

#### Covid-19 Guidance 5

## 1. BPC Guidance 5 - Returning to clinical work in the consulting room

The easing of social distancing measures from 4<sup>th</sup> July offers the potential to return to face to face sessions, however government still advises that every reasonable effort should continue to enable working remotely as a first option and people who can work from home should continue to do so.

Registrants who decide to open their consulting rooms are required to assess whether they can implement current government guidance to contain the spread of Covid-19. The devolved governments are managing the easing of lockdown's restrictions at a different pace than England however the following guidance applies to all registrants when the possibility of returning to face to face work is available.

#### a. Assessing Risk

Government has published guidelines for businesses and the self-employed returning to face to face work. There has been no specific guidance issued for psychotherapists and counsellors, however, the <u>guidance for 'close contact services'</u> can be useful when risk assessing premises and ensuring they are safe enough for registrants and patients. Further information is also available on the <u>UK Government</u> and <u>HSE</u> websites. The location of the consulting room, how it is accessed, whether it is shared with other practitioners, located in a private or public setting will also influence whether government guidance can be adhered to or not. Risk assessment includes whether:

1. Registrants and/or patients may be particularly vulnerable to Covid-19

- 2. Increasing the frequency of handwashing/sanitising and surface cleaning is possible to implement
- 3. Every reasonable effort to comply with the social distancing guidelines set out by the government (2m, or 1m with risk mitigation where 2m is not viable) has been put in place
- 4. Every reasonable effort to clean and sanitize the consulting room, door handles, to protect/clean chairs/couch and to air the room during and/or in between sessions can be implemented.
- 5. Waiting areas are spacious enough to continue to be made available or the appointment system needs changing to avoid any unnecessary contact between patients.
- 6. A clear action plan is in place in case registrants or any of the patients they have been in contact with, test positive to Coronavirus (for example would they communicate this to each other and to other patients or would they solely rely on the Test and Trace system).

# b. Mitigating risk for both clinicians and patients

Registrants should consider the needs of their patients and their own personal circumstances. If they are satisfied contracting and spreading Covid-19 can be mitigated according to guidance available and that there is mutual understanding of the risks and of the actions needed to mitigate such risks, they may consider implementing the following specific protective measures before, after and during sessions:

- Telling patients they cannot arrive early.
- Leaving enough time between sessions to ensure the room can be sanitised and aired.
- Hand washing upon entering the premises and upon leaving.
- Ensuring there are infection control measures in place at all times (wipes, alcohol had gel and disinfectant spray for furniture).
- Considering using single use plastic covers for chairs and sofas/couch.

- Opening doors for patients to minimise patients touching anything in the room or considering the use of disposable plastic gloves.
- Keeping windows open if/when possible but always ventilating between appointments.
- Cleaning door handles, surfaces, taps, light switches, loo flush (if toilet facilities are provided) before and after every session.
- Discouraging the use of toilets unless absolutely necessary.
- Avoiding touching objects in the room.
- Wearing masks or visors when the two metre distance cannot be maintained.
- Regular and effective hand-washing/hand sanitising remains an essential and core principle.

Further steps registrants may need to consider are highlighted in the Government guidance for close contact services (link above) and in the BPC Guidance 4.

### c. Covid-19 Test and Trace and disclosing patients' details

The wider approach to contain Covid-19 includes contact tracing to identify positive cases and to slow down the spread of the virus.

People considered 'close contacts' are:

- people you've spent 15 minutes or more with at a distance of less than 2m
- Sexual partners, household members or people with whom you have had faceto-face conversations at a distance of less than 1m

It is important that registrants are aware that if tested positive to Coronavirus, they will be required to inform the NHS of people they have been in close contact with this includes disclosing patients' names and contact details. However, disclosing the nature of the relationship is not a current requirement.

Registrant are expected to comply at all times with the BPC Code of Ethics. The BPC recommends that all registrants explain their obligation in relation to Test and Trace to their patients and set out the steps they would take if they were to test positive. If a written contract is provided, this will need to be amended to include the new disclosure requirements and shared with patients.

If patients are uncomfortable with the possibility of their details being disclosed, they may choose to continue with online or telephone sessions.

An explanation of how contact tracing works <u>can be found on the BBC website</u>.