Health and Social Care Board

To: All NI GDPs

BY EMAIL

18 March 2020

Dear Colleague,

Further Practice Preparations for COVID-19 (Coronavirus)

As the proportion of the Northern Ireland population infected with the Coronavirus continues to rise and the risk that infectious patients will present at general dental practices also increases, it is now necessary to take additional steps to protect both dental staff and patients.

This advice letter will outline updated government advice in regards to self-isolation and social distancing; provide advice in regards to care and treatment to be provided by general dental practices; and provide assistance in developing Business Continuity Plans.

1. Updated Government Advice

As per my letter dated 16th March 2020 patients experiencing a new persistent cough or a high temperature have been advised to self-isolate for 7 days. In addition it is now recommended that anyone living in the same household as a symptomatic person should self-isolate for 14 days from the date of onset of symptoms. If anyone in the household subsequently displays symptoms they need to stay at home for 7 days from when the symptoms appear, regardless of what day they are on in the original 14 day isolation period. Further information is available at https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance

General dental practitioners are not expected to examine and treat patients who are self-isolating as per above. Alternative arrangements for these patients and those who require emergency dental treatment are being finalised and will be confirmed in due course.

The UK Government have also advised people aged 70 or older, 70 and under with underlying health conditions, and those who are pregnant to instigate social distancing measures. Further information is available at https://www.gov.uk/government/publications/covid-19-guidance-on-social-distancing-and-for-vulnerable-people
General dental practitioners are not expected to examine and provide routine treatment to the above people. Treatment should be restricted to urgent and emergency care.

Advice for pregnant healthcare workers is being developed by Public Health England and will be shared in due course.

2. Care and Treatment within the General Dental Services

It is now apparent that a “business as normal” approach is no longer sustainable. As such practices should now consider:

- Practices should have a process in place to identify patients who are self-isolating or social distancing prior to any visit to the practice. This may include phone calls, text alerts, websites/social medias and posters on display outside the practice
- Postpone routine check-ups for patients who are social distancing
- Review open courses of treatment for ALL patients to identify any urgent care and treatment that may be necessary or which cannot be delayed
- Cancellation of non-urgent domiciliary visits
- Request wherever possible that patients attend unaccompanied.
- Given the potential risk of asymptomatic cases attending in this delay phase it seems sensible and necessary at this time to reduce exposure of staff and patients to infection by avoiding aerosol generating procedures wherever possible. Therefore:
  - Restrict aerosol generating procedures to urgent and emergency care
  - Provide routine care to patients with no symptoms wherever possible but do not undertake aerosol generating procedures
- Removing all unnecessary items from waiting rooms and work surfaces to aid environmental cleaning
- Provide hand washing facilities to patients

3. Business Continuity Plan

During this period practices should develop Business Continuity Plans to ensure that emergency care is available “in-hours” to all non-COVID-19 patients. In the event of a practice closure this may involve working with neighbouring practices. It is not appropriate to refer patients to the Relief of Dental Pain Clinics in the event of a practice closure. Practices should ensure that patients are informed of these arrangements including signage at the practice, answer machine messages, text alerts and practice websites/social media. The HSCB should also be informed of any closure and the arrangements in place for patients via the GDS.Correspondence@hscni.net mailbox.

To assist practices in their preparation and to provide an assurance that the General Dental Services are prepared for the period ahead I have attached a template Business Continuity Plan to be reviewed, completed and submitted by the practice lead. A payment of £100 will be made upon receipt of the Business Plan. Any
Business Plan should be reviewed and updated as necessary and shared with practice staff.

Practices should be prepared to implement their business continuity arrangements and make appropriate arrangements which best suit their individual practices. It is possible that in the future practices will be asked to focus on emergency care only or to close completely.

The HSCB are aware of the financial impact on dental practices during this period; the Department of Health are considering financial mitigation measures and we hope these will soon be issued. Please note that the support package that will be offered to practices/practitioners will require full participation in appropriate business continuity arrangements, close monitoring and implementation of HSCB email and web communications and potentially provision of dental care in different environments and/or undertaking new duties within the wider HSC.

A guidance paper has also been prepared to assist health practitioners communicate with patients in regards to COVID-19. This document is available on the BSO COVID-19 Webpage in the Archive section entitled COVID-19 Approved Lines for Helplines.

Please be aware that this is an emerging and rapidly changing situation. While HSCB will endeavour to email all updates to practitioners as soon as possible, it is incumbent upon you to check the COVID-19 webpage on the dental section of the BSO website every day (http://www.hscbusiness.hscni.net/services/3111.htm).

Yours sincerely

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Head of Dental Services