



University College
of Osteopathy

UCO Clinical Services: Clinical Policy and Guidance - following COVID-19

UCO Clinic: Clinical Policy and Guidance— following COVID-19

Version number	Dates produced and approved (include committee)	Reason for production/ revision	Author	Location(s)	Proposed next review date and approval required
V1.0	June 2020 Earlier version reviewed at SMT June 2020	Change to standard practice following COVID-19	Head of Clinical Practice	SharePoint	This policy will be reviewed as part of our ongoing risk assessment as we train staff, receive feedback and review initial experience of opening the clinic
V1.1	October 2020	Additional information added	Deputy Vice Chancellor (Research)	SharePoint and UCO main Website	This policy will be reviewed as part of our ongoing risk assessment as we receive feedback and review experience of ongoing clinical operations
V1.1	November 2020	Added information – peer to peer practice and National restrictions from 4/11/20	Deputy Vice Chancellor (Research)	SharePoint and UCO main Website	This policy will be reviewed as part of our ongoing risk assessment as we receive feedback and review experience of ongoing clinical operations
V1.2	01 Dec 2020	Relocation of clinical services to BHS	DVC (Research)/Head of Clinical Practice	SharePoint and UCO main Website	
Equality Impact					
Positive equality impact (i.e. the policy/procedure/guideline significantly reduces inequalities)					

Neutral equality impact (i.e. no significant effect)	X
Negative equality impact (i.e. increasing inequalities)	
If you have any feedback or suggestions for enhancing this policy, please email your comments to: quality@uco.ac.uk	

WORKING DOCUMENT

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UCO Clinic Operational Plan – following COVID-19

1. SCOPE OF OPERATIONAL PLAN

This policy and guidance has been developed following the COVID-19 pandemic and the necessary and significant changes that will be needed in educational and clinical practice to ensure the safety of practitioners, patients and other staff and stakeholders. This document should be read in conjunction with the overarching document, Use of BHS (clinical and teaching): Policy and Guidance following COVID-19.

Our understanding of this situation will continue to evolve and be informed by guidance from government, regulators and professional organisations. As such, this document will be updated as new guidance is received and in response to feedback and our experience of clinical operations. Notably additional National Restrictions are in place from November 5th 2020 to December 2nd 2020. The Guidance can be viewed here:

<https://www.gov.uk/guidance/new-national-restrictions-from-5-november>

The UCO has undertaken risk assessments and has a COVID-19 Outbreak Management plan. Both are available on UCO SharePoint at <https://bso.sharepoint.com/sites/Covid-19> and on the UCO main website <https://www.uco.ac.uk/>. These have been used to inform this guidance and policy. We have reviewed practices and procedures in response to COVID-19 and current guidance. The UCO have taken the necessary steps to reduce and mitigate risk to create a COVID-19 secure working, studying and clinical environment. Fundamental to our creation of a safe environment is that everyone at the UCO takes responsibility to follow this guidance effectively.

This operational policy, as part of the Use of BHS Policy and Guidance, forms part of the UCO's policies and procedures and as such, staff and students and visitors (including patients) are expected to adhere to this whilst using the Borough High Street (BHS) site.

Should any user of the BHS site have concerns about physical resources they should contact estates@uco.ac.uk. Concerns about COVID-19 safety, this guidance or its operation at UCO should be emailed to steven.vogel@uco.ac.uk.

2. POLICY AND GUIDANCE

The guiding principles in developing this policy and guidance are:

- The safety and wellbeing of all who work, study, attend for healthcare services and visit the UCO is a priority.
- We will utilise best practice guidelines provided by Public Health England, the NHS, UK Government and any other relevant organisations.
- That the key considerations are:
 - o Infection control processes
 - o Occupancy numbers
 - o Social distancing
 - o Ventilation
 - o Use of face coverings where appropriate

This policy and guidance is structured into the following 8 sections:

- Section 3 - Attending the UCO for Clinical Education or Clinical Services - at risk groups and travel
- Section 4 - Delivering clinical education and clinical services
- Section 5 - Screening and identification of people with COVID-19 symptoms
- Section 6 - Social distancing
- Section 7 - Training of staff and students
- Section 8 - Regular dissemination of information
- Section 9 - Infection control
- Section 10 - Logging of interactions, tracing contacts and managing possible outbreaks

There are a further 6 appendices:

1. At risk groups
2. References
3. Room usage
4. Notes of updates
5. Additional Information for those working in the Paediatrics Clinic
6. Additional Information for those working in the SMUG Clinic

3. ATTENDING FOR CLINICAL EDUCATION OR CLINICAL SERVICES AT UCO – AT RISK GROUPS AND TRAVEL

1. AT RISK GROUPS, SUCH AS THOSE WITH HIGHEST CLINICAL RISK, AND THOSE WITH INCREASED RISK OF SEVERE ILLNESS FROM COVID-19 MAY NOT BE ABLE TO ATTEND THE UCO CLINIC
 - a. This could apply to staff, students, patients and others planning to accompany patients. UCO staff and students should refer to the [Use of BHS Policy and Guidance](#) for further information.
 - b. Patients who contact the UCO for appointments, will be asked a number of screening questions to see if they are at highest clinical risk and may be offered a virtual consultation at this stage (Appendix 7). Those patients at increased risk of severe illness from COVID-19, will be invited to discuss the risks of attending the UCO with one of our practitioners, including their travel to and from the UCO. The patient and practitioner can then discuss and decide on the best course of action, for example a virtual consultation, a face to face consultation or a hybrid (where the case history is taken virtually and a shortened face to face consultation is offered)
2. RESPONSIBILITY TO SELF SCREEN AND ACT ON COVID-19 SYMPTOMS
 - a. Staff, students and visitors are expected to be familiar with the symptoms of COVID-19 and their associated risk and to act accordingly in line with government policy.
 - b. The main symptoms of coronavirus are:
 - i. High temperature
 - ii. New or continuous cough
 - iii. Loss or change to your sense of smell or taste
 - iv. Most people with coronavirus have at least one of these symptoms
 - c. For further information see <https://www.nhs.uk/conditions/coronavirus-COVID-19/symptoms/>
 - d. Staff, students and potential visitors must not attend the UCO if they have any symptoms of COVID-19 or are feeling unwell, and must follow:
 - i. The usual procedures for notifying UCO of their absence
 - ii. Seek appropriate advice please see: <https://www.nhs.uk/conditions/coronavirus-COVID-19/self-isolation-and-treatment/when-to-self-isolate-and-what-to-do/>
 - iii. Those in this situation should follow the test and trace guidance which is available here: <https://www.gov.uk/guidance/nhs-test-and-trace-how-it-works>
 - e. Further information about actions to be taken if you live with someone who has COVID-19 or have been in contact with someone who has COVID 19, have been asked to self isolate by NHS track and trace and related scenarios may be found at the following sites:

<https://www.gov.uk/government/publications/COVID-19-stay-at-home-guidance>

<https://www.nhs.uk/conditions/coronavirus-COVID-19/self-isolation-and-treatment/when-to-self-isolate-and-what-to-do/>

<https://www.gov.uk/government/publications/COVID-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-COVID-19-infection>

3. TRAVEL TO AND FROM UCO WILL NEED TO BE CONSIDERED AS PART OF THE OVERALL RISK OF PATIENTS, STUDENTS AND STAFF ATTENDING THE UCO.
 - a. Initially, the clinic hours were limited to reduce the number of people who would need to travel at peak times. Having embedded good practices in staff and students attending the clinic, plus the changes to advice regarding travel, we extended the opening hours of the clinic. This provides students with additional clinical experience and increased appointments available for patients.
 - b. We acknowledge that many people may be apprehensive about travelling and that other options, such as virtual consultations should be explored and offered.
 - c.

4 FOOD AND REFRESHMENTS

Users of the BHS site are advised to bring with them their own personal items and where possible food and refreshments that do not need refrigeration or secondary heating. These should be brought into the building and taken home on a daily basis.

In order to minimise the risk of cross contamination, shared utensils such as cutlery, cups and plates, will not be available for use. Microwaves and fridges are available but should be sanitised before and after use along with surfaces and other areas that are used. Cleaning material for this purpose is provided throughout the building.

Clinical staff should use the archive room (1.08) on the first floor or other communal areas for eating and refreshments but are advised that social distancing must be maintained at all times. This is particularly important when eating and drinking with colleagues as face coverings are not in use at these times.

Students should use the bar area, seating area in the car park if the weather permits, and G.02 on the ground floor. The library space may also be used for eating lunch. Maintenance of social distancing is imperative in these areas. Furniture must not be re-arranged. It should be organised in such a way as to allow for two metres distance between people. Food should not be consumed on the second floor clinical areas. Please take care to not leave any items behind and to sanitise the space you used when you have finished eating.

4.DELIVERING CLINICAL EDUCATION AND CLINICAL SERVICES

1. PATIENT SERVICES – OSTEOPATHY

- a. We will continue to offer virtual consultations as it may not be appropriate for all patients to attend the clinic in person.
- b. Telehealth across medicine has gone through a huge period of growth and development in response to COVID-19 and this is something that we will look to develop and enhance at the UCO.

- c. Face to face appointments will be delivered using personal protective equipment (PPE). See section 7. Initially, we will not be offering appointments in our specialist clinics, due to current capacity limitations. Patients who usually attend these clinics, may be able to be seen in general clinic at this time, if it is appropriate for them to attend.

2. STUDENT EDUCATION

- a. We continued to run the virtual clinic for the Summer holiday period, and this was focused on the learning needs of the new level 6 students, who were attending. We set out to deliver a supportive and developmental program for the level 6 students to support their work at this time.
- b. The level 7 students attended face to face clinic over the Summer holiday period and we have continued to work flexibly with any students who have not been able to do this.
- c. Any student returning to face to face work in clinic, has had/will have training on the new infection control procedures, as well as the use of PPE. This training will be a mix of online preparatory training, alongside training in the clinic prior to seeing any patients. This will include the Public Health England video on donning and doffing PPE which can be found at: https://www.youtube.com/watch?v=GncQ_ed-9w&feature=youtu.be

4. ONLINE CLASSES

- a. We have begun to develop UCO online classes. We plan to offer exercise, rehabilitation and wellbeing classes for UCO patients, staff and students, and the wider community. This may be particularly pertinent for people who may not currently be able to attend the UCO Clinic or access similar services.
 - i. With the onset of the pandemic, we began work on a pilot project that has started with delivering online yoga classes. We anticipate expanding this to include yoga classes for different needs, as well as looking at other types of exercise, rehabilitation and wellbeing.

5. SCREENING AND IDENTIFICATION OF PEOPLE WITH COVID-19 SYMPTOMS

1. PATIENTS

- a. A screening process has been implemented for all patients seeking care from the UCO.
- b. Patients will be advised to seek appropriate advice and not to attend the UCO if they have any symptoms of COVID-19.
- c. Some patients may be identified as potentially having coronavirus as part of the screening questions which will assess likelihood of current COVID-19 infection and identify those at highest clinical risk of poor outcome if infected with COVID-19.
 - a. The main symptoms of coronavirus are:
 - i. High temperature
 - ii. New or continuous cough
 - iii. Loss or change to your sense of smell or taste

- iv. Most people with coronavirus have at least one of these symptoms

For further information on the screening process, please see the related documents that have been developed.

Ref: <https://www.nhs.uk/conditions/coronavirus-COVID-19/symptoms/>

- d. If a patient is identified at this stage as having symptoms of which may be related to COVID-19 infection, they will be encouraged to use the NHS 111 online coronavirus service.

<https://111.nhs.uk/COVID-19/>

- e. Patients will be advised to call 111 if they cannot get help online.
- f. Patients identified as having had contact with another person with COVID-19 within the last 14 days will be invited to have a virtual consultation and will not be booked into the clinic for a face to face consultation.
- g. Those patients that have been offered face to face consultations in the clinic but are identified as potentially having coronavirus as part of the additional screening on arrival at the clinic:
 - a. This may be by temperature check or when the practitioner speaks with the patient.
 - b. Clinical decisions will then need to be taken as to whether to send the patient home with advice to contact NHS 111 as above (if the patient is stable), or whether they may need more urgent care.
- h. Patient or appropriate other who contacts the UCO after their appointment, to notify us that they or another patient, have COVID-19.
 - a. UCO will explain that the context of a potential contact is a working healthcare setting that is following robust risk assessment and mitigation processes, including the use of PPE, in line with government guidance for our setting and that the clinical supervisors are regulated healthcare professionals and students on a regulated health care programme of study.
- i. UCO clinic has a specific QR code
 - a. Patients are encouraged to use the QR code on attending for clinical services
 - b. All staff and students should be using the NHS COVID-19 APP
 - i. All students and staff should set the Contact Tracing feature to OFF when in a clinical or practical teaching setting when wearing PPE
 - ii. At all other times the Contact Tracing feature should be turned on
 - c. All staff, students and visitors must use their ID card to log their movements in the building

2.PRACTITIONER – STUDENT, TUTOR OR ASSOCIATE.

- a. All staff, students, associates or others, should not attend the UCO if they have any symptoms of COVID-19 and should follow:
 - a. the usual procedures for notifying UCO of their absence
 - b. appropriate advice (see <https://www.gov.uk/government/publications/COVID-19-management-of-exposed-healthcare-workers-and-patients-in-hospital->

[settings/COVID-19-management-of-exposed-healthcare-workers-and-patients-in-hospital-settings](#)).

- b. Staff and students in this situation should follow the test and trace guidance which is available here: <https://www.gov.uk/guidance/nhs-test-and-trace-how-it-works>
- c. For any member of staff or student who has had any symptoms of COVID-19 and has undergone a test for COVID-19, should inform their area lead as soon as they are aware of any symptoms (see Section 8 below). Staff and students must not await the results of a test before taking action to inform UCO of their status.

6. SOCIAL DISTANCING

The following changes have been put in place in order to align with social distancing procedures. This will continue to be reviewed in light of any changes from UK Government guidance.

1. ADMINISTRATIVE CHANGES

- a. Adjusted general clinic day so that it runs for 8 hours (including one-hour lunch break).
- b. Scheduled 20 minutes between appointments for disinfecting of treatment rooms and related areas.
- c. Appointment times for teams will be staggered to limit patients arriving and waiting at the same time
 - a. Team 1 will start at 8.30 and finish at 16.30
 - b. Team 2 will start at 8.45 and finish at 16.45
 - c. Team 3 will start at 9.00 and finish at 17.00
 - d. Team 4 will start at 9.15 and finish at 17.15
- d. Appointment availability will be limited to reduce the number of patients in the clinic at any time.

2. LUNCH BREAKS

- a. Students will leave the clinical area during the lunch break and can either have lunch out (weather permitting) or in the designated areas at Borough High Street, including the Student Union bar area, G.02 and in the library space
- b. Staff should use the Archive (1.08) room on the 1st floor
- c. When leaving the clinical area for short periods of time such as lunch or refreshment breaks, students and staff may wear their clinical scrubs.
- d. Students and staff may not leave the building wearing scrubs
- e. The reasons for asking students to leave the clinical area for lunch are:
 - a. We do not have the space in clinic for people to have a socially distanced lunch
 - b. Lots of people having lunch in clinic could undermine the high standards of hygiene and infection control that we have put in place
 - c. We hope it will be a benefit, psychologically, as well as physically, to leave the clinical area for the lunch break; this will require people to work efficiently so that they have sufficient time for this

3. ENVIRONMENTAL CHANGES – KITCHEN AREAS AND LOCKER ROOM

- a. Staff have access to the kitchen area on the 4th floor and students have access to the student kitchen area on the ground floor. Please see the Use of BHS Policy and Guidance for further information.
- b. Staff and students are advised to bring food that does not require heating and or refrigeration where possible to avoid potential cross contamination by multiple contact with utensils and appliances.
- c. Hand washing should take place before and after using kitchen areas.
- d. Staff locker room: 4 people maximum at anyone time, observing 2 metre distance; each user responsible for disinfecting own locker and local area.

4. ENVIRONMENTAL CHANGES – RECEPTION AND WAITING AREA

- a. Perspex screens have been added to the reception front desk.
- b. Separate chairs in waiting area with a 2-metre gap.
- c. Waiting area (G.01)
 - a. There will be wipeable chairs in the waiting area. Seating will be spaced 2 metres apart.
 - b. Pairs of chairs will be available as people may travel with a chaperone or want somewhere to put belongings on.
 - c. The reception team are responsible for directing patients to the waiting area and ensuring that patients are wearing face coverings.
 - d. This gives a total capacity of 15 patients waiting at any one time
 - e. If the waiting area becomes busier than planned, a member of the reception team will be responsible for managing this and ask patients to wait outside if necessary, until space is available.
 - f. Signage is in place, asking people to maintain social distance and for queuing in the reception area.

5. ENVIRONMENTAL CHANGES – CORRIDORS, STAIRWELLS AND TOILETS

- a. With the clinical services being at BHS, we need to ensure that we have effective systems in place to allow patients and practitioners to move about safely and effectively. This includes the wearing of masks, organised flow of people, social distancing where possible and limited capacity in the clinic.
- b. The lift is restricted to the use of one person only at a time. Priority should be given to people with impaired mobility and to those with disability, as well as patients.
- c. There are one-way systems in place, where possible, to enhance the safe flow of people through the building. These include:
 - a. Teaching rooms where there are 2 doors
 - i. Doors will be signposted for entrance and exit
- d. Stairwells
 - a. The main stairwell at BHS will have people moving up and down the stairs and so people must keep to the left and maintain social distancing. The main stairwell will be used for the following:

- i. For patients and those working with patients to ascend and descend the stairs to and from the 2nd floor clinical area to the ground floor waiting area
 - ii. For non-clinical staff and students to ascend the stairs
- b. The fire escape stairwell should be used by non-clinical staff and students to descend the stairs and/or exit the building from floors 1 to 4.
 - i. Please note that the 2nd floor is dedicated to clinical services and you should not enter this area unless you are expected in clinic.
 - ii. This means that you will not be able to exit via the fire escape stairwell on this floor except in an emergency
- e. Reception staff should encourage patients to use the toilets on the ground floor.

6. ENVIRONMENTAL CHANGES – TREATMENT ROOMS

- a. Each team point will be allocated a group of rooms to be used.
- b. Team points are located in 2.02, 2.08 and 2.09. The Berthon room will be used as a flexible space for additional team point work and practical learning as required.
- b. Students will work with other colleagues on their mini-team, although this should be in a socially distanced way where possible– for example when discussing cases.
- c. Students may work with colleagues on their team point to rehearse and develop practical skills
- d. For any practical work, students need to be wearing appropriate PPE (as if this were a patient and practitioner interaction).
- e. No Staff member, associate or student may deliver clinical care or practical teaching without wearing a surgical mask. Those who are exempt from wearing a face covering for reasons of age, health or disability are required to wear a visor when on premises and may only observe if they are able to maintain social distancing requirements.
 - a. Individuals in this situation may need to consider their ability to tolerate mask wearing for short periods of time to enable them to participate in practical learning and clinical service delivery.

7. RECEPTION TEAM

- a. The reception team will be expected to maintain a distance of 2 metres with each other.
- b. Workstations for the reception team to use will have been suitably spaced
- c. Staff will be allocated dedicated workstations where possible, rather than frequent use of different workstations
Ref: <https://www.gov.uk/guidance/working-safely-during-coronavirus-COVID-19/offices-and-contact-centres>
- d. Staff will be expected to disinfect their workstation on arrival and to disinfect this when they leave their workstation, for example at the end of a shift or when moving to other duties.

8. PATIENTS

- a. Patients will be asked to attend for their appointment no earlier than 5mins before their scheduled time in order to limit time in the waiting area
- b. For patients who are late for their appointment (+5mins), either the patient will be asked to re-book for a later appointment if this is available, or the practitioner will be contacted to see if they are still able to see the patient; we will not be able to routinely accommodate people who are late for their appointments as timings will have been staggered accordingly in light of social distancing.
- c. Patients will be asked to attend appointments alone but advised that should they wish to bring a chaperone this should be limited to one person.

9. USE OF TEAM POINTS

- a. Tutors and students are advised to use empty treatment rooms and Team Points for case discussions, but special care must be taken to maintain social distancing in each Team Point.
- b. Surgical masks must be worn at all times in the clinical area and social distancing must be adhered to where 2 metres should be the standard.
- c. Avoid conversations where you are directly facing another person.

7. TRAINING OF STAFF, STUDENTS AND ASSOCIATES

All who are working in the clinic must be aware of their own responsibilities and duties so that we can ensure we are all working to the highest standards, to ensure the safety and wellbeing of all who work or visit the UCO clinic. Training will be provided to ensure that people are clear and informed about their responsibilities and what to do in any situation where they are uncertain.

- a. Infection control processes
 - a. Staff, students and associates must read and review preparatory material prior to attending clinic including this policy and guidance. A mix of online preparatory work and written material will be provided, as well as person to person training in the clinic, covering a range of topics such as:
 - i. Responsibilities with regards to hygiene control
 - ii. Handwashing
 - iii. Donning and doffing of PPE and masks/gloves during the session
 - iv. Disposal of PPE
- b. Managing a patient who has symptoms of COVID-19
 - a. Whether this be as part of a screening process beforehand or a virtual consultation
 - b. Whether this is a patient who has attended the UCO clinic
- c. Current information about COVID-19 symptoms and presentations
 - a. We have set up areas on SharePoint to centralise all of this information and will send out regular posts about this. The clinic site focuses on updates related to the management and treatment of COVID 19.
 - b. UCO main website hold institutional policy and related documents <https://www.uco.ac.uk/life-uco/coronavirus-covid-19>
 - c. UCO's SharePoint Site holds guidance, updates and additional information for the UCO community <https://bso.sharepoint.com/sites/Covid-19>

- d. Recording processes and procedures in clinic
 - a. For the purposes of tracking and tracing:
 - i. clear record keeping with regards to who attended to which patients, any chaperones and the tutor involved must be clearly noted

8. REGULAR DISSEMINATION OF INFORMATION

- a. It is important that we have a regular cycle of disseminating information and ensuring that this is current.
- b. This will be via a number of platforms, including SharePoint for our internal audiences, social media for our external audiences and via displays in the clinical area.
- c. Signage will be in common areas, and will cover for example:
 - a. Handwashing
 - b. Changes to room function (eg additional waiting areas, storage etc)
 - c. What to do if you have symptoms of COVID-19
 - d. That we are here to help
 - e. Social distancing
 - f. Clear indication of where to throw away disposable material
 - g. Current guidance and information

9. INFECTION CONTROL

There are a number of important changes with infection control at the UCO since COVID-19. It is essential that all students, staff and associates know what their responsibilities are with regards to this. It is therefore expected that all staff, students and associates will have a thorough knowledge and understanding of this and that in any situation where they are unsure, they seek advice from a tutor or a member of the clinic team.

1. ALL

- a. Ensure regular and effective handwashing and/or use of hand sanitiser. Effective and frequent handwashing is still thought to be one of the most effective ways to combat the spread of COVID-19.

2. PATIENTS

- a. Prior to appointment:
 - a. Prior to patients attending the UCO clinic, a number of areas will need to be discussed with patients, to ensure that attending the clinic, is the most appropriate action. The following will need to be discussed with the patient when they contact the UCO for an appointment:
 - i. An overview of the number of changes that we have made to the clinic, to ensure the safety of all.
 - ii. The clear expectations we have of patients, to ensure that everyone is safe, including:
 - 1. That patients should notify us immediately by phone or email if they or anyone they know, have come into contact with anyone

- with symptoms of COVID-19, so that we can take immediate action.
2. That we are taking the temperature on arrival, of everyone entering the clinic and this will be done primarily by the reception team
 3. Use of hand sanitiser immediately on arrival at the BHS site
 4. Magazines and toys have been removed
 5. That we are here to help
 6. To not touch anything that they don't need to
 7. To avoid touching their phones after disinfecting their hands
- iii. That we will ask screening questions about their health prior to booking their appointment, as it may not be appropriate for them to attend clinic or it may be best for them to talk to a practitioner to decide on the best course of action
 1. This will include whether the patient:
 - a. Is in the highest clinical risk group, and so may be offered a virtual consultation
 - b. Whether they are at risk of having more severe symptoms, and so would be offered to discuss this with a practitioner
 - c. Whether they have any common symptoms of COVID-19 or have been in contact with anyone with symptoms of COVID-19 (or confirmed cases)
 - iv. The overall risk of attending the clinic, including the travel to and from the clinic and any particular concerns the patient may have (such as caring for other relatives, other responsibilities etc).
 - v. Patients will be provided with information about the changes to the clinic and what is expected of patients.
 - b. When practitioners collect patients from reception, they should check again at this point if the patient has developed any symptoms of COVID-19 since booking their appointment. If any patient has, then the patient should NOT be taken into the clinical area on the 2nd floor and the processed followed for patients identified as possibly having COVID-19.
 - c. Patients who walk into the UCO to see if we have available appointments at that time will need to go through the same screening process. The reception team may use a paper copy of the screening questions that the patient can complete. If the patient has any particular risk in relation to COVID-19, then the patient can discuss these with a tutor in a treatment room. If the patient has answered positively to the symptoms of COVID-19, they should not enter the clinical area on the 2nd floor and should be managed as any other patient.

3. STAFF AND STUDENTS, AND ASSOCIATES

- a. Arrival at BHS for clinic:
 - a. Everyone's temperature will be checked on arrival at the UCO clinic

- b. Please use the hand sanitisers as would be expected when you enter the BHS building. Clear disinfection processes will be expected prior to you entering the clinical area and during your time in the clinical area.
- c. Collect and put on your clinic mask for your session in clinic (available as you pass the reception on the ground floor)
 - i. Avoid touching your face
 - ii. Avoid touching any surfaces or objects
- d. Proceed to a treatment room/team point where you will change into your scrubs and clinic footwear that you have brought with you.
- e. Your clinic footwear must be wipeable, supportive and is only for use when you are in clinic.
- f. Clothes and footwear that you travelled in to get to the clinic, must be placed in a plastic bag and placed in your own bag.
- g. Remove your clinical kit that you need for your clinical session.
- h. Once you are changed and have all your clinical kit ready in the treatment room, you should sanitise your hands and place your bag in your locker.
- i. Once you have placed your bag in your locker, you should return to your treatment room, sanitise your hands and disinfect all your clinical kit, ready for use.
- j. Any electrical devices that you bring to clinic, such as your phone, tablet, laptop etc must also be cleaned to reduce any risk of infections. We are not expecting students to bring in anything beyond their own phone.
- k. For how to safely clean your phone with minimizing screen damage please see <https://www.bbc.co.uk/news/av/technology-51863924/coronavirus-how-to-clean-your-smartphone-safely>
- l. Face masks must be worn in clinic at all times; the remainder of your PPE should be donned prior to you collecting a patient.
- b. Collection of gloves and apron:
 - a. You will be able to collect gloves and aprons from your team point
 - b. You should do this prior to each patient arriving
- c. Visors/goggles in clinic
 - a. Each member of staff and student will be provided with a visor when you arrive in clinic and this will be yours to clean at the end of each session and yours to keep. If you damage or forget your visor, you will need to pay for a replacement at the clinic or purchase your own.
 - b. Any students or staff who would prefer to wear goggles may do so if they have considered the relative risk to them. Goggles will need to be purchased by individuals.
- d. Disposal of single use items – gloves and apron
 - a. These items are to be disposed of after each patient interaction and placed in the bins in the treatment room. You should sanitise your hands after you do this.
 - b. You will be responsible for emptying these bins at the end of the clinic session, if your bin is full.
- e. At the end of your clinic session
 - a. Deposit your gloves and apron in the bin as above.

- b. If the bin in your treatment room is full, then remove the bin bag and tie this securely. Please take the contents of the bin and go to the Berthon room to deposit this. There will be different allocated bins for each day – please ensure that you deposit your bin bag in the correct bin.
- c. You should continue to wear your mask while doing this and you should still be in your scrubs at this point.
- d. If your bin is not full, then please leave in place until full, so that we are only emptying full bins (this reduces both the number of bin liners and therefore waste, along with reducing moving of waste round the building).
- f. You should then collect your bag from your locker and return to your treatment room to change back into your travelling clothes (to change on the team point)
 - a. Please ensure that you disinfect your footwear before placing this in a bag and taking these home.
 - b. Your used scrubs should be placed in your pillowcase and then in a plastic bag, before being placed in your bag, so that you can take these home
 - c. Once home, your scrubs should be placed immediately in the wash at 60 degrees
- g. Please ensure that you:
 - a. Wash hands and/or use hand sanitiser routinely throughout the day as per current COVID-19 guidance and as per the infection control policy.
 - b. Are bare below the elbow and wash any area that has come into contact with a patient.
 - c. Tie back any hair that is long enough to cover the face, to avoid touching your face while in the clinic.
 - d. Disinfect hands after contact with phones.
 - e. Do not use phones during consultations.
 - f. Disinfect your treatment room, including the plinth, chairs and any instruments used (such as patella hammer, stethoscope etc) prior to the first patient arriving and after each patient leaving.
 - g. Disinfect door handles regularly through the day
 - h. Only use plinth roll on plinths (no plinth covers) and ensure this is changed after each patient.
 - i. Turn used gloves inside out and dispose of these after each patient (or if gloves become damaged etc).
 - j. Organise the consultation room to limit contact with objects that will need disinfecting.
 - k. Provide a chair for patients to put all their belongings and clothes on.
 - l. Maintain a distance of 2 metres with patients unless this needs to be reduced (eg for some clinical assessments and manual treatment).
 - m. Limit physical contact where possible so that only the practitioner's hands are coming into contact with the patient; if other areas do come into contact with the patient, then these will need to be disinfected.

3. WHAT PPE WILL BE REQUIRED

- a. Clinic tutors, students, associates and any other clinicians in the clinic, are to use the following PPE when working with patients:

- a. disposable gloves (single use)
 - b. disposable plastic apron (single use)
 - c. fluid resistant (Type IIR) surgical mask
 - d. eye/face protection, face shield for example (dependent on risk assessment, this may be used for a session)
- b. No staff member, associate or student may deliver clinical care without wearing a surgical mask. Those who are exempt from wearing a face covering for reasons of age, health or disability are required to wear a visor when on premises and may only observe if they are able to maintain social distancing requirements.
- a. Individuals in this situation may need to consider their ability to tolerate mask wearing for short periods of time to enable them to participate in practical learning and clinical service delivery.
- c. Patients will be asked to remove their face covering when they arrive at clinic and will be asked to wear a face mask provided by the UCO.
- d. For patients who are exempt from wearing a face covering for reasons of age, health or disability an individual risk assessment should determine whether the supervising clinician and student are able to deliver care to the individual patient. In this situation, patients will be asked if they are able to wear a visor.
- e. Disposable PPE items will be disposed of in bins with lids, with plastic bin liners that should be tied up prior to disposal.
- f. Reception team on the front desk have Perspex screens and are expected to wear face coverings in line with everyone at the BHS site.

4. RECEPTION TEAM

- a. Heightened hygiene control, including handwashing/use of hand sanitiser on arrival at BHS and regularly through day; avoid touching face
- b. Disinfect work area before starting work and when leaving workspace; this should include all areas that have been contacted, so mouse, telephone, keyboard etc
- c. Milton spray available at each workstation
- d. Appropriate spacing of workstations to ensure social distancing.
- e. Receptionist to use the same workstation for their shift, where possible
- f. The reception team will be responsible for stocking treatment rooms, the central stock area on the 2nd floor and teampoints with gowns, hand wash etc and this will be done at the start of the clinic day.

5. STORAGE, PROVISION OF PPE, REMOVAL AND DISPOSAL OF PPE

- a. All PPE for use at BHS will be stored in a designated locked room on the 1st floor (outside 1.08)
- b. The reception team will be responsible for providing sufficient PPE in the team points and treatment rooms, that staff and students can use while in the clinic.
- c. PPE can be disposed of in general waste (in rubbish bins with liners and a lid) unless there is a suspicion that COVID-19 may have been present.
- d. The Berthon room is the designated room for the storage of used PPE and there will be a specific bin for the disposal of PPE on each day.
- e. The reception team are responsible for ensuring the correct bin is used and the cleaners will empty the bin.

6. ENVIRONMENT – RECEPTION WAITING AREA

- a. The following changes have been made to the reception waiting area to reduce the potential spread of infection:
 - a. Magazines, toys, flyers and any other objects from the waiting area (bookcase, coin shakers, etc) have been removed
 - b. Chairs in the waiting area have been set out so there is appropriate distance between them
 - c. Chairs will not have arms and will be easily wipeable, so that they can be regularly and easily disinfected
 - d. The reception front desk and door handles in the clinic reception and back office area will be regularly disinfected
 - e. Perspex screening has been added to the reception desk
 - f. The water coolers remain in place at BHS and are cleaned regularly

7. GENERAL CLINIC ENVIRONMENT

- a. The following changes have been made in the clinic, to encourage good hand hygiene and reduce the potential of the spread of infection:
 - g. Handwash gel readily available in reception area, clinic corridor and team points
 - h. Supplies of handwash gel etc to be regularly checked and re-filled; the reception team will be responsible for this, although all staff and students are expected to monitor this
 - i. Batches of Milton spray and disposable towels available in all team points and treatment rooms
 - j. Doors to be left open where possible. For example, when leaving a treatment room with the patient
 - k. Practitioners should be opening doors so that patients do not have to have contact with them
 - l. Only Reception staff on duty are allowed behind the reception desk.
 - m. Workstations in Team points to be disinfected after each use. Milton spray will be available on team points
 - n. Additional hand sanitisers are available on either side of all push doors
- b. Toilets
 - o. Additional regular cleaning of toilets, with emphasis on areas where there is contact with hands (door handles, taps, soap dispenser, toilet seat, toilet flush, etc); the cleaning company will be responsible for signing off completing of this
- c. Ventilation system
 - p. It is important that everyone takes responsibility for ensuring good ventilation of treatment rooms, team points, corridors and stairwells at BHS.
 - q. Windows should be opened on stairwells and on team points to allow good air flow.
 - r. Fans will be strategically placed to draw air out of rooms with reduced air flow. This will include:
 - i. GO1
 - ii. The corridors on the 2nd floor

- iii. The internal treatment rooms (so 2.10, 2.15, 2.18 and 2.19)
- s. It is important that treatment rooms with windows are ventilated between patients; this will help the air flow in the room itself, as well as the air flow in the adjoining corridors and spaces. Treatment rooms should be ventilated as follows:
 - i. Raise the blinds fully
 - ii. Open the window as widely as you can
 - iii. Open the door to the treatment room
 - iv. Ensure this is done before you use the room and after every patient interaction or every practical use (with colleagues for example)
 - v. Windows and doors should be left open while you go and collect your patient and can be closed once you arrive in the room with your patient. This will ensure as much air flow as possible in the room and the adjoining corridors and spaces.
 - vi. Re-lower the blinds
- d. Letters:
 - a. Any letters that need to be sent can be printed and/or emailed by the reception team; similarly, Physiotec exercises can be emailed as is usual practice.

8.TREATMENT ROOMS

- a. The following changes have been made to reduce the potential spread of infection:
 - t. Removal of all non-essential furniture and kit.
 - u. Plinths have been checked for any rips or tears.
- b. Disinfectant spray must be used around the patient's seating area and the plinth, between appointments assuming the patient has removed their shoes.

10.LOGGING OF INTERACTIONS SO THAT WE CAN TRACE CONTACTS AND MANAGE POSSIBLE OUTBREAKS

Please note: for detailed information on this section, please go to the UCO Use of Borough High Street Building and Clinical Services Policy and Guidance document that can be found at: <https://bso.sharepoint.com/sites/Covid-19>

- a. Staff and students are responsible for clearly documenting which staff, student, associate, or other have worked with which patients (including observers), and if any chaperones were attending with the patient, along with the supervising tutor, so that tracing can rapidly take place if needed
- b. The reception team, as well as clinical staff and students are responsible for ensuring that accurate clinical diaries are maintained on TM2 to ensure lists are accurate and we can readily check which people may have come into contact with any others.
- c. Patients should be advised and informed about the importance of contacting the UCO, should they develop any symptoms that may be due to COVID-19.
 - a. Patients should be advised to email or phone with their name, date of birth and the date of their appointment.

- b. The member of the reception team who receives this (email or call) is responsible for logging this on the patients record in TM2, and contacting the Head of Clinical Practice who is the relevant Area Lead and will then take the necessary steps. Please also copy in the Reception Manager.
- c. The practitioners involved should be checked on TM2 and the patients paper notes.
- d. Where there has been no breach of PPE, staff and students should keep alert for the development of symptoms and act accordingly.

OTHER RELEVANT DOCUMENTS THAT YOU SHOULD BE FAMILIAR WITH

1. Reception Team Process for managing patients – June 2020 (reviewed Nov 2020)
2. Reception Team Process for managing patients – flowchart – June 2020 (reviewed Nov 2020)
3. Patient Information Sheet with regards to COVID-19 June 2020 (reviewed Nov 2020)

APPENDICES

1. At risk groups
2. References
3. Room usage
4. Notes of updates
5. Additional Information for those working in the Paediatrics Clinic
6. Additional Information for those working in the SMUG Clinic

APPENDIX 1: AT RISK GROUPS

SECTION 1: HIGHEST CLINICAL RISK GROUPS

Category 1 – Solid organ transplant recipients

Category 2 – People with specific cancers

- People with cancer and are having chemotherapy
- People with lung cancer and are having radical radiotherapy
- People with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment
- People having immunotherapy or other continuing antibody treatments for cancer
- People having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors.
- People who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs.

Category 3 – People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe COPD

Category 4 – People with rare diseases and inborn errors of metabolism that significantly increase the risk of infections (such as SCID, homozygous sickle cell disease)

Category 5 – People on immunosuppression therapies sufficient to significantly increase risk of infection

Category 6 – People who are pregnant with significant heart disease, congenital or acquired

SECTION 2: GROUPS AT INCREASED RISK OF SEVERE ILLNESS FROM COVID-19:

1. aged 70 or older (regardless of medical conditions)
2. under 70 with an underlying health condition listed below (ie anyone instructed to get a flu jab as an adult each year on medical grounds):
3. chronic (long-term) mild to moderate respiratory diseases, such as asthma, chronic obstructive pulmonary disease (COPD), emphysema or bronchitis
4. chronic heart disease, such as heart failure
5. chronic kidney disease
6. chronic liver disease, such as hepatitis
7. chronic neurological conditions, such as Parkinson's disease, motor neurone disease, multiple sclerosis (MS), a learning disability or cerebral palsy
8. diabetes
9. a weakened immune system as the result of conditions such as HIV and AIDS, or medicines such as steroid tablets
10. being seriously overweight (a body mass index (BMI) of 40 or above)
11. those who are pregnant

APPENDIX 2: REFERENCES

Additional considerations for PPE:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/879111/T4_poster_Recommended_PPE_additional_considerations_of_COVID-19.pdf

Caring for people at highest clinical risk: https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/03/20200403-Clinician-FAQs-v_FINAL.pdf

COVID-19 –Adaptive hygiene guidance for osteopathic practices; Centre for Osteopathic Medicine Collaboration (COME)

Guidance on social distancing for everyone in the UK:

<https://www.gov.uk/government/publications/COVID-19-guidance-on-social-distancing-and-for-vulnerable-people/guidance-on-social-distancing-for-everyone-in-the-uk-and-protecting-older-people-and-vulnerable-adults>

Management of suspected case of COVID-19:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/873496/COVID-19_flow_chart.pdf

Routine decontamination of reusable and non-invasive patient care equipment:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/877533/Routine_decontamination_of_reusable_noninvasive_equipment.pdf

Visual guide to safe PPE:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/878056/PHE_COVID-19_visual_guide_poster_PPE.pdf

APPENDIX 3: ROOM USE

UCO Clinic is based on the 2nd floor, comprising treatment rooms and team points.

Storage of new PPE is on the 1st floor in the storage space outside 1.08

Storage of used PPE is in the Berthon room in a screened off area with bins used in rotation

APPENDIX 4: NOTES OF UPDATES

3 Aug 2020

- amended guidance on time period for self-isolation from 7 to 10 days, following changes by UK Government (Section 8, item a, section g on page 16)
- amended use of the kitchen down the far end of clinic so that this can be used by staff and students (as opposed to just students); this saves having the tea urn in the team point. All staff and students are advised to regularly disinfect areas in the kitchen that are frequently touched such as door handles, fridge, kettle etc (Section 4; item 2 on page 7)
- amended section on social distancing and use of treatment room 6 for people to pass in the corridor. This is in light of UK Government guidance to 1m plus distancing, along with this room not really being utilised (Section 4, item 4, section a amended and section b removed; page 8)
- Updated clinic opening hours and rationale for this (Section 1, item 2a, Pg 4)
- Updated process for those with COVID-19 symptoms and who have had a COVID-19 test (Section 3, item 2c, Pg 6)
- Updated clinic opening hours (Section 4, Item 1, Pg 7)
- Updated room usage (Pg 20)

8 Sep 2020

- Changes in preparation for Autumn term, including:
 - Use of treatment rooms – per team, rather than per student
 - Increase number of treatment rooms available (as reducing PPE disposal rooms and other storage)
 - Bins to be emptied when full, rather than after each session
 - Reference to Summer holiday period and how that was managed as historic
- Addition of appendices for the:
 - Paediatrics clinic
 - Sports Medicine Ultrasound Group (SMUG) Clinic

08/10/20

- Added to and clarified reporting COVID-19 related concerns
- Added use of NHS COVID-19 APP
- Added constraints on clinical and practical activity to only be possible whilst wearing a surgical mask
- Added guidance to make individual risk assessment wear patient is exempt from wearing a face covering
- Clarified social distancing requirements

- Amended information about COVID-19 communications on main UCO site, clinic and academic SharePoint sites

02/11/20

- Added link to new National Restrictions in place 4/11/2020 to 2/12/2020
- Enabled students to engage in peer to peer practice with colleagues from within their team point
- Clarified further importance of social distancing and need to eat lunch for students outside of clinical environment

18/11/2020

- Reframing and updating of this document to reflect the clinic relocating to BHS and that the UCO Use of BHS document covers the whole BHS site; that the Clinic Operational plan reflects the detail required for this environment
- Amend scope of operational plan section, and policy and guidance section, to align with Use of BHS document
- Update ventilation of treatment rooms, team points and corridors in the clinical area
- Removal of parts of the section on Logging of interactions and referred to seek this information in the Use of BHS document. This is to avoid unnecessary repetition and ensure this is clearly set out in one place.

01/12/20

- Global changes to accommodate relocation of clinical services to BHS
 - G.01 converted to reception and patient waiting area
 - Second floor exclusively converted to clinical education and service area
 - Tutorial and clinic rooms created
- Changes to the availability of eating and communal spaces.
 - No food to be consumed on the second floor clinical area
 - Staff to use archive room (1.08) on the first floor
 - Students no longer have access to G.01 as a social and eating space, and should use the bar, outside space, G.02 and the library space
 - Staff to change in 3.09 for clinic
- Changes to the movement in the building
 - The main stairs will now be used to ascend and descend to and from the second floor clinical area for those in clinic
- Students and staff not involved in clinical services should use the main stairs to ascend to the floor on which they are working or receiving education (1st, 3rd and 4th floor) and use the fire escape stairs to descend
- All should keep strictly to the left on the stairwells and maintain social distancing
- Changes to procedure wearing scrubs
 - Staff and students may now wear their scrubs whilst taking breaks for lunch and refreshment within the UCO Borough High Street building
 - Staff and students must not exit the Borough High Street building wearing scrubs
- Reporting of symptoms and test results
 - Made clearer that students and staff must report symptoms to UCO immediately and NOT wait for a positive COVID test prior to contacting UCO.

- Changes to practical teaching and practice spaces
 - 1.03 on the first floor has been re-purposed for practical teaching
 - 1.05 on the first floor has been re-purposed for practical teaching and peer to peer practice
- Changes to PPE storage and disposal
 - PPE will be stored on the first floor in room in the storage room next to 1.07
- Used PPE from practical learning will be stored in a cabinet on the 4th floor and then in the space opposite 1.10 on the first floor.
- Used PPE from clinic will be stored in Berthon room

APPENDIX 5: ADDITIONAL INFO FOR THOSE ATTENDING THE PAEDIATRICS CLINICS

Additional requirements for Paediatric clinic at the UCO:

1. At the time of appointments being booked, reception team to remind parent/carer that only one chaperone is permitted with their child
2. COVID-19 Screening to include the person accompanying the paediatric patient and both to have temperature taken at reception
3. Staff and students attending the SPOP clinic to be aware of the increased screening for Safeguarding and Mental Health due to the prolonged isolation as a result of COVID-19. Course leader will brief staff and students via a webinar
4. Staff and students to read the current Safeguarding policies at the UCO due to the increased awareness of safeguarding and mental health during COVID-19 lockdown and the lack of outside professionals meeting with young people and their families. Course leader will send links to current information on the UCO clinic web page and request all staff and students familiarise themselves.
5. Staff and students to be aware of current guidelines regarding clinically extremely vulnerable children. Course leader will send staff and students a user-friendly flow chart with the information on and print a poster for the team point.
6. Staff and students to be aware of nappy changing processes. Course leader will send information regarding no changing of nappies in the treatment rooms and who is responsible via email. Clinic Reception to print out notice for disabled bathroom on cleaning processes.
7. Reception to keep nappy sacks for hygienic disposal of soiled goods if parents do not have them.
8. Prior to seeing patients, staff and students to undertake relevant training that relates to pertinent issues with the health and well being of paediatrics during this pandemic. Course leader to signpost students and staff to relevant information, pre clinic webinar will take place before start date, training session on first day in clinic for returning staff and students.
9. Staff and students to be familiar with the rules regarding children and masks.

Wearing of masks does not apply to the following

- Children under the age of 11 are NOT required by law to wear masks however they may choose to wear one.
- Children under the age of 3 MUST NEVER wear a mask due to health and safety concerns.

Clinic operational plan additional points

- 7 d Patients will be asked to attend appointments alone but advised that should they wish to bring a chaperone this should be limited to one person.
- 7 e Children under the age of 16 should be accompanied by one person who has parental responsibility for the child.
- Risk assessment additional points for Paediatric clinic

Area	Detail
Increased sanitisation and cleaning	<p>Nappies to be changed in the 2nd floor toilet for disabled people. Plinth roll offered for changing table if carer does not have a mat.</p> <p>Nappies to be bagged, tied and disposed of in toilet bin.</p> <p>Spare nappy bags to be kept in reception</p> <p>Parent responsible for cleaning of the changing table in bathroom.</p>
Clinicians will wear the following PPE	<p><u>In addition</u></p> <p>Eye protection for all paediatric patients not wearing a mask</p> <p>Gloves to be worn at all times.</p> <p>For neonatal intraoral assessment this will require 3 pairs. One for examination, clean pair for intraoral assessment then safe disposal and redonning of new gloves after examination to proceed with consultation.</p>

Dissemination and training for staff and students

Course leader will be responsible for ensuring the following is implemented from the current operational plan using the following method

1. Students and staff will be sent links to all information to read before attending clinic
2. Virtual meeting will be set to go through all the information given
3. Virtual clinic walk through to orient students visually
4. Training on first day of attendance in clinic
5. Signpost students and staff to SharePoint where all the information is kept and regularly updated

The Course leader will cover the following areas with staff and students.

- Responsibilities with regards to hygiene control, handwashing/use of hand sanitiser, donning and doffing of PPE and masks/gloves during the session
- Disposal of PPE
- Managing a patient who has symptoms of COVID-19
 - Whether this be as part of a screening process beforehand or a virtual consultation
 - Whether this is a patient who has attended the UCO clinic
 - Current information about COVID-19 symptoms and presentations
- The importance of clear record keeping with regards to who attended to which patients, any chaperones and the tutor involved for the purposes of tracking and tracing.

APPENDIX 6: ADDITIONAL INFO FOR THOSE WORKING IN THE SMUG CLINIC

SMUG Mentorship Programme – Safe working practices during COVID-19 and COVID-19 screening form.

Aims

To provide continued ultrasound (US) scanning practise and patient clinics whilst maintaining consistent high-quality standards with respect to course learning outcomes, minimising risk to staff, students and patients during COVID-19, whilst appreciating that the risk of COVID-19 cannot be completely eliminated.

Procedures for managing risks of COVID-19

1. Managing Risk

- a. Increased frequency of washing hands/use of hand sanitiser, equipment and surfaces.
 - i. Clean hands with antibacterial gel or soap and water (for 20 seconds) before and after each patient and wear single-use gloves.
 - ii. Clean equipment (scanner screen & keys, probe & lead) with antibacterial gel in between each patient and after the last patient of the session.
20 Minutes will be allowed between patients for cleaning as points i & ii above.
 - iii. Wear scrubs and PPE in accordance with UCO's protocol (see UCO Clinic: Clinical Policy and Guidance- following COVID-19 document).
- b. Social distancing of 2 metres apart wherever possible.
 - i. You will be 'Buddied up' and must remain in a group of two with your assigned buddy for scanning, for the whole day.
 - ii. You will stay in the same room for the whole day and your tutor will move between rooms.
 - iii. Only 4 people allowed per break out room and you must remain paired with your buddy.
- c. Ordinarily, you should not share equipment outside of people in your buddy group; if you do need to use equipment outside of your buddy group, then you should thoroughly clean it prior to and after use.
- d. You will be issued with a Chromebook or equivalent for report writing; if there are any issues with this, then we will revert to paper notes.

- e. Independently assess if it is appropriate to engage in face to face situations.
- f. Do not attend any clinical or teaching sessions if you have any symptoms of COVID-19 or are feeling unwell.
- g. You must complete a COVID-19 screening form (below) and return it by email no later than 24hours before the Supervision Day.

COVID-19 Screening Form for SMUG Students attending Clinical Sessions at the UCO



Personal Details

Name: _____

Email address: _____

Telephone number: _____

Please answer the following questions with YES or NO.

- I confirm that I have not had any of the following symptoms in the last 14 days: fever, shortness of breath, loss of sense of taste or smell, dry cough, runny nose or sore throat.
YES/NO___
- I confirm that I am not in the clinically extremely vulnerable category and therefore advised to shield at home by the government.
YES/NO___
- I confirm that to the best of my knowledge, I have not been in close contact with anyone with confirmed COVID-19 in the last 14 days.
YES/NO___
- I confirm I am aware of UCO's patient clinic requirement for social distancing in the clinic.
YES/NO___
- I confirm I am aware of UCO's patient clinic requirement for hand washing/use of hand sanitiser in the clinic. YES/NO___
- I confirm I am aware if the UCO's patient clinic requirement for me to wear a face mask, scrubs, apron and gloves whilst in the clinic
YES/NO___

I agree that my contact details that I have provided can be used by NHS Test and Trace if required. Text messages will come from NHS Tracing. Calls will come from 0300 0135000 <https://contact-tracing.phe.gov.uk>.

YES/NO___

Signed Student:

Date:

Return this form by email to info@ultrasoundtraining.co.uk no later than 24hrs before the Supervision Day.

WORKING DOCUMENT

APPENDIX 7: SCREENING QUESTIONS
Screening Questions

Set 1: Questions Related to Covid-19	Yes	No	Not sure
1. Have you tested positive for COVID-19 in the last 7 days?			
2. Are you waiting for a COVID-19 test or the results?			
3. Do you have any of the following symptoms:			
a. New, continuous cough*;			
b. High temperature or fever;			
c. Loss of, or change in, sense of smell or taste?			
4. Do you live with someone who has tested positive for COVID-19 in the last 14 days?			
5. Do you live with someone who has had symptoms of COVID-19 in the last 14 days?			
6. For Reception: Ask patient to inform the UCO if any of the above circumstances change before their appointment			

** Note for Practitioners: A new, continuous cough means coughing for longer than an hour, three or more coughing episodes in 24 hours. If the patient usually has a cough, it may be worse than usual.*

Set 2: Patients in Highest Clinical Risk Group	Yes	No	Not sure
1. Have you been advised to shield from Covid-19 at any point?			
2. Have you been having treatment for cancer?			
3. Are you having any treatment that effects your immune system?			
4. Have you had any bone marrow or stem cell transplants in the last 6 months?			
5. Do you have any severe conditions that effect your lungs? (for example; cystic fibrosis, severe asthma or severe COPD)			
6. Do you have a disease that effects your metabolism? (eg sickle cell disease)			

Set 3: Group at Risk of Severe Symptoms from Covid-19	Yes	No	Not sure
1. Are you over 70 years of age?			
2. Do you have any long-term mild to moderate respiratory diseases? (e.g. asthma, COPD, emphysema or bronchitis)			
3. Do you have chronic heart disease, such as heart failure?			
4. Do you have chronic kidney disease?			
5. Do you have chronic liver disease, such as hepatitis?			
6. Do you have any chronic neurological conditions?			
7. Do you have diabetes?			
8. Do you think you might have a weakened immune system as the result of conditions such as HIV and AIDS, or medicines such as steroid tablets?			
9. Being seriously overweight (a body mass index (BMI) of 40 or above) This question is about identifying those who may be at risk of more severe Covid 19 symptoms due to increased weight. e.g. those with a BMI of 30 and above may be more at risk. You may not be aware of your BMI but it would be helpful for us to know if you think your weight may be a risk factor for you.			
10. Are you pregnant? **			

****Note for practitioners: Any patient who is pregnant with significant heart disease is considered to be in the highest clinical risk group**

Outcome	Use X
Patient booked in at UCO and no further action needed	
Patient referred for testing for COVID-19	
Patient booked in at UCO pending confirmation from call back clinic	

Call Back completed by:	At:	On Date:	Use X
Relative Risks (including travel) discussed with patient (please annotate with further information)			
Patient referred for Virtual Clinic Appointment			
Patient referred to GP			
Notes and Additional Information:			

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WORKING DOCUMENT