**Standard Operating Procedure (SOP) Hive Physio Ltd**

Updated 29/10/2020

**In Light of Covid-19 Outbreak**

**Covid-19** is a new and novel virus, for which there is currently no vaccine and so additional care must be taken to limit the risk of its transmission. Predominantly the disease is passed from person to person through small droplets from the nose or mouth which are produced when a person coughs, sneezes or speaks.  These droplets can land on objects and surfaces around the person.  People can become infected by breathing in these droplets or by touching surfaces on which droplets have landed, then touching their eyes, nose, or mouth (1).

The objectives of this SOP are:

* to outline how Hive Physio Ltd will deliver physiotherapy assessments and treatment during the ongoing Covid-19 outbreak in the UK.
* To provide a plan to reduce the risk of transmission of Covid-19

The following is based on having reviewed the latest advice and guidelines from UK Government as well as the Health Care Professions Council (HCPC), Chartered Society for Physiotherapy (CSP) and Physio First.

Hive Physio Ltd provides physiotherapy services to patients in their own homes as well as remote consultations via Telehealth video calls or telephone.

**Contents - as per CSP 7 key factors (2)**:

1) Legal, regulatory, and professional responsibilities

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6) Patient risk assessment and clinical reasoning

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**1)** **Legal, regulatory, and professional responsibilities**

* It must be acknowledged that the risk of transmitting coronavirus cannot be completely eliminated. The aim of this SOP is to reduce the risk to the lowest practical level by implementing preventative measures.
* Risk assessment must be carried out in each individual case and this will include following the CSP guidance on face to face decision making (3)
* Risk assessment must be documented in each individual patient’s case notes as this will be patient specific. With that in mind, the therapist’s duty of care (4) must be prioritised and this will outweigh a patient’s desire for F2F treatment if it is believed that that patient’s level of risk outweighs the potential benefits of a F2F session.
* All decisions with regards to face to face consultations will be discussed in full with the patient.
* Hive Physio Ltd will continue to monitor changes to advice and guidance from the UK Government, the HCPC and CSP.
* **Track and trace:**
	+ the therapist will report any symptoms appropriately and report for testing within 3 days as per UK Government testing guidelines if symptoms appear. (9)
	+ If symptoms appear, all face to face sessions will cease and therapist will self-isolate as per Government guidelines.
	+ Patients must be made aware that if contacted by track and trace teams and asked for information of those they have been in contact with, the therapist is obliged to pass on details of those patients who have been seen face to face – patients must consent to this before face to face treatment can be carried out.

**2)** **Risk assessment of the working environment for which you are responsible**

* Face to face consultations with Hive Physio Ltd are carried out in patient’s homes and so control of the area is limited, however, the following requests will be made of clients
	+ Face coverings to be worn by patient throughout session were possible, if a patient is unable or unwilling to wear a face covering, further protection in the form of a visor or goggles should be considered by the therapist
	+ The room for treatment should be selected for its ease of access from entry into the house and should have ample space to allow good ventilation and for 2m physical distancing to be observed as much as possible during the session. Where possible, and privacy can be maintained, an open window will be encouraged.
	+ Except in cases of children under the age of 18 and vulnerable groups where chaperones are required, no other people should ideally be present in the room chosen for treatment. Chaperones will be asked to comply to 2m physical distancing as far as possible and will also be asked to wear a face covering.
	+ Patients are to observe hand hygiene before sessions based on the advice on the NHS website on hand washing technique: <https://www.nhs.uk/live-well/healthy-body/best-way-to-wash-your-hands/>. They will also be advised to observe this after the session.
	+ Cleaning of touched surfaces will be encouraged following the appointment.

**3)** **Infection Prevention and Control Measures**

* Measures as above for patient and patient setting.
* 2m physical distancing will be maintained at all times in which direct contact is not required.
* PPE will be worn by the therapist for all face to face sessions as per UK wide advice (6). This will consist, at least, of:
	+ Face mask (fluid resistant, type IIR)
	+ Gloves
	+ Apron
* All PPE will be patient specific
* Eye Protection/goggles/visor will be available if risk of AGP is considered, but not used routinely.
* PPE will be donned and doffed in order advised by gov.uk (5).
* Type IIr mask will be donned outside of the patient’s home directly before entering, after use of alcohol-based hand rub (ABHR) (7). Gloves and aprons will be donned when assessing and treating within 2m of the patient.
* PPE will be doffed, with the exception of face mask, just before leaving the patient’s home – the patient and all other household members will be asked to maintain a 2m distance from this point onwards. ABHR will be used immediately after removal and again once therapist has returned to car (7).
* PPE will be double bagged, dated. This will be advised to set aside for 72 hours before disposal in municipal waste (8).
* Face mask will be removed after leaving the patient's home, it will be double bagged, dated and disposed of after 72 hours.
* **Hand Hygiene:**
	+ Whilst away from site (therapist’s own home) ABHR will be used as above pre and post PPE
	+ Therapist will carry out hand hygiene thoroughly with soap and water prior to leaving own home and on return, which will be between each client as far as possible.
	+ Hand hygiene will include bare arms from elbows down and inclusion of forearms and elbows in washing
	+ Patient’s will be asked to carry out their own hand hygiene pre and post session.
* Hair must be tied up away from face and off clothes.
* Equipment:
	+ Equipment, aside from plinth, will be carried in a wipeable case.
	+ Patient contact with equipment will be minimised, any equipment that comes into contact with patient will be cleaned with combined detergent and disinfectant wipes and placed back into case. The case will be wiped at the end of each session.
	+ Plinth will be wiped fully with combined disinfectant and detergent wipes at the beginning and end of each session.
* All patients must complete a Covid-19 Screen before F2F consultation is confirmed and again verbally immediately before their session.
* Physiotherapy sessions may involve periods of contact closer than 2 metres – if this close contact is agreed by therapist and patient.  PPE must be worn by therapist throughout.
* Uniform will only be worn during sessions and travelling between therapist’s own home and sessions. Uniform will not be worn in other areas between sessions such as shops.

**4.** **Access to PPE**

* Hive Physio Ltd will provide all their own PPE.
* We ask that patients provide their own face covering.

**5. “Virtual First” Approach**

* All patients will be triaged and can be managed remotely unless face to face is deemed more beneficial, and safe to do.
* In cases that are deemed non-urgent and would not be expected to worsen without F2F input, a virtual approach should be tried before considering F2F.

**6. Patient Risk Assessment and Clinical Reasoning**

* The CSP flow chart will be utilised in deciding if someone should be offered a F2F session (3), alongside clinical judgement, taking into account age, underlying conditions, severity of condition, etc., but always erring on the side of caution.
* The aim of risk assessment will be to establish if risk outweighs potential benefits of a F2F session, in which case management should be remote.
* Risk assessment will be individual to each patient and their circumstances and must be documented in full.
* A risk assessment tool will be completed for each patient being considered for face to face treatment – this will be used to assist in clinical judgement.
* Hive Physio Ltd will involve patients in discussions over the rationale behind face to face treatments and patients must be made aware of risks associated with this approach to allow them to provide informed consent.

**7. Patient Consent for Treatment**

* All patients will be individually screened and risk assessed prior to carrying out face to face treatments.
* If face to face treatment is indicated, patients will be asked to complete a screening form which will be emailed them. This must be completed satisfactorily before a face to face session can be confirmed.
* The patient will then be asked a further verbal screen on the day of their face to face session.
* All patients who are being offered face to face sessions will be asked to read a copy of this SOP – this, alongside detailed discussion with the therapist, will be used to ensure patient provides informed consent.
* The NHS guidance on high risk and moderate risk will be acknowledged and covered with each patient to ensure risk can be managed as appropriate (11).

**REFERENCES**

**1. World Health Organisation Q&A on Coronavirus**:

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/question-and-answers-hub/q-a-detail/q-a-coronaviruses> <Accessed: 29/10/2020>

**2. CSP Guidance on Face to Face or Remote Consultations**

<https://www.csp.org.uk/news/coronavirus/clinical-guidance/remote-or-face-face-consultations/implementing-guidance> <Accessed: 29/10/2020>

**3. CSP Guidance on deciding if face to face consultations are appropriate**

<https://www.csp.org.uk/news/coronavirus/clinical-guidance/remote-or-face-face-consultations/flowchart> <Accessed: 29/10/2020>

**4. CSP Guidance on Duty of Care**

<https://www.csp.org.uk/publications/duty-care> <Accessed: 29/10/2020>

**5. Gov.uk Guidelines for donning/doffing PPE** [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/911313/PHE\_quick\_guide\_to\_donning\_doffing\_PPE\_standard\_health\_and\_social\_care\_settings.pdf <](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/911313/PHE_quick_guide_to_donning_doffing_PPE_standard_health_and_social_care_settings.pdf%20%3C) Accessed: 29/10/2020>

**6. UK wide PPE Advice**

<https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/925605/PHE_PPE_illustrated_guide_for_community_and_social_care_settings_OCT_2020.pdf> <Accessed: 29/10/2020>

**7. PHE Advice re PPE in home care settings** <https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/888998/Domiciliary_guidance_01_06_2020.pdf> <Accessed via UK Gov website: 29/10/2020>

**8. Physio First and CSP guidance on PPE disposal in community setting**

<https://www.physiofirst.org.uk/resources/coronavirus-covid-19.html> <Accessed: 11/06/2020>

**9. Guidelines on getting tested in UK**

<https://www.gov.uk/guidance/coronavirus-covid-19-getting-tested> <Accessed 29/10/2020>

**10. CSP Remote delivery service options**

<https://www.csp.org.uk/news/coronavirus/remote-service-delivery-options> <Accessed: 29/10/2020>

**11. NHS – Who’s at Risk Guidance**

<https://www.nhs.uk/conditions/coronavirus-covid-19/people-at-higher-risk/whos-at-higher-risk-from-coronavirus/><Accessed 29/10/2020>