

*David Reaney & Associates Dental Practice*  
**HEALTH AND 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.

Signed ...David Reaney.....Practice Principal

Date 14th February 2013 (updated)

## 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

**Dr David Reaney (Practice Principal)**

2. Dr Reaney is responsible for this policy being carried out at the practice at 28 Dungannon Street, Moy Co. Tyrone BT71 7SH

**Colm Marley** is responsible as his Practice Manager.

3. The following are responsible for safety in particular areas:

<b>Gregor McGlashan:</b>	infection control, including waste
<b>David Reaney:</b>	radiation safety
<b>Sally Anne Eddie:</b>	mercury hygiene
<b>Colm Marley:</b>	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 he/she is not able to put right, must tell the appropriate person named above.
6. Other people responsible for:

Safety training – **Colm Marley**

Investigating accidents – **Colm Marley**

Monitoring maintenance

of equipment – **David Reaney**

## SECTION B

# GENERAL ARRANGEMENTS

Local Health and Safety Executive:  
83 Ladas Drive  
Belfast  
BT6 9FR  
Tel: 02890243249  
Email: hseni@detini.gov.uk

### Accidents

The First Aid appointed person for the practice is **Connie McAanallen**.

The first-aid box is located at reception 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 **Connie McAanallen** 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 beside the safe and reported to **David Reaney** 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 & Safety file in the office.

All staff receive 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. **Colm Marley** 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

**Colm Marley** conducts regular visual inspections on all portable electrical equipment at the practice. A combined inspection and test of portable electrical equipment and the fixed supply is carried out every three years by ROL Electrical Inspection & Testing. Records of these inspections and tests are maintained Equipment file beside safe.

## **Fire safety**

General fire safety within the practice is the responsibility of **David Reaney**.

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 by **Smith Fire & Safety Tel 37531313**. All aspects of our Fire Alarm system including emergency lighting are inspected every six months by **Fire:NI Tel 02892662662**

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 on a quarterly basis.

## **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 **Colm Marley** or 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**

**David Reaney** is responsible for ensuring all staff receive adequate training to ensure safe working practices and procedures. 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 and contractors**

All contractors and visitors to the practice (with the exception of patients) should be referred to **Colm Marley** 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**

**David Reaney and Colm Marley** conduct regular inspections of the practice. A record of these inspections is kept Health & Safety File in office. 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

### Anaesthetic gases

The practice owner ensures that the levels and concentration of anaesthetic gases used in the dental surgery are kept below the Workplace Exposure Level set by the Health and Safety Executive. Anaesthetic equipment is fitted with an active scavenging system and the surgery well ventilated.

When not in use, anaesthetic gases are securely stored in downstairs store at rear of treatment room 4 (DR surgery). The practice owner ensures that all anaesthetic equipment and appliances are regularly checked. Records of these inspections are kept beside safe.

### Autoclaves and 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 **David Reaney** who will arrange for its repair.

Autoclaves in the practice are serviced annually by **Dentaquip. Allianz Engineering** carries out an annual 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 are updated digitally.

The air receiver for the practice is serviced annually by **Dentaquip**. It will also be inspected annually by **Allianz Engineering** 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 COSHH file. 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 **David Reaney** 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 (Sedation Drugs)**

Sedation drugs are stored in a locked cupboard. The cupboard should be kept locked at all times.

### **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 [WHERE]. In the event of a mercury spill, **David Reaney** should be informed and will decide what further action is required.

### **Radiation**

A Radiation Protection Adviser **Estelle Walker** has been appointed for advice in complying with the requirements of IRR99.

**David Reaney** 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.

**Onephoton Consultancy** carries out a radiation safety survey every three years on all radiographic equipment. Servicing is carried out by **Dentaquip/Henry Schein** according to the manufacturer's instruction. Local rules are displayed in the Radiation Protection File.

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 the surgeries 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 **Cannon Hygiene** file.