

Practice Health & Safety Policy

SECTION A

General Statement of Policy

Our policy is to provide and maintain safe and healthy working conditions, equipment and systems of work for all our employees and to provide such information, training and supervision as they need for this purpose. We also accept our responsibility for the health and safety of other people who may be affected by our work activities. This policy applies to all employees of the practice, dental associates, dental hygienists and other contractors providing services to the practice, such as anaesthetists.

The allocation of duties for safety matters and the particular arrangements that we will make to implement the policy are set out below.

This policy will be kept up to date, particularly as changes occur within the practice. To ensure this, the policy and the way in which it has operated will be reviewed every year.

Dr Antimos Ouzounoglou

Practice Owner

Communication

The practice owner regards communication between staff at the practice as an essential part of health and safety management. Consultation on health and safety matters will be facilitated by means of practice meetings every month or as often as is deemed necessary.

Co-operation between staff at all levels is essential. All staff are expected to co-operate and accept their duties under this health and safety policy. Disciplinary action may be taken against any employee who fails to follow safety rules or carry out duties under this policy.

Responsibilities

1. Overall and final responsibility for health and safety matters within the practice lies with **Antimos Ouzounoglou** (practice owner)
2. **Antimos Ouzounoglou** is responsible for this policy being carried out at the practice at Richmond Dental Suite, 29-31 Heath Road, Twickenham, Middlesex. TW1 4AW
Practice Manager is responsible as his deputy.
3. The following are responsible for safety in particular areas:

Edita Suhajdova	Infection Control, including Waste
Antimos Ouzounoglou	Radiation Safety
Edita Suhajdova	Mercury Hygiene
Antimos Ouzounoglou	Risk Assessments including COSHH, Manual Handling, DSE
4. All employees have the responsibility to co-operate with supervisors and managers to achieve a healthy and safe workplace and to take reasonable care of themselves and others.
5. An employee, supervisor or manager who notices a health or safety problem, which s/he is not able to put right, must tell the appropriate person named above.
6. Other people responsible for:
 - Safety Training – **Antimos Ouzounoglou**
 - Investigating Accidents - **Antimos Ouzounoglou**
 - Monitoring Maintenance of Equipment – **Antimos Ouzounoglou**

SECTION B

General Arrangements

Local Health and Safety Executive:

Buckingham Road Palace
151 Buckingham Road Palace
London
SW1W 9SZ

Westminster Office
Caxton House
Tothill Street
London
SW1H 9NA

Accidents

The qualified first-aider / appointed person(s) for the practice are:

Antimos Ouzounoglou

The first-aid box is located in the practice hallway and a list of telephone numbers of doctors and hospitals available to the practice is kept at reception. The first-aid box will be maintained by all staff who will ensure that it is adequately stocked at all times.

All accidents and hazardous incidents (such as spills of mercury) must be entered in the accident report book, which is kept at reception and reported to Antimos who will decide whether the accident or incident should be reported to the Health and Safety Executive under the *Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995*. Forms for this purpose are kept in the health and safety folder in the top office.

**** IF THE INCIDENT INVOLVES A DEATH OR MAJOR INJURY the report needs to be phoned through on 0345 300 9923 ****

All other RIDDOR reports need to be submitted online at www.webcommunities.hse.gov.uk or by phone on 0300 003 1647.

Please refer to our RIDDOR Policy.

All staff receives annual training in cardiopulmonary resuscitation (CPR).

Display Screen Equipment

All users of display screen equipment (DSE) are given appropriate training on the health and safety aspects of this type of work. TDA conducts an assessment of all DSE workstations in the practice. Eye and eyesight tests are arranged on request and corrective eyewear, if required for use with DSE, is provided. A footrest and wrist pad is provided if required by the user.

Electrical Safety

An electrician or PAT testing company carries out portable appliance testing at our practice every 2-3 years. An electrician also carries out an inspection on our fixed electric supply every 5 years.

Fire Safety

General fire safety within the practice is the responsibility of the fire marshals:

Edita Suhajdova & Antimos Ouzounoglou

All staff in the practice have been informed of the action to be taken in the event of a fire, the evacuation procedure and the arrangements for calling the fire brigade.

Escape routes must be free from obstruction at all times and adequately signposted. Fire alarms and smoke detectors are tested weekly. Fire extinguishers are inspected annually.

If a smoke detector or fire alarm sounds, members of staff should raise awareness within the practice, report the fire (dial 999) and evacuate the building. Staff are only expected to tackle a fire if it poses no threat to their personal safety to do so. Fire drills are conducted at a frequency of 3-4 monthly and logged.

Manual Handling Operations

Where there is a risk of injury, manual handling operations must be avoided. Where they cannot be avoided, an assessment of the task should be undertaken taking into account the load, the working environment and the capability of the individual involved. Assistance should be requested from **Antimos Ouzounoglou** others within the practice.

Personal Protective Equipment

Personal protective equipment is provided in those circumstances where employees are exposed to risks to their health that cannot be controlled by other means. Comprehensive training on its use, maintenance and purpose is provided as appropriate. Where appropriate, the practice owner maintains such equipment in good working order.

Training

The person responsible for ensuring that all staff receive adequate training to ensure safe working practices and procedures is **Antimos Ouzounoglou**. Training includes advice on the use and maintenance of personal protective equipment appropriate to the task concerned and emergency contingency plans.

The following tasks require special training due to their hazardous nature:

1. Use of the autoclave for the sterilisation of instruments
2. Decontamination of equipment prior to sterilisation
3. Disposal of used local anaesthetic cartridges and needles
4. Taking of any dental radiographs
5. Processing of radiographs

Visitors & Contractors

All contractors and visitors to the practice (with the exception of patients) should be referred to reception to ensure that they are made aware of the hazards present and what precautions might be required.

Work Equipment

All equipment used in the practice is maintained in good working order and repair. Where appropriate, equipment is clearly marked with health and safety warnings and staff provided with adequate protection. Equipment maintenance is undertaken as recommended by the manufacturer.

Workplace Inspections

TDA conducts regular inspections of the practice. A record of these inspections is kept in the **Maintenance Folder behind reception**. Staff are informed of the significant findings as soon as is reasonably practicable or at the monthly staff meetings, whichever is appropriate.

SECTION C

Hazards

Autoclaves & Air-Receivers

All clinical staff will be trained in the safe use of autoclaves. Staff who have not received training must not attempt to use any autoclave within the practice. At no time should any member of staff mishandle, tamper with or attempt to repair an autoclave. If an autoclave requires attention, it should be reported to **Edita Suhajdova** who will arrange for its repair.

Autoclaves in the practice are serviced at a frequency of annually and an annual pressure vessel inspection on all autoclaves according to the written scheme of examination. Staff are required to monitor individual autoclaves to ensure that the right conditions for sterilisation are being achieved routinely. The results of monitoring should be recorded and kept for 2 years.

The air receiver for the practice is serviced at a frequency of annually. It will also be pressure vessel inspected at a frequency annually as shown in the written scheme of examination.

Hazardous Substances

A number of hazardous substances are used in the day to day activities of the practice. These must be handled with care to avoid skin and eye contact, inhalation or ingestion. Assessments of the hazardous substances used are kept in the COSHH folder on every computer in the practice. Staff should familiarise themselves with the hazards associated with each substance and the recommended means of control.

Infection Control

The practice infection control policy is displayed in each surgery – it must be adhered to at all times. If any aspect is not clear, please ask **Edita Suhajdova** who is responsible for infection control within the practice.

Training in the following areas will be provided for all staff:

- personal protection
- procedures for the cleaning, sterilisation and storage of instruments
- segregation and safe disposal of clinical waste
- cleaning and decontamination of work surfaces and equipment
- decontamination of laboratory items prior to dispatch
- decontamination of instruments and equipment prior to service or repair.

Medicines

Medicines are stored securely and kept locked away at all times. When a medicine is dispensed to a patient as part of his/her treatment, details of the patient, medicine (including batch number) and prescribing dentist should be entered in the medicines record log, which is kept on our network. Details of the medicine, dose and batch number are also entered in the patient's records.

Mercury hygiene

Mercury vaporises at room temperature and can be absorbed into the body through inhalation or contact with the skin. The surgery must be well ventilated to prevent the Workplace Exposure Level being exceeded and protective gloves worn to reduce skin contact. Any mercury spills must be cleaned up immediately. The mercury spillage kit is kept in the practice hallway. In the event of a mercury spill, **Edita Suhajdova** should be informed and will decide what further action is required.

Clinical staff using will undergo biological monitoring to ensure exposure to mercury vapour is within accepted safe limits. This is arranged through occupational health.

Radiation

A Radiation Protection Adviser – **Dr Shahed Khan Radiation Consultancy Services Ltd** has been appointed for advice in complying with the requirements of IRR17.

Antimos Ouzounoglou is the Radiation Protection Supervisor (RPS) at the practice and is responsible for ensuring that the practice complies with the regulations relating to radiation protection.

All staff are given general training about the radiation equipment used at the practice. Only staff who have received appropriate training and possess the relevant knowledge may take radiographs. Such training is arranged as required. A member of staff who has not undertaken formal approved training must not use radiographic equipment at the practice.

Shahed Khan carries out a radiation safety survey at a frequency of 3 yearly on all radiographic equipment. Servicing is carried out annually according to the manufacturer's instruction. Local rules are displayed near each machine.

Where individual workloads exceed 100 intra-oral or 50 pan-oral films per week, monitoring badges are provided by the practice owner. Additional monitoring may also take place.

In the event of radiographic equipment malfunctioning, the member of staff involved must immediately switch off the machine (without entering the controlled zone) and report the incident to the RPS.

Waste disposal

All waste generated at the practice is segregated into hazardous, offensive and non-hazardous (trade) waste for appropriate disposal. Waste is collected in appropriate containers and stored in a locked shed to await collection for disposal. Particular attention is given to the safe disposal of sharps waste and designated containers are provided for this purpose. Records of disposal are kept in the practice waste folder.

Date: February 2022

Review Date: February 2023