Keeping up appearances

Days of inadequate cold sterilisation using harmful chemicals are over, says Mhari Coxon who encourages all forward-thinking practices to make changes before a deadline is issued.

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though the holidays will be well and truly over by the time you read this, I am writing this piece on the countdown to spending six weeks with the kids. Both my children’s schools have had swine flu outbreaks, but there no longer seems to be the value of closure as new cases are increasing rapidly beyond the singular outbreak.

I sound like a broken record reminding each child to wash their hands before eating, avoid touching their eyes or mouth in class, and use a tissue if you need to sneeze or cough. These basic measures can reduce their risk of contracting H1N1. I notice a lot more people wearing masks (to questionable benefit unless the wearer is infected and trying to reduce transmission) on the train and Tube and most people are carrying tissues in case they do need to cough or sneeze, and those people that don’t feel the icy stares from fellow commuters.

I have also re-evaluated my cross-infection protocol in practice, but thankfully we are following best practice with regards to transmission of viruses within our limits.

Our cleaning routine

In my practice, I work with a floating nurse/oral health educator, so I’m often doing all my own instrument cleaning. Yes, this can be time consuming, but it’s one of the things I refuse to rush.

What we are working on is not to move to improve our disinfection and decontamination procedures in our centre. We are, at present, using ultrasonic baths to decontaminate, then hand rinsing and visually checking, and autoclaving in non-vacuum unit, before bagging instruments and dating them. Our “dirty area” is clearly marked, but is still in one of the surgeries. We quality check our ultrasonic baths with full tests monthly and have our autoclave serviced regularly, while all ultrasonic baths are emptied at least daily. But we know we need to switch to using a washer system to reduce our contamination risk significantly.

The Department of Health has issued best practice guidance, and this can be found online at http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PolicyandGuidance/DH_092443. This is what all dental health professionals should be working towards achieving in any dental environment.

The aim of the guidance is to improve the quality of disinfection and decontamination of reusable dental equipment. Over the next few years, every dental centre, both private and NHS, will have to be registered to show they offer a safe, clean environment for dental treatment, especially that they are using appropriate decontamination of dental equipment.

Most dental professionals registered with the GDC will have to improve their current practice to achieve this standard. Newly refurbished, and purpose-built practices will have installed these protocols as they developed.

A clean space

Out of necessity, Martin Fulford has launched the Anti Microbial Dental Impression Mix to a combined surface cleaner/disinfectant. The surface cleaner offers a 2 in 1 solution that removes dirt or grease whilst disinfecting the treated area to ensure surfaces are clean as well as decontaminated. The Dental Impression Mix saves time by disinfecting impressions at source using Continu to mix the alginate, rather than water. Continu effectively inhibits fungal growth for up to 3 weeks.

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