

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/covid-19-practice-recovery/).

This checklist is part of a Practice Recovery Toolkit that has been produced to assist general dental practice teams to prepare for the reopening of their practices during [Phase 2 of the remobilisation of NHS dental services](https://www.scottishdental.org/remobilisation-of-nhs-dental-services-in-scotland/). The checklist follows on from Parts A & B of the [SDCEP Dental Practice Closure During COVID-19 Pandemic](https://www.sdcep.org.uk/published-guidance/practice-support-manual/practice-management-covid-19/) guide and includes a series of actions to support reopening. Users are advised to refer to the [SDCEP Resuming General Dental Services Following COVID-19 Shutdown](http://www.sdcep.org.uk/covid-19-practice-recovery/) guide for further advice and information.

Individual circumstances and equipment will vary considerably between settings. Therefore, this checklist presents a list of points to consider rather than definitive specific actions. For some points, further information is provided, including external links. There are instances where this information is specific to Scotland.

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 checklist including suggestions for amendments or additions.

Professional bodies, equipment manufacturers and maintenance providers have already produced and issued advice and continue to do so. This checklist is designed to complement these sources rather than supersede them.

This checklist 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.

## C: Preparation for Reopening

| **Action** | **Completed** | **Comments** |
| --- | --- | --- |
| 1. **Premises** |  |  |
| 1.1 Carry out a risk assessment of the practice to identify the measures required to minimise the risk of COVID-19 transmission. |  | This should include premises, protocols and procedures.  Further information is available from the [Health and Safety Executive.](https://www.hse.gov.uk/news/assets/docs/working-safely-guide.pdf) |
| 1.2 Clean the practice thoroughly and remove any clutter to facilitate frequent cleaning and disinfection. |  |  |
| 1.3 Run water through pipes and taps in surgeries, kitchen, bathrooms, showers etc. |  | Consider how frequently water has been run while the practice was closed in determining how long to run the taps for. In order to avoid splashback, do not open taps fully to start with. |
| 1.4 Place posters and signage in the practice e.g. hand and respiratory hygiene. |  | Example posters are available from:  [National Infection Prevention and Control Manual, Best practice How to wash hands](http://www.nipcm.hps.scot.nhs.uk/appendices/appendix-1-best-practice-how-to-hand-wash/).  [National Infection Prevention and Control Manual Respiratory hygiene ‘Catch it, bin it, kill it’](http://www.nipcm.scot.nhs.uk/resources/respiratory-hygiene-catch-it-bin-it-kill-it/). |
| 1.5 Plan hand hygiene facilities for patients e.g. handwashing sinks or alcohol-based hand rub (ABHR). |  | Air hand dryers should not be used at this time. |
| 1.6 Ensure supplies for hand and respiratory hygiene are available at practice entrance, reception areas, waiting room and surgeries. |  |  |
| 1.7 Plan how to facilitate physical (social) distancing in reception, waiting room and other communal areas. |  | For example, marking out physical (social) distancing spacing, use of physical barriers/screens, removing chairs. |
| 1.8 Cancel redirection of mail and deliveries. Devise a protocol for receiving mail and deliveries. |  |  |
| 1.9 Test fire alarm. |  |  |
| **2. Plant and equipment** |  |  |
| 2.1 Reconnect compressor as per manufacturer’s instructions. Turn on mains electricity, close drains, turn compressor on. Perform any housekeeping and maintenance testing. |  | It might be necessary to seek advice from your supplier or maintenance provider. |
| 2.2 Carry out safety and quality assurance checks on radiographic equipment. |  |  |
| 2.3 Test the Automated External Defibrillator (AED). |  |  |
| 2.4 Check emergency drug kit for expiry dates. |  | Ensure any oxygen cylinders loaned out during shutdown have been returned or replaced. |
| 2.5 Ensure rechargeable items are fully charged and operational. |  |  |
| 2.6 If the practice has a drinking water dispenser for staff use, recommission as per manufacturer’s instructions. |  | If this is in a patient accessible area, remove or relocate to a non-public area. |
| 2.7 Check for and install computer software updates. |  | Investigate possible IT options to facilitate physical (social) distancing e.g. patient accessible portals to allow patients to update medical history remotely. |
| **3. LDU** |  |  |
| 3.1 Reconnect washer-disinfector to mains electricity (if it has been electrically isolated), prepare for use and run tests as per manufacturer’s instructions. |  | It might be necessary to seek advice from your supplier or maintenance provider. |
| 3.2 Reconnect steriliser to mains electricity, prepare for use and run tests as per manufacturer’s instructions. |  | It might be necessary to seek advice from your supplier or maintenance provider. |
| 3.3 Reconnect ultrasonic bath to mains electricity, prepare for use and run tests as per manufacturer’s instructions. |  |  |
| 3.4 Reconnect Reverse Osmosis (RO) machine to mains electricity and prepare for use as per manufacturer’s instructions. |  | Replace filter if required. |
| **4. Surgery** |  |  |
| 4.1 Check operation of chair and light functions. Open air and water lines to unit. |  |  |
| 4.2 Flush dental unit water lines with biocidal as per manufacturer’s instructions. |  | Consult your supplier or maintenance provider if there are any queries regarding manufacturer’s instructions or concerns regarding water quality e.g. odour or discolouration.  Ensure handpieces are removed while flushing lines. |
| 4.3 Clean and lubricate couplings and air motors then reconnect, as per manufacturer’s instructions. |  |  |
| 4.4 Test handpieces for functionality. |  |  |
| 4.5 Test suction system. Run cleaning solution through hoses. Check that the cup fill, bowl flush and spittoon have water flowing. |  | Consider replacing suction and spittoon filters and record when this is done. |
| 4.6 Check dental materials for expiry date and order as required. |  | Consider supply chain and likely availability. |
| 4.7 Check stocks of supplies and consumables and order as required. |  | This may include extra instruments e.g. hand scalers.  Consider supply chain and likely availability of, for example, disinfectant products and PPE. |
| 4.8 Reprocess instruments prior to returning them to use. |  |  |
| 4.9 Organise engineer visits for maintenance and testing as required. |  | This may include inspection, revalidation and routine maintenance visits that were due while the practice was closed. |
| **5. Staff** |  |  |
| 5.1 Ensure that staff undergo training to prepare for changes to practice processes, including: |  | See Section 4.4 of [SDCEP Resuming General Dental Services Following COVID-19 Shutdown](http://www.sdcep.org.uk/covid-19-practice-recovery/) guide. |
| * + Infection prevention and control. |  |  |
| * + Decontamination processes. |  |  |
| * + Donning and doffing of PPE. |  |  |
| * + Scenario based training for patient management and procedures. |  |  |
| * + IT training e.g. tele-dentistry software and use of any triage custom screens or templates. |  |  |
| * + Administrative tasks including any changes to payment methods and appointment protocols. |  |  |
| 5.2 Ensure mechanisms are in place to support staff health and wellbeing, including: |  |  |
| * + Checking local health board occupational health contacts and COVID-19 protocols. |  |  |
| * + Devising a protocol for all staff to follow if they or someone they live with develops symptoms, including whether they should apply for a COVID-19 test. |  | [Coronavirus (COVID-19): getting tested in Scotland](https://www.gov.scot/publications/coronavirus-covid-19-getting-tested/pages/who-can-be-tested/) |
| * + Putting tools in place to facilitate effective staff communication whilst working in “clinical bubbles”. |  | For example, continued group chats/video conferencing or other mechanism. |
| * + Making staff aware of available resources e.g. mental health, resilience, self-care. |  | [National Wellbeing Hub](https://www.promis.scot/)  [NHS Education for Scotland resources](https://learn.nes.nhs.scot/28063/coronavirus-covid-19/psychosocial-mental-health-and-wellbeing-support) |
| 5.3 Check if there is information relevant to this phase of return available from your indemnity provider. |  |  |
| 5.4 Review and update continuity plan with required amendments. |  |  |
| **6. Practice procedures** |  |  |
| 6.1 Develop procedures for returning to practice, including: |  | For ease of team reference consider documenting some or all of these processes. |
| * + Patient movement/journey through the practice |  | Consider chaperoning the patient during their entire journey through the practice. |
| * + Patient appointment booking |  |  |
| * + Remote patient triage prior to attendance |  | See Appendix 2 of [SDCEP Resuming General Dental Services Following COVID-19 Shutdown](http://www.sdcep.org.uk/covid-19-practice-recovery/) guide. |
| * + Medical history completion |  | Try to facilitate this being done remotely where possible. |
| * + COVID-19 assessment |  | See Appendix 1 of [SDCEP Resuming General Dental Services Following COVID-19 Shutdown](http://www.sdcep.org.uk/covid-19-practice-recovery/) guide. |
| * + PPE |  |  |
| * + Treatment protocols |  |  |
| * + Cleaning procedures: * Environmental cleaning * Standard Infection Control Precautions * Transmission Based Precautions |  | It may be useful to create a list of surfaces and areas that require more frequent cleaning than previously. This can be added to the practice cleaning schedule. |
| * + Treatment payment options |  | If the practice is taking payment over the telephone, check with your card payment facilitator that this does not impact on PCI DSS (Payment Card Industry Data Security Standard) compliance if it is a requirement of your agreement with them. |
| * + Use of toilet facilities |  |  |
| * + Staff working patterns |  |  |
| * + Team communication |  |  |
| * + Team reporting of COVID-19 status |  |  |
| * + Dealing with known or suspected COVID-19 symptoms in practice |  |  |
| * + Laundry |  |  |
| * + CPR |  |  |
| 6.2 Review the list of patients that contacted the practice during closure and begin to book appointments, prioritising these on the basis of clinical need and available treatments. |  | Continue to change/cancel upcoming appointments as necessary. |
| 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 as appropriate. |  | This may include updating answer machine, website and social media posts. |
| **7. Patients** |  |  |
| 7.1 Update patient communications (answer machine, website, social media) to advise of reopening changes (treatment options, requirement to book appointments in advance etc). Include details of out-of-hours service. |  | Consider sending all patients a letter/email/text to advise of changes to practice. |
| 7.2 Devise a method of tracking patient progression with treatment, so that you can monitor those awaiting AGPs. |  |  |
| 7.3 Prepare advice for patients on what to do/expect when attending the practice for an appointment. |  | This will be based around the protocols you have devised. |
| 7.4 Place a sign(s) on door/window stating that patients with suspected or confirmed COVID-19 should not enter the practice, and indicating that the practice is only open for patients with a pre-arranged appointment. Include details of how to contact the practice. |  | You may choose to keep the door locked and have staff open it when the patient arrives.  See Appendix 4 of [SDCEP Resuming General Dental Services Following COVID-19 Shutdown](http://www.sdcep.org.uk/covid-19-practice-recovery/) guide. |
| **8. External** |  |  |
| 8.1 Inform external providers e.g. insurance company, indemnity provider, waste contractors, IT provider, pharmacy, suppliers, maintenance contractors, dental laboratories, utilities and telecoms of practice reopening date. |  |  |