

Risk assessment and mitigation guide

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.

Section 1. Both clinic and consultation procedures have been assessed for risks outlined and additional processes and procedures have been implemented as detailed below:	
Risk assessment date	27/07/20
Heightened cleaning regimes	<i>Clinic Rooms- these will be cleaned between each patient Washroom will be cleaned after a patient has used it and at the beginning, middle and end of the day. Reception hard surfaces will be cleaned at the beginning, middle and end of the day.</i>
Increased protection measures	<i>All linens, magazines, books and toys have been removed from the treatment rooms All magazines, books and toys have been removed from the reception room. There will be no reception staff present in the reception room. We ask that payment for the treatment is made online or using card facilities where possible.</i>
Distancing measures	<i>We have increased the time between appointments (30 minutes) so patients do not come into contact with each other. All patients will now wait in their cars in the car park or under the carport if they have not come by car, until called by their practitioner.</i>
Staff training	<i>Staff will be briefed on the updated clinic policies and infection measures Staff will be trained on correct hand washing techniques and how to put on and remove PPE safely</i>
Providing remote/ telehealth consultations	<i>All patients will be given the option of a telephone or zoom consultation, in place of a face to face consultation.</i>
Section 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 as detailed below	
Description of risk	Mitigating action – introduced on 3/08/20
Pre-screening for risk before public/patients visit the clinic	<i>If a virtual consultation does not meet the needs of the patient, the patient will be prescreened (and chaperone if relevant) before they arrive in the clinic by:</i> <ul style="list-style-type: none"> • Screening for any symptoms of COVID 19 (high temperature or a new, persistent cough, loss of smell and taste) in the last 7 days? • 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

	<p>days?</p> <p>Other information we will provide during the pre-screening call</p> <ul style="list-style-type: none"> • The patient will be informed of the risk of a face to face consultation and if they consent this will be recorded in their notes. • The patient will be informed that they need to wear a mask at all times whilst in the practice and if they don't have one, we can provide one. • The patient will be asked to park in the car park and wait in their car until they are called. If arriving other than by car to wait under the carport until called.
Confirmed cases of COVID 19 amongst staff or patients?	<p>If a member of staff is tested for COVID-19 we will follow the Government guidelines</p> <p><i>If a patient advises me that they have symptoms of COVID-19 after visiting the clinic, in line with government guidance the following action will be taken:</i></p> <ul style="list-style-type: none"> • <i>If the patient experiences symptoms within 2/3 days of visiting the clinic, any staff with direct contact to that individual should self-isolate</i> • <i>Anyone with indirect contact with the patient, should 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)</i>
Travel to and from the clinic	<p>Patients will be requested to try and avoid public transport. If they use it they will be asked to wear a mask at all times and to wait under the carport until called for their appointment.</p> <p>Patients arriving by car will be asked to park in the car park and wait in their car until called for their appointment.</p> <p>Patients who use walking or cycling to travel will be asked to wait under the carport until they are called for their appointment.</p>
Entering and exiting the building	<ul style="list-style-type: none"> • Practitioners will be asked to change into work clothing at the clinic and place work clothing in a separate cloth bag to take home for washing or place in the washing machine at the clinic for washing. • We will asking patients not to arrive too early or late for their appointment to ensure enough car parking space and avoid contact with other patients and therefore complying with social distancing • Patients arriving early will be asked to wait in their car or outside the building (observing social distancing). • The patient will be guided by their practitioner to the route into and out of the building, this will vary depending on whether 1 or 2 practitioners are working in the building. • Patients will be asked to use a hand sanitiser upon entering the building
Reception and common areas	<p>Practitioners will take payment and rebook patients whilst they are in their clinic rooms to avoid contact with reception staff and other patients. Patients can also rebook appointments by phone call at a later date.</p>
Social/physical distancing measures in place	<p>Appointments times are now staggered to ensure that patients do not meet.</p> <p>Patients will be asked to stay in their cars or outside under the carport until</p>

	<p>they are called by their practitioner. There will be a maximum of 2 staff on the premises at any one time.</p>
<p>Face to face consultations (in-clinic room)</p>	<p>The treatment rooms are large enough to allow 2m between the patient and practitioner when taking a case history.</p> <ul style="list-style-type: none"> • The practitioner will choose treatment techniques which provide the greatest distance between them and the patient in the first instance. • Only one parent/guardian with a child and no additional family members except if requested as a chaperone • The patient must inform the practice if they are bringing a chaperone and obtain consent from the chaperone to provide us with their telephone number and for us to telephone them. The practice will telephone the chaperone the day before or on the day of the appointment to pre-screen and communicate the risks to them.
<p>Increased sanitisation and cleaning</p>	<ul style="list-style-type: none"> • Clinic rooms - cotton plinths and pillow case covers have been removed and replaced with wipeable plastic covers. A plastic tray is provided for patients to place their personal belongings in. The plinth, pillow, desk, door handles and tray will be wiped with at least 60% alcohol surface wipes between each patient • To reduce touch points the practitioner will open and close all doors. Reception surfaces and door handles will be cleaned at the beginning, middle and end of the day • The kitchen door and reception door will be left open where possible to reduce touch points.
<p>Aeration of rooms</p>	<ul style="list-style-type: none"> • A window in each room being used, will be left open at all times to increase air circulation. Where there is an outside door to the room this will be opened after each patient leaves the room, weather permitting. The internal door of the treatment room will be closed for 15-20 minutes after each patient to allow the virus to settle out of the air before cleaning surfaces. • Fans will not be used to cool the room in hot weather so removing any air-circulation.
<p>Staff hand hygiene measures</p>	<ul style="list-style-type: none"> • All staff will be bare below the elbow and will wash their hands before and after each patient with soap and water for at least 20 seconds, including forearms. <p>Practitioners are advised to use gloves whilst treating patients and replace with each patient.</p>
<p>Respiratory and cough hygiene</p>	<p>Communication of cough hygiene measures for staff and patients will be talked about when phoning patients</p> <ul style="list-style-type: none"> • 'Catch it, bin it, kill it' • Provision of disposable, single-use tissues, lined waste bins with foot operated lids. <p>Hand gel available for patients, visitors, and staff</p>
<p>Section 2b Hygiene measures We have assessed the following areas of risk in our practice and put in place the following heightened hygiene measures</p>	
<p>Cleaning rota/regimes</p>	<ul style="list-style-type: none"> • The washroom will be cleaned at the beginning, middle and end of the day. In addition the washroom will be cleaned after a patient has used it. The reception area will be cleaned at the beginning, middle and end of the

	<p>day (Patients will only be passing through and not stopping)</p> <ul style="list-style-type: none"> • A written record of cleaning time and by whom will be kept in the kitchen
Section 3. Personal Protective Equipment:	
Clinicians will wear the following PPE	<ul style="list-style-type: none"> • Single-use nitrile gloves and aprons with each patient. If the air temperature becomes very high then the practitioner may choose not to wear gloves and use increased hand washing instead. • Fluid-resistant surgical masks type IIR • Eye protection – a plastic visor will also be worn when treating clients
When will PPE be replaced	<ul style="list-style-type: none"> • When potentially contaminated, damaged, damp, or difficult to breathe through • Gloves and aprons will be replaced with each new patient. • Masks can be used for up to 4 hours or replaced earlier or after each patient at the practitioner's discretion
Patients will be asked to wear the following PPE	<p>All patients will be asked to wear face-coverings at all times whilst in the clinic and fluid-resistant surgical masks if they have respiratory symptoms e.g. hay fever or asthma or lung conditions</p>
PPE disposal	<ul style="list-style-type: none"> • PPE, cleaning cloths and wipes will be double-plastic bagged and left for 72 hours before removal, keeping away from other household/garden waste, and then placed in our normal waste for collection by our local authority.
Section 4. Communicating with patients:	
Publishing the updated clinic policy	<ul style="list-style-type: none"> • Patients will be made aware of the updated clinic policy when booking an appointment. • Patients can have the policy emailed to them or given a paper copy on request. • It will be made available on our website
Information on how you have adapted practice to mitigate risk	<p>When we receive new Government guidance we will update our clinic policy.</p> <ul style="list-style-type: none"> • This will be updated on our website • Patients will be made aware of this when booking appointments.
Pre-appointment screening calls	<ul style="list-style-type: none"> • These will take place either the day before or on the morning of a scheduled appointment • A practitioner or receptionist will call the patient. • The receptionist will be given training by the practitioner on what to ask and check for. A script will be provided to ensure all points are covered.
Information for patients displayed in the clinic	<ul style="list-style-type: none"> • A notice will be placed on the front door and reception' window advising anyone with symptoms not to enter the building. • Notice on hand washing will be placed in the washroom
Other patient communications	<p>We will ask all patients to contact us if they subsequently develop COVID19 symptoms.</p>