

Adapting practice: Infection 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.

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”

Table 1: We have assessed our practice for risks outlined and put in additional processes as detailed below

Undertaken a risk assessment	Risk assessment undertaken on 20/05/2020 and updated on 14/03/2022. This assessment will be reviewed as and when new guidance is provided by the government, the General Osteopathic Council or the Institute of Osteopathy.
Heightened cleaning regimes	All equipment will be cleaned on arrival at the patient's house and after treatment has concluded. Surfaces to be cleaned include (but are not limited to) bench and tub of aqueous cream. Where appropriate, dry needling equipment will be cleaned (dry needle packs, alcohol gel, sharps bin). Lauren Jardine advises the room where treatment takes place will be aerated for 15 minutes after the appointment. Where more than one household member has an appointment, aeration is not necessary. However, couch roll and PPE (apron and gloves) will be changed and the treatment couch will be wiped down with appropriate cleaning products.
Increased protection measures	Cashless payment is encouraged. Contactless card payment is preferred but bank details can be provided on request. Cash payments will only be accepted in exceptional circumstances (e.g. no access to the internet) Patients will be triaged both at time of booking (to ensure the patient has not knowingly been in contact with anyone with any COVID-19 symptoms for ten days prior to their appointment) and 24 hours (or less) before their appointment to check for COVID-19 symptoms. Patients will be risk assessed on a case-by-case basis based on the information they provide e.g. medical history, occupation and age. Patients will be asked to wash their hands using soap and water for a minimum of 20 seconds when Lauren arrives at their house. Lauren Jardine will ask to wash her hands using soap and running water for a minimum of 20 seconds on arrival at the patient's house. If this is not appropriate, she will wash her hands with alcohol gel. Lauren Jardine will dry her hands with her own disposable tissues, which will be disposed of in a double bagged rubbish bag and held for 72 hours prior to disposal, along with used PPE, couch roll and other used supplies. Patients are requested to wear a mask or face covering during their appointment. All non-essential items have been removed from use, including towels and fabric couch cover. Patients are asked to provide their own towels and pillows if required. Lauren Jardine is double vaccinated and boosted with recognised vaccinations against COVID-19.
Put in place distancing measures	Lauren Jardine will arrive at the appointment time. Where possible, the patient is asked to answer the door and then walk out of the way to clear a clear space for Lauren Jardine to pass through. Lauren Jardine will not touch anything when entering the home which she has not brought to the appointment e.g. light switches, walls or door handles. Where possible, patients are asked to maintain a two-metre distance from Lauren Jardine until she has donned PPE. Where this is not possible, it is asked that patients wear a mask or face covering.

	<p>Patients are asked to have the minimum number of people at home where possible at time of the appointment. Only the patient and Lauren should be in the room where treatment is taking place (unless a chaperone is required).</p> <p>Patients are asked to attend their appointment alone. If the patient is a child under the age of 16 years old or requests a chaperone, we ask only one chaperone to attend. This chaperone will be pre-screened and triaged prior to the appointment. If pre-screening is not done, the appointment will be rescheduled.</p>
Staff training	<p>Lauren Jardine has been trained in correct handwashing techniques, how to put on and remove PPE safely and how to effectively clean equipment.</p>
Providing remote/ telehealth consultations	<p>Remote consultations will continue to be available to patients and are encouraged prior to face-to-face appointments. In situations where a patient is unable to attend a face-to-face appointment due to self-isolation, illness or childcare issues, remote consultations will be offered via Zoom.</p> <p>Prior to face-to-face appointments, all patients will be screened via telephone or video call, as detailed above.</p>
	<p>(Document last updated: 14/03/2022)</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	When introduced
Pre-screening for risk before public/patients visit the clinic	<p>As patients with COVID-19 can be asymptomatic or take up to 14 days to display symptoms, it is important to pre-screen patients before booking a face-to-face appointment.</p> <p>Screening is also important as certain age groups and those with preexisting medical conditions may be at a higher risk of infection or progression of symptoms.</p>	<p>Patients will be screened prior to their appointment either via telephone, email or online consultation.</p> <p>Patients will be asked about COVID-19 symptoms (persistent cough, fever, loss of taste and/or smell) or known exposure to those with COVID-19 in the 10 days prior to their appointment. Those with symptoms, a positive test or having had exposure to someone with COVID-19 symptoms will be asked to postpone their appointment for 10 days. During this time, a remote consultation will be offered.</p> <p>Screening will also enable Lauren Jardine to assess the potential risk COVID-19 poses to the patient by discussing medical history, occupation, isolation status and age. This includes screening people who are shielding and those who are extremely clinically vulnerable (both the patient and their household members). Other respiratory conditions will also be considered, including hayfever and asthma.</p> <p>Screening will enable Lauren Jardine to assess your need for a face-to-face appointment. Where possible, a case history may be taken remotely to reduce the time needed in the face-to-face appointment.</p> <p>Screening also enables Lauren Jardine and the patient to discuss the risks of face-to-face consultations so the patient can provide informed consent. The patient will be informed of protocols for home visits such as cleaning protocols and how to social distance when opening the door.</p> <p>Remote consultations are still available to patients who do not wish to have a face-to-face appointment.</p>	<p>These protocols will be introduced one week prior to the first face to face appointment and will be ongoing.</p>
Protecting members of staff	<p>It is important to consider other staff members when risk assessing face to face appointments.</p>	<p>Lauren Jardine Osteopathy does not employ any staff.</p> <p>Lauren Jardine does not have any vulnerable members in her household.</p>	<p>(Not applicable)</p>

<p>Confirmed cases of COVID 19 amongst staff or patients?</p>	<p>Should Lauren Jardine, members of her household or patients develop symptoms of COVID-19, this could pose a risk to other patients seen in the time since, potentially exposing them to COVID-19 too.</p>	<p>Should Lauren Jardine or members of her household develop symptoms of COVID-19, all household members (including Lauren Jardine) will self-isolate until they have tested negative on two consecutive days using recognised lateral flow or polymerase chain reaction tests for COVID-19, as per government guidelines.</p> <p>Lauren Jardine and her household will be tested. Testing is most effective in the first three days of symptoms, so this is a priority. The affected person should contact 111 should symptoms not improve.</p> <p>Should Lauren Jardine or a household member develop symptoms, she will contact everyone she has treated in the preceding two days to inform them and their household.</p> <p>Should a patient contact Lauren Jardine to inform her that they or a household member have developed symptoms within two days of their appointment, the patient will be recommended to be tested as soon as possible and to contact 111 for advice. As Lauren Jardine will be following PHE advised cleaning and PPE protocols, there is no need to Lauren Jardine or anyone with indirect contact with the patient (i.e. anyone else with an appointment on the same day as the affected patient) to self-isolate. Out of courtesy however, Lauren Jardine will contact those who attended the clinic on the same day to make them aware and to advise them to monitor for symptoms of COVID-19.</p> <p>If symptoms are present</p> <p>If testing is positive, the affected person should self-isolate until they have tested negative on two consecutive days using recognised lateral flow or polymerase chain reaction tests for COVID-19.</p> <p>If testing is negative, the affected person can return to work if asymptomatic or risk assess if they are symptomatic. Testing can be re-requested up to five days from first symptoms.</p> <p>If testing is inconclusive but the affected person is symptomatic, they should self-isolate until they have tested negative on two consecutive days using recognised lateral flow or polymerase chain reaction tests for COVID-19.</p> <p>If symptoms are not present</p>	<p>These protocols will be introduced from the first face to face appointment.</p>
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Travel to and from the clinic	<p>Non-essential travel is now permitted but special care should be taken when travelling, particularly by public transport due to the airborne transmission of COVID-19.</p>	<p>It is recommended that patients who are shielding or high risk are seen as the first patient of the day.</p> <p>Lauren Jardine will be travelling to and from the clinic by her own car and will bring the minimum amount equipment with her.</p> <p>Lauren Jardine's steering wheel, gear stick and handbrake will be wiped with viricidal wipes before driving to a patient's home.</p>	<p>These protocols will be introduced from the first face to face appointment.</p>
Entering and exiting the building	<p>Due to the airborne transmission of COVID-19, it is important for people to be aware of social distancing when entering and exiting buildings.</p> <p>If social distancing is not possible, masks or face covers are recommended, as per government advice.</p>	<p>Where possible, the patient is asked to answer the door and then walk out of the way to clear a clear space for Lauren Jardine to pass through. The route from the front door to the room where treatment will take place should be clear.</p> <p>Lauren Jardine will not touch anything when entering or exiting the home which she has not brought to the appointment e.g. light switches, walls or door handles.</p> <p>Where possible, patients are asked to maintain a two-metre distance from Lauren Jardine until she has donned PPE. Where this is not possible, it is asked that patients wear a mask or face covering.</p> <p>Patients will be asked to wash their hands using soap and running water for a minimum of 20 seconds when Lauren arrives at their house.</p> <p>Lauren Jardine will ask to wash her hands using soap and running water for a minimum of 20 seconds on arrival at the patient's house. If this is not</p>	<p>These protocols will be introduced from the first face to face appointment.</p>

	No contact with surfaces outside of the treatment room is advised.	appropriate, she will wash her hands with alcohol gel. Lauren Jardine will dry her hands with her own disposable tissues, which will be disposed of in a double bagged rubbish bag and held for 72 hours prior to disposal, along with used PPE, couch roll and other used supplies. Patients will be advised to use appropriate cleaning products on areas contacted by Lauren Jardine after their appointment e.g. a seat.	
Social/physical distancing measures in place	Social distancing helps to reduce the transmission of COVID-19 and is highly encouraged with face-to-face appointments.	Where possible, patients are asked to maintain a two-metre distance from Lauren Jardine until she has donned PPE. Where this is not possible, it is asked that patients wear a mask or face covering.	These protocols will be introduced from the first face to face appointment.
Face to face consultations (in-clinic room)	Despite wearing PPE, the gold standard for reducing transmission is a two-metre distance between members of different households. This reduces the likelihood of transmission of COVID-19.	Where possible, a two-metre distance will be maintained between Lauren Jardine and the patient whilst completing the case history part of the appointment. Should a two-metre distance not be possible, it is asked that the patient wears a mask or face covering. There will be no contact between the two parties until Lauren Jardine dons PPE. Remote consultations may also be used for the case history part of the appointment. This could be considered if the patient (or a member of their household) is in a higher risk group. This option will be offered to every patient when booking their appointment and again at their pre-screening call the day before their appointment. Certain treatment techniques may need to be avoided until the risk reduces further in the general population. These include techniques that could be considered aerosol generating procedures, such as breathing techniques. This again will be considered on a case-by-case basis. Where possible, patients are requested to attend appointments alone. If a chaperone is present, we will only be able to have one extra person in the treatment room at a time. They will be required to sit at a two-metre distance from Lauren Jardine throughout or use a mask or face covering if this is not possible. Ideally the chaperone or family member would be a member of the patient's own household. This will be assessed on a case-by-case basis. All chaperones or family members will be pre-screened along	These protocols will be introduced from the first face to face appointment.

		with the patient where they will be informed of the risks of attending the appointment. They will be required to sign a consent form to agree to their understanding.	
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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	Due to the airborne nature of COVID-19, strict cleaning and disinfection protocols need to be adhered to. This will reduce the risk of cross-contamination.	<p>Treatment bench and aqueous cream, will be wiped down on arrival and before leaving the patient's house with either viricidal/min 60% alcohol cleaning wipes or spray.</p> <p>When used, dry needling equipment (needle packs, alcohol wipes and gel and sharps bin) will also be wiped down with viricidal/min 60% alcohol cleaning wipes or spray.</p> <p>Patients will be recommended to clean any surfaces Lauren Jardine has contacted with an appropriate cleaning product once she has left.</p> <p>All unnecessary linen has been removed, including the fabric couch cover.</p> <p>Patients are able to use their own towels and pillows should they wish.</p> <p>Lauren Jardine will provide her own disposable paper towels to dry her hands, which will be disposed of with her other clinical waste.</p> <p>Lauren Jardine will bring the minimum amount of equipment, which will be cleaned with viricidal spray between appointments.</p>	These protocols will be introduced from the first face to face appointment.
Aeration of rooms	Due to the airborne nature of COVID-19, aeration is recommended.	<p>Patients are advised to aerate the room used for treatment for 15 minutes following Lauren Jardine's exit.</p> <p>Patients are advised that fans are not be used due to the airborne nature of COVID-19.</p> <p>Should the patient have air conditioning in their home, it can only be used if the air is extracted from the room via an outside vent. If not, it cannot be used.</p>	These protocols will be introduced from the first face to face appointment.

Staff hand hygiene measures	COVID-19 is most effectively removed from surfaces by hand washing for 20 seconds with running water and soap.	Lauren Jardine will be washing her hands, forearms and elbows with soap and running water (or min 60% alcohol gel if cleaning facilities are not available) before donning and after doffing PPE after every patient for at least 20 seconds. She will also be doing this if she has contact with an object that has not be cleaned before the appointment. Lauren Jardine will be wearing nitrile gloves when treating all patients.	These protocols will be introduced from the first face to face appointment.
Respiratory and cough hygiene	Due to COVID-19 being an airborne pathogen, respiratory and cough hygiene is vital.	Lauren Jardine will be adhering to the 'catch it, bin it, kill it' protocol and requests that patients do the same. Lauren Jardine will dispose of any used tissues via waste disposal procedures detailed below. After coughing or sneezing, Lauren Jardine and patients will be required to wash their hands (and arms if necessary) with soap and water for 20 seconds.	These protocols will be introduced from the first face to face appointment.
Cleaning rota/regimes	Cleaning is vital to reduce COVID-19 transmission and will be strictly adhered to.	As Lauren Jardine is a sole practitioner, all cleaning duties will be completed by her in the presence of the patient if requested by the patient.	These protocols will be introduced from the first face to face appointment.

Table 3: Personal Protective Equipment

Clinicians will wear the following PPE	<p>Lauren Jardine will be wearing the following:</p> <ul style="list-style-type: none"> • Single use nitrile gloves, changed for each patient • Fluid resistant surgical mask type IIR, changed at a maximum every four hours, or when touched or handled, damaged, damp or difficult to breathe through • Single use plastic apron, changed for each patient <p>Eye protection may also be considered if aerosol generating procedures are being conducted. If used, these will be disinfected between patients.</p>
When will PPE be replaced	Gloves and aprons are single use and will be changed after each patient Masks will be used for a maximum of four hours. They will be changed before this time if they have been contaminated (i.e. touched or handled) or are damp, damaged or difficult to breathe through.
Patients will be asked to wear the following PPE	Due to the close nature of osteopathic treatment, patients are welcome to wear PPE should they feel comfortable doing so. It is advised that patients wear a mask or face covering, as recommended by the government. Those patients with respiratory symptoms e.g. asthma or hayfever will be offered a FRSM mask.

PPE disposal	<p>PPE, cleaning products, couch roll and tissues will be disposed of responsibly in the following way:</p> <ul style="list-style-type: none"> • Double bagged in a plastic bag. • Left for 72 hours in the car boot before removal. • After 72 hours, the bin bag will be placed with normal waste collection and removed by the local authority
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Table 4: Communicating with patients

Publishing updated clinic policy	This policy will be added to my website, a link of which will be included in appointment confirmation emails.
Information on how you have adapted practice to mitigate risk	<p>In summary of the above, all necessary steps have been taken to mitigate the potential transmission of COVID-19 during home visits. PPE will be worn and all contacted surfaces will be sufficiently cleaned between patients. The waste will then be disposed of safely and responsibly.</p> <p>A summary of this information will be added to social media platforms and my website, along with salient points pertinent to patients before their home visit.</p> <p>This information will be updated in line with government guidance as and when it is available.</p>
Pre-appointment screening calls	Pre appointment screening calls or emails will take place 24 hours before each appointment by Lauren Jardine. If there is no answer to the phone call, an email will be sent and in the case of no response, a further call will be made in the morning. If there is still no response, the appointment will have to be rescheduled to a later date, when pre-screening can be possible.
Other patient communications	<p>A summary of the above information will be sent in an email newsletter. This will alert patients to the clinic reopening, as well as what safety procedures are in place and what will be expected of them during home visits.</p> <p>This information will also be made available on social media platforms, via posts and stories on Instagram.</p> <p>Patients will be reminded across all platforms to contact Lauren Jardine should they develop symptoms.</p> <p>Patients will be sent reassurance across all platforms of the lengths gone to to help to protect them.</p>