

# Brookview Dental Care Annual Infection Prevention and Control Statement April 2023 – April 2024

The Health and Social Care Act 2008: code of practice on prevention and control of infections guidance states that the infection control lead is responsible for producing an annual statement of infection control which includes:

- Known outbreaks of infection.
- Audits undertaken and subsequent actions.
- Action taken following an outbreak of infection.
- Risk assessments undertaken for prevention and control of infection.
- Induction, education and training received by staff.
- Review and update of policies, procedures and guidance

#### 1. Introduction

- Brookview Dental Care
- This annual statement outlines the Infection Prevention & Control activities for April 2023 to April 2024
- Prevention of infection is a fundamental aspect of all care afforded to patients and is at the heart of patient safety. Infection prevention standards are a basic requirement of registration for health and social care providers, and the ongoing inspections against the Code of Practice for the prevention and control of infections.
- In compliance with good practice on infection prevention and control, a copy of this statement is available to patients on request.

### **Practice Information**

Number of dentists: 3Number of hygienists: 2

• Number of patients registered: 1019

• The practice is best practice compliant

### 2. Infection Prevention and Control Service

- The lead for Infection Prevention within the Practice is Niki Kitsiou
- The lead for decontamination is Julie Wallington
- The Practice lead for validation is Niki Kitsiou

# 3. Audit Programme Year

This practice conducts audits to assess implementation of HTM 01-05 and related infection prevention and control issues using the Infection Prevention Society audit tool.

The following areas were audited during April 2023- April 2024 using the IPS Self Audit Tool.

## 4. Actions identified through audit year

The following actions were identified during audit

Web: <u>www.brookviewdentalcare.co.uk</u> Email: <u>contactus@brookviewdentalcare.co.uk</u>

Tel: 01509 856 041 02/10/2024



Date of	Issues	Actions	Date of Completion/ status
audit	identified		
05/03/2024	Lack of washer	Unable to install one due to	Ongoing – will install one
IPS tool	disinfector	lack of space and insufficient	when and if the premises re
		water pressure	locates

## 5. Monitoring of Cleanliness

Cleanliness is monitored using FR national standards.

The following scores were achieved in April 2023 – April 2024: 5 star

## 6. Staff Training

The following staff have received Infection Prevention and Control training this financial year

Dental nurses	Jacqui Barrett, Joanna Bateman , Julie Wallington , Linda Hoad
Dentist(s)	Niki Kitsiou
Hygienists	
Administration staff	Stephen Kitsiou
Reception staff	Louise Hopper

The training was provided by Henry Shein - Jenni Nixon of Dentisan on 16/04/2024

## 7. Policies, Guidelines and Risk Assessments

- The practice risk assessments, COSHH assessments and infection control policies and procedures are reviewed and updated on a regular basis
- Policies are found in the decontamination file and reviewed yearly.

#### 8. Known infection transmission events

- There have been no known transmission events during year
- There have been 2 potential transmission events which were traced to be low risk due to the patient's medical history and there has been no incidence of infection to the nurse concerned

## 9. Refurbishment / Improvement Projects

• There are still ongoing talks / plans to relocate the whole health centre in which our practice is a part. However, this is yet to occur and is still to be finalized.

#### 10. Other Issues

- Continued issues with property service employed caretakers cleaning standards. Mopping and daily environmental cleaning carried out by dental staff to rectify this.
- We have relaxed the need for staff to wear masks in the non-clinical areas
- Air purifiers continue to be in use in both surgeries since the Covid 19 pandemic.
- We continue to have non-essential items removed from reception to minimize cross infection, leaflets are display only and handed out as required, there are no magazines.
- AGPs for non-respiratory patients continue to be at the discretion of the clinician as to

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which face mask they wear. However for respiratory patients FFP3 fit tested masks are still SOP

# 11. Notes

- Self- assessment audits can be done using the IPS (Infection Prevention Society) tools.
- National specifications for cleanliness for dental premises can be found at
- www.nrls.npsa.nhs.uk/resources/?entryid45=75241

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