

COVID-19

Lee Savarrio - Chief of Dentistry Update (14-4-2020)

I hope as many of you as possible managed to get some time to relax over the public holiday weekend. I would, however, like to acknowledge all of the GDPs who continued to triage their patients, the GGCEDS staff who operated the service on Saturday and Sunday and the PDS staff who gave up their bank holiday to ensure we had emergency care provision throughout the 4 day break as well as the clinical and operational managers who put together the service at very short notice.

It was a busy weekend for all those triaging, but the interface between GDS, the PDS Special Care Hub and GGCEDS all worked well. I appreciate there were a couple of issues in relation to telephone access to the Special Care Hub and these are being reviewed at present to see how this can be improved, in general, but in particular looking ahead to the next public holiday.

- I have attached a letter from Jeanne Freeman, Cabinet Secretary for Health and Sport which provides clear guidance on clinical negligence cover. This should provide reassurances to those who have kindly volunteered their services.
- Further to my email to all staff treating patients of last week, please see the new guidance from over the weekend regarding treating patients in urgent care dental settings from PHE / HPS for the Covid pandemic. This document was produced in a “four nations approach” with collaboration between the 4 CD’s in the UK as well as specialist societies, FGDP UK group and the Dental Deans of the UK Royal Colleges.

Points to pick out:

1. It is based on the best evidence available from previous pandemic and inter-pandemic periods and is considered good practice in response to this COVID-19 pandemic.
2. It nicely sets out why we need more than “Universal Precautions” for specific infectious agents eg COVID-19, active TB, Ebola, etc.

Transmission-based precautions: In addition to Standard Infection Control Precautions (SICPs), transmission based precautions (TBPs) are applied when SICPs alone are insufficient to prevent transmission of an infectious agent. TBPs are additional infection control precautions required when caring for a patient with a known or suspected infectious agent and are classified based on routes of transmission:

Contact precautions: Used to prevent and control infection transmission via direct contact or indirectly from the immediate care environment. This is the most common route of infection transmission.

Droplet precautions: Used to prevent and control infection transmission over short distances via droplets (>5µm) from the patient to a mucosal surface or the conjunctivae of a dental team member. A distance of approximately 1 metre around the infected individual is the area of risk for droplet transmission which is why dental teams routinely wear fluid resistant surgical masks, eye and face protection for treating patients.

Airborne precautions: Used to prevent and control infection transmission via aerosols (≤5µm) from the respiratory tract of the patient directly onto a mucosal surface or conjunctivae of the dental team.

Stay Safe and Look After One Another

3. Extractions, even with suction, continue to be classified as non-aerosol generating procedures.
 4. It acknowledges that the evidence base on COVID-19 is rapidly evolving and that further updates may be made to this guidance as new detail or evidence emerges.
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- Can I ask that all GDS practices to ensure that your answer machines are working regularly in particular check/delete old answer phone messages from practice phones, especially for colleagues working remotely. It has been highlighted to me that a few practices have found that if the answer phone becomes full then the calls are rejected, with the telephone ringing out unanswered. Please also ensure you advise patients to call NHS24 at the appropriate times.
 - We are now actively looking to identify any staff who could be reassigned to support colleagues elsewhere in the wider NHSGGC, this may be within any of the acute sites including the NHS Louisa Jordan Hospital or supporting the work within Community Assessment Centres. I have attached a letter issued from the CDO appealing for a good response from NHS dental colleagues.
 - I thought I would end on a positive note and share this message we received recently from a patient.

“Morning, I just wanted to send a quick email to thank all of the staff involved in my dental treatment yesterday. Even in these difficult times I think from contacting my dentist to the teeth being extracted was around 4.5 hours, which really is an amazing service. More than that though, everyone involved throughout couldn't have been nicer or more helpful.

Providing such an intimate service in a hospital environment obviously puts all staff at high risk of coronavirus. If idiots like me hadn't neglected my teeth in the first place then perhaps the service wouldn't be needed. However, unfortunately it is and just wanted to share my gratitude. Thanks again and stay safe.”

Stay Safe
Lee Savarrio, Chief of Dentistry