



RISK	POTENTIAL RISKS
Pre-attendance at clinic	 Are you assured you are able to return to work by the Government and your professional association (PA)? Have you checked your insurance (directly or via PA information)? Home visits and office visits are not encouraged because the environment is not controllable, however, see Mobile Visit section of this document if this is a necessity Have you sourced PPE and cleaning products? Have you sent Covid-19 screening document to client prior to session (within 48 hours or less)? Advise client that their details may be released to NHS Test and Trace for contact tracing if necessary DOCUMENT DECISIONS and FILE (either hard copy or electronically, revisit and update regularly) ACTION POINTS:
	1. Source PPE* and cleaning products
Client attendance at clinic	 Where do you want your client to wait before their appointment? Stay in their car until you text / phone them to say you are ready for them? Plan for those arriving by public transport or if the weather is bad? Where will an escort sit/wait? Key workers to change out of work clothing and shower before coming to their appointment, especially NHS frontline staff Client to arrive as close as possible to appointment time Client to leave coats / bags in car if possible (out of sight in boot) Clients to come alone to their appointment, unless they require a guardian/chaperone by law If chaperone/guardian is present, they must also be screened Therapist to don preferred PPE* as per NHS instructions (ensure hand washing to elbows) NB. hand washing is always preferential to using gel. Client to don face mask/covering (discretionary *) if they have one, otherwise therapist to supply upon entry Take client's temperature** (discretionary *) and carry out a verbal screening before entering clinic. Client to sanitise hands before entry





	DOCUMENT DECISIONS and FILE (either hard copy or electronically, revisit and update regularly) ACTION POINTS: 1. Communicate new session regime to clients via email, posted letter, phone call before you return to work 2. Familiarise self with donning and doffing PPE (WHO website) 3. Source face masks for therapists and clients to use if required* 4. Consider printing posters for donning and doffing PPE for clinic walls (see links above) 5. Obtain contactless thermometer (, document temperature on client notes
Client entrance to premises	 Who will greet the client? If it is the therapist, then a sign should be put outside of the door reminding clients to wait until their appointment time and that you will open the door for them If the client is going to open the door then the bell / door handle will need cleaning before and after session If clients have to use stairs or a lift, all touchable surfaces will need to be sanitised before and after each session You should advise the client where they should go once in the building. Hand washing facilities (preferable) or sanitising liquid should be supplied for the client's use upon arrival and exit. Therapist should open and close doors for clients throughout building Footwear should be removed outside of clinic room or shoe covers supplied
	 DOCUMENT DECISIONS and FILE (either hard copy or electronically, revisit and update regularly) ACTION POINTS: 1. Make weather-proof or laminated signs for front door advising clients of opening / entry procedure and where they should then go once inside the building 2. Place hand sanitising products near door 3. Source shoe coverings if required 4. Communicate changes to clients





Reception desk	 If you have a reception area you have a duty of care to the <u>receptionist</u>. Consider erecting a Perspex screen to protect staff from mucus spray when clients speak (or coughs/sneezes etc.) Ensure social distancing between staff members on the premises Carry out staff training to ensure all staff comply with risk assessment actions Receptionists will need face mask and gloves if touching shared paperwork and money. The screen will need to be washed daily and a fresh face mask / covering will be required as necessary
	DOCUMENT DECISIONS and FILE (either hard copy or electronically, revisit and update regularly)
	ACTION POINT: 1. Source Perspex screen, face masks / coverings and gloves for reception staff 2. Training for other staff as required 3. Communicate changes to clients
Waiting area	 If you are one of a group of therapists working within a clinic, appointment scheduling and the waiting room will need to be organised to ensure social distancing No sharing of clinic rooms between therapists in one day Magazines, books, plants, flowers and bric-a-brac should be removed from the waiting area All soft furnishings, rugs etc., should be removed. Chairs should be plastic or metal in order to sanitise regularly, but fabric chairs need to be covered with couch roll which is replaced between clients. Maybe clients can simply stand, and all chairs are removed DOCUMENT DECISIONS and FILE (either hard copy or electronically, revisit and update regularly)
	ACTION POINTS: 1. Organise diary to reflect social isolation 2. Clear waiting room/reception area of superfluous items 3. Organise cleaning routine/replacement of couch roll schedule etc 4. Communicate changes to clients





Bathroom facilities	 If a bathroom is available for client use, it should be thoroughly cleaned after each client. Pump-action soap should be supplied. Use paper towels instead of fabric but otherwise, the towel must be replaced between each client. A footoperated bin should be available, so that the bin does not have to be touched. A bin liner should be used. If anybody else uses the bathroom between clients arriving and leaving, bathroom must be cleaned, and towel replaced where necessary
	DOCUMENT DECISIONS and FILE (either hard copy or electronically, revisit and update regularly) ACTION POINTS: 1. Make signs for toilet/bathroom door advising clients of new cleaning procedures. 2. Create daily cleaning record sheet 3. Communicate changes to clients
Surface areas including desk, retail space and walls in clinic/reception	 All surfaces must be kept clear of clutter, books etc., in order to disinfect effectively and not harbour pathogens Clients' notes should be filed immediately (if paper) to prevent contamination Retail testers must not be available Posters, wall hangings, fliers, business cards etc., should be removed COSHH risk assessment of cleaning products should be carried out. https://www.hse.gov.uk/pubns/indg136.pdf
	DOCUMENT DECISIONS and FILE (either hard copy or electronically, revisit and update regularly) ACTION POINTS: 1. Clear unnecessary clutter from work environment 2. Prioritise filing 3. Remove superfluous items from all areas 4. Carry out COSHH risk assessment
Client seating	 Ideally plastic or metal chairs should be used in the clinic so they can be sterilised between appointments either with detergent or antimicrobial products If this is not possible, couch roll should cover the chair which is replaced following each client DOCUMENT DECISIONS and FILE (either hard copy or electronically, revisit and update regularly)





	ACTION POINT: 1. Consider suitability of practise furniture 2. Ensure adequate supply of couch roll 3. Communicate changes to clients
Storage of client's belongings	 Where will clients put their belongings and clothes? Where will the therapist store their belongings? Containers and chair must be cleaned after each client and/or couch roll disposed of appropriately and replaced DOCUMENT DECISIONS and FILE (either hard copy or electronically, revisit and update regularly) ACTION POINT: Source storage containers, preferably covered Communicate changes to clients
Massage couch, linen, equipment	 What will you use to cover the couch (sheets, couch cover)? Whichever, they must be replaced after each client. To remove, the linen must be folded into the centre, with as little disturbance as possible and placed into a lidded container until washing. Sanitise couch after each use, especially around the face cradle, following product instructions, especially regarding time for effectiveness (this can be up to ten minutes) Any couch roll used should be changed after each client Pillows should have a water-resistant non-porous cover on them which can be wiped down after each client. Supports should have a water-resistance non-porous cover and be sterilised after use Fresh linen must be used for each client Consider floor covering; hard floors must be washed after each client, rugs removed, if carpeted consider using a carpet protector runner roll (to be mopped between clients) DOCUMENT DECISIONS and FILE (either hard copy or electronically, revisit and update regularly)





	ACTION POINT: 1. Source sufficient linen, couch roll, water-resistant pillow covers/supports 2. Source storage for dirty linen 3. Familiarise self with cleaning product instructions 4. Communicate changes to clients
Following attendance	 If PPE* was used, it must be removed as per Public Health England instructions and placed into a foot operated, lined, lidded bin. All couch roll and waste product must also be placed into a foot operated, lined, lidded bin. Sealed bin contents must be stored for 72 hours before putting into the non-recyclable household bin. Where will this be stored? All materials for laundry should be washed at 60°+ or as hot as product allows. A face mask and gloves must be worn when putting washing into machine with as little disturbance as possible. Sanitise container / laundry basket If you are informed that someone you have been in contact with has Covid-19, you must self-isolate for 14 days. If you go on to develop symptoms, you can order an NHS test https://www.nhs.uk/conditions/coronavirus-covid-19/ or call 119. If you test positive Test and Trace will be in contact to advise. If you test negative, you can return to work providing you do not have another contagious condition. DOCUMENT DECISIONS and FILE (either hard copy or electronically, revisit and update regularly)
	ACTION POINT: 1. Familiarise self with donning and doffing PPE 2. Purchase adequate supply of bin liners / black bags 3. Protect carpets 4. Communicate changes to clients
Cleansing of premises	 Ensure full cleanse of premises between clients (as listed above) including equipment, materials, doors, bathrooms, reception, furniture, flooring etc. Allow time to reset the couch and replace any couch roll used. We suggest a minimum of 30 mins needs to be left between clients to allow for this Ensure you are familiar with instructions for all cleaning products





	DOCUMENT DECISIONS and FILE (either hard copy or electronically, revisit and update regularly)
	ACTION POINT: 1. Carry out a trial run of cleaning process to ensure adequate timing between clients 2. Ensure appointment schedule allows enough time for cleaning/resetting clinic 3. Carry out a COSHH assessment of cleaning products
Ventilating clinic/practice room	Ensure practice room is well ventilated between clients. Open windows whilst cleaning. Use an extractor fan which must vent to the outside
100111	Do <u>NOT</u> use air conditioning that recirculates air into the same or another room
	DOCUMENT DECISIONS and FILE (either hard copy or electronically, revisit and update regularly)
	ACTION POINT:
	1. Consult with air conditioning manufacturer if unsure of suitability 1. Consult with air conditioning manufacturer if unsure of suitability
Therapist's hygiene protocols	Jewellery should be removed before work, hair should be tied back
	Therapist to <u>wash hands</u> up to elbows with soap and warm water (for at least 20 seconds) on entering clinic
	• If using public transport or travelling from outside clinic, therapist should change into work uniform at clinic. Store travel clothing in a storage box / bin liner in another room. Wash hands again
	Therapist should put on preferred PPE before client arrives and wear at all times when dealing with the client
	Drinking water only supplied in case of emergency, client to provide own
	Therapist to wash hands up to elbows with soap and warm water (for at least 20 seconds) after each client
	 Therapist to wash hands up to elbows with soap and warm water (for at least 20 seconds) after cleaning practice room between clients
	Therapist to put street clothes back on before leaving for home
	If working from home remove all work clothes after cleaning practice room
	All work clothes to be treated as clinic linen (see laundry procedure above) and stored accordingly until washed





	DOCUMENT HYGIENE PROTOCOLS and FILE (either hard copy or electronically, revisit and update regularly)
	ACTION POINT: 1. Source container for personal belongings
Use of massage medium	 Ensure use of spatula to prevent double dipping when using waxes or creams to prevent cross contamination Use pump dispenser for oils/lotions DOCUMENT PROTOCOLS and FILE (either hard copy or electronically, revisit and update regularly) ACTION POINT: Source spatulas and pump dispensers
Personal Care	 Take own temperature and screen self for symptoms morning and lunchtime (discretionary**) If changing uniform between clients rather than wearing a PPE apron, take care when lifting top overhead to protect face; button up tops/shirts may be preferable Consider if wearing scrubs could be beneficial Ensure personal care of hands given the extra hand washing and wearing of gloves DOCUMENT PERSONAL CARE ACTIONS (either hard copy or electronically, revisit and update regularly) ACTION POINT: Obtain contactless thermometer Source adequate supply of uniforms/PPE Source hand moisturiser if necessary





Client Consultation	 Face-to-face consultations should be minimal, instead, carry out in advance via telephone or video conferencing New clients could be sent consultation documents and declaration forms via email prior to appointment, to be completed and returned via emailed Existing clients should be contacted prior to their appointment to check on their health, follow up previous therapies etc., and complete a Covid-19 declaration form. Note health issues and allergies to assess suitability for session in light of PPE and Covid-19 contra-indications. Reconsider cancellation fees should someone cancel at short notice due to Covid-19 symptoms Ask clients to bring their own pen to sign forms, or dispose of pen following use Aftercare advice can be sent electronically following session to minimise face to face time DOCUMENT NEW PROCEDURES and FILE (either hard copy or electronically, revisit and update regularly) ACTION POINT: Prepare new consultation documents or amend existing documents to reflect Covid-19 screening and declaration Amend Cancellation Policy Communicate changes to clients
Payment	 Consider using direct bank transfer or other electronic methods to take payment prior to each session Use contactless payment methods Cash payments should be placed in envelopes and when unsealing, wear gloves and mask Electronic card machines should be sanitised after use
	DOCUMENT NEW PROCEDURES and FILE (either hard copy or electronically, revisit and update regularly)
	ACTION POINT: 1. Source contactless payment method 2. Provide bank details to clients 3. Obtain envelopes for collecting cash 4. Communicate changes to clients





Covid-19 specific contraindications

People with the following health issues are considered a Covid-19 RED FLAG and may require full PPE* for the session or GP consent to treat (consider the impact on GPs time in this situation)

- Those shielding vulnerable family members, front-line NHS staff, carers and those who have been in contact with anyone suffering from Covid-19
- Anyone currently receiving treatment for cancer, suffering lung conditions or is post-operative
- Experiencing post Covid-19 circulatory complications (deep vein thrombosis, micro-embolisms, stroke symptoms or pulmonary embolism). THIS IS AN IMPORTANT CONSIDERATION AS POST COVID BLOOD COAGULATION PROBLEMS CAN BE EXPERIENCED
- Aged 70 years or above
- Pregnancy
- Heart and/or respiratory conditions
- Supressed immune systems
- Diabetes
- BMI over 39

Assess each client using professional judgement and clinical reasoning to decide if session is appropriate. If you choose to go ahead be extremely strict with hygiene and document justification. **NB:** You are under no obligation to carry out session and if in doubt DON'T!

DOCUMENT NEW PROCEDURES and FILE (either hard copy or electronically, revisit and update regularly)

ACTION POINT:

- 1. Prepare documentation to evidence assessment of contra-indications
- 2. Make client aware of new contra-indications/cautions





Mobile Visits

NB. ALL other risk assessment actions listed above should be carried out (where applicable), including Covid-19 screening of client before arrival at venue. You must not enter a home where a household member is shielding, self-isolating or clinically vulnerable. Further information can be obtained from this website Working in Other People's Homes PPE* is discretionary, but we strongly advise you wear this.

- Consider purchasing a car boot liner that can be sterilised
- Kit bag should be hard shell or made from a wipeable fabric
- Ensure you will not meet other household members and there is no one else in the clinic area whilst you are there

Use of client's bathroom

- Where possible, this should be avoided
- Consider providing toilet tissue for your own use
- Take sealable bag for used PPE and fresh PPE (in a sterile bag) to the bathroom
- Keep on all PPE until you get into the bathroom. Remove gloves and apron and wash hands
- Use toilet, ensuring you close the toilet lid before flushing
- Wash hands and remove mask. Once again, wash hands and replace apron, mask and gloves

On arrival at venue

- Don mask and gloves. Alert the client that you have arrived. When they come to the door, give them a mask to wear and take their temperature, verbally screen for Covid-19 symptoms
- Take ALL required equipment to the door of the venue without entering (to minimise number of times entering and leaving the venue)
- Only take bedding into the venue that will be used during the appointment (unused bedding must not be subsequently used if taken into the venue, but must be placed into laundry container for washing)
- Don shoe coverings and take equipment into the clinic room and set up ready for session without the client in the room. Touch as few surfaces/client belongings as possible including seating.
- Sanitise all equipment as the clinic area is set up. Place all consumables onto a couch roll covered surface.
- Remove mask and gloves used for setting up, placing in a sealable bag and into the larger sealable bag for removal from the venue
- Don fresh mask, apron and gloves and invite the client in





Following session

- Place all waste material into a sealable bag, and into further sealable refuse bag
- Place all laundry in sealable bag and place in lidded container to store in car
- Sterilise all equipment before placing outside of the venue
- Once ALL equipment is outside, bid farewell to client. Remove PPE placing in a sealable bag which is placed in larger sealable refuse bag for later disposal
- Put all equipment in the car

At the end of the clinic day

- Seal bag containing used PPE, date and store for 72 hours, place in non-recyclable waste bin
- Launder daily. Don gloves and mask, carefully put used linen in the washing machine with as little disturbance of fabric as possible
- Where possible store massage equipment in the car, rather than bringing in and out of your home

DOCUMENT NEW PROCEDURES and FILE (either hard copy or electronically, revisit and update regularly)

ACTION POINTS:

- 1. Ensure adequate supply of PPE (including shoe covers)
- 2. Source bin bags/sealable bags for used PPE/waste and laundry
- 3. Source car boot liner
- 4. Source laundry container
- 5. Communicate changes to clients

Continued....





*PPE

PPE recommendations from the SMA are advisory not mandatory, please see full details on <u>FAQ</u>'s on SMA website. However, we strongly recommend you use PPE and take your own, and the client's temperature as other healthcare professionals in similar fields are doing to demonstrate due diligence, build confidence and trust with clients and to show professionalism. Recommendations are:

The following quotes are in the government guidelines suggesting these could be the minimum requirement, although the wearing of a visor is dependent upon the period of time spent in close proximity to a person's face, mouth and nose.

"VISOR: This should take the form of a clear visor that covers the face and provides a barrier between the wearer and the client from respiratory droplets caused by sneezing, coughing or speaking. Visors must fit the user and be worn properly. It should cover the forehead, extend below the chin, and wrap around the side of the face.

GLOVES: Unless crucial for the treatment, change practices to avoid any potential skin to skin contact or use gloves where possible."

However, we would also suggest that in order to ensure safety for yourselves and your clients, that further PPE (i.e. apron and IIR mask) along with the client wearing a mask/face covering too, may be more appropriate in order to mitigate risk. We feel this provides better protection for yourself and clients, is aligned to medical advice and instils confidence in you from the client.

We also suggest with vulnerable or higher risk clients that full PPE is worn.

**Temperature taking (Discretionary)

There is much debate about the worth of taking a client's temperature with regard to whether or not the results are relevant. A hot day, rushing to get to clinic etc. can increase a client's temperature and also there is a question about the efficacy of contactless thermometers. The SMA feel it provides some indication of possible illness and once again, it may instil confidence in the therapist from the client's perspective. If a client's temperature is raised but screening results are negative, maybe give the client time to sit quietly and cool down. Be aware of their potential to contaminate if they subsequently do have Covid-19 and have entered your premises.