

COVID-19 Guidance and Standard Operating Procedure

The purpose of this document is to provide a guidance for the following:

- To provide a safe environment for staff working at the clinic.
- To provide a safe environment for our patients.

This guidance is based on UK Government guidelines (2020)

<https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control>

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Patients

- Patients to be asked to wear mask or mouth covering.
- Patients to be emailed consent form – if patient does not have email address, we will post it to them and wait for patient to post it back to us before booking –
- Payments to be with card – contact less payments for all appointments. Card machine to be sanitised after use.
- No appointment cards – patient to make a note of their own appointment or we can email the details via Diary system/PPS Rushcliff.
- If patient would like to bring towel, they can –The Backbone Clinics will not be supplying.
- When patients enter the building they will be asked to wash their hands – sanitiser is also provided
- Practitioners will measure patient temperature prior to taking them into treatment room

Appointments

- Staggering appointment times so 15 minutes difference
- Changing lunch hours for practitioners
- There will be no Osteo Yoga classes on site – Zoom classes only.
- Triaging patients the day before – logged on PPS Rushcliff using new template
- 45 minute appointment slots in PPS Rushcliff – 30 minute appointment & 15 minute disinfecting time
- Patients to come just 2-3 minutes prior to their appointment and on their own (unless carer/chaperone required)
- Exercises will be emailed – Rehab My Patient to be used for exercise prescription and video call
- Insurance companies have allowed video/telephone consultations

Reception Area

- Not more than 2 patients in clinic waiting room at a time – if there is already a patient, other patients to wait outside.
- Sign will be placed on the front of the outside door asking anyone with Covid 19 symptoms NOT TO ENTER and to go home and call NHS 111
- 2 chairs to be placed in reception area
- All magazines, leaflets and water cooler to be removed
- Prop open as many doors as possible
- Discourage the use of toilet (for patients)

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Staff

- All staff (employed and self-employed) must ask themselves the same questions we are asking patients on the triage before coming into the clinic.
- Practitioners to wear different clothes whilst travelling to/from clinic and change into work clothes at the clinic
- Call Ayshe or Natalie if you or a family member becomes ill and to self-isolate for 14 days
- Staff temperature to be taken and noted prior to each shift.

Cleaning Handwashing protocol Hand hygiene is essential. Before performing hand hygiene:

- Ensure you expose forearms (bare below the elbows).
- Remove all hand and wrist jewellery.
- Ensure finger nails are clean, short and that artificial nails or nail products are not worn.
- Cover all cuts or abrasions with a waterproof dressing As we will be wearing an apron rather than a gown (better to be bare below the elbows), and it is known, or possible, that forearms have been exposed to respiratory secretions (for example cough droplets) or other body fluids, hand washing should be extended to include both forearms.
- Wash the forearms first and then wash the hands. Clean your hands regularly, for at least 20 seconds - hand hygiene includes either cleansing hands with soap and water or an alcohol-based hand rub, but soap and water is the best option.

Hand hygiene:

Practitioners and staff should apply WHO's My 5 Moments for Hand Hygiene approach (See Appendix 2) before:

- Touching a patient,
- Before any clean or aseptic procedure is performed,
- After exposure to body fluid,
- After touching a patient,
- After touching a patient's surroundings.

Hand hygiene includes

- Cleansing hands with an alcohol-based hand rub or with soap and water;
- Alcohol-based hand rubs are preferred if hands are not visibly soiled;
- Wash hands with soap and water when they are visibly soiled.

For specific information on handwashing, please see Appendix 2.

Staff Uniforms/Clothing

The appropriate use of PPE will protect staff uniforms from contamination in most circumstances. Uniforms should be transported home in a disposable plastic bag. This bag should be disposed of into the household waste stream.

Uniforms should be laundered:

- Separately from other household linen;
- In a load not more than half the machine capacity;
- At the maximum temperature the fabric can tolerate, then ironed or tumbled-dried. N.B. It is best practice to change into and out of uniforms at work, and not wear them when travelling. This only applies to staff who have patient contact.

Therapist Cleaning

- Cleaning after each patient - couch, chair, pillow, card machine and any other surface handled by patient.
- Clean keyboard before you start your session and once you complete.
- Cleaning treatment room floors with steam mop at the end of your shift.

Cleaning communal areas

Practitioner to use spray to disinfect following items in the morning and every 5 hours:

- Chairs in reception.
- Door handles Daily Cleaning
- The clinic must be thoroughly cleaned.
- Floor mopped using disinfectant.

Understanding Personal Protective Equipment (PPE)

All therapists must inform themselves of current best practice in the wearing of PPE.

PPE summary

Before undertaking any procedure, therapists will need to assess any likely exposure, and ensure PPE is worn. This must provide adequate protection against the risks associated with the procedure or task being undertaken. All therapists should be trained in the proper use of all PPE that they may be required to wear.

All PPE should be:

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- Located close to the point of use
- Stored to prevent contamination in a clean/dry area until required for use (expiry dates must be adhered to)
- Disposed of after use into the waste bin.

Practitioners should wear the following:

- Masks when appropriate
- Gloves
- Disposable plastic aprons
- Visor or safety glasses at therapists discretion Patients should have a mouth covering otherwise only provide advice whilst social distancing.

Materials needed for PPE

Mask

Fluid resistant surgical masks are adequate for most MSK consultations. Masks to be used per session.

Apron/ gown

Disposable plastic aprons must be worn to protect staff uniforms or clothes from contamination when providing direct patient care. The disposable aprons must be changed between patients.

Disposable gloves

Disposable gloves must be worn when providing direct patient care and when exposure to blood and/or other body fluids is anticipated/likely, including during equipment and environmental decontamination. Gloves must be changed immediately following the care episode or the task undertaken.

Eye protection/ face visor

Eye/face protection should be worn when there is a risk of contamination to the eyes from splashing of secretions (including respiratory secretions), blood, body fluids or secretions. An individual risk assessment should be carried out prior to/at the time of providing care. Regular corrective spectacles are not considered adequate eye protection.

Eye/face protection can be achieved by the use of any one of the following:

- Surgical mask with integrated visor;
- Full face shield/visor;
- Polycarbonate safety spectacles or equivalent.

Donning and doffing sequences:

The order in which you put on (donning) or remove (doffing) your PPE is essential for protecting yourself and preventing the spread of any possible contaminants or fluids. The following is the correct sequence for donning your PPE:

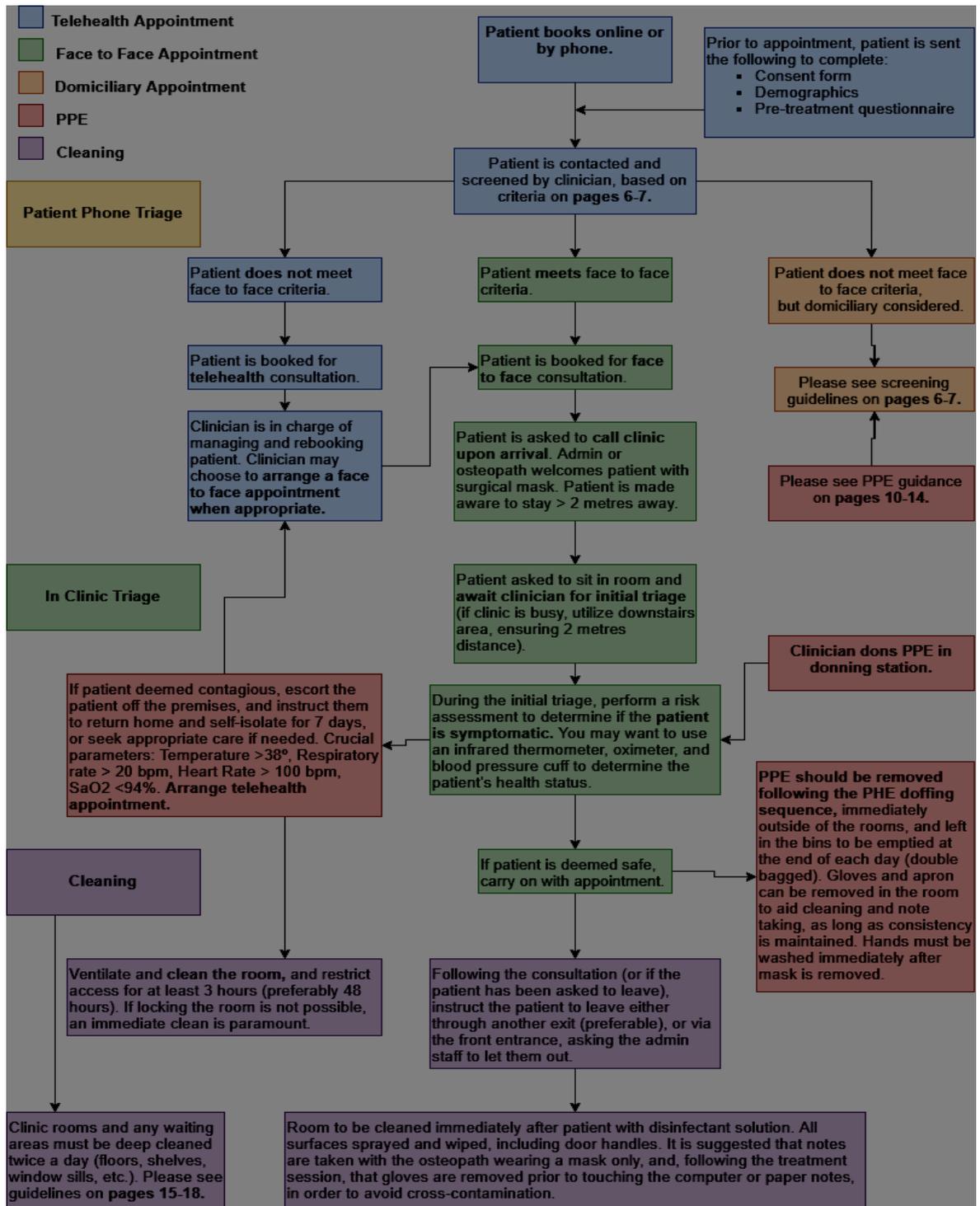
1. Apron
2. Mask
3. Safety glasses or face shields
4. Gloves

It is extremely important to take great care when removing and disposing of used PPE to avoid exposure to infection. It is important to practice before using these techniques in a clinical setting, ideally with a colleague to provide guidance and feedback.

The following is the correct sequence for doffing your PPE:

1. Gloves
2. Safety glasses or face shields
3. Mask
4. Gloves
5. Wash hands or use sanitiser after removing all PPE

Safe Guarding Policy:



Risk Assessment for Reducing risk of COVID-19:

Hazard/ Activity	Person at risk	Steps taken to Eliminate or Reduce the risk	Risk Rating	Comments/ Actions (By Who / When)
Booking Arrangements	Patients, Practitioners, Call Reception team	<ul style="list-style-type: none"> All patients and staff to be informed that they must not attend work or visit the clinic if they feel unwell or have any Covid 19 symptoms. All patients triaged at time of booking. 	High	The list of symptoms is not exhaustive. Best reception team and practitioners.
Patient Access to Clinic	Patients, Practitioners, Staff	<ul style="list-style-type: none"> Access and exit routes to the clinic are clearly defined. All visitors and staff to maintain a safe distance (2m) between themselves. Visitors to be informed of social distancing arrangements before arrival. No walk-ins – all appointments to be pre-booked 	Low-Med	Best reception team and practitioners.
Waiting Room	Room Patients, Practitioners, Staff	<ul style="list-style-type: none"> Only 2 people to be in the waiting room at a time, if waiting room already has 2 people – patient to wait outside the clinic. Patient to wear face mask/covering whilst in reception. 	Low-Med	Practitioners, patients Delivery drivers to wear face masks/coverings and maintain social distancing.
Cleaning and Hygiene	Patients, Practitioners,	<ul style="list-style-type: none"> Cleaner to sanitise all surfaces in a weekly deep clean. 	Low-Med	Cleaner, Practitioners.

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		<ul style="list-style-type: none"> • Practitioners to sanitise all surfaces in treatment area between patients and at end of shift. • Practitioners to sanitise all waiting room surfaces – door handles, chairs, table, and card machine at regular intervals. • Hand sanitiser to be available to staff and visitors at all times. Staff and visitors to be encouraged to use it. 		Ensure sufficient stock of disinfectant and antiseptic wipes are in stock for daily use.
Toilets	Patients, Practitioners	<ul style="list-style-type: none"> • Toilets should be used only be used by staff. • All surfaces handled to be sanitised after use by the staff using the toilet. • Paper towels available • Soap is available. Low Patients to be asked to limit use of toilet and be informed when booking appointment. 	Low-Med	Cleaner, Practitioners. Poster on toilet stopping it's use
Use of PPE	PPE Patients, Practitioners	<ul style="list-style-type: none"> • Government guidelines will be followed for use of PPE – visor or safety glasses, masks, gloves and aprons. Low-Med Ensure sufficient stock of relevant PPE is in place. 	Low-Med	Practitioners Ensure sufficient stock of relevant PPE is in place.
Treatment / Therapy	Patients, Practitioners	<ul style="list-style-type: none"> • Patient screened over phone the day before. • Social distancing between practitioner chair and patient chair • The practitioner will visually check and question each patient as to their general health before treatment commences and take their temperature. <p>If any doubt about good health then cancel planned hands on treatment. This applies regardless of pain or discomfort the patient is experiencing for their treatment.</p>	High	Practitioners Ensure sufficient stock of relevant PPE is in place.

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		<ul style="list-style-type: none"> • Practitioner will thoroughly wash hands before and after every patient. • Practitioner will thoroughly sanitise every surface that has been touched during a treatment before and after every patient. • Practitioner will follow professional body guidelines for treatment protocol. • Practitioner to modify treatment to avoid any aerosol generating procedures. • PPE to be used during treatment will include face mask, visor, plastic apron, disposable gloves • All patients to wear face masks before they enter the treatment room and during treatment. If patient does not have a face mask, no hands on treatment will be conducted. • A daily clean of the treatment room will be undertaken. • Suitable bins will be provided for disposal of hazardous waste – i.e. used masks, gowns, protective clothing 		
Post Treatment	Patients, Practitioners, Staff	<ul style="list-style-type: none"> • Clearly maintain social distancing during payment for treatment between others in waiting room. 	Low-Med	Practitioners
Confirmed cases of COVID 19 amongst staff or patients	All Staff	<ul style="list-style-type: none"> • If a patient experiences symptoms within 2/3 days of visiting the clinic, any staff with direct contact to that individual should self-isolate. • 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). 	Low-Med	<p>All Staff</p> <p>Staff should always maintain social distancing with each other.</p>

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		<ul style="list-style-type: none"> • If a member of staff experiences symptoms and they have had direct contact with patients, notify patients to self-isolate as per government guidelines. 		
Cleaning chemicals	All Staff Chemical splashes, fumes	<ul style="list-style-type: none"> • All staff to be aware of COSHH arrangements and substance use instructions when using acidic, corrosive or bleach substances. • Instructions on bottles must be strictly adhered to. 	Low-Med	Cleaner & Practitioners Stronger chemicals than usual may be in use.
Lone Working	All Staff Personal injury, abuse	<ul style="list-style-type: none"> • Be aware of procedures to deal with threats of violence or aggression. • Lone working procedures are in place. • Do not undertake any hazardous tasks when working alone. 	Low	Practitioners Lock front door, CCTV in reception and panic buttons in treatment rooms.
Lifting of Objects	All Staff Back injury, physical strain	<ul style="list-style-type: none"> • Carry out simple manual handling assessment. 	Low-Med	Unusually large deliveries of PPE etc could lead to injury if handled carelessly.
First Aid Kits	All Staff and patient Injury treatment	<ul style="list-style-type: none"> • There are sufficient first aid kits in the clinic. • The kits are regularly checked by a nominated person to ensure they remain adequately stocked. • There must be no extra items in the first aid kits i.e. Aspirin, Paracetamol, creams etc. 	Low	Practitioners
Information for patients		<ul style="list-style-type: none"> • Updated patients on how we have adapted the guidelines and new processes by sending information via: -News Letter -Social media -Triage process before face to face appointment 		

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		<p>-Appointment Reminder will have link to website with detailed information</p> <ul style="list-style-type: none"> • Door notices advising anyone with symptoms not to enter the clinic. • Notices on other public health measures including hand wash and use of hand gel. • Website with a specific Covid-19 page Newsletter, mailshot, social media and adding information to our website. 		

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Appendix 1: Training resources

The following table contains the most up to date links to training resources, and suggested hours needed to complete them.

Please USE and KEEP this resource to help your return as a clinician. Please also sign and date each topic to show that you have completed the necessary modules before returning to work.

Importance	Subject	Resources	Time	Sign/Date
Essential Learning	Online Triage and Consultations	Moving to online triage and consultations, NHS England Remote Total Triage Model in General Practice, HEE	2 hours	
	IPC	NHS Coronavirus Infection Control COVID-19: Infection Prevention and Control Guidelines	2 hours	
	PPE	Donning of PPE, Public Health England Removal and Disposal of PPE, Public Health England Public Health England PPE Guidance	3 hours	

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