

Kingdom Osteopaths/Appletree Clinical Policy and Procedure – Pandemic and Infection Control Measures as taken by Gillian McIntosh

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

This risk assessment and mitigation record have been undertaken in conjunction with review of the iO's guidance 'Infection control and PPE' and 'Adapting practice guide'.

In this document you will find the following:

- **Table 1:** This is an overview of the measures I have taken that will form your clinic policy for operating during COVID-19 and available to all staff and patients.
- **Table 2:** Areas assessed for risk and mitigating action taken. This records in detail the areas of potential risk I have identified and record of the mitigating actions I have taken and when.
- **Table 2a - Protection for staff and patient before and when in clinic**
- **Table 2b – Heightened hygiene measures**
- **Table 3:** My PPE policy for staff/practitioners in practice
- **Table 4:** Detail of how I will communicate to staff and patients the policies

This Document takes into consideration

[General Osteopathic Council Interim Infection Control guidance for COVID 19](#)

Completion of the attached demonstrates compliance with the following Osteopathic Practice Standards including but not limited to:

- A2: ".... adapting your communication to take account of [your patient's] particular needs"
- C5: "You must ensure your practice is safe, clean and hygienic"
- D11: "You must ensure that any problems with your own health do not affect your patients"

Other Documents and agencies referred to for guidance

- **Health and safety act at work 1974**
- **General Data protection Guidance act 2018**
- **Scottish Government <https://www.gov.scot/>**
- **Health Protection Scotland <https://www.hps.scot.nhs.uk/a-to-z-of-topics/covid-19/>**

Kingdom Osteopaths/Appletree– Risk assessment

In this section, I provide an overview of the measures I have taken to adapt my clinical practice and those for preparation for operating in the current COVID-19 situation. This will be taken as my clinical practice policy, so patients are aware of the measures I have taken both in Kingdom osteopaths and Appletree Clinic.

Risk assessment	25 th May 2020 <ul style="list-style-type: none"> This will be reviewed as guidelines are changed or monthly which ever comes first.
Heightened cleaning regimes	New, heightened cleaning regimes for your clinic are as follows. <ul style="list-style-type: none"> Clinic rooms will be cleaned between in each patient with an approved cleaning/disinfecting agent Common areas/washrooms will be cleaned 2 hourly – chart will indicate this and signed Hard surface in common areas will be cleaned twice daily – general wiping of surfaces between patients There is be daily full cleaning of premises.
Increased protection measures	The practice will now follow increased infection control measures <ul style="list-style-type: none"> All linen will be removed from the clinic and wipeable pillowcases and couch will be used. Patients can bring their own linen for comfort There will be no reception staff on site as we can not create enough distancing at present All staff/practitioners will be temperature checked on arrival and change into clean clothes and sanitise and wash hands before entering the clinical area. Cashless methods of payment will be taken. Streamline or BACS Practitioners will be provided and expected to wear nitrile gloves, plastic aprons which will be replaced after each treatment and water-resistant masks worn. Patients will be asked to have a temperature check on entering the premises and sanitise hands and offered a mask.
Distancing measures	I have put in the following distancing measures <ul style="list-style-type: none"> There will 10 mins break between appointments. Only one patient in the building at a time. Patients will be asked to wait for confirmation that they can come in and will be given instructions on safe distancing measures.
Staff/ Practitioner Training	Additional training and information that staff and practitioners will have undertaken: <ul style="list-style-type: none"> Posters and information on correct handwashing process and information leaflets provide on how to follow this Guidance and posters on how to put on/remove PPE safely Staff and practitioners will be briefed and trained on updated clinic policies and infection measures and be expected to keep up to date on any changed that come into effect.
Providing remote/ telehealth consultations	I will provide telehealth/remote consultations for the following reasons: <ul style="list-style-type: none"> All patients will have telephone pre-screening call in no more than 24hours before their appointment. All patients will have a remote consultation to ascertain if person to person contact is required and can be offered a video call as an alternative if remote assistance would be suitable. Follow-up/maintenance appointments available via telephone/video call if person to person contact is not required
Document last reviewed	

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	risk of infection with face to face consultation	<p><i>I will triage and offer a virtual consultation in the first instance. I will take an initial case history by telephone to determine if a face to face is relevant or support can be provided by a telehealth consultation.</i></p> <p><i>If a telephone consultation does not meet the needs of the patient, I will pre-screen a patient (before they arrive in the clinic for:</i></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? • 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><i>I will provide information during the pre-screening call to:</i></p> <ul style="list-style-type: none"> • Inform of the risk of face to face consultation – this will be documented that the patient has been informed of risk associated with attending the clinic, and that they confirm that they are not experiencing symptoms of COVID-19. • Given the options for telehealth • When patient has booked a face to face appointment, they will receive information about increased infection control that they will be asked to wait until they are invited into the premises and will sanitise hands and have a temperature check. They may bring with them a towel and pillow for use on the treatment table. They can not bring any additional people to the appointment unless this has been agreed in advance. <p>NB: All triage pre-screening information will be documented in the patient notes.</p>	
Protecting members of staff and practitioners		Staff will be working remotely until distancing measures are reduced to protect them. Practitioners will be offered the opportunity to return to practice but must provide their own pandemic and infection control policy and risk assessment that meets the standards of the practice.	
Confirmed cases of COVID 19 amongst staff or patients?		Should a member of staff be tested for COVID-19 see the attached Flowcharts from HMRC as to the return to work process. Should a patient confirm that they have tested positive or had symptoms of COVID-19 after visiting	

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
		<p><i>the clinic the practice will act in line with government guidance</i></p> <ul style="list-style-type: none"> • If the patient experiences symptoms within 2/3 days of visiting the clinic, any staff with direct contact to that individual should get tested and/or self-isolate in line with government guidelines. Anyone with indirect contact with the patient, should be advised of the situation and suggest they monitor for symptoms and if concerned can get tested (those with indirect contact with suspected cases COVID 19 do not need to self-isolate) 	
Travel to and from the clinic		<p><i>Practitioners/ staff and/or patients/chaperones will be asked where possible not to take public transport but where this is not possible, they travel by public transport will be asked to follow government guidelines for social distancing. If they arrive early, they will be asked where possible to wait outside (otherwise they will be seated in a separate room) until their appointment. Patient/chaperones traveling by car will be asked to wait in their cars until they are invited in.</i></p>	
Entering and exiting the building		<p><i>Guidance for practitioners, staff and patients entering and exiting the clinic:</i></p> <ul style="list-style-type: none"> • Staff will be change into work clothing at the clinic and place work clothing in a separate cloth bag to take home a home for washing. • Patients will not arrive early or late for their appointment to avoid overcrowding therefore complying with social distancing. • Patients arriving early be asked to wait in their car or outside the building (observing social distancing). • Patients/Staff and Practitioners will sanitise hands on entry and have their temperature checked. • Exiting the building they will remove all items they have brought with them safely. Pillowcases are a safe medium to remove clothes and linen brought in. 	
Reception and common areas		<p><i>Controlling use of reception and common areas</i></p> <ul style="list-style-type: none"> • Patients will be asked to turn up promptly at the appointment time to reduce time in the waiting area • Contactless/BACs payment will be preferred instead of cash, and patients will be informed of this prior to their appointment. • Floor will be marked for safe distancing in the reception area where appropriate. • Follow up appointments will be made by telephone calls at the end of the clinic sessions. 	
Social/physical distancing measures in place		<p><i>Other distancing measures in place include but are not limited to:</i></p> <ul style="list-style-type: none"> • Staggered appointment times so that patients do not overlap in reception • Prescribe a maximum number of staff and/or patients on the premises at any one time 	

<p>Table 2a. Protection of staff and patients before they visit, and when in, the clinic.</p> <p>We have assessed the following areas of risk in our practice and put in place the following precautions to</p>			
	Description of risk	Mitigating action	When introduced
		<ul style="list-style-type: none"> • <i>Floor markings where appropriate for patient practitioner distancing in reception and treatment rooms for transition before and after treatment.</i> 	
Face to face consultations (in-clinic room)		<ul style="list-style-type: none"> • <i>Consultation information will be taken remotely so as to minimise patient time in the clinic</i> • <i>Consultation times have been shortened to a maximum of 20 mins in the clinic</i> <p><i>Chaperones and family members will be asked to remain social distanced .</i></p> <ul style="list-style-type: none"> • <i>One parent/guardian only with visits for children</i> • <i>No additional family members except if requested as a chaperone</i> • <i>Chaperones /Guardians will have to comply to the same infection control measures expected of the patient before arrival and will be asked to call the practice prior to attending.</i> 	<ul style="list-style-type: none"> •

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		<p><i>Cleaning regime changes are as follows</i></p> <ul style="list-style-type: none"> • Clinic rooms - plinths, desk, door handles, equipment chairs - between each patient will be wiped down with a covid-19 approved detergent/sanitiser • Reception surfaces, doors and door handles, chairs, taps, card machines will be wiped down after use • Use of at least 60% alcohol sanitisers/wipes, using bleach-based detergents for floors <p><i>Actions to minimise the number of surfaces requiring cleaning</i></p> <ul style="list-style-type: none"> • Removal of all unnecessary linen/use plastic pillowcases that can be cleaned between patients. • Decluttering the clinic rooms and waiting area on unnecessary items. <p><i>Keeping doors between common areas open if safe and appropriate to do so, to reduce touch points</i></p>	
Aeration of rooms		<p><i>Aeration for clinic rooms</i></p> <ul style="list-style-type: none"> • Leaving the window open and the door closed for 10 minutes after each patient • If no windows, will you leave clinic room doors open for at least 20 minutes • Removal of fans and other air-circulation mechanisms <p><i>Aeration of common/reception areas e.g. opening windows during clinic opening hours.</i></p>	
Staff hand hygiene measures		<p><i>Practitioner and staff hand hygiene measure put in place</i></p> <ul style="list-style-type: none"> • 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><i>Communication of cough hygiene measures for staff and patients e.g.</i></p> <ul style="list-style-type: none"> • 'Catch it, bin it, kill it' posters • Provision of disposable, single-use tissues and bags to dispose of in waste bins. • Hand hygiene facilities available for patients, visitors, and staff. 	
Cleaning rota/regimes		<ul style="list-style-type: none"> • Cleaning rota frequency increased from half-day to 2 hours for common areas • A written record of cleaning time and by whom kept by in the reception. • Cleaning rota frequent and inspection of washrooms, detail recorded on notice of washroom door 	

Table 3. Personal Protective Equipment: Detail here your policy for use and disposal of PPE

Clinicians will wear the following PPE	<p><i>PPE clinicians wear</i></p> <ul style="list-style-type: none"> • Single-use nitrile gloves and plastic aprons with each patient • 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 • At the end of a session (Detail here what a session may be e.g. 4 hours)
Reception staff will wear the following PPE	<ul style="list-style-type: none"> • Fluid resistant surgical masks for those in direct contact with patients, • Apron and gloves when cleaning areas.
Patients will be asked to wear the following PPE	<ul style="list-style-type: none"> • Fluid-resistant surgical masks if respiratory symptoms e.g. from hay fever or asthma (provided) • Face-covering in clinical and waiting areas (asked to bring own face covering)
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 this can be placed in your normal waste for collection by your local authority. • Cloths and cleaning wipes also bagged and disposed of with PPE • Washable PPE placed in pillow case or dissolvable wash bag and washed at 60 degree wash

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	<p><i>Policy and updates will be:</i></p> <ul style="list-style-type: none"> • Published on clinic wall and a copy available on request • Provide as part of appointment confirmation emails • Available on your website
Information on how you have adapted practice to mitigate risk	<p><i>All information the practice has provided on covid-19 in practice</i></p> <ul style="list-style-type: none"> • Updating of website and via your social media accounts • Email to your patient base and all with appointments made. • Advise patients to monitor our site and social media platforms for updates in line with new Government guidance
Pre-appointment screening calls	<p><i>Pre-screening calls may take place</i></p> <ul style="list-style-type: none"> • No more than 24hrs before a scheduled appointment by the practitioner.
Information for patients displayed in the clinic	<p><i>Patient information posters that you have in clinic</i></p> <ul style="list-style-type: none"> • Door notices advising anyone with symptoms not to enter the building. • Notices on other public health measures e.g. hand washing/sanitising/Catch-it, bin it kill • Providing patients contact information posters as provided by IO
Other patient communications	<p><i>Patients still active on the database and in guidance with current data protection act will receive an email containing our policies and expectations during covid-19 measures</i></p> <p><i>Information will be provided on request via email and/or be available to download from our website.</i></p> <p><i>Patients will be provided with a mobile number to text or call should they develop symptoms subsequent to attending the practice in line with government guidelines.</i></p>