

SOP 3 Personal responsibilities of staff

3.1 Surgery Clothing

The guiding principle is that all staff who work in healthcare settings must accept that the requirement for staff and patient health and safety takes priority over any personal preferences with respect to dress and appearance regardless of the basis for that preference.

Uniform

- Studies show that uniforms are frequently contaminated by disease causing bacteria, including *Staphylococcus aureus*, *Clostridioides difficile* and *Vancomycin resistant enterococci*.
- Clean uniforms should be worn in the dental surgery. Staff should have sufficient uniforms to comply with this arrangement. The clinical day should begin with staff changing from their own clothes into their uniform in the clinic and uniforms must be removed at lunch-time, if leaving the building, or before travelling home.
- If uniform becomes visibly soiled during an operative procedure, they must be changed between patients.
- Short sleeves, bare below elbow are recommended. Disposable sleeves are available if required.
- A dental healthcare worker who wishes to wear a long sleeve top has a responsibility to ensure that these requirements are fully complied with:
 1. The top must be made from a fabric that permits hot wash (60°C).
 2. The top must be freshly laundered each day of working in the dental clinic.
 3. The top must be specifically for use in the dental clinic and must not be worn while travelling to or from work.
 4. The sleeves must fit closely to the forearm at least 10 cm above the wrist to ensure that it does not interfere with correct performance of hand hygiene and does not become wet when performing hand hygiene.
- Shoes must protect toes and heels from injury. Closed-in shoes made from a strong material such as leather must be worn in the clinical setting. Open-toed footwear/ sandals/flip-flops/canvas or permeable fabrics are not permitted.
- Used uniforms must be treated as contaminated, even if not visibly soiled.
- Uniforms should be washed in a biological detergent at a temperature of 60 degrees centigrade (or above for 10 minutes) to remove any potential microbial contamination. 40°C is acceptable but removal of microbes is then dependant on the dilution effect of the rinse water and detergent action, which is less reliable. Tumble drying in a hot cycle and ironing of uniform also contribute to the decontamination process.
- If dental staff need to wear any items of their own clothing in the surgery then similar hygiene measures should be employed in accordance with local policy.
- Staff religious and cultural practices must be considered in addition to adherence with IPC however it is secondary to IPC requirements.
- Staff should have name badges on display, which may be wipeable or embroidered onto uniforms.
- Hand jewellery must not be worn in the dental setting; the only exception is a single smooth band/ring.
- Dangling or clip on ear rings should not be worn. Small stud or secured small hoop earrings may be worn.

- Lanyards/ties should not be worn due to risk of contamination and entanglement.
- In clinical areas, long hair must be tied back and secured off the collar, using minimum accessories. Long fringes should be clipped back off the face. Beards must not make contact with the patient or clinical environment when treating a patient.

Click here for further information and guidance on uniforms.

<https://www.hse.ie/eng/about/who/healthwellbeing/our-priority-programmes/hcai/resources/general/guidance-on-of-wearing-of-personal-headscarfs-and-tops-in-theatre.pdf>

3.2 Mobile phones

- Mobile phones can be sources of contamination. Use of them in the clinical setting should be limited in so far as possible.
- Mobile phones should not be on display in the dental surgery.
- Always decontaminate hands before and after phone use in the clinical environment.

3.3 Food in the dental surgery

- Eating and drinking is not allowed in the dental surgery. Food and drink should be consumed in a staff tea room or other designated non-clinical area.
- No food should be stored in a medical fridge.

3.4 Acute overt clinical symptoms

Dental staff members with an acute infectious disease e.g. flu like illness or acute infectious diarrhoea should not be involved in direct patient care. They are potential sources of infection to other staff and patients and therefore have a responsibility to:

- Consult with an appropriate medical practitioner to determine that they are capable of performing their tasks without putting patients or other workers at risk.
- Seek appropriate guidance from line manager/Occupational Health Department
- Further guidance available from CDC.

<https://www.cdc.gov/oralhealth/infectioncontrol/guidelines/index.htm>