



## Considerations for Infection prevention and control and personal protective equipment in osteopathic practice.

### Carnes D. 11.5.20

These considerations are not exhaustive and may be subject to change as more information about COVID-19 emerges.

#### Stage 1: General considerations for practice

1. Personal risk assessment, consider your current state of health and vulnerability and the consequences of being infected
2. Risk to others, consider family, friends and clinical personnel who may work in the same practice
3. Financial risks, consider pressures against risks that cannot be mitigated against from self and others, financial viability with less volume and capacity
4. Access to and availability of PPE necessary to practice
5. Clinical environment, can it be adapted?

#### Stage 2: Preparation and pre-planning

1. Adjusting and adapting the clinical setting for social distancing (for example having 2 metres between chairs in the waiting room or removing chairs altogether, distance in the consultation room for the non-touch elements of care)
2. Reducing contamination opportunities, hand washing and hand sanitising facilities, removing non-essential paraphernalia (pens, magazines, toys). Leaving doors open or sanitiser wipes and paper for touching door handles and taps
3. Providing information to patients about new clinical hygiene protocols and what to expect, for example:

- Pre-screening health questions 12 hours or less prior to consultation
- Turn up on time so there is no waiting
- Asking the patient to wash their hands when entering and leaving the clinic
- Requesting that the patient wears a mask
- Warn the patient about your PPE attire and why the changes are in place
- Ask the patient not to touch anything unnecessarily

- Remind patients not to touch their face

4. Establishing a non-cash payment method

5. Purchasing appropriate personal protective equipment, this may include cloth face masks, fluid resistant face masks, particle filtration masks, eye protection, water-resistant aprons and or gowns.

6. Role play a patient flow scenario to establish new procedures and a daily plan to protect yourself, your patients and others from cross contamination.

7. Purchasing suitable cleaning products, disinfectants and detergents

8. Consider methods and procedures for clinical waste disposal and or transporting and washing linen

9. If shared premises consider impact of the wider clinical setting (shared corridors, security systems etc)

10. Online training for self and clinical personnel infection control and prevention, doffing and donning PPE and disposal

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/877658/Quick\\_guide\\_to\\_donning\\_doffing\\_standard\\_PPE\\_health\\_and\\_social\\_care\\_poster\\_.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/877658/Quick_guide_to_donning_doffing_standard_PPE_health_and_social_care_poster_.pdf)

11. Consider risks and safety and protection of any personnel working in the clinical setting.

### **Stage 3 Everyday practice**

#### **Patient management considerations**

1. Pre-screening questions prior to a consultation, questions re symptoms and potential exposure. Consider your own personal 'cut-off' points for accepting, delaying or deferring patient consultations. Be clear with patients prior to the consultation if you are limiting your practice to exclude for example elderly, vulnerable and babies.

You may consider a 2 tier IPC and PPE for those you regard as high and low risk patients or for consultations and treatment regimens that you consider high or low risk.

2. Consider whether you will ask all patients to wear a mask throughout the consultation or just those with respiratory symptoms or when you will administer any techniques that may stimulate a cough or deep expiration.

3. Levels of undress required, placing and storage of personal items

4. Coming alone where possible and appropriate (special circumstances for the vulnerable or children)

#### **Your personal safety considerations.**

1. Limit physical contact, pre determine your boundaries and consider the range of techniques you are going to administer

2. Hand hygiene and wearing gloves (gloves will protect the wearer from pathogens through broken skin and wounds)

3. Re-usable equipment regimens
4. Available washing facilities
5. Personal mask use, for example throughout the consultation or just within 2 metres or sessional.
6. Your clothing and coverings

#### **Cleaning and hygiene**

1. 20 minutes aeration of rooms between patients (without anyone present)
2. Cleaning all surfaces and utensils, in the consultation room, waiting room, door handles and toilets / wash rooms
3. Hand washing routines before, during and after. Use of gloves and disposing of gloves between patients (current advice is that all patient handling requires gloves)
4. Availability of paper towels and tissues.
5. Factor in aeration and cleaning time between patients
6. Avoid cross over between patients

#### **Patient assessment: Standard pre-screening criteria for COVID-19**

- fever  $\geq 37.8^{\circ}\text{C}$

and at least one of the following which must be of acute onset:

- persistent cough (with or without sputum),
- hoarseness,
- nasal discharge or congestion,
- shortness of breath,
- sore throat,
- wheezing,
- sneezing.

Direct contact with a known case of COVID-19 within 14 days

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/873496/COVID-19\\_flow\\_chart.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/873496/COVID-19_flow_chart.pdf)

**It is NOT advised to treat a person who has been exposed to the virus within 14 days or has suspected symptoms of COVID 19 or has COVID 19 recommendations are to self-isolate.**

**Suggested minimum PPE recommended (PHE April 2020)**

**1. For direct patient care assessing an individual that is not currently a possible or confirmed case (within 2 metre zone) recommendations are to wear:**

- Gloves
- Disposable plastic apron
- Fluid resistant face mask
- Eye / face protection (risk assess for sessional or single use)
- Full cleaning procedure and aeration (but guidance is not very clear on aeration) after consultation

**2. If performing an aerosol generating procedure (AGP) on a patient that is not a possible or confirmed case of COVID 19 recommendations are to wear (an AGP is not clear):**

- Gloves
- Fluid repellent gown
- Filtering face piece respirator mask
- Eye/face protection
- Full cleaning procedure and aeration after consultation