

COVID-19: Infection Risk Assessment and Mitigation



This document provides a written record of the heightened infection control measures that this clinic has put into place to ensure the safety of all staff and patients during COVID-19.

Table 1. We have assessed our practice for risks outlined and put in additional processes as detailed below	
Undertaken a risk assessment	A risk assessment was conducted and documented below. We will review this document and our procedures each time the Government provides a Covid19 update
Heightened cleaning regimes	<ul style="list-style-type: none"> • Clinic rooms will be cleaned between each patient • Reception area and hallway will be cleaned twice a day • Hard surfaces in common areas will be cleaned after every patient • Toilet will be cleaned after every use
Increased protection measures	<ul style="list-style-type: none"> • Removed all linens from the clinic rooms and changed to medically wipeable pillows • Removed all non wipeable items from the clinic rooms and reception (including stock items) • Replaced fabric chairs with vinyl chairs • We will fit Perspex® screens to the reception when they arrive next week • Encouraging patients to make contactless payments and book their next appointment in the clinic room • Reception staff will wear PPE
Put in place distancing measures	<ul style="list-style-type: none"> • Staggered appointments • Patients will wait, where possible, in their cars until being ushered directly into the clinic room
Staff training	<ul style="list-style-type: none"> • Correct handwashing technique best practice • Put on/remove PPE safely • Staff briefed and trained on updated clinic policies and infection measures
Providing remote/ telehealth consultations	<ul style="list-style-type: none"> • All patients will have telephone pre-screening call and offered telehealth consultations • Follow-up/maintenance appointments available via telehealth consultations

Table 2a. Protection of staff and patients before they visit, and when in, the clinic.	We have assessed the following areas of risk in our practice and put in place the following precautions
Description of risk	Mitigating action
Pre-screening for risk before public/patients visit the clinic	<p>We are triaging and offering virtual consultations (where possible) in the first instance.</p> <p>If a virtual consultation does not meet the needs of the patient we will screen the patient as follows:</p> <ul style="list-style-type: none"> • Screening for any symptoms of COVID 19 (e.g. high temperature or a new, persistent cough) in the last 7 days, or tested positive • Screening for extremely clinically vulnerable patients • Screening for additional respiratory symptoms or conditions e.g. hay fever, asthmas etc • Screen to see if a member of their household had/has symptoms of COVID-19 or are in a high-risk category i.e. shielded as considered extremely clinically vulnerable • Have they been in contact with someone with suspected/confirmed COVID-19 in last 14 days <p>As a minimum we will provide the following information during the pre-screening call</p> <ul style="list-style-type: none"> • Inform the risk of face to face consultation and that the therapist are not experiencing symptoms of COVID-19 • Options for virtual consultations/telehealth • Process the patient should expect/undertake on arrival and whilst at the clinic (see below)
Protecting members of staff	As well as the therapist we must make every effort to protect the receptionist from infection so ask patients to minimise time spent paying and rebooking. Reception staff will be issued with PPE as described below. The clinic will initially reopen and operate without a receptionist.
Confirmed cases of COVID 19 amongst staff or patients?	<p>The current evidence suggests the infectious period may begin approximately 2 days before symptoms appear. People are most infectious during the symptomatic period, even if symptoms are mild or non-specific (hence the recommendation to pre-screen before visiting the clinic).</p> <p>If someone who visits the clinic subsequently experiences symptoms within 2 days of their visit, if the therapist was wearing PPE in line with the current guidance, then the therapist does not have to self-isolate but will monitor for symptoms.</p> <p>If a member of the clinic team tests positive for COVID-19 they will follow the current Government guidelines for self isolating. We will advise the patients that have been in direct contact, within 2 metres for more than 15 minutes, or less than 1 metre for any amount of time.</p>

Table 2a. Protection of staff and patients before they visit, and when in, the clinic.	We have assessed the following areas of risk in our practice and put in place the following precautions
Description of risk	Mitigating action
	Anyone with indirect contact with the patient or staff member will be advised of the situation and suggest they monitor for symptoms (those with indirect contact with suspected cases COVID 19 do not need to self-isolate).
Travel to and from the clinic	<p>Patients/Chaperones and clinic team members should minimise the risk of infection during transit to and from the clinic, ideally avoiding public transport.</p> <p>For those arriving by car you will be asked to wait in the car park until being called in.</p> <p>Therapists will change into work clothing at the clinic and place work clothing in a separate cloth bag to take home a home for washing.</p>
Entering and exiting the building	<p>Patients are strongly encouraged to arrive promptly for their appointment time and wait in their car until called into the clinic either through being waved in or a call to their mobile. For those arriving early by taxi or bus or on foot they will be ushered to sit on an isolated chair in the reception area until their appointment time.</p> <p>The therapist will open the main door for the patient and ask them to remove any gloves they may be wearing (using bin provided) and use the sanitising gel provided in the porch before entering. For those who cannot use alcohol gel, they will be directed straight to the clinic room sink for soap/water washing. If a patient would prefer to wear gloves then a new pair of gloves will be offered to the patient after gel/soap washing.</p> <p>Patients must wear a face covering before entering the clinic.</p> <p>The therapist will wipe down the door handles and any other surfaces touched between the front door and the clinic room. The door will be locked from inside with the thumb turn lock to prevent unexpected people entering the building.</p>
Reception and common areas	Time spent in the reception area will be reduced to an absolute minimum.

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	<p>Patients will be encouraged to complete their consent and GDPR forms at home and email back the signed documents. Where this has not been possible Consent and GDPR forms will be completed in the clinic room. A wiped down pen and clipboard will be provided.</p> <p>Where possible the therapist will rebook any future appointments through their PC in their room at the end of the consultation.</p> <p>Patients are encouraged to pay using a contactless method to minimise handling of cash or cheques.</p> <p>Usual products for sale have been removed from display but may be available on request from the therapist.</p> <p>Patients are encouraged to go to toilet at home before setting off for their appointment to minimise use of the clinic's facilities. Where the clinic facilities are used the client's therapist will wipe the surfaces down immediately after use.</p>
Social/physical distancing measures in place	<p>Staggered appointment times to minimise patients overlapping in reception/toilet.</p> <p>We will not allow walk in clients to make appointments, purchase products etc and therefore we can minimise the number of people in the clinic at any one time.</p> <p>We will not use floor markers as we never envisage a queue in the reception area.</p>
Face to face consultations (in-clinic room)	<p>Where possible, the distance between therapist and the client (and chaperone) will be greater than 2 metres, for example during discussions or exercise demonstrations.</p> <p>Some manual therapy techniques will be avoided that increase the risk of infection e.g. Aerosol Generating Procedures (AGP) like supine osteopathic thrusts to the thorax. There are always alternative techniques available.</p> <p>If the patient requires/desires a chaperone then please limit this to one person. The chaperone should be identified during pre-screening so that their health status and vulnerabilities can also be assessed. They will also consent to having their contact details recorded so that they can be contacted by the Contact Tracing Team should a therapist test positive.</p>

Table 2b Hygiene measures	We have assessed the following areas of risk in our practice and put in place the following heightened hygiene measures
	Mitigating action
Increased sanitisation and cleaning in clinic rooms	<p>All moveable equipment, models, stock etc have been placed into the cupboard or into wipeable plastic containers.</p> <p>Plinth fabric covers, towels, pillow cases have been removed and replaced with medically wipeable pillows and face hole cushions.</p> <p>Plinths, cupboards, door handles, equipment chairs, sink, taps, bin and other touchable surfaces– cleaned between each patient using at least 60% alcohol sanitisers/wipes.</p>
Increased sanitisation and cleaning in reception room	<p>All moveable equipment, stock etc have been removed and placed into wipeable plastic containers. The area around the desk has been decluttered.</p> <p>The card machine, keyboard, mouse and telephone will be wiped down after every use. Where possible the receptionist will not touch the payment card.</p> <p>Therapists will limit their activity behind the desk where there is limited space.</p> <p>Touchable surfaces will be wiped down between each patient using at least 60% alcohol sanitisers/wipes.</p> <p>A further container of wipes and sanitiser gel is available on the desk.</p>
Increased sanitisation and cleaning in staff room	<p>All non essential items have been removed from surfaces into cupboards.</p> <p>Hand gel and wipes, as well as the usual soap dispenser, are available next to the sink.</p> <p>Staff must stagger their use of the staff room and take drinks back to their clinic room.</p> <p>Any crockery/cutlery should be washed/dried and put away immediately after use.</p> <p>All surfaces should be wiped down after use.</p> <p>Staff to bring in their own mug to assist in infection control.</p>

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	Mitigating action
Aeration of rooms	Clinic windows will be opened more than usual to help aerate the rooms especially between patients.
Staff hand hygiene measures	Bare below the elbow/hand washing before and after patients with soap and water for at least 20 seconds, including forearms/use of hand sanitiser gel/use of gloves.
Respiratory and cough hygiene	<p>Communication of cough hygiene measures for staff and patients</p> <ul style="list-style-type: none"> • 'Catch it, bin it, kill it' or similar posters • Provision of disposable, single-use tissues waste bins (lined and foot-operated) • Hand hygiene facilities available for patients, visitors and staff
Cleaning rota/regimes	<p>As well as the areas described above that are wiped down between every patient, the cleaning rota frequency has been increased from once a day to twice a day for common areas.</p> <p>Floors hoovered daily and washed with detergent. Geoff Skrone (or nominated person in his absence) is responsible for the cleaning regime.</p> <p>The bags from each clinic room, reception, kitchen and outside bins are placed into the bag in the large grey bin (previously recycling bin) in the kitchen, hence double bagging, labelled with the date and place in the garage for 72 hrs.</p>

Table 3. Personal Protective Equipment	This is our policy for use and disposal of PPE
Clinicians will wear the following PPE	<ul style="list-style-type: none"> • Plastic aprons • Single-use nitrile gloves (unless the therapist prefers to treat with bare hands with patient's permission) • Fluid-resistant surgical masks (or higher grade) • Eye protection, e.g. if there is a risk of droplet transmission or fluids entering eyes
When will PPE be replaced	<ul style="list-style-type: none"> • When potentially contaminated, damaged, damp, or difficult to breathe through • Apron and gloves for every patient • Face mask at the end of a session e.g. morning or afternoon
Reception staff will wear the following PPE	<ul style="list-style-type: none"> • Fluid resistant surgical masks for those in direct contact with patients
Patients will be asked to wear the following PPE	<ul style="list-style-type: none"> • Face-covering in the clinic (gloves are also available if a patient requests them)
PPE disposal	<ul style="list-style-type: none"> • Double-plastic bagged and left for 72 hours before removal, keeping away from other household/garden waste, and then normal waste for collection by Bowmans • Cloths and cleaning wipes also bagged and disposed of with PPE

Table 4. Communicating with patients: Detail here how you will advise patients of measures that we have taken to ensure their safety and the policies that have been put in place in our clinic

Information on how you have adapted practice to mitigate risk	<p>This document has been made available on our website, posted on the clinic notice board, emailed to our database of patients with email address and provided to patients during pre-screening.</p> <p>The document will be updated as and when new advice is provided by the Government.</p>
Pre-appointment screening calls	The therapist or receptionist will make the pre-screening call in the 24hrs preceding the appointment.
Information for patients displayed in the clinic	<p>Notices for hand washing/sanitising/Catch-it, bin it kill have been placed in the clinic and in the porch</p> <p>A Staying COVID-19 Safe poster shows who to contact for more information.</p>
Other patient communications	<p>The patients on our database for whom we have permission to send a newsletter will receive updated information prior to opening on 13th July 2020.</p> <p>We will link this document to our website and to our Facebook page.</p> <p>We will ask patients to advise us should they subsequently develop symptoms or test positive for COVID-19 after the appointment.</p>

Should you wish to discuss any points contained in this document or have some valuable suggestions to enhance our procedures then please direct your correspondence to info@lochaberclinic.co.uk for the attention of Geoff Skrone.