to infection control. Lacerated, abraded and cracked skin can offer a portal of entry for micro-organisms. Gloves must be worn for all clinical procedures and treated as single use items. Hands must be washed before gloving and a new pair of gloves should be put on for every patient. To prevent drying and cracking of skin a suitable hand conditioning cream is recommended after every clinical session.

Gloves should be replaced immediately if they get torn, cut or punctured – a likely result of long nails or sharp jewellery. The removal of all rings, jewellery and watches is recommended for hand care during clinical sessions. The wearing of a mask and protective eyewear is also essential.

The new guidance from the BDA, revised in association with the Department of Health, emphasises the need for effective pre-sterilisation cleaning, methods for sterilisation and the use of single use items (see page 54.)

The interest of patients in infection control protocols cannot be underestimated. The BDA receives many telephone calls from patients questioning what dentists should be doing and asking what they can do when guidelines haven't been followed – not wearing gloves, for example. The BDA always encourages patients to ask their dentists directly about their infection control procedures to allow the dentist to explain what actually happens in practice.

The media has done a good job in making patients more aware of infection control within dental surgeries, so it is important that you are aware of the image you present to your patients and the messages that are given, frequently unintentionally. With the publication of the new infection control guidelines, the time is ripe to re-evaluate practice policies and protocols and improve the information that is available for patients.

Advice Sheet A12: Infection Control in Dentistry, has been distributed to all dental surgeries. Additional copies are available without charge through BDA Shop at www.bdashop.com.