

Management of COVID-19 cases in dental practice

Dental practices should always maintain social distancing, including in non-clinical areas, such as reception or staff rooms and practise frequent hand washing. This will mitigate against the risks of transmission both between staff/patients and staff/staff and the need to self-isolate under the NHS Test and Trace requirements if someone in the practice subsequently tests positive for COVID-19.

Symptoms:

The **main symptoms** of coronavirus are:

- **a high temperature** – this means you feel hot to touch on your chest or back (you do not need to measure your temperature)
- **a new, continuous cough** – this means coughing a lot for more than an hour, or 3 or more coughing episodes in 24 hours (if you usually have a cough, it may be worse than usual)
- **a loss or change to your sense of smell (anosmia) or taste** – this means you've noticed you cannot smell or taste anything, or things smell or taste different to normal

Most people with coronavirus have at least 1 of these symptoms.

<https://www.nhs.uk/conditions/coronavirus-covid-19/symptoms/>

If you have **any** of the **main symptoms** of coronavirus:

- **Stay at home (self-isolate)** – do not leave your home or have visitors. Anyone you live with, and anyone in your support bubble, must also self-isolate.
- **Get a test** – get a test to check if you have coronavirus as soon as possible. Anyone you live with, and anyone in your support bubble, should also get a test if they have symptoms.

<https://www.nhs.uk/conditions/coronavirus-covid-19/symptoms/>

Case definitions

- Confirmed case: laboratory positive case of COVID-19 with or without symptoms.
- Possible (suspected) case: new continuous cough and/or high temperature and/or a loss or change to your sense of smell (anosmia) or taste.

Contact definitions:

1. **Direct close contacts:** Direct face to face contact with a case for any length of time, including being coughed on or talked to. This will also include exposure within 1 metre for 1 minute or longer
2. **Proximity contacts:** Extended close contact (within 1-2m for more than 15 minutes) with a case
3. **Travelled** in a small vehicle with a confirmed case or in a large vehicle or plane near someone who has tested positive for COVID-19
4. **Same household** as a COVID-19 positive person
5. **Skin-to-skin physical contact**

Infectious Period:

The infectious period is from 48 hours prior to symptom onset (or 2 days before test if no symptoms) until at least **10 days after**. Symptomatic staff who test positive for SARS-CoV-2 or who have an inconclusive test result, and symptomatic staff who have not had a test, can [return to work](#) no earlier than **10 days** from symptom onset, provided clinical improvement has occurred and they have been afebrile (not feverish) without medication for 48 hours and they are medically fit to return. Staff who test positive for SARS-CoV-2 and who were asymptomatic at the time of the test must self-isolate for **10 days** from the date of the test. If they remain well, they can [return to work](#) on **day 11**. See: <https://www.gov.uk/government/publications/covid-19-management-of-exposed-healthcare-workers-and-patients-in-hospital-settings/covid-19-management-of-exposed-healthcare-workers-and-patients-in-hospital-settings>
<https://www.gov.uk/government/news/statement-from-the-uk-chief-medical-officers-on-extension-of-self-isolation-period-30-july-2020>

Outbreak definition:

There have been 2 or more confirmed cases (or clinically suspected cases of COVID-19) associated with the setting within 14 days.

Notification of COVID-19 positive cases:

- Symptomatic people who test positive or have an inconclusive result and symptomatic staff who haven't had a test should isolate for a minimum of **10 days** from start of symptoms. Those who have tested positive will be contacted by a member of the Test & Trace team to undertake contact tracing. Asymptomatic people who test positive must self-isolate for **10 days** from the date of the test. If, during this time, they develop symptoms, they must self-isolate for at least **10 days** from the day of symptom onset. See: <https://www.gov.uk/government/publications/covid-19-management-of-exposed-healthcare-workers-and-patients-in-hospital-settings/covid-19-management-of-exposed-healthcare-workers-and-patients-in-hospital-settings>
<https://www.gov.uk/government/news/statement-from-the-uk-chief-medical-officers-on-extension-of-self-isolation-period-30-july-2020>
- Staff who have previously tested positive (either by polymerase chain reaction (PCR) or antibody test) should still self-isolate and be tested again if they become symptomatic. <https://www.gov.uk/government/publications/covid-19-management-of-exposed-healthcare-workers-and-patients-in-hospital-settings/covid-19-management-of-exposed-healthcare-workers-and-patients-in-hospital-settings>
- Staff should inform their Practice Principal/dental practice manager if they are symptomatic, have gone for a test, and of a positive result as soon as they receive it so that relevant actions can be completed immediately (as the Health Protection Team may take up to 48 hours after the positive result to notify a dental practice of staff who have tested positive).
- Within 24 hours of notification of a positive test or symptoms by a member of staff/patient, the dental practice should notify the Consultant in Dental Public Health via email Siobhan.grant@phe.gov.uk or Sandra.whiston@phe.gov.uk and the dental commissioning team at NHSEI via email england.yhdentalreturns@nhs.net (if a NHS dental contract is held). Please include the dental practice name, address, name of informing person & position, a mobile number for contact and back up landline telephone. At weekends or out of hours, call out of hours number **0114 3049843** for support.
- Please complete **forms 1 and 2** in the Appendix below **prior** to contact with as much information as possible.

Potential scenarios

Staff member (the **case**) develops one or more of the **main** symptoms of COVID-19. They should report this to the practice manager/practice principal



Staff member (the **case**) should be advised to:

- 1) **Self-isolate** for at **least 10 days** (need to be clinically improved and fever free without medication for 48 hours before self-isolation ends)
- 2) **Go for a test** for COVID-19 as soon as possible
- 3) Inform the practice manager/practice principal as soon as possible of the results



The practice manager/practice principal should:

- 1) Identify **potential** contacts (an individual would be classed as a contact only when the case individual has received a positive test result for COVID-19, however, useful to anticipate who might be a **potential** contact in the event the test result from the case individual returns positive). **Potential** contacts do not need to self-isolate at this stage but they should take extra care to follow social distancing advice, including washing their hands often. If they get any coronavirus symptoms, they must self-isolate and get a coronavirus test as soon as possible.
- 2) **Complete forms 1 and 2** in the appendix below
- 3) Instigate **deep clean** of the practice in line with latest version of OCDO SOP

Dental practice could remain open if sufficient staff to sustain a safe service

Staff member (the **case**) contacts practice principal/practice manager to report a **POSITIVE COVID-19** test result



The **case** reporting the test should **self-isolate** for at **least 10 days** (needs to be clinically improved and fever free without medication for 48 hours before self-isolation ends)



The practice manager/practice principal should:

- 1) Identify **contacts** and **complete forms 1 and 2** in the appendix below
- 2) Instigate **deep clean** of the practice in line with latest version of OCDO SOP

The case and identified contacts would not be able to work within the practice

Dental practice could remain open if sufficient staff to sustain a safe service



Contact Consultant in Dental Public Health within 24 hours (in hours)
At weekends or out of hours, call out of hours number 0114 3049843 for support.
Identified contacts will need to register on Test & Trace, using the ID number of the case: <https://contact-tracing.phe.gov.uk>

The Consultant will contact the dental practice to undertake a risk assessment of possible exposures

Anyone classified as a contact (through work, social contact or household contact) would be advised to self-isolate for 14 days, regardless of having a subsequent negative test result.

Contacts of contacts do not need to self-isolate unless the contact becomes symptomatic.

within the dental practice. The correct use of appropriate PPE would exclude someone from being a contact as the risk of transmission would be assumed to be negligible. If a staff member is a confirmed case, then an assessment of contacts without appropriate PPE would be made.

Appropriate clinical PPE is described in the dental transition to recovery standard operating procedure. For non-AGPs staff should wear eye protection, disposable fluid-resistant (Type IIR) surgical mask, disposable apron and gloves. For an AGP, staff should wear disposable, fluid-repellent gown, gloves, eye/face protection (full face shield/visor) and a disposable FFP3/FFP2/N95 respirator or reusable half mask with replaceable P3 particle filters.

Anyone classified as a contact (through work, social contact or household contact) would be advised to self-isolate for 14 days, regardless of having a subsequent negative test result. Contacts of contacts do not need to self-isolate unless the contact becomes symptomatic.

Useful references for practices:

- **Guidance for contacts of people with confirmed coronavirus (COVID-19 infection) who do not live with the person:** <https://www.gov.uk/government/publications/guidance-for-contacts-of-people-with-possible-or-confirmed-coronavirus-covid-19-infection-who-do-not-live-with-the-person/guidance-for-contacts-of-people-with-possible-or-confirmed-coronavirus-covid-19-infection-who-do-not-live-with-the-person>
- **Stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection:** <https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection>
- **COVID 19: Infection prevention and control website** <https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control>
- **Dental Standard operating procedure: transition to recovery (section 15 on decontamination)** <https://www.england.nhs.uk/coronavirus/publication/dental-standard-operating-procedure-transition-to-recovery/>
- **Working safely during coronavirus** <https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19>

**Appendix – for completion PRIOR to contacting Consultant in Dental Public Health
Form 1**

<p>Dental practice name</p> <p>Address</p> <p>Name of informing person & position</p> <p>Mobile number for contact and back up landline telephone</p>

Question
<p>1. Details about person who has tested positive (or is symptomatic), including:</p> <p style="padding-left: 40px;">Date of confirmation of positive COVID-19 test or date of onset of symptoms (whichever is earlier).</p> <p style="padding-left: 40px;">Job role</p> <p style="padding-left: 40px;">Where they have been working</p> <p style="padding-left: 40px;">Who they have been working with</p>
<p>2. Last date at work for confirmed case.</p>
<p>3. How many patients (without appropriate PPE being worn) do you think are involved (from 48 hours before positive test result or onset of symptoms, whichever is earlier)</p>
<p>4. Has the practice closed to patients? If so, date closed</p>
<p>5. How many staff members do you think are involved as contacts (see above definition). Please include part-time staff and cleaners/maintenance staff.</p>
<p>6. Do you think this is an outbreak? Have two or more members of staff/patients tested COVID-19 positive within 14 days?</p>
<p>7. Have you previously spoken to PHE or NSEI about another case? If so, who and when?</p>
<p>8. Do you have any concerns with compliance with infection prevention and control policies and practices?</p> <p>a. Hand Hygiene (duration & frequency)</p> <p>b. Infection control including cleaning, waste management, laundry</p> <p>c. Appropriate PPE worn (in surgery and on reception)</p> <p>d. Social distancing for patients and staff</p> <p>e. Fallow period observed for AGPs</p>

f. Infection prevention and control guidance in Dental Standard Operating Procedure: transition to recovery followed

9. Has the COVID-19 positive person worked across multiple settings during the infectious period? If so, which addresses?

10. What is the current and anticipated impact on the dental practice and activity?

11. What is needed to mitigate disruption to service?

12. Any measures needed to be put into place in the event of future cases?

List of Potential contacts Form 2

Action for contacts:

1) provide self-isolation advice AND

2) ask them to register as a contact on Test & Trace, using the ID number of the case: <https://contact-tracing.phe.gov.uk>

NB May need to be duplicated if multiple individuals have tested positive as they may have different contacts

<p>COVID-19 positive case name & Test & Trace ref ID</p> <p>Dob Mobile and home tel nos Email Address and postcode Date of onset of symptoms Date tested Where tested Date of result</p>	
<p>Potential contact name 1</p> <p>Dob Mobile and home tel nos Email Address and postcode Date and nature of contact (see list above) e.g. car sharing, ate lunch together, shared reception desk Date and duration of procedure/interaction</p>	
<p>Potential contact name 2</p> <p>Dob Mobile and home tel nos Email Address and postcode Date and nature of contact (see list above) e.g. car sharing, ate lunch together, shared reception desk Date and duration of procedure/interaction</p>	
<p>Potential contact name 3</p> <p>Dob Mobile and home tel nos Email Address and postcode Date and nature of contact (see list above) e.g. car sharing, ate lunch together, shared reception desk Date and duration of procedure/interaction</p>	
<p>Potential contact name 4</p> <p>Dob Mobile and home tel nos Email Address and postcode Date and nature of contact (see list above) e.g. car sharing, ate lunch together, shared reception desk Date and duration of procedure/interaction</p>	

**Appendix – for completion PRIOR to contacting Consultant in Dental Public Health
Patient identified as case - Form 3**

ONLY if case is identified as a patient and there was a breach in cross infection control

If a patient tests positive for COVID-19 and appropriate cross infection control was **not** followed (would also include member of the public, maintenance personnel and cleaners) please complete the form below.

Dental practice name
Address
Name of informing person & position
Mobile number for contact and back up landline telephone

Question
1. Details about the person who has tested positive (or is symptomatic), including: Date of confirmation of positive COVID-19 test or date of onset of symptoms (whichever is earlier). Patient contact details Time of interaction with patient Procedure done and what was the breach in cross infection control e.g. fallow time following an AGP not adhered to? What PPE was worn at the time?
2. How many patients (without appropriate PPE being worn) do you think are involved (from 48 hours before positive test result or onset of symptoms, whichever is earlier)
3. Has the practice closed to patients? If so, date closed
4. How many staff members and patients do you think are involved as contacts (see above definition). Please include part-time staff and cleaners/maintenance staff?
5. Do you think this is an outbreak? Have two or more members of staff/patients tested COVID-19 positive within 14 days ?

6. Have you previously spoken to PHE or NSEI about another case? If so, who and when?

7. Do you have any concerns with compliance with infection prevention and control policies and practices?

- a. Hand Hygiene (duration & frequency)
- b. Infection control including cleaning, waste management, laundry
- c. Appropriate PPE worn (in surgery and on reception)
- d. Social distancing for patients and staff
- e. Fallow period observed for AGPs
- f. Infection prevention and control guidance in Dental Standard Operating Procedure: transition to recovery followed

9. What is the current and anticipated impact on the dental practice and activity?

10. What is needed to mitigate disruption to service?

11. Any measures needed to be put into place in the event of future cases?