

Chief of Dentistry - Anniversary Update

March 2021 saw the 1st anniversary of the outset of the Covid-19 Pandemic in Scotland and the UK, which changed all our personal and working lives almost beyond recognition.

As we come to see an easing of the national restrictions and what we hope will be the end of the current lockdown and a move away from being on an emergency footing and returning to something that resembles normality, this has provided an opportunity to look back and reflect about the past year through stories, personal accounts and photographs from colleagues. Some of these you may be familiar to you as they may have been in my Chief of Dentistry updates, others are more recent reflections.

Everything happened so fast and continued to change at a rapid rate, so do you recall:

- ❖ Development and roll out of NHS GGC UDCCs and safe pathways of care, including Red (Hot) Pathways
- ❖ MS Teams – a move to virtual meetings
- ❖ Attend Anywhere - using virtual patient management
- ❖ Local Management Response Team meetings
- ❖ Friends and colleagues being reassigned to other services
- ❖ Supplies and distribution of PPE
- ❖ Face Fit Testing
- ❖ Working Public Holidays
- ❖ Covid Assessment Centres
- ❖ New Standard Operating Procedures and Risk Assessments
- ❖ Vaccinations and Vaccinators
- ❖ And then there was our Health Improvement Team who quite frankly turned their hand to everything and anything they were asked

In all of this there were most definitely some “Covid wins” with new ways of working which will continue to be adopted and most of all working together - GDS/PDS/HDS as a more integrated service. Something I am sure most of us would never have thought possible!

We achieved an incredible amount in a very short space of time and continued to meet these challenges head on throughout the year – and all of this without the aid of a pub or hairdresser most of the time!!

I have said many times in my Chief of Dentistry updates just how immensely proud I am of all our teams, no one could have asked for anything more from you, so once again ... thank you. The Chief of Dentistry updates were established at a time when good communication between us all was more vital than ever. It is no less important now, but moving forward, I am looking to do it in a slightly different way. So this will be last Chief of Dentistry update in its current format, so watch out for some new communications coming your way.

NHS Greater Glasgow & Clyde Oral Health Directorate

Activity of Oral Health Directorate During COVID-19

During COVID-19 the dental services of the Oral Health Directorate worked collaboratively with GDS partners to provide access to urgent care for patients of Greater Glasgow & Clyde until dental practices were able to reopen, OHI Teams were re-deployed to cover a range of additional responsibilities



8 the number of sites the UDCC initial response included – with Glasgow Dental Hospital treating ‘Red’ pathway patients

14 the number of sites the UDCC developed over with more treatments and pathways for AGP care were widened

14 the number of weeks the UDCCs maintained continuity of care until GDS practices were able to reopen for care

19,049 the number of patient contacts managed by the UDCC between March and

August 2020

14,845 and **2,750** the number of contacts for residents of GG&C in primary & secondary care, respectively

1,454 the number of patient contacts out with GG&C - **1,063** in primary care and **391** in secondary care; helping to support neighbouring Boards

The Oral Health Directorate have worked to improve estates for the delivery of COVID-safe care in the PDS and Glasgow Dental Hospital. This includes patient pathways and staff areas; In GDH, there have been over **30** upgrades to ventilation to provide at least **10** Air Changes per Hour . We have worked with Estates and the University of Glasgow to support teaching and training by building over **40** cabins to deliver AGP care to patients on student clinics.

majority of outpatient services now at pre-COVID position for waiting lists. ACRT is over **80.2%**, which is the highest level within Regional Services.

Dental Teams have supported the delivery of the COVID vaccine programme and have also delivered **24** clinics for flu vaccine over the winter flu season.

We have worked closely with Public Health and Test & Protect to support dental practices in managing COVID cases and ensuring continuity of care for patients.

Secondary Care has returned to delivering at least **60%** of pre-COVID activity, with the

14,861 the number of patient contacts owing to severe pain or swelling

7,316 the number of patient contacts managed by advice only or a prescription

848 number contacts with patients known to be at high risk of serious illness with COVID-19

0 the number of patients known to have contracted COVID-19 when seeking care at UDCCs

Success of the UDCCs can be measured by:

- the maintenance of patient access to urgent care during COVID
- the rapid development of COVID-safe patient pathways
- adopting new technologies for remote consultation by the UDCCs via Attend Anywhere - reducing avoidable patient attendances and maximizing social distancing

Oral Health Improvement:
Maintaining contact with priority groups-
Childsmile: induction/training/education via online platforms. Distributed over **65,000** OHI packs to schools and nurseries; **7,000** packs to community hubs.
Care Homes: online support to **162** care homes; distribution of over **7,000** packs to staff and residents.
Priority Groups: online training to Simon Community, sign posting to services; **16,500** items of OHI supplies distributed to Homeless Services and Community Hubs.

Additional Activities during COVID:-
Distribution of **hundreds of thousands of PPE items** to dental practices
Delivery of over **200** Face-Fit-Tests to FFP3 masks each month, over **2,500** dental staff face fit tested
Collection and delivery of laboratory work form UDCCs and Glasgow Dental Hospital
OHIT staff redeployed to support services across the Board and HSCPs, including promotion of hand sanitization & social distancing and signposting for visitors to the QEUH

Covid Asymptomatic Surveillance:

GGC was a key pilot site, completed a serology sub study, and a QIP to increase participation

2657 the number of asymptomatic patients tested in GGC

11 (0.41%) the number of positive asymptomatic patients identified in GGC

23.5% the % of asymptomatic tests that GGC did as a total across Scotland

96% the % of data completeness of questionnaires in GGC

So here is a snapshot of people's thoughts and images of a year in oral health during Covid

Alan Donaldson – Clinical Director, GDH

“When lockdown happened in 2020, I had only been in my CD post for six months. I knew the post was going to be challenging but the weeks following lockdown were the most stressful of my career to date. Standing down routine secondary care dental services and repurposing the Dental Hospital into an emergency care hub was an enormous task. As part of the senior management team our priority was to provide a safe and effective care pathway for patients and staff.

All staff at GDH rose to the task and worked under incredibly challenging conditions to provide emergency care. Some staff groups undertook different roles within the Hospital or volunteered to be redeployed. I was impressed by all the staffs resilience and professionalism and proud to be one of their colleagues.

If you can draw a positive from a year of lockdown, I feel that this has made us all reflect on our personal and professional circumstances and focus on wellbeing as well as new ways of providing our services.

The end is in sight and hopefully we can all enjoy a hug and a catch up with family and friends in the not too distant future.”

Gareth Calvert – Restorative Dentistry, GDH

In moments of quiet reflection away from the noise of board room and government affairs, it is appropriate to celebrate the individuals who delivered the first and longest running unique emergency service in the face of overwhelming adversity. With 72 hours' notice and an ever changing foreign landscape of clinical care, 100's of patients were compassionately cared for without a single never event. Not forgetting those individuals who tirelessly fabricated PPE for our safety and the plethora of inspiring patient stories from Care Opinion. These exemplary achievements are a true testament to our teams' culture of safety systems in healthcare.

The responsibility of balancing the health of our profession, the population and the individual has challenged our teams' reserves but we look forward to the next chapter of returning to what we love doing.

GARRY HUME, CLINICAL SUPPORT WORKER – GDH
(From Glasgow Herald 21 March 2021)

“Right from the beginning, life really changed for me. I remember going into work and thinking, ‘Will I catch Covid today?’ “I sometimes struggle with my mental health, so lockdown has been tough. But I’ve moved in with my girlfriend Jay and in July we got engaged. It’s really something to look forward to. “The people I work with are brilliant. I’m nearly the only guy on my floor and I sometimes tease Jay about it, but really, they’re fantastic. It would be so difficult without them. I was trained to fit FFP3 face masks, which are so important in the dental hospital. We’re also responsible for whole new levels of cleaning and that’s a huge focus of my job. It’s been a lot of work but it’s great to feel like I’m helping keep people safe.

I just can’t wait until things are eased – going out for a meal with Jay and watching the world go by. Restaurant, ice-cold Bud, sorted! It’s the little things we take for granted, and it’s those we miss when they’re not there.”



GGCEDS Dentist

My reflection of covid 19 is of pride, solidarity and friendship.

While I have been appreciative of the opportunity to spend more time at home with my family and I miss my northern Irish family.

I will look back with pride to be part of a GGCEDS team during our response to COVID 19.

Every member of our team has stepped up to the challenges thrown at us.

We have not had to face these challenges alone, we have been there for each other with kindness, solidarity and encouragement that we can cope with the situation together.

The ability to have a sense of normality behind our doors of the dental hospital. Having people to talk to and lend a friendly ear (even having a laugh)

As we will reflect the sadness of this time in years to come I will always hold proud memories of our team and being a small part of it.

Kirsty Watters – DN Sedation GDH

In my many years as a dental nurse in the Glasgow dental hospital IV never quite had a year like this one! Covid hit and our first challenge was switching from our regular service to an 'emergency hub'. We had to get to grips with new PPE, and a whole different way of working, I didn't think I'd ever get used to wearing gloves outside a surgery! It was a really busy time seeing all the patients GDPs couldn't.

We then returned to our normal secondary care patients doing our own treatments but again working very different from our 'normal'.

Then came the call out could anyone help in the wards as they were struggling, this was a daunting prospect if you've only ever worked from the neck up! But many years ago I had been on the auxiliary nurse bank so thought I might be useful and I knew what I was getting myself into....

So now I'm in the surgical ward doing patient care and stuff I never thought I would as a dental nurse but learning new skills too. I'm thoroughly enjoying it and wow the day goes in quick. All my new colleagues in the ward have had a really tough year most have been unwell with covid at one point and they're still short staffed so I do feel my tiny contribution is making a difference.

Before my 'ward' experience I proudly clapped for the NHS, now I would give us a standing ovation.

Lesley Robb Dental Nurse Team Leader GDH - Oral Medicine COVID experience

As a department we were extremely limited at the beginning of the pandemic as the majority of our clinical staff were reassigned to work in QEUH in the COVID receiving ward.

The remaining clinical staff concentrated on keeping the service ticking along using attend anywhere to see all urgent cases. All nursing staff were solely working in the Oral Surgery department at this time treating emergency care patients.

Around July/August the clinical team returned for QEUH and it was clear that due to social distancing we would not have enough space in the clinics and waiting room to allow the throughput of patients required for the Oral Medicine service to start back up properly.

An alternative site was being investigated and we were offered the chance to move the majority of outpatient service to NHS Louisa Jordan. We immediately went for several visits and a date was arranged in September for us to start. It was a massive undertaking the scale of the space we would be covering was an eye opener. The step counter was definitely going to be busy. 3 Dental Nurses and 1 Clinical Support Worker volunteered to staff the clinics at Louisa Jordan, 3 days a week initially and it was then reduced to 2 days latterly.

During our time at Louisa Jordan we have been lucky enough to be supported by our Clinical photographers supplied by the medical illustration team, which has been a massive part in why the clinic could run from this site. We have now spent the last 6 months working in the Louisa Jordan and we couldn't thank all the staff from the site enough for their help and support it has definitely felt like our second home away from the Dental Hospital.



Simon Kidd, GDS Dentist

My experience of redeployment was varied and frustrating, but I was nevertheless grateful of the opportunity to get out of the house in those first few months of lockdown.

My first redeployment was at a Covid Assessment Centre where I was asked to help assess the severity of disease and steer patients towards the right service. Thankfully, our medical colleagues had everything under control, and I was therefore re-deployed to the RAH UDCC. Until this point, the UDCCs had been staffed almost exclusively by PDS and HDS colleagues and it was quite clear that many staff were close to breaking point. As a GDP, I fully expected to swagger in on my first day and heroically bash through 40 patients. However, as the reality of triage, risk assessment, enhanced PPE, and SOPs dawned on me, it became clear why everyone was so stressed. It wasn't long before I realised that general dental practice had all of this coming too. I've latterly had the opportunity to take part in the vaccination programme which has provided a welcome sense of 'progress'!

Speaking as an LDC representative for GDPs, this year has clearly demonstrated the value of both *clear communication* and *robust representation*. The successes GG&C have had in responding to the pandemic, and the wealth of information we've managed to share with colleagues, is largely down to the open dialogue that representatives have had with the Chief of Dentistry and OHD team. I believe GG&C has the best represented GDPs in the country and, in our role as an advisory committee to the Board, we have never been more heard.

Lesley Russell – PDS

I feel the last year has highlighted how strong a team we have within PDS. We have all adapted to daily changes and I feel risen to that challenge. But have provided support to each other when we have all, at various points, felt overwhelmed, stressed or exhausted. We are very much the undervalued service within dentistry but we have risen and should stand proud of our service and in particular our staff.

Sandy Mccreadie – Restorative Services - GDH

Glasgow Dental hospital houses the largest restorative department in Scotland. In April 2020, the two floors that house the restorative services put in place plans to mobilise COVID safe services. Due to the risks posed by aerosol generating procedures (AGPs) it was necessary to create spaces that allowed safe delivery of emergency care in those instances where an AGP was unavoidable. The dental nurses and clinicians worked quickly to establish standard operating procedures and an environment to allow delivery of care as care in general practice settings were closed in response to the ever-increasing community spread of the virus. Now that the one anniversary of lockdown passes, we can take some time to reflect on the response and look to the future.

At the outset all staff involved in the response (dental nurses, dentists and support staff) were inevitably filled with uncertainty and a degree of trepidation. We were faced with a rapidly changing situation with a novel virus that the medical profession and science were trying to get to grips with. What was clear however, was the resolve displayed by all to ensure services for those in need continued. The staff showed immense adaptability, changing their patterns of work without a blink of an eye. As a result of everyone's preparedness to step up to the plate we were the first in Greater Glasgow and Clyde to set up an emergency treatment hub. Although, many routines services did cease to operate under the government guidelines, the head and neck cancer service continued to serve its patient group throughout the pandemic.

I joined the department as a team lead in December 2020. The timing of my move into the role coincided with the need to reinstate delivery of specialist restorative services. My focus has been to ensure we are able to return to a new normal as efficiently as possible, whilst ensuring the highest standard of infection control using the enhanced PPE dictated by infection control guidance thus maintaining staff and patient safety as we continue to progress.

The pandemic and resultant interruption of services has created a significant backlog. Many patients' assessments have been postponed and treatments suspended or have been delayed. As these patients return to treatment after a long 12 month wait, we welcome them into a rather different environment than pre-pandemic times. Although we have been delivering specialist services since October 2021, we continue to operate in challenging circumstances with a reduced capacity due to environmental controls centred around air exchange with the need for fallow periods to mitigate against AGP risks. The staff response to these challenges again have highlighted the adaptability and resilience of the staff within the department, and I can only thank them for their efforts of the past twelve months to provide care of the highest standards to all that have come through the doors. As a minute's silence fell on the department on March 23rd, 2021, we remembered the lives lost and immense struggles of all affected by the pandemic, but it also gave a chance to look forward to brighter times and the continued evolution of the services that we provide.

Debbie Pitts - PDS

A year ago, it was all so different. Lock down transformed our department in Greenock Health Centre to a UDCC. We were nudged out of our comfort zone-which is primarily paediatrics and special care. Here we were, dealing with urgent dental emergencies, over run with providing a patient triage service and treating a stream of adult patients, many with swollen faces, often on multiple medications.

However we were lucky, our local GDPs came to offer a helping hand. Maybe tired of doing DIY and gardening having lost its charm – they got in touch with offers of help.

Some came lycra clad having cycled long distances, others bearing gifts of friendship – we welcomed them all, especially the latter. It was great to see the faces behind the names. It was good for them to see what our PDS set up was like.

Honestly we would have been lost without this collaboration. All staff loved the influx of new people. They were interesting. They made us laugh. They made what we had to do – so much more tolerable.

From the PDS to our GDP colleagues – thank you. We were in it together. We were a unified, great team. To coin a well-used phrase – we were a Covid win.

Aikta Amin - PDS

If I'd been told that, weeks into my return after maternity leave, there would be a global pandemic, I never would have believed it. Yet, here we are, over a year into one of the largest pandemics of our time. Special Care Dentistry is the 'day job', however, working in a UDCC tested all my skills in this specialty. As a full time member of staff within the PDS, we all quickly stepped into our new roles, with speed and a huge element of the unknown. We had to adapt, both personally and professionally to ever changing guidance. From telephone triaging, often in excess of 50 patients per day, to forever amending the appointment book to bring in those most in need, it really was a juggling act.

We are now, finally, seeing some light at the end of the tunnel. The experience of working in GGC UDCCs is one that will remain with me forever. The positivity, teamwork and deep respect for my colleagues is immeasurable. Our seniors acted quickly, decisively and selflessly to keep us all safe whilst providing essential care to the general public. I feel unbelievably grateful and humbled to have been part of this journey, navigating through the beast that is covid19 and coming out the other side.

GGCEDS Team

- First team of GGCEDS staff were face fit tested on 20 March 2020, this allowed the Covid response team to commence on 21 March 2020 and they continue to have this on every session
- First AGP was carried out on 10 April 2020
- Covid positive patients attended the service for treatment and continue to do so
- Staff were flexible with their working hours to allow the midweek session to operate at an earlier time of 5pm. This allowed patients who used public transport to access the service as the public transport was limited later in the evening. It also provided emergency cover for registered patients as the dental practices were closed and NHS 24 did not commence until 6pm
- GGCEDS accepted patients from secondary care and the Urgent Dental care Centres in PDS in addition to the referrals from NHS 24
- Staff started an hour earlier on a Saturday and Sunday to accommodate the volume of patient referrals to ensure all patients were dealt with
- Staff worked extra hours to facilitate the Covid rota and increase of staffing on each session

..... and then there was Sharon Henderson their intrepid leader who went above and beyond, she remained in constant contact with her GGCEDS team and provided updates to senior managers every evening, weekend and public holiday at the height of the pandemic whilst practices were closed.



Julie Percival and Sam Reid – Hygiene Therapy

At the beginning of the current Covid Pandemic we were given the opportunity to qualify as FFP3 Qualitative Face Mask Fitters. This has allowed us to Face Fit both PDS and GDS staff.

Subsequently we were joined by the Oral Health Improvement Team and this allowed for an increased number of dental staff to be fitted.

During our secondment to Glasgow Dental Hospital we were invited to become part of the Enhanced Dental Surveillance Program offering Covid 19 Swabs to all asymptomatic dental patients. We continued this surveillance program at the Royal Alexandra Hospital on our return to our base clinic. Our participation in this program concluded at the end of March.

In October of 2020 we undertook training to allow us to become Peer Influenza Vaccinators. This allowed us to run clinics within the RAH to vaccinate our GDP colleagues.

After further training we then transferred these skills to allow us to be part of the Covid Vaccination Team.

In addition we have also been fortunate enough to have accessed Silver Diamine Fluoride Training, Attend Anywhere Training and revisited our Cognitive Behavioural Therapy Training to assist our department in the remobilisation of the PDS Dental Services.

We have enjoyed the opportunity to develop new skills and to support the overall efforts of the department over the last year







