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Consistent changes

01 Dec 2015

I have to admit, I have never enjoyed our annual infection control lecture. Past experience has left me concerned about the quality of the CPD on offer, worried that I will be subjected to another afternoon of scare-mongering and opportunistic commercialism. Far worse, though, is the yo-yo-like introduction and withdrawal of guidelines that happens year on year – usually without any scientific evidence to support the decisions.



Like any conscientious practitioner, I take these responsibilities very seriously and, ultimately, I think the changes that have been made have been positive.

But all I want is a little consistency. I'm sure we can all remember when we were required to keep our sterilised equipment in bags, to be re-sterilised after 30 days of non-use. That quickly changed to 60 days and now it's gone up to one year. Why?

Who knows?

The science that dictates these guidelines is not made widely available to professionals – we are simply required to dogmatically follow them. What's more worrying, however, is the fact that private practitioners are not consistently informed of these regularly changing guidelines. NHS practices and hospitals receive regular updates from the Department of Health – but we are too often left in the dark. Gone are the days when the BNF was sent to all practices: we now have to purchase it or subscribe online.

In fact, and I say this with a certain amount of trepidation, I regularly find out about new guidelines by reading through some of the GDC fitness to practise hearings. I often see cases where practitioners are being penalised for something of which I'm not even aware. In this, I think, there has been a fundamental failing in the profession – which is having serious ramifications for practitioners right across the country.

I also couldn't help tallying up just how much compliance could end up costing. With all the changes, with all the considerations, I was left wondering what strategies I would have to employ to make it feasible – and it all came back down to the question of consistency again. Should practices spend significant sums of money to replace their old sinks with ones that are compliant this year but potentially not the next? Should they have to budget for the government's indecisiveness?

It's a difficult situation and, ultimately, the patient will suffer. If practitioners are always having to buy new equipment, new cabinetry or new PPE the cost of treatment will inevitably go up to accommodate the additional costs. It's not a case of ignoring these topics – the protection of our patients is, and always will be, our foremost consideration – but in order to best do that, we need a consistent direction and a better system for sharing the knowledge we need.

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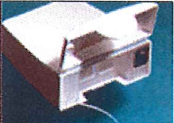
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