

This advice might change as new information becomes available. Please ensure that you are viewing the most recent version of this document by referring to [www.sdcep.org.uk.](http://www.sdcep.org.uk/published-guidance/acute-dental-problems-covid-19/)

As a direct result of the COVID-19 Pandemic, the Chief Dental Officer for Scotland issued a letter on 23rd March 2020 indicating that all routine dentistry in Scotland should cease and urgent emergency treatment only be carried out in designated centres until further notice. Dental services within the other UK countries are also having to adapt.

This guide has been produced to assist general dental practice teams with a period of closure, upkeep of the practice during that closure and eventual re-opening of their practices during the COVID-19 Pandemic period only. Individual circumstances and equipment will vary considerably between settings. Therefore, this guide presents a checklist of points to consider rather than definitive specific actions. For some points, further information is provided, including external links, some of which are specific to Scotland.

The checklist is divided into 3 sections presented as tables:

* + Part A: Actions to consider at closure \*
	+ Part B: Points to consider during practice closure
	+ Part C: Actions to consider prior to practice re-opening (to follow)

\* Although practices in Scotland have already closed, we have included Part A as dental teams might find it helpful to compare the items included here with their own closure processes.

Due to the overall uncertainty and rapidly changing COVID-19 landscape as well as the individual variation in practice circumstances and equipment, this list cannot be exhaustive. Therefore, as always, **we recommend that you also refer to manufacturers’ instructions and seek clarity from your maintenance providers if in any doubt**. We welcome feedback on this guide including suggestions for amendments or additions.

Some equipment manufacturers and maintenance providers have already produced and issued advice to their customers and continue to do so. This guide is designed to complement these sources rather than supersede them.

This guide has been compiled by the SDCEP team with reference to equipment-specific advice received from manufacturers and suppliers and with input from several experienced dental professionals.

## A: Closure

Actions to consider at closure

| **Action** | **Completed** | **Comments** |
| --- | --- | --- |
| **1. Surgery** |  |  |
| 1.1 Ensure dental unit waterlines (DUWL) are flushed, disinfected using appropriate biocide and drained as per manufacturer’s instructions.  |  | It might be necessary to contact the supplier or maintenance provider directly to seek this advice. |
| 1.2 Remove couplings and air motors from tubing. Clean and lubricate as per manufacturer’s instructions. |   |  |
| 1.3 Sterilize and oil handpieces, store upright in a clean dry environment. |  |  |
| 1.4 Ensure suction pumps are flushed with chemical cleaning solution as per manufacturer's instructions.  |  |  |
| Remove and clean all suction and spittoon filters. |  |  |
| **2 Local Decontamination Unit (LDU)** |  |  |
| 2.1 Drain sterilizer reservoir, clean chamber and seals as per manufacturer’s instructions. |  |  |
| 2.2 Prepare Washer Disinfector (WD) for period of inactivity as per manufacturer’s instructions.  |  | It is crucial to check with your manufacturer and/or maintenance providers regarding best protocol to safeguard WD function whilst the practice is closed. This may vary considerably between machine manufacturers. You may be advised NOT to electrically isolate the WD unit as this will compromise the flood failsafe mechanism. |
| 2.3 Drain and wipe dry ultrasonic bath, leave drain valve open and hose in sink as per manufacturer's instructions. |  |  |
| 2.4 Drain water from Reverse Osmosis (RO) machine as per manufacturer’s instructions. |  |  |
| **3 Plant and equipment** |  |  |
| 3.1 Prepare compressor for a period of inactivity as per manufacturer’s instructions. Drain the compressor cylinder until gauge is 0.  |  | The instructions may vary depending on whether your equipment is oil free or not. |
| 3.2 Set up and test any remote access to IT and telecommunications systems e.g. practice management software and telephones. |  | Ensure IT backup protocols will still function during closure. |
| 3.3 Ensure x-ray unit is electrically isolated and stowed in the correct position.  |  | This may be with the arm open or closed depending on model.  |
| 3,4 If the practice has a drinking water dispenser, drain or switch off as per manufacturer’s instructions. |  | If a bottled system, discard water from partially used bottles. |
| **4 Premises** |  |  |
| 4,1 Electrically isolate all equipment (except IT server and, if advised, Washer Disinfector (WD). Remove plugs from sockets where possible. |  |  |
| 4,2 Consider whether mail redirection is required, and where any parcel deliveries may be left in the interim. |  |  |
| 4.3 Follow agreed policy regarding switching off mains water to avoid risk of flooding. |  | This may vary depending on individual practice circumstances. |
| 4.4 Remove money/valuables from practice into a secure place for safekeeping.  |  |  |
| **5 Staff** |  |  |
| 5.1 Check contact details for staff are current. Agree how, when and how often to keep in contact e.g. via group chats or video conferencing tools. |  |  |
| 5.2 Ensure business continuity plan is up to date, and that all staff know how to access it.  |  | Whilst not exhaustive this may include the location of key documents; contact details for landlord, accountant, bank, power of attorney, insurance company, fire safety providers, burglar alarm company, IT support, next of kin; a list of suppliers, ordering processes, arrangements for settling suppliers accounts, health board contacts. You may want to ensure procedure and process manuals are up to date, in case team members need to switch roles as a result of illness or redeployment. |
| **6 Patients** |  |  |
| 6.1 Decide a mechanism to answer/divert phone so that patients can contact practice within normal working hours.  |  | As per [CDO letter POL/33888 23.03.20](https://www.scottishdental.org/wp-content/uploads/2020/03/CDO-Letter-Cessation-of-Routine-Dental-Care-Further-Advice-23-March-2020.pdf) it is a requirement that patients have access to telephone advice during working hours.If working remotely, ensure you maintain patient confidentiality and comply with GDPR e.g. make sure you lock screen if leaving computer unattended so that others cannot view it.  |
| 6.2 Update answerphone message, websites, social media, online booking systems and emails to inform patients of current practice closure and actions required to obtain emergency advice if necessary. |  |  |
| 6.3 Place sign on door/window indicating practice is closed and how to contact practice if necessary. |  | You may also want to say on this sign that there are currently no drugs, money or PPE on the premises. |
| 6.4 Change/cancel patient appointments. |  | Stop automatic text/email reminders. |
| **7 External** |  |  |
| 7.1 Inform insurance company that the building will be closed, including what steps have been undertaken to ensure its safety e.g. locked windows, burglar alarm activated, fire detection system in place, equipment isolated from water supply, electrical items switched off and plugs removed if possible, regular checks or people in building. |  |  |
| 7.2 Check health board strategy for communicating with pharmacies regarding prescription dispensing. Liaise with local pharmacies to ensure they will have stocks of items you will be recommending e.g. temporary dressing material, desensitising toothpastes etc.  |  | Consider sharing SDCEP’s COVID-19-specific guidance with pharmacy colleagues. [SDCEP Management of Acute Dental Problems during COVID-19 Pandemic](http://www.sdcep.org.uk/published-guidance/acute-dental-problems-covid-19/) [SDCEP Drugs for the Management of Dental Problems during COVID-19 Pandemic](http://www.sdcep.org.uk/published-guidance/acute-dental-problems-covid-19/) |
| 7.3 Ensure dentists will have access to prescription pads and stamps and are able to store them securely whilst working remotely. |  |  |
| 7.5 Consider cancelling Healthcare/Sanitary waste collection.  |  | Contact your health board to arrange an uplift if there is residual healthcare waste in the practice.  |

**B: During closure**

Points to consider during practice closure

| **Action** | **Completed** | **Comments** |
| --- | --- | --- |
| **1 Surgery** |  |  |
| 1.1 Operate chair and run handpiece motors periodically to prevent parts seizing as per manufacturer’s instruction. |  |  |
| 1.2 Maintain Dental Unit Waterlines (DUWL) and Suction to minimise biofilm as advised by the manufacturer. Perform system disinfection if recommended.  |  | It might be necessary to contact the supplier or maintenance provider directly to seek this advice. |
| **2 Local Decontamination Unit (LDU)** |  |  |
| 2.1 If advised by manufacturer or maintenance provider, run sterilizer cycle and keep records of tests. Remember to drain and wipe dry the chamber, door and seals and then electrically isolate again. |  | It might be necessary to contact the supplier or maintenance provider directly to seek this advice. |
| 2.2 If advised by manufacturer or maintenance provider, run Washer Disinfector cycle and keep records of tests. |  | It might be necessary to contact the supplier or maintenance provider directly to seek this advice. |
| **3 Plant and equipment** |  |  |
| 3.1 Put in place a mechanism to test the Automated External Defibrillator (AED) and check emergency drug kit regularly. |  | Batteries in an AED should last for 5 years. You may want to check the age of the machine or when the battery was most recently replaced.  |
| 3.2 Maintain rechargeable items as per manufacturer’s instructions.  |  | To preserve battery life, rechargeable items should be discharged before charging again.  |
| 3.3 Turn on compressor at regular intervals to allow for pump turnover as per manufacturer’s instructions. Remember to bleed again after running.  |  | If drain has been left open while machine switched off, remember to close it before switching back on. It might be necessary to contact the supplier or maintenance provider directly to seek this advice. |
| 3.4 Ensure computer back-ups are running and remote IT access systems remain functioning (if using) |  |  |
| **4 Premises** |  |  |
| 4.1 Test fire alarm regularly. |  |  |
| 4.2 Keep the practice clean – dust, vacuum, mop.  |  | This will be easier if surface clutter is kept to a minimum. |
| 4.3 Regularly run water through pipes and taps in surgeries, kitchen, bathrooms, showers etc to prevent water stagnation. |  | Remember to turn off water supply via main stop valve once complete, if this is your policy.  |
| **5 Staff** |  |  |
| 5.1 Keep in contact with staff by agreed methods. |  |  |
| 5.2 Keep up to date with COVID-19 Briefings.  |  | [Health Protection Scotland](https://hps.scot.nhs.uk/a-to-z-of-topics/covid-19/), [Scottish Government](https://www.gov.scot/coronavirus-covid-19/) and [NHS inform](https://www.nhsinform.scot/)COVID -19 resources for health and social care professionals are also available via [TURAS Learn](https://learn.nes.nhs.scot/27993/coronavirus-covid-19)  |
| 5.3 Inform indemnity provider if any staff member is redeployed. |  | Staff members who have individual indemnity may need to inform their indemnifiers personally.As per [CDO letter dated 09.04.2020](https://www.scottishdental.org/wp-content/uploads/2020/04/Scotland-CDO-letter-wider-COVID-19-response-090420.pdf) |
| **6 Staff activities** |  |  |
| 6.1 Change/cancel patient appointments as required. |  |  |
| 6.2 Check regularly and respond to practice mail, emails, social media and answerphone messages, as appropriate.  |  |  |
| 6.3 Check NHS email accounts daily for updates from Scottish Government, Health Boards or other organisations e.g. Health Protection Scotland. Ensure any updates are communicated to patients and staff appropriately.  |  | This may include updating answerphone, website and social media posts. |
| 6.4 Monitor and record any information requested by your NHS Board or Scottish Government e.g. referrals, effects of COVID closure. |  |  |
| **7 Patient Care**  |  |  |
| 7.5 Triage patients following SDCEP *Management of Acute Dental Problems during COVID-19 Pandemic* guide. If required, follow your specific Health Board triage pathway to urgent care centres. |  | Check for updates from SDCEP website. [SDCEP Management of Acute Dental Problems during COVID -19 Pandemic](http://www.sdcep.org.uk/published-guidance/acute-dental-problems-covid-19/) Detailed clinical advice including analgesia and antimicrobials dosages can only be given by a suitably qualified health professional. |
| 7.6 Give drug advice following SDCEP *Drugs for the Management of Dental Problems during COVID-19 Pandemic* guide. |  | Check for updates from SDCEP website. [SDCEP Drugs for the Management of Dental Problems during COVID-19 Pandemic](http://www.sdcep.org.uk/published-guidance/acute-dental-problems-covid-19/)Detailed clinical advice including analgesia and antimicrobials dosages can only be given by a suitably qualified health professional. |
| 7.7 Keep a record of patients that contact the practice.  |  | As in all consultations, an accurate record of issues and actions is required. These records will also be needed to arrange any necessary follow up on your return. Keep a separate list of patients who make contact in order to prioritise any actions required going forwards. |
| **8 External** |  |  |
| 8.1 Collect any redirected parcel/deliveries. |  |  |
| 8.2 Consider cancelling Healthcare/Sanitary waste collection.  |  | Ensure practice will be accessible when collection is due. |

## C: Reopening - to follow

This part of the checklist is in development and will be made available in due course.