

Adapting practice: Infection risk assessment and mitigation guide for

FORM Osteopathic Clinic

We have assessed our practice for risks outlined and put in additional processes as detailed below

Undertaken a risk assessment	18/05/2020 To be reviewed monthly, on the next Government guidance or osteopathic body guidance
Heightened cleaning regimes	<ul style="list-style-type: none"> • Clinic room to be cleaned between each patient • Common areas/washrooms to be cleaned between each patient • Hard surface in common areas to be cleaned after every patient
Increased protection measures	<ul style="list-style-type: none"> • PPE to be worn for all treatments carried out and disposed of appropriately • Linens to be changed after every patient and double bagged for washing with detergent at 60°C • Plinth to be disinfected after every patient • Cashless payments through Bacs are advised and bookings made remotely by email, telephone or online
Put in place distancing measures	<ul style="list-style-type: none"> • Patients to arrive promptly for the appointment to reduce time spent in the waiting area • Limit entry to the clinic to 1 person at a time where possible
Staff training	<ul style="list-style-type: none"> • Thorough handwashing technique as 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"> • Patients to have telephone pre-screening call • Follow-up/maintenance appointments available via telephone/video call as and when appropriate
	(Document last updated: 16/08/2021)

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 to			
	Description of risk	Mitigating action	When introduced
Pre-screening for risk before public/patients visit the clinic	<p>Exposure risk with face to face consultation</p> <p>Symptomatic, non-symptomatic, shielding and vulnerable patients risks to COVID-19 virus</p> <p>Patients entering the clinic and in direct or indirect-contact with others and surface contact</p>	<p>Virtual consultation to be offered in the first instance to triage for COVID-19 symptoms and to determine if a face to face is relevant or support can be provided by a telehealth consultation.</p> <p>If a virtual consultation does not meet the needs of the patient, a face to face consultation may be necessary. Pre-screening questions will be asked to ascertain if:</p> <ul style="list-style-type: none"> You (and if necessary, your chaperone, or household members) are showing symptoms of COVID-19 (e.g. high temperature or a new, persistent cough) or the delta variant (headache, runny nose, sore throat, sneezing, fever, loss of smell, persistent cough) or any subsequent variant in the last 10 days? A member of your household had/has symptoms of COVID-19 or are in a high-risk category You are shielding, extremely clinically vulnerable or are pregnant. You have had exposure or been in contact with someone with suspected/confirmed COVID-19 in last 10 days? You have additional respiratory symptoms or conditions e.g. hay fever, asthmas etc The benefits and risks of having a face to face consultation outweigh no treatment or a remote consultation You understand the option for telehealth consultations <p>On arrival at the clinic:</p> <ul style="list-style-type: none"> Where possible, doors to be left open for you to enter the clinic, avoiding direct contact with surfaces 2 metre social distancing to be followed if and when possible Arrive for your appointment at the specified time. Attending before the allotted time and arriving late will disrupt the disinfecting process and increase risk Come alone to your appointment, unless it is necessary to have a chaperone Avoid touching surfaces unnecessarily and only take items that you need for the appointment with you 	19/07/2021

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 to			
	Description of risk	Mitigating action	When introduced
		<ul style="list-style-type: none"> • A lined basket to be provided to store items of clothing during the treatment. Lining to be removed after each patient • Hand gel and/or hand wash facilities readily available at the clinic • Reading material and toys are not currently available • Temperature reading of practitioner to be taken daily on clinic days 	
Confirmed cases of COVID 19 amongst staff or patients?	COVID-19 virus spread to patients and staff	<ul style="list-style-type: none"> • Staff and patients experiencing COVID-19 symptoms to self-isolate and contact trace direct exposure of person(s) 2-3 days prior • Person(s) with indirect contact with the patient to be advised of the situation and to monitor for symptoms (those with indirect contact with suspected cases of COVID-19 do not need to self-isolate) 	19/07/2021
Travel to and from the clinic	COVID-19 virus spread from external factors	<ul style="list-style-type: none"> • If travelling by public transport, wash hands with alcohol gel prior to entering the clinic and again on entering (provided on entry) • If wearing a mask, dispose of it prior to entering the clinic and replace it with a new one • Chaperone to remain in the car or away from the clinic where possible 	19/07/2021
Entering and exiting the building	Droplet or contact transmission of COVID-19 on the premises	<ul style="list-style-type: none"> • Wash hands (with either soap and water or a form of hand sanitiser) on entering and leaving the clinic • Clinic clothing to be double bagged and washed at 60°C with detergent • Wait outside the building (observing social distancing) until precise appointment time 	19/07/2021
Reception and common areas	Exposure to surfaces containing COVID-19 virus	<ul style="list-style-type: none"> • Arrive promptly to the appointment, avoiding or reducing waiting time in the reception area • Contactless payment to be encouraged, by Bacs bank transfer 	19/07/2021
Social/physical distancing measures in place	Exposure to other patients	<ul style="list-style-type: none"> • Arrive promptly to your appointment to avoid patient overlap in the clinic 	19/07/2021
Face to face consultations (in-clinic room)	Risk of exposure to COVID-19 virus in an enclosed space	<ul style="list-style-type: none"> • 2 metre distancing to be adhered to for the consultation where possible • Social distancing to be adhered to during the treatment, avoiding treatment techniques that promote face to face exposure where possible 	19/07/2021

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	Description of risk	Mitigating action	When introduced
		<ul style="list-style-type: none"> Chaperone can attend treatment with the patient if the patient requires or requests this but to be avoided where possible Only one chaperone to attend treatment Chaperone to be pre-screened for COVID-19 and other variant symptoms, asked if they are shielding, in the vulnerable group or a member of their family are 	

Table 2b Hygiene measures We have assessed the following areas of risk in our practice and put in place the following heightened hygiene measures			
	Description of risk	Mitigating action	When introduced
Increased sanitisation and cleaning	Surface contact risk of exposure to COVID-19 virus	<ul style="list-style-type: none"> Clinic room - plinth, desk, door handles, equipment, chair, sink and taps disinfected between each patient Waiting room - surfaces, doors and door handles, seating area – disinfected between patients Bathroom - surfaces, sink, tap, toilet disinfected after use Use of at least 60% alcohol sanitisers/wipes or bleach-based detergents for floors Unnecessary linen has been removed Clinic room and waiting room has been decluttered of unnecessary items Bathroom door to be left open for handwashing as necessary 	19/07/2021
Aeration of rooms	Airborne and droplet transmission of COVID-19 virus	<ul style="list-style-type: none"> Only hepa filter fans used on the premises 	19/07/2021
Staff hand hygiene measures	COVID-19 virus particles on clothing and hands	<ul style="list-style-type: none"> Uniform to be worn that allows arms to be bare below the elbow Hand washing with soap and water for 30 minutes prior to patient presenting to include forearms to elbow 	19/07/2021

Table 2b Hygiene measures

We have assessed the following areas of risk in our practice and put in place the following heightened hygiene measures

	Description of risk	Mitigating action	When introduced
		<ul style="list-style-type: none"> • Hand washing prior to donning gloves with minimum 60% alcohol gel or soap and water • Hand washing after doffing gloves • Hand washing after apron and/or mask removal 	
Respiratory and cough hygiene	Spread of COVID-19 virus through aerosol producing activities	<ul style="list-style-type: none"> • 'Catch it, bin it, kill it' poster on view • Provision of disposable, single-use tissues and waste bins (lined and foot operated) • Hand hygiene facilities available for patients and staff 	<i>19/07/2021</i>
Cleaning rota/regimes	Spread of COVID-19 virus particles through hard surface contact	<ul style="list-style-type: none"> • Clinic room - plinth, desk, door handles, equipment, chair, sink and taps disinfected between each patient • Waiting room - surfaces, doors and door handles, seating area – disinfected between patients • Bathroom - surfaces, sink, tap, toilet disinfected after use • Use of at least 60% alcohol sanitisers/wipes or bleach-based detergents for floors 	<i>19/07/2021</i>

Table 3. Personal Protective Equipment: Detail here your policy for use and disposal of PPE	
Clinicians will wear the following PPE	<ul style="list-style-type: none"> • Single-use nitrile gloves and plastic aprons to be worn for each patient • Fluid-resistant surgical masks (or higher grade) to be changed every 4 hours or before if damp, torn or damaged • Eye protection to be worn 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 • At the end of a session (maximum 4 hours)
Patients will be asked to wear the following PPE	<ul style="list-style-type: none"> • If you have respiratory symptoms e.g. from hay fever or asthma • Wear face-covering in clinical and waiting areas
PPE disposal	<ul style="list-style-type: none"> • PPE waste to be double-plastic bagged and left 72 hours before removal, keeping away from other household/garden waste, and then placed in normal waste for collection by local authority • Cloths and cleaning wipes 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	
Publishing your updated clinic policy	<ul style="list-style-type: none"> • Available on request • Provided as part of appointment confirmation emails • Published on FORM Osteopathic Clinic website
Information on how you have adapted practice to mitigate risk	<ul style="list-style-type: none"> • Updated website and social media accounts • Email to patient base when new and relevant information is highlighted
Pre-appointment screening calls	<ul style="list-style-type: none"> • Within 24 hours of the appointment or the morning prior to a scheduled appointment • Clinician to call or email • Email follow on morning of appointment
Information for patients displayed in the clinic	<ul style="list-style-type: none"> • Notices on public health measures e.g. hand washing/hand gel use/sanitising/Catch-it, bin it kill/don and doff masks
Other patient communications	<ul style="list-style-type: none"> • Post treatment email to encourage notification if subsequent COVID-19 symptoms experienced