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Dear colleague,

I would like to update you on some forthcoming actions in relation to infection prevention and control guidance and some recent and potential changes.

As you will be aware, the level of clinical activity in dentistry remains reduced primarily due to restrictions on patient throughput due to IPC guidance. Specifically, the requirement to work in enhanced PPE, fallow time and physical distancing. The guidance we work under in healthcare has remained static, even as the COVID-restriction levels have reduced in some areas from Level 4 to Level 0. The position at present is that all dental patients remain in the 'medium risk (amber) pathway'.

There is clearly a pent up demand from patients wishing to see their dental team and a backlog of unmet need. The key to unlocking more clinical care is the development of more proportionate but safe IPC guidance, especially if we move beyond Level 0 later in the summer.

I am in regular contact with the Chief Nursing Officer and her IPC team, the Scottish Dental Clinical Effectiveness Programme team (SDCEP), the Antimicrobial Resistance and Healthcare Acquired Infection (ARHAI) team from NHS National Services Scotland, and through them the Public Health Scotland Guidance Cell and the UK IPC Cell. Currently work is underway, led by Public Health England but involving all UK countries, to examine government policy for people who have been vaccinated, this work includes:

- A review of the "main" IPC guidance with an associated consultation in August with the revised recommendations published in September 2021;
- A revision of the dental IPC appendix to ensure it aligns to the revised IPC document, this will be to the same timetable as the main report;
- The development of a risk assessment template for dental practices to support the implementation of any new guidance.

Some recent revisions to guidance, which you may be aware of, include:

- There being no need for a fallow time between AGPs undertaken on members of the same household;
- A move back to pre-pandemic application of cleaning controls in medium risk pathways (which currently includes all dental patients) to Standard Infection Control Precautions in line with NHS Health Facilities Scotland National Cleaning Specification. This includes using a fresh solution of general purpose neutral detergent in warm water or detergent wipes for routine cleaning (rather than chlorine containing solutions/wipes).
- A move back to pre-pandemic application of waste handling in medium risk pathways by reinstating the domestic waste stream for non-infectious waste. Thus only disposing of items contaminated or likely to be contaminated with blood and/or body fluids in the clinical waste stream. This means that PPE which is not contaminated as described can be disposed of in the domestic waste stream.

I would like to reassure you that we remain aware of these IPC issues and the impact they have on your ability to deliver care to your patients. I will continue to work with the CDOs, my IPC and health protection colleagues to ensure dentistry is represented in discussions. However, I am also mindful that the current backdrop to these discussions is one of increasing community transmission.

If there are any future changes to guidance, I will highlight these to you and can I end by thanking you and your teams for your resilience and efforts in delivering as much clinical care as possible to your patients in such challenging conditions.

Yours sincerely,



Tom Ferris
Chief Dental Officer