

# Riverside Dental Practice

## Infection Control Policy Statement

Infection control is of prime importance in this practice.

All new staff will receive training related to their job role during their induction process. New clinical staff also complete an additional IPC induction to ensure they have received training in the equipment and processes undertaken at the practice. Staff then complete infection control training on a regular basis.

The following policy statement describes the routines for our practice, which must always be followed. If any aspect is unclear, please ask Dr. Megha Sethi - Infection Control Lead. Full versions of each policy can be found in the Infection Control Manual.

Remember, any of your patients might ask you about the policy, so make sure you understand it.

All clinical staff or any staff who come into contact with sharps or clinical waste must be immunised against hepatitis B; records of hepatitis B seroconversion will be held securely by Dr. Megha Sethi - Infection Control Lead, to ensure confidentiality. For those who do not seroconvert or cannot be immunised, advice will be sought on the appropriate course of action.

'Safer Sharps' (which have a shield or cover that slides or pivots to cover the needle after use) are used where it is reasonably practicable. Where it is not reasonably practicable to use safer sharps, traditional unprotected sharps are used in conjunction with procedures for safe use and disposal.

All staff members are provided with personal protective equipment (PPE) where required, which includes gloves, masks, goggles/visors, aprons, and scrubs.

All new dental instruments must be fully decontaminated before being used, according to the manufacturer's instructions and within the limits of the practice's facilities.

All equipment related to Infection Control, such as Autoclaves, Washer Disinfectors, etc, will be serviced in accordance with the manufacturer's guidance, and evidence will be obtained for the minimum period required.

At the end of each patient treatment, instruments should be placed in a lidded, sealed, rigid box and transported to the decontamination room as soon as possible. If instruments cannot be taken directly to the decontamination room, they should be kept moist.

All re-usable instruments must be decontaminated after use to ensure they are safe for reuse. Protocols for cleaning and sterilising instruments can be found in the Infection Control Manual.

Single-use instruments and equipment must be identified and disposed of safely, never reused.

Instruments can be stored in sealed pouches for up to 1 year.