

Q1. Which of the options proposed do you prefer and why?	
Comment	Rationale for change
Support retirement of current Board's guidelines to reduce possible confusion among practitioners and duplication of effort.	The AICGs and the ADA infection control guidelines are available to guide clinical practice
The detail in the current guideline is insufficient to promote sound infection prevention and control practice in dental practitioners.	Despite its revision, there are a number of gaps in the current guideline that need to be addressed for this to be a useful guideline.

Q2. Feedback on revised infection control guidelines			
Page	Section Heading	Comment/Suggested change	Rationale for change
1	Documents	Need to explicitly describe what AS4187 and AS4815 are for, i.e. reprocessing of reusable devices	This level of detail is not available and without it, the purpose of these Australian Standards may be misinterpreted
1	Documents	Need to refer to the appropriate organisational accreditation standard	The organisational accreditation standard also sets infection prevention and control requirements
1	Documents	If antimicrobial prescribing is taking place, then dental practitioners should have access to the relevant prescribing guidelines such as the current version of Therapeutic Guidelines: Antibiotic to support appropriate antimicrobial stewardship practices	Antimicrobial stewardship is an important strategy in the prevention and control of antimicrobial resistance and relies on appropriate prescribing, which is informed by access to prescribing guidelines.
2	Behaviours	Need to include guidance on the appropriate use of standard and transmission-based precautions	Standard precautions should be used by all healthcare workers when providing care, regardless of a patient's infectious status.

Q2. Feedback on revised infection control guidelines			
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			Transmission-based precautions may also be required where there is a specific mode of transmission that needs to be mitigated and standard precautions may be insufficient to do this.
3	Behaviours	Need to address the appropriate use of reusable medical devices and cleaning of shared patient equipment to ensure patient safety	Equipment that is shared between patients poses the risk of cross-infection. The behaviours of dental practitioners should minimise the cross-infection risk associated with shared equipment.
3	Behaviours	Need to include reference to the role of the dental practitioner in promoting good infection prevention and control behaviours, acting as a role model to their patients to minimise the spread of infection within the practice, and when the patient returns home. Good hand hygiene practice would be an example of such a behaviour.	Dental practitioners are role models for their patients and should be include infection prevention and control advice, where relevant, as part of clinical discussion, to enable patient participation and engagement in the clinical process.
Overall	-	Include reference to the Commission's National Safety and Quality Primary and Community Healthcare Standards, and require compliance with those Standards for optimal patient care.	It is important the guidelines and additional resources reference and comply with each of the relevant Standards and AICG's.

<p>Q3. Would replacing the guidelines with other supporting resources result in any unintended consequences or costs for:</p> <ul style="list-style-type: none"> a. dental practitioners b. dental practices c. patients or consumers
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<p>d. vulnerable members of the community, or</p> <p>e. Aboriginal and Torres Strait Islander Peoples?</p> <p>If so, please describe or quantify them.</p>	
Comment/Suggested change	Rationale
Suggest APHRA seek feedback directly from these groups	

Q4. Feedback on draft factsheet			
Page	Section Heading	Comment/Suggested change	Rationale for change
1	How to comply	Include workforce immunisation requirements or specific it in relation to jurisdictional requirements	Immunisation is an important infection prevention and control strategy for this workforce and should be highlighted in this section
Overall	-	At the beginning of this factsheet, there needs to be clear definition of the scope of infection prevention and control and why it is important in healthcare	The factsheet refers to the need for “good infection prevention and control” however the term infection prevention and control is not actually defined in the resource.
Overall	-	Referencing the Commission’s National Safety and Quality Primary and Community Healthcare Standards, and requiring compliance with those Standards for enhanced patient safety.	It is important the guidelines and additional resources reference and comply with each of the relevant Standards and AICG’s.
Q5. Feedback on draft self-reflection tool			
Page	Section Heading	Comment/Suggested change	Rationale for change
Overall	-	Unable to comment on this resource	The self reflective tool provided in the consultation page and on the consultation page is a copy of the revised guidelines

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Q6. Do you have any other feedback about the Board's proposal?	
Comment/Suggested change	Rationale
It is suggested that the focus of the resources would benefit from a re-orientation to provide greater clarity of the scope of infection prevention and control and why it is critical to patient and workforce safety. The current focus is heavily on the regulatory requirements for dental practitioners.	The current focus of the resources on the regulatory requirements would benefit from an improved balance with patient safety and safe healthcare provision.
A general comment for the resources to ensure there is referencing and compliance to the Commission's National Safety and Quality Primary and Community Healthcare Standards	It is important the guidelines and additional resources reference and comply with each of the relevant Standards and AICGs.