

# Risk Assessment for Resumption of Optical Service in England

## NHS England & NHS Improvement East of England

### Introduction

In support of Optical practices planning to re-open to provide GOS services for patients as part of the resumption of Optical services in England, NHS England and Improvement regional team with input from LOC colleagues, have come up with a checklist of themes that should be considered in accordance with current guidance issued by NHS England.



C0601\_Reopening of C0601\_COVID19\_OP  
optical services letter · TICAL\_SOP v1 17 Jun

Other useful sources of information and guidance can be found at the following links:

<https://www.college-optometrists.org/the-college/media-hub/news-listing/primary-eyecare-covid-19-guidance-amber-phase.html>

<https://www.abdo.org.uk/coronavirus/>

<https://www.aop.org.uk/coronavirus-updates/novel-coronavirus-covid-19-advice>

### Aim

The checklist is aimed at encouraging practices to risk assess all aspects of providing GOS services during the COVID-19 pandemic and safely re-open their doors to patients and their staff.

Due to the overall uncertainty and rapidly changing COVID-19 landscape as well as the individual variation in practice circumstances and equipment, this list cannot be exhaustive. Therefore, this checklist presents a list of points to consider rather than definitive specific actions.

Professional bodies have already produced and issued advice and continue to do so. This checklist is designed to complement these sources rather than supersede them.

- Appendix 1 – Overview of Areas to consider
- Appendix 2 – Checklist for preparation of re-opening
- Appendix 3 – Example risk assessment tool for staff potentially at increased risk of illness from COVID-19

## Appendix 1 Overview of Areas to Consider

Areas to Consider	Additional Information
Premises	Posters and signage on display for patients
	Clear messages and communications for patients to inform of changes of services e.g. on practice answerphone/website
	Hand gel/ handwashing facilities available for patient use
	Toilet facilities for patients and team members
	Adaptions to reception areas needed e.g. screens
	Payment mechanisms for patients to avoid handling money
	Avoid air conditioning
Social Distancing	Consider the patient journey through the practice
	Consider the teams travel through the practice
	Implementing 2m social distancing within communal areas e.g. spaced seating in waiting rooms and staff rooms
	Limit the number of patients within the practice at any one time
	Encourage patients not to arrive early for appointments
	Patients to attend for appointments alone where possible
Team Members and Workforce	COVID-19 risk assessment – consider non-clinical roles for vulnerable and high-risk team members
	Working patterns – consider if shift work is required
	Ensure all team members have adequate indemnity
	Consider a protocol if a team member develops signs or symptoms of COVID-19
	Consider and support staff health and well-being
PPE	Undertake a risk assessment tool (see appendix 1)
	Source and supply
	Training for team members including fit testing for FFP3 masks (where required)
	Specific areas for donning and doffing PPE
	Establish the level of PPE required for each team member
Practice and Treatment Protocols	If appropriate, ensure uniform is not worn to and from work.
	Place a sign(s) on door/window stating that patients with suspected or confirmed COVID-19 should not enter the practice and indicating that the practice is only open for patients with a pre-arranged appointment.
	Remote consultation for patients via phone or video
	COVID-19 assessment must be completed for all patients
	Remote triage prior to in-practice appointment
	Appointment booking schedule
	Appointments for shielded patients to consider offering as the first appointment of the day (specific time slots for shielded patients)
	Avoiding use of paper with patients – to gain medical history and consent remotely
	Consider taking temperature of patients on arrival
Infection Control	Update patient communications to include practice opening times, out of hours contact details, procedure when attending the practice for an appointment
	Where practices have been closed for an extended time thoroughly clean all areas before opening Consider additional training for staff including all members are

	aware of document COVID-19 infection prevention and control guidance and scenario-based team training in the practice.
	Remove unnecessary items from surfaces to facilitate cleaning

## Appendix 2 Checklist for preparation for re-opening

Action	Completed	Comments
<b>1. Premises</b>		
1.1 Carry out a risk assessment of the practice to identify the measures required to minimise the risk of COVID-19 transmission.		This should include premises, protocols and procedures.  Further information is available from the <a href="#">Health and Safety Executive</a> .
1.2 Clean the practice thoroughly and remove any clutter to facilitate frequent cleaning and disinfection.		
1.3 Run water through pipes and taps in the practice, kitchen, bathrooms, etc.		Consider how frequently water has been run while the practice was closed in determining how long to run the taps for. In order to avoid splashback, do not open taps fully to start with.
1.4 Place posters and signage in the practice e.g. hand and respiratory hygiene.		Example posters are available from:  <a href="#">National Infection Prevention and Control Manual, Best practice How to wash hands</a> .  <a href="#">National Infection Prevention and Control Manual Respiratory hygiene 'Catch it, bin it, kill it'</a> .
1.5 Plan hand hygiene facilities for patients e.g. handwashing sinks or alcohol-based hand rub (ABHR).		Air hand dryers should not be used at this time.
1.6 Ensure supplies for hand and respiratory hygiene are available at practice entrance, reception areas, waiting room and surgeries.		
1.7 Plan how to facilitate physical (social) distancing in reception, waiting room and other communal areas.		For example, marking out physical (social) distancing spacing, use of physical barriers/screens, removing chairs.
1.8 Cancel redirection of mail and deliveries. Devise a protocol for receiving mail and		

Action	Completed	Comments
deliveries.		
1.9 Test fire alarm to make sure everything is working.		
<b>2. Consulting Room Facilities</b>		
2.1 Is the consulting room clean and tidy		
2.2 Is there adequate lighting, test all is working		
2.3 Is there reasonable patient access (Equality Act 2010)		
2.4 Is there suitable and enough seating		
2.5 Is the consulting room suitable for confidential consultations and confidential telephone calls to be made by the optometrist/OMP. e.g. for urgent referrals		
2.6 Is there adequate testing distance considering COVID-19 2m rule.		
2.7 Access to a wash hand basin (good practice for this to be within the consulting room) hand gel available		
2.8 Contractor aware of duty of care to appropriately dispose of waste.		
<b>3. Clinical Testing Equipment</b>		
3.1 Check that all equipment is in working order and is fit for purpose.		
3.2 Check ophthalmic drugs for expiry date and order as required.		Consider supply chain and likely availability.
3.2 Check stocks of supplies and consumables and order as required.		This may include extra instruments. Consider supply chain and likely availability of, for example, disinfectant products and PPE.
3.3 Organise engineer visits for maintenance and testing as required.		This may include inspection, revalidation and routine maintenance visits that were due while the practice was closed.
<b>4. Staff</b>		
4.1 Ensure that staff undergo training to prepare for changes to practice processes, including:		
<ul style="list-style-type: none"> <li>• Infection prevention and control.</li> </ul>		

Action	Completed	Comments
<ul style="list-style-type: none"> <li>Decontamination processes.</li> </ul>		
<ul style="list-style-type: none"> <li>Donning and doffing of PPE.</li> </ul>		<p>Do you have a policy on uniform which has been updated to reflect more stringent hygiene requirements?</p> <p>Communicate any policy updates to staff.</p>
<ul style="list-style-type: none"> <li>Scenario based training for patient management and procedures.</li> </ul>		
<ul style="list-style-type: none"> <li>IT training e.g. software and use of any triage custom screens or templates.</li> </ul>		
<ul style="list-style-type: none"> <li>Administrative tasks including any changes to payment methods and appointment protocols.</li> </ul>		
4.2 Ensure mechanisms are in place to support staff health and wellbeing, including:		
<ul style="list-style-type: none"> <li>Checking local health board occupational health contacts and COVID-19 protocols.</li> </ul>		
<ul style="list-style-type: none"> <li>Devising a protocol for all staff to follow if they or someone they live with develops symptoms, including whether they should apply for a COVID-19 test.</li> </ul>		
<ul style="list-style-type: none"> <li>Putting tools in place to facilitate effective staff communication whilst working in “clinical bubbles”.</li> </ul>		For example, continued group chats/video conferencing or other mechanism.
<ul style="list-style-type: none"> <li>Making staff aware of available resources e.g. mental health, resilience, self-care.</li> </ul>		
4.3 Review and update continuity plan with required amendments.		
<b>5. Practice procedures</b>		
5.1 Develop procedures for returning to practice, including:		For ease of team reference consider documenting some or all these processes.
<ul style="list-style-type: none"> <li>Patient movement/journey through the practice</li> </ul>		Consider chaperoning the patient during their entire journey through the practice.
<ul style="list-style-type: none"> <li>Patient appointment booking</li> </ul>		Pre-book appointments including spectacle dispensing, collections, repairs

Action	Completed	Comments
		and adjustments.
<ul style="list-style-type: none"> <li>Remote patient triage prior to attendance</li> </ul>		
<ul style="list-style-type: none"> <li>Medical history completion</li> </ul>		Try to facilitate this being done remotely where possible.
<ul style="list-style-type: none"> <li>COVID-19 assessment</li> </ul>		
<ul style="list-style-type: none"> <li>PPE</li> </ul>		<p>Do you have PPE for all staff who are providing care within a 2m radius?</p> <p>Adequate supplies of: Gloves, aprons, masks, protective eyewear</p>
<ul style="list-style-type: none"> <li>Appointment protocols</li> </ul>		Consider extra time between patients, communicate any new appointment schedules to staff members.
<ul style="list-style-type: none"> <li>Cleaning procedures:</li> <li>Environmental cleaning</li> <li>Standard Infection Control Precautions</li> <li>Transmission Based Precautions</li> </ul>		It may be useful to create a list of surfaces and areas that require more frequent cleaning than previously. This can be added to the practice cleaning schedule.
<ul style="list-style-type: none"> <li>Trying and fitting spectacles</li> <li>Create notice asking patients to use hand sanitiser or wear gloves provided by the practice before they select and try on frames</li> <li>Create policy to set aside frames that have been tried, to clean before returning to display</li> <li>Consider whether you want to limit it to staff taking frames off display.</li> </ul>		
<ul style="list-style-type: none"> <li>Appointment payment options</li> </ul>		If the practice is taking payment over the telephone, check with your card payment facilitator that this does not impact on PCI DSS (Payment Card Industry Data Security Standard) compliance if it is a requirement of your agreement with them.
<ul style="list-style-type: none"> <li>Use of toilet facilities</li> </ul>		
<ul style="list-style-type: none"> <li>Staff working patterns</li> </ul>		
<ul style="list-style-type: none"> <li>Team communication</li> </ul>		
<ul style="list-style-type: none"> <li>Team reporting of COVID-19 status</li> </ul>		

Action	Completed	Comments
<ul style="list-style-type: none"> <li>Dealing with known or suspected COVID-19 symptoms in practice</li> </ul>		
5.2 Review the list of patients that contacted the practice during closure and begin to book appointments, prioritising these on the basis of clinical need and available treatments.		Continue to change/cancel upcoming appointments as necessary.
<b>6. Patients</b>		
6.1 Update patient communications (answer machine, website, social media) to advise of reopening changes (treatment options, requirement to book appointments in advance including spectacle collections, repairs and adjustments etc).		Consider sending all patients a letter/email/text to advise of changes to practice.
6.2 Prepare advice for patients on what to do/expect when attending the practice for an appointment.		This will be based around the protocols you have devised.
6.3 Place a sign(s) on door/window stating that patients with suspected or confirmed COVID-19 should not enter the practice and indicating that the practice is only open for patients with a pre-arranged appointment.		You may choose to keep the door locked and have staff open it when the patient arrives.
<b>7. External</b>		
7.1 Inform external providers e.g. NHSE&I area team, insurance company, indemnity provider, waste contractors, IT provider, pharmacy, GP practice, suppliers, maintenance contractors, utilities and telecoms of practice reopening date.		

## Toolkit Scoring

Category	Completed	Not Completed	Action, if not completed
Premises			
Consulting Room Facilities			
Clinical Testing Equipment			
Staff			
Practice Procedures			
Patients			
External			

**Having completed the self-assessment document please consider the date and detail the level of service you will be able to provide**

Able to open and provide full GOS services including Aerosol Generating Procedures (AGP)	Y/N	Date:
Able to open and only provide advice only	Y/N	Date:
If answered no to all of the above, please explain why and the projected date by which you will be open, advising the level of service you will be able to provide.		

Please respond via the link in the Gateway message to these questions by **5pm on 24 June 2020**. For ease of reference the link is also detailed below:

## Appendix 3 Example risk assessment tool for staff potentially at increased risk of illness from COVID-19

Adapted from Bradford District Care Trust risk assessment tool

Optical practice owners and managers are asked to have a supportive and comprehensive conversation with **ALL** staff at increased risk, including BAME staff to ensure that all steps are being taken to support them during the COVID-19 pandemic. This document provides a framework for these discussions, but it should also be used as a template for discussions with other team members with risk factors e.g. underlying conditions. It is a record of the risk assessment undertaken and agreements made between:

<b>Employee/ staff member name</b>	
<b>Job title</b>	
<b>Line Manager's name</b>	
<b>Date</b>	

This agreement should be reviewed as necessary with the agreement of both parties upon a change of national guidance or the health and risk situation for the staff member and team. It should also be reviewed at any of the following:

- At any regular one-to-one meeting
- At a return to work meeting following a period of sickness absence or social isolation
- Before a change of job or duties or introduction of new technology or ways of working
- Before or after any change in circumstances for either party.

### Precautionary Measures

Are you still attending the workplace?	
Have you been 'deployed' into another role?	
Is your role patient /service user facing?	
Are you coming into contact directly with Covid-19 positive patients/service users?	
Have modifications been made to your duties to reduce risk?	

Do you feel further modifications could be made to further reduce risk? What are they?	
Do you have any concerns about travelling to and from work?	
Do you have any concerns in relation to maintaining social distancing whilst at work?	
Do you have any concerns in relation to the availability of PPE?	
Have you received Fit Testing where this is required for your role/work situation?	
Do you have any concerns in relation to Fit Checking?	
Are you receiving adequate breaks at work?	
Do you have any concerns in relation to your working hours or shift pattern?	
Do you have a second job in a different organization?	

### Your Wellbeing

Do you have an underlying health condition or any of the risk factors listed by the government on the attached document?	
Is there any family history of the conditions that the Government has reported as increased risk factors?	
If yes, have you received advice from occupational health during the pandemic in relation to your condition(s)?	
If yes, have all Occupational Health's recommendations been implemented?	
Do you have any anxieties, concerns about attending work?	
Do you have any other concerns (housing, financial, personal, etc.) that may be affecting your well-being or your ability to undertake their current role?	

### Personal Circumstances

Is there anything else you feel we should know to assist you during the pandemic? For example:	
do you live with someone with underlying conditions / is shielding / is at risk for any other reason?	
do you have caring responsibilities and/or dependents? -	

do you live with extended family or in shared accommodation that would / does make isolating within the home if required difficult?	
Travel to work arrangements?	
Do you have any concerns about being able to follow government guidance around social distancing and isolation outside of work?	

**Example risk mitigations could be as follows:**

- Signposting to support / information – a wide range of support is available on Connect and via the wellbeing work Team.
- Reviewing an ensuring provision of Equipment (e.g. PPE, homeworking equipment).
- Working flexibly or homeworking
- Change to working pattern
- Redeployment to another role
- Limiting contact with covid-19 positive patients.

I will let you know if there are changes to my condition which have an effect on my work and/or if the agreed adjustments are not working or if the risk to me relating to Covid-19 changes. We will then discuss any further adjustments or changes that should be made.

Employee signature: \_\_\_\_\_

Date: \_\_\_\_\_

Employer signature: \_\_\_\_\_

Date: \_\_\_\_\_