

COVID-19: Return to Clinic Best Practice

Clinic Environment Guidance

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Protect



- ✓ Prior to returning to practice, all practitioners should undertake a COVID-19 Antibody test to determine a past or recent infection, inform their patients of a negative result and self-isolate in the instance of a positive result
- ✓ All practitioners should consider taking a COVID-19 Antibody test at regular intervals as the test is not 100% accurate and only a snapshot in time
- ✓ Ensure PPE is well stocked (sourced from a reputable supplier) at all times and staff have access to the safest, government recommended PPE including high standard, qualified and verified fluid resistant surgical face masks (type IIR) and respirators e.g. N95, FFP2, FFP3 or equivalent
- ✓ All clinic staff should wear a fluid resistant surgical face mask at all times to protect colleagues and patients
- ✓ Staff should be trained on 'donning and doffing' PPE and staff should know what items and type of PPE they should wear for each setting, procedure and context
- ✓ Ensure your staff are trained on the type of PPE to wear for aerosol and non-aerosol generating procedures
- ✓ Gloves and aprons should be subject to single use and disposed safely after each patient contact
- ✓ Ensure 'fit testing' arrangements are in place to ensure respirators are well fitted and an adequate seal is in place

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Disinfect

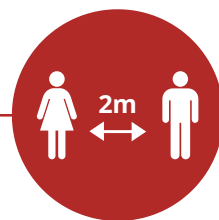


- ✓ Set up a sanitizing station where incoming patients can disinfect their hands using virucidal hand cleanser or provide a hand washing facility
- ✓ Clean card payment terminals if used between patients
- ✓ Hand hygiene must be performed immediately before every episode of direct patient care and after any activity or contact that contaminates the hands
- ✓ Designate a staff member to ensure cleaning products are re-stocked regularly
- ✓ Teamwork and environmental awareness are very important, consider designating a principle 'rule enforcer' of the new safety 'regime'
- ✓ A cleaning timetable with a named responsible staff member should be maintained for each clinic area ensuring at the end of the working a day, all common areas are subject to a thorough cleaning and disinfection regime
- ✓ Staff should receive training and information on the proper cleaning methods required
- ✓ Regular cleaning of keyboards, phones and other frequently used items should become part of the new safety 'regime'
- ✓ Thorough cleaning and disinfection of equipment, surfaces and areas of contact with the patient should be carried out after every procedure (staff should inform the patient of this for their assurance)
- ✓ Decontaminate equipment and the care environment using a combined detergent/disinfectant solution and warm water.

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Distance



- ✓ Consider perspex screen shields at the reception desk in-between patients and staff
- ✓ If you can't have a perspex screen shield, place a boundary line 2 metres in front of the reception desk, this should be known as the 'clean area'
- ✓ Treatment staff should not be permitted to pass through the reception area
- ✓ Consider staggering start times and breaks for staff in order to maintain distancing in offices, lunchrooms and changing facilities
- ✓ Using floor tape or paint to mark areas to promote 2 metre social distancing between staff and patients for easy reference and the avoidance of doubt

Our bespoke COVID-19 page and documents are for guidance purposes only; the responsibility remains with the practitioner at all times. It is the responsibility of the practitioner to ensure clinical good practice and public health is prioritised at all times, whilst following Public Health England recommendations.