## FOOT HEALTH PRACTICE WITHIN THE COMMUNITY

#### **Risk Assessment – COVID-19**

## **Background**

Coronavirus (Covid-19, SARS-Cov-2) a highly contagious respiratory infection, presents as asymptomatic, in a mild to severe form and in the more susceptible persons leads to an untimely death. The first confirmed case occurred in the UK on January 29 in York, England. In response the UK government in consultation with a number of top experts implemented an emergency plan to protect the public. This was conveyed in the striking and memorable phrase 'Stay at Home, Protect the NHS, Save Lives' campaign. During this phase of 'lockdown' the law required all non-essential businesses to close including some professions who were self-employed and working in the community.

As a Foot Health Practitioner (FHP) who routinely provided domiciliary foot care this was the 'trigger' to cease work immediately to ensure my clients who were deemed a 'high risk 'group (classified as clinically vulnerable or 'clinically extremely vulnerable) of catching Covid -19, would be protected. Telephone consultation was provided and clients reassured they could contact me with any concerns, but all routine, non-urgent treatments and assessments, appointments would be deferred until further government guidance published. (Alliance of Private Sector Practitioners, Alliance Rule Book – Professional Code of Conduct & Ethics 2017, College of Foot Health Practitioners – Covid-19 Guidance, March 2020).

Although at this time the rate (R) of infection/transmission is now between 0.7- 0.9 (below 1.0) and the number of deaths have shown a steady declined, and a gradual easing of restrictions has been implemented particularly for health care professionals and their businesses, it is to be remembered the <u>risk of transmission remains high for everyone (level 4)</u> and therefore, it is advisable that all FHP's should assume they are highly likely to encounter COVID-19 in their community and take measures as much as possible prior, during and after their domiciliary visits to reduce transmission and to proceed with caution. 'Stay Alert', Control the Virus, Save Lives'.

During this time, it is equally important to keep up to date with the (R) rate and trend within your own region, and area of daily practice and take heed of any government bulletins. A Track and Trace system is now in operation and local councils are responsible for its full implementation. There may be a 'second wave' of COVID -19 infection as there is concern of a rise in transmission, particularly in certain regions of England. (Closing certain businesses and venues in England, Gov.uk updated 13 may 2020)

# Rationale for return to practice in the community.

Since the outbreak of Coronavirus (COVID -19) was declared, the South West of England, particularly in Devon the figures have shown the lowest level of transmission rate, although deaths have occurred. The location in which I inhabit is very rural with a few towns and covers the South Hams District, Devon of approximately 85,000 residents. The latest confirmed (COVID-19) cases are 79 with no deaths. The residential and nursing homes I normally visit have had no Covid-19 cases throughout the pandemic. Although telephone consultation has been implemented it is now 11 weeks since clinical practice. Priority will be given to clients who have diabetes, circulatory problems, risk of skin breakdown / ulceration and pain.

### **RISK ASSESSMENT**

Employers and self-employed people are legally required to make an assessment of health and safety risks arising out of their work. The purpose of the assessment is to identify what needs to be done to control health and safety risks. *Regulation 3 of the Management of Health and Safety at Work Regulations 1999*. The regulations also state a person only needs to undertake an assessment of the business has 5 or more employees. <a href="https://www.hse.gov.uk/risk/assessment.htm">https://www.hse.gov.uk/risk/assessment.htm</a>.

However, FHP's are responsible for the health, safety and wellness of their clients and are accountable for their actions / omissions of treatment and care. Completion of a risk assessment will help one to decide if everything has been done that

needs to be done to keep everyone safe. Careful and thoughtful reasoning and analysis combined with the best evidence available can be demonstrated with the added knowledge it would be useful for insurance purposes in the future.

#### **OBJECTIVE**

To undertake a COVID-19 health and safety risk assessment to identify and quantify the extent of risk encountered through activities, processes, materials, equipment and from this information and approved resources implement measures in order to control the risks associated with return to clinical foot health practice within the rural community of South Hams, Kingsbridge, South West Devon, England. United Kingdom.

(Working safely during COVID-19 in other people's homes – Guidance for employers, employees and self-employed, May 2020, Gov. UK). COVID-19 Personal Protective equipment (PPE)- resource for care workers delivering homecare (domiciliary care) during sustained COVID-10 transmission in England. PHE APRIL 2020, Institute of Chiropodists and Podiatrists, Risk Assessment 'Traffic Light System', ICOP, May 2020)

# RISK ASSESSEMENT

Assessor	
Job Title: Foot Health Practitioner	
MPSP 23484	
Assessment Date: 30.05.2020	
Review Date: Ongoing- as per government guidance updates	
Description of assessment - Coronavirus (COVID -19)	
Location Details – South Hams District – Community Based	

Identified hazards)	Who may be affected	Risk Level before control measures. RED high YELLOW moderate GREEN low	Existing Control Measures	Additional Control Measures	Final Risk Level RED YELLOW GREEN
Catching and Spreading COVID -19	Self, clients, carers and family members other health professional visiting home environment the public.	HIGH	Telephone consultations <b>prior visit</b> to ensure client has no signs of Covid -19 or have been in contact with anyone other than carer, family member. Enquire if any Covid -19 tests / results. If positive or showing any signs of covid-19. Advise according to government guidelines. DO NOT ATTEND,  If practitioner shows any signs of Covid, stop work immediately and self-isolate.		GREEN

		History update. Medications, current foot problems - decision to treat. Skin breakdown, infection, pain. Record decision to treat.  Ensure, client, carer understands what they need to do to maintain their safety and for practitioner.  Inform practitioner if any changes in health before appointment.  Advise no dogs or animals in planned area of treatment / room and ideally only client present. If others present advise to wear surgical face mask.		
Maintain social distance of 2m	HIGH	Social distancing 2 m on entry to house where ever possible.  Leave doors open – no touching handles etc,	Consider delivery of treatment outside of house e.g.	MODERATE
Hygiene	HIGH	clear passage through house.  Wash hands in soap and water for at least 20 secs, dry hands with paper towel on entry immediately and dispose in designated plastic bag.  Use hand sanitiser.	garden, conservatory	MODERATE
PPE	HIGH	Client to wear surgical face mask where practical.  Practitioner - use of visor, N95 mask, apron, gloves. Do not touch eyes, face or mouth.		MODERATE

		Practitioner- Hair up, shave beard if appropriate, no jewellery to be worn (except wedding ring)  To 'don' visor and mask prior entry to environment.  If at any time sneeze or cough turn away from client. Wash hands for 20 sec and use hand sanitizer before proceeding again.	Consider removal of wedding ring during sessions.	MODERATE
Consent to attend for treatment and happy to do so following telephone conversation.	HIGH	You must not work if these are signs of COVID-19.  Document in records, date and time. This may consist of texts, emails.		GREEN
Transport	MODERATE	Stagger appointment times, particularly if other health professional visiting e.g. liaise  Use of own car. Insured for business.  No other persons or pets in car any time.  Maintain good ventilation windows open.  Use gloves. Clean visor in car / per product instructions.  Mask can be worn in car if not touched.		GREEN

	Clean handles, driving wheel and gear box with approved surface cleanser between visits followed by use of approved hand sanitiser.  Cleanse I phone cover with hand sanitiser after each use.  Use 'Double' plastic bag designated for all	
	waste disposal.  Record-keeping, diary entry date and time notes  Consume food & beverage outside of car on own.	GREEN
	Disinfect hands with approved hand sanitizer.	
Client's home environment	Arrival at location  Telephone on arrival – outside house or ensure front door open.	GREEN
Spread of COVID -19  Cross contamination	'don' visor and face mask, limit equipment and stock, keep to the minimum., disposable apron and gloves (after hand hygiene completed)	MODERATE
	Client to wear surgical mask if practical.	
	Consultation, treatment, care	
	Limit time in home / garden environment, do the essentials to maintain comfort and prevent further problems where possible.	

		Advice and telephone follow up re next appointment at be performed at home.  Use pre- packed sterile equipment as usual.  Use of disposable 'foot' serviettes' instead of towels.  Perform treatment and care as trained/ protocols  Adhere to infection control procedures as standard practice/ guidelines.  Follow product guidelines e g for visor and N95 masks. If damaged or dirty remove and replace between each home visit.  All PPE to be placed in designated 'double' plastic bag.  Wash hands in soap and water for at least 20 secs, dry hands with paper towel before leaving environment.  Payment for treatment. Collect cash or cheque with gloves on before washing hands on leaving.  Consider investing in electronic payment methods.	MODERATE
Emergency CPR	Client, practitioner, other health professionals	Call for help, telephone 999 ambulance.  Use client's emergency alarm if available usually found on neck or wrist.  Wear mask and gloves.  Familiarise with updated guidelines in line with COVID-19	

			Continue with chest compressions and defibrillation.  Infection control measures.	Resources  BMJ - talk medicine.  PHE  Resuscitation Council UK	
Uniforms, scrubs	Client, Practitioner, others in family household	HIGH	Carry a spare set of clean cotton scrubs. to change if they become contaminated, wet or dirty.  Change clothing and shower when arriving at home. Wash hands.  Launder uniforms separate to other items in the washer with disinfectant laundry wash detergent. /liquid on full cycle. Tumble dry or iron.  Use a high temperature as possible without damaging the item. Recommended temperature is 60 -90 degrees,		GREEN
Waste Disposal		HIGH	All waste disposal is to be' doubled bag' and left in garage for 72 hours before placing in collection bin.		GREEN
Equipment		HIGH	Strict adherence to training protocols, standards, guidelines, equipment manuals,		GREEN

Infection control  Cross - contamination		product information, be more careful when washing, cleaning, disinfection procedures and disposal of items.  Evidence of in date Certificate of annual maintenance.  Use of vacuumed autoclave as recommended.  Change distilled water weekly or when contaminated.  Wash hands more frequently.  Wear gloves.  Increase normal surface cleaning with approved products.	GREEN
Date completed	30.05.2020		
Lesley Hembrough			
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#### Resources

- 1. Guidance for people who have symptoms and those who live with others who have symptoms.
- 2. Guidance -Closing certain business and venues in England updated 13.05.2020
- 3. www.gov.uk/workingsafely. Updated 29.05.2020
- 4. Working safely during COVID-19 in other people's homes-Guidance for employers, employees, and the self-employed. 11 May 2020.
- 5. https://www.hse.gov.uk/risk/assessment.htm
- 6. www.gov.uk/government/publications/covid19/how-to-work-safely-in-care-homes.
- 7. www.gov.uk/government/publications/wuhan-coronavirus-infection-prevention-and-control.
- 8. https://www.nice.org.uk/guidance/cg139
- 9. https://coronavirusresources.phe.gov.uk/hand-hygiene.
- 10. https://www.gov.uk/government/publications/coronavirus-covid-19-personal-protective-equipment-ppe-plan/covid-19-personal-protective-equipment-ppe-plan.
- 11. https;//gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings/covid-19-decontamination-in-non-healthcare-settings.
- 12. PHE. Covid-19 Personal protective equipment (PPE)- resource for care workers delivering home care (domiciliary care) during sustained COVID-19 transmission in England. April 2020.
- 13. Guidance on mental health and wellbeing aspects of coronavirus (Covid19)
- 14. HSE
- 15. BMJ, PHE, Resuscitation Council.UK accessed 29.05.2020