

## COVID-19 Recovery Guidance

### The Orthodontic Workforce

The aim of this document is to provide some guidance on how to manage the orthodontic workforce during the early transition stage out of lockdown.

#### 1. Appropriate Training

- Ensuring all staff are up to date with their CPD and core training requirements as well as current COVID- 19 guidelines
- To protect staff consider providing this training remotely. Team training can be carried out virtually utilising various platforms. (**For further information see IT in COVID-19 Recovery Guidance**).

#### 2. Standard Operating Procedures (SOPs)

- Staff should be aware of the guidance on patient pathways, triaging and accessing the Urgent Dental Care (UDC) hubs to allow them to give advice to patients when it is anticipated that the UDC hubs will still play an important role until dental surgeries start to open up and become fully operational.

#### 3. Use of Personal Protective Equipment (PPE)

- As we are dealing with a respiratory virus carried in saliva, many of the procedures carried out in orthodontics are high risk if an AGP is produced. It is therefore important that all staff are adequately trained and ideally fit tested in the appropriate and correct use of PPE. This should involve practical training sessions particularly in relation to the correct donning and doffing of PPE.

There are a couple of very useful videos on YouTube on [donning](#) and [doffing](#) PPE.

#### 4. Cross Infection and Decontamination

- All staff should already be well trained in cross infection and decontamination procedures.
- As COVID-19 presents new challenges and concerns. It is therefore very important that all staff understand and can practice the new levels of cross infection control being recommended. While these are still subject to debate and change, there are some basic

principles that should be followed including hand hygiene, appropriate and safe use of PPE and surgery decontamination (**for further advice see BOS advice on [PPE](#) and [Decontamination](#)**).

## 5. Communication Skills

Patients will no doubt have many questions as we start seeing them again. These may include questions regarding progress of their treatment and potential extension to treatment times to questions about changes in operating procedures of practices and how they will be seen. These concerns need to be managed sensitively by all members of staff.

**Some basic principles of good communication are:**

- Communication with purpose
- Clear, concise and informative communications
- Think: values and ethos
- Be proactive and available
- It is advised that as practices and departments start to resume clinical activity that a standard letter is sent to patients. This should outline potential changes to their appointment including issues related to higher levels of cross infection control and social distancing (**for further advice see [COVID-19 guidance on patient communication](#)**).

## 6. Health and Well-Being

### • Staff Swabbing and Testing

The availability of swabbing and testing has increased significantly in the last few weeks. Within secondary care swabbing and testing is now available for staff who report symptoms or share a household with someone who becomes symptomatic or tests positively. The results of these tests are usually available with 24 to 48 hours. This arrangement is likely to continue hopefully with enhanced capacity, with each hospital having its own staff testing facilities. Some Trusts have started random swabbing of asymptomatic staff to investigate how endemic the virus is within the NHS workforce.

As primary care so far has stopped seeing patients except for emergencies, the need for testing of staff has remained low. However, as some non-urgent work resumes this will increase significantly. The government has set up swabbing sites as well as mobile swabbing units which should allow for greater testing in primary care. Each practice should be aware of nearest swabbing site and how

their staff can access it. This is through a self-referral portal on-line, the link to which is below.

Alternately a home test can be requested.

It should be noted the validated testing available at this point remains testing for presence of the virus RNA via PCR (Polymerase chain reaction test). It is not an antibody test and therefore gives no indication of previous exposure or potential immunity.

- **Staff Sickness and Self-isolation**

The national policy is that if someone develops suspected symptoms of COVID-19 they should self-isolate for 7 days from when the symptoms started. If after 7 days, they do not have a high temperature, they do not need to continue to self-isolate. If they still have a high temperature, keep self-isolating until their temperature returns to normal. They do not need to self-isolate if you just have a cough after 7 days, as a cough can last for several weeks after the infection has gone.

If they live with others and are the first in the household to have symptoms of coronavirus (COVID-19), then they must stay at home for 7 days, but all other household members who remain well must stay at home and not leave the house for 14 days. The 14-day period starts from the day when the first person in the house became ill.

All staff should be screened on a regular basis via a health questionnaire and measurement of temperature. There should be robust policies in place for staff to self-report suspected symptoms and self-isolation. This should also include guidelines on accessing swabbing/testing (see above) and a return to work policy in line with national guidelines. Staff should also be asked about their personal home circumstances, which may necessitate shielding a member of their family. This may impact on their job plans necessitating redeployment to a non-patient facing role.

The ongoing issue of staff sickness and absence may have an impact on staff levels and service delivery and necessitate changes in the way you work.

- **Mental Health and Well-Being Support**

Staff may report feeling higher levels of anxiety and fear. They may also experience higher levels of fatigue, particularly if their working patterns change. It is therefore vitally important that they are supported. Simple things that can be done to help are:

- Clear communication strategy to reduce confusion and anxiety
- Regular updates/meetings to avoid speculation providing latest advice and guidance
- Adequate breaks during the day to allow some rest
- Rotation of teams to reduce exposure to infection and allow adequate rest

- Shielding of vulnerable members of staff redeploying to non-clinical areas
- Allowing working from home where possible
- Resources available to staff to help with physical and mental well-being (see links below)

  

- **Supporting BAME (Black, Asian and Minority Ethnic) Staff**

A national enquiry has been launched to understand why people from BAME backgrounds appear to be disproportionately affected by COVID-19. Until the findings become evident, all BAME staff should feel confident to discuss their concerns about any underlying health issues so that risk assessments can be undertaken and relevant modifications made when planning their clinical responsibilities.

## 7. Working practice

### Flexibility

- Each practice should formulate its own plans and arrangements dependent on the patient load, the priorities and the workforce. Allow for individuals' personal circumstance, including childcare although all healthcare staff, including NHS dentists and dental care professionals, are classified as **key workers** for the purposes of the pandemic. This means that otherwise-closed schools and nurseries should continue to provide education and childcare to their children so they can continue working.
- There may be problems of staff off on sick leave or self-isolation. In addition, some staff may have been redeployed to work in other areas of the health service. This means that in the initial period as we break out of lockdown, services may have to contend with reduced staff levels. To help this and other staffing issues the following need to be considered:

### Staff Rotation

- Splitting your staff into teams who work different days/shifts in combination with extended working hours/days will potentially mean greater utilisation of facilities and workforce. This can also help to reduce stress and fatigue as well as the added benefit of allowing more patients to be seen counterbalancing the reduction in activity as a result of stricter cross infection control and greater time required for each appointment. It would also reduce the risk of exposure to infection across your workforce as well as allowing rest time for staff members.
- In line with team working, team members may have to cross cover each other. For example, clinical staff working on reception. This may require extra training as outlined

above. It is also important that all staff work within their competencies and that they have proper registration and indemnity. It is also important to check that staff who have temporarily suspended their indemnity during lockdown, reinstate this and have adequate cover.

- To maintain social distancing, you may consider staggered work start times for staff with an extension to the working day. For example, some staff may come in and finish earlier while a second team that comes in later, takes over and finishes later. Again, this needs to factor in individuals' personal circumstance.
- It is anticipated the principles of self-isolation as outlined above will continue for the foreseeable future. It is therefore important that practices and departments have a clear policy of how this is reported and managed. To allow for this and the potential reduction in the workforce that would result, a temporary expansion of the workforce should be planned. This could be achieved by offering part time staff greater hours or recruitment of locum or agency staff.
- Wider use of virtual clinics where possible would free up clinical time for other clinical activities and prevent unnecessary travel in line with the policy of social distancing. Numerous platforms have been used and developed for this, and it is likely that these will continue be developed and become more sophisticated (**Please see BOS COVID-19 Recovery Guidance-IT Management and Guidance for Remote Working**)
- Communication and regular team meetings are important to provide staff with clear and concise advice. It is therefore recommended that practices and departments have regular team meetings to update members of staff on latest policies and guidance and for hand over between teams. It is recommended that these are carried out virtually to reduce the risk of cross infection.

## Resources

<https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/04/C0282-covid-19-urgent-dental-care-sop.pdf>

<https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control/covid-19-personal-protective-equipment-ppe>

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/878056/PHE\\_COVID-19\\_visual\\_guide\\_poster\\_PPE.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/878056/PHE_COVID-19_visual_guide_poster_PPE.pdf)

<https://oralhealth.cochrane.org/news/personal-protective-equipment-commentary-dental-and-oral-health-care-team>

<https://www.nhsemployers.org/covid19/training>

<https://www.nhsemployers.org/covid19/communicating-with-staff>

<https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection>

<https://www.nhsemployers.org/covid19/health-safety-and-wellbeing>

<https://www.nhsemployers.org/retention-and-staff-experience/health-and-wellbeing/taking-a-targeted-approach/taking-a-targeted-approach/how-are-you-feeling-today-nhs-toolkit>

<https://www.nhsemployers.org/covid19/health-safety-and-wellbeing/support-available-for-nhs-staff>

<https://www.nhs.uk/oneyou/every-mind-matters/coronavirus-covid-19-anxiety-tips/>

<https://www.gov.uk/government/publications/covid-19-guidance-for-the-public-on-mental-health-and-wellbeing>

<https://www.nhsemployers.org/covid19/staff-terms-and-conditions>

<https://www.gov.uk/guidance/coronavirus-covid-19-getting-tested>

<https://www.gov.uk/apply-coronavirus-test>

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/882654/Self\\_referral\\_portal\\_user\\_guide\\_v1.6.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/882654/Self_referral_portal_user_guide_v1.6.pdf)

[https://www.youtube.com/watch?v=kKz\\_vNGsNhc&feature=youtu.be](https://www.youtube.com/watch?v=kKz_vNGsNhc&feature=youtu.be)

<https://www.youtube.com/watch?v=oUo5O1JmLH0&feature=youtu.be>

**Confidential** is a helpline offering emotional support and signposting for dentists from a team of trained volunteer dentists. Freephone 0333 987 5158, 24 hours a day.

The **Dentists' Health Support Trust** provides dental professionals with free support and advice on mental health, alcohol and drug issues. Call 0207 224 4671 or email [dentistsprogramme@gmail.com](mailto:dentistsprogramme@gmail.com)

**Dental Mentors UK** is offering pro bono coaching/mentoring support from fellow dental professionals during Covid-19.

**Denplan** is offering its dentists and their employees [free access to a virtual GP service, and a 24/7 helpline](#) offering advice on a range of health, lifestyle, legal and wellbeing issues, until 31 July. To access the service, email [DenplanGP@simplyhealth.co.uk](mailto:DenplanGP@simplyhealth.co.uk).