

28/5/21 COVID-19 Patient Information Sheet for Face to Face Consultation

This information sheet is provided to you to allow you to be fully informed about COVID 19, how you can reduce the risk to yourself and others and how Caledonian Physiotherapy Services will manage risk if you visit the practice for a face to face consultation.

The information is broken down into three areas, these are:-

- 1. Initial remote triage- this allows us to assess your suitability for a face to face consultation, to inform you about COVID-19 and the risks it presents to you and others by attending a face to face consultation.
- 2. What do you need to do when attending your face to face consultation?
- 3. What will Caledonian Physiotherapy do to manage the risks to you and others when attending for a face to face consultation?

Please feel free to ask any questions at any stage of the process, ideally before you attend by email or telephone.

1.0 Initial Remote Triage

Patients contacting the practice by phone or email for appointments would firstly be emailed or posted out a COVID-19 Triage questionnaire, to be completed both for themselves and anyone else accompanying them. We ask for the document/s to be returned to us by email, ideally at least 48 hours before the appointment. This allows the Physiotherapist time to check the information and if necessary, time to call you and clarify any information should it be needed. If the patient does not have an email address, one of our physiotherapist's will phone the patient to complete a COVID-19 Triage.

The purpose of this triage is to:-

Clearly give the patient as much information about how the service is running presently
and why this is being done with respect to the prevention of transmission and spread of
COVID-19 and that the preferred and recommended method of consultation may be a
virtual appointment. This information will also be readily available on the website and on
social media.



- By giving information it will allow the physiotherapist to understand the expectations of the patient and be able to manage these effectively.
- To find out the nature of the patient's problem and the patient's needs and goals.
- The physiotherapist will follow "The 3 Point F2F Check" three stage face to face triage procedure to decide if a face to face consultation is warranted and justified:-
 - 1. Clinical indication
 - 2. COVID 19 Risk Assessment passed
 - 3. Consent of the patient
 - Screening for clinical red flags relevant to the body area in question will be carried out and if necessary direct onward referral will be carried out.
- The physiotherapist will consider whether clinically the patient fulfils one of the following three clinical states which may clinically indicated for face to face consultation: -
 - 1. There is a high suspicion of risk of rapid, significant clinical deterioration from underlying serious pathology or those presenting with worsening, progressive neurological symptoms of spinal origin which the physiotherapist is unable to determine remotely.
 - 2. The patient has urgent rehabilitation needs, which if not met, will require care from General Practice, secondary care or social care agencies. This is particularly important if they are themselves a carer for someone who is vulnerable.
 - 3. The patient requires rehabilitation to support their rapid discharge from secondary care.
- To determine the current health status of the patient by asking whether they have had COVID-19 or are currently having symptoms of COVID-19 or other viral infections, whether they have been in contact with some body in their household who has had or currently has COVID-19 or other viral infections. The patient will also be asked whether they have a" vulnerable" or "shielding" or self- isolating member of their household or who they may be carring for. A COVID-19 Risk Assessment would be a carried out: -
 - 1). Has the patient had any symptoms of COVID-19 within the last 14 days?



- 2). Does the patient have a temperature of 38.7C or above?
- 3). Has the patient come into close contact with a known or suspected case of COVID -19 in the last 14 days?
- 4) Has the patient had a confirmed negative COVID-19 test in the last 14 days?
- 5) Is the patient, or anyone in the patient's household, awaiting the results of a COVID-19 test?
- 6) Has the patient returned from a foreign country in the last 14 days?
- 7). Is anyone in the patient's household self-isolating due to symptoms of or possible exposure to COVID -19?

The symptoms of COVID-19 are: -

- Fever > 37.8c
- New continuous cough
- Myalgia
- Difficulty breathing
- Loss of taste
- Loss of smell
- Nausea
- Diarrhoea
- Confusion in the elderly
- Reduced mobility in the elderly

The methods of transmission are: -

- Aerosol spread by coughing, sneezing and heavy breathing as in exercise, the droplets are directly inhaled into the recipient's airway or absorbed through the eyes.
- Contact spread by droplets landing on hard or soft surfaces touched by the recipient and then brought close to their face and eyes by the hands or they land on the skin and are transferred to the airway by the hands touching the face.
- Droplets on hard and soft surfaces can survive for up to 72 hours.

The virus has an incubation period in which there may be no symptoms and this period is variable. During this time, the person can infect other people. Prevention/reduction of transmission can be achieved by: -

- Using a tissue to blow your nose or when coughing or sneezing and immediately placing the tissue in the bin.
- Washing your hands or using hand sanitiser after blowing your nose, coughing or sneezing



- Cleaning surfaces that you may have coughed or sneezed over and then wash or sanitise your hands.
- Regular hand washing and sanitisation.
- Stay at home within your home household unless you need to go to work or to go outside to exercise or meet one other family group.
- Obey social distancing guidance outside the house and when visiting shops, your place of work or places such as the doctors or other medical services.
- Dispose of tissues securely by bagging it and storing it for 72 hours it can then be put in the normal refuse.
- Washing clothing or bedding which may be contaminated at the recommended temperature of 60 degrees Celsius and above.

Once infected with the virus, the symptoms can vary in the type of symptoms and the effects of the virus with the most common symptoms being a fever with temperature greater than 37.8C, new continuous cough, loss of sense of taste and smell. During this time, the person is potentially highly infected.

If you have any of these symptoms or similar symptoms you should: -

- Stay at home and self-isolate from others in your household
- Let the NHS know via their helpline or by going online
- You should stay at home for ten days
- If you are worsening or the symptoms are not improving by ten days contact NHS 24.
- Other persons in your household must now self-isolate for ten days, if asymptomatic at ten days they can then leave the house.
- By contacting the NHS you will trigger the Test and Trace Procedure where people you
 have in contact with will be told to go home and self- isolate for ten days if
 symptomatic and ten days if they have no symptoms. This will apply to all the people
 they have contacted as well.

The effects of the virus can be catastrophic and in the worst-case lead to death. This is more likely in people with pre-existing conditions or comorbidities. At present there is a vaccine which is being administered in stages.

Some people are categorised as being more vulnerable because of these pre-existing conditions or comorbidities these would and some of the most vulnerable people have been shielded from the beginning of the COVID-19 lockdown to reduce the risks to them.



- Patients are welcome to bring their carer/family member/translator or chaperone but the
 physiotherapist will need to know all about their health status and they also need to
 understand the risks posed by attending for a face to face consultation with the patient.
- Patients will be asked whether they or their carer/family member/translator or chaperone attending with them whether they have certain comorbidities which would make them more vulnerable in a face to face consultation these are termed COVID19 high risk red flags and these would include: -
 - 1. Aged greater than 65
 - 2. Gender
 - 3. Pregnancy status
 - 4. BMI greater than 30
 - 5. Smoking status
 - 6. BAME ethnicity
 - 7. Underlying respiratory condition
 - 8. Weakened immune system
 - 9. Comorbidities that cause immunosuppression including, diabetes, HIV/AIDS, RA, pre-existing infection, alcohol abuse, smoking and long-term steroids usage.
 - 10. People with known cancer diagnosis and receiving treatment.
 - 11. Vitamin C or D deficiency
 - The patient will be asked whether they need assistance or mobility issues when attending for their face to face consultation to allow the physiotherapist to select the correct treatment room suitable for the patient and if applicable their carer/family member/translator or chaperone.
- If there is evidence to support that the patient or their carer/family member/translator or chaperone is potentially infected with COVID-19 or is potentially at greater risk for medical reason, they should be asked to stay at home and get the appropriate medical help and advice.
- Information given by the patient and those accompanying them will be used for the Test and Trace procedure should that be necessary. The data provided by those accompanying the patient will be held securely for one month and then this will be deleted.
- If the physiotherapist feels face to face consultation is appropriate and they are happy that the patient is fully informed regarding the risks to themselves and others by attending and that the patient has given their written or verbal informed consent, then a planned face to face consultation can proceed.



- The patient will be placed into one of three categories of risk, which helps to define whether face to face consultations are appropriate, and what level of PPE is required.
 These are: -
- High risk- the patient is unwell with COVID- 19 symptoms and has a positive test for COVID-19. This category of patient will not be seen face to face but they may be appropriate for remote or virtual consultation.
- Medium risk- the patient is well but has not had a COVID-19 test. These patients will be appropriate for face to face consultations, with the physiotherapist wearing appropriate PPE.
- Low risk- the patient is well and has had a confirmed COVID-19 test. These patients will also be appropriate for face to face consultations, with the physiotherapist wearing appropriate PPE.

2. What do you need to do when attending your face to face consultation?

- Ensure your COVID status or the status of those accompanying you has not changed since the initial remote triage. If so, do not attend and let the practice know by phone.
- Try wherever possible to come on your own-this reduces the risks for them and for others.
- Try to come by your own transport were possible and avoid public transport.
- Obey social distancing on your way to the practice.
- Wear a mask or suitable face covering where possible, unless you are exempt, and ask those accompanying you to do the same where possible, unless they are exempt.
- Do not enter the building until it is time for your appointment-ideally ringing ahead allows the physiotherapist to know that you are waiting and if they are delayed you would wait outside or in your car until the physiotherapist says it is safe to come in.
- All external doors to the practice should be open reducing your need to touch the door handles. If they are closed, please wait patiently for your physiotherapist to come and collect you.
- Try not to touch anything you do not need to touch e.g. our intercom button.
- Use the hand sanitiser station on entering the inner hallway.



- You will either proceed upstairs to Suite 4 or downstairs to Suite 2. The physiotherapist will meet you and take you into the treatment room and will open and close any doors, so you do not have to touch them.
- The toilets at the practice will be closed and only available in an emergency to reduce the areas that the patients and staff touch.
- There will be no waiting area and all unnecessary furniture will be removed to reduce contact with them for patients and staff.
- Wear something comfortable to your consultation which will allow the physiotherapist to examine you more closely, ideally if wearing shorts wear them under your trousers. This reduces the use of shorts provided by the practice and their possible contamination.
- You will be asked to sit 2 metres from the physiotherapist on a plastic chair which is easily cleaned, if applicable those accompanying you will do the same.
- In the event of an emergency the physiotherapist would advise the patient as to the course of action.

3). What will Caledonian Physiotherapy do to manage the risks to you and others when attending for a face to face consultation?

- You will see signs giving details about COVID-19, social distancing and hand sanitisation information by each doorway in the practice asking you not to come in if you suspect you may be infectious.
- The doors to the practice will either be open, or a member of staff will open and close the door for you, reducing your need to touch the door.
- Try to place all your belongings into your pockets or bag so that you do not need to hold them.
- Ensure your face covering is in place before you enter the building if you can wear one. You will then be required to sanitise your hands. There are instructions how to do this on the wall by the masks. The use of a mask, where possible, will reduce the risk of transmission by aerosol spread. The use of sanitiser will ensure your hands are clean. If you are accompanied, then the person accompanying you will have to do the same. Once the mask is in place, if you are wearing one, it is important not to touch it again until you leave the building.
- You will note that the toilets are closed (except in an emergency) and that there is no furniture in the waiting areas to reduce the surfaces that may be touched by patients or staff.
- You will be met by the physiotherapist who will take you and those accompanying you to the treatment room allocated to you and they will open and close the doors for you.
- Your appointment will be at a staggered time so that you do not come into close contact with other patients or staff and so that you can adhere to correct social distancing.



- The physiotherapist will be wearing PPE which has been deemed appropriate for the level of risk, namely, low risk: a mask, gloves and an apron; medium risk: a mask, gloves and an apron; the need for eye protection in this scenario will be individually risk assessed by the physiotherapist. They may check to see that your mask is well fitted and give you instructions how to fit it correctly. If you are accompanied the physiotherapist will check that their mask fits correctly. If this is necessary, the physiotherapist will ask you to sanitise your hands again.
- The physiotherapist will take your temperature and anybody accompanying you using an Infrared Thermometer and they will record these details. If there is any suspicion that you may be a COVID-19 risk, you will be asked to leave and go home.
- The physiotherapist will ask you to sit down on a plastic chair placed 2 metres distant and this will be the case for anybody accompanying you. The use of plastic chairs ensure we can clean the chair easily.
- The physiotherapist will go over the COVID 19 questions they have asked you previously
 and if accompanied those accompanying you. If you wish to ask any questions, then do
 so.
- The physiotherapist will ask you to sign a consent form to show that you understand and agree to the risks that may be involved in a face to face consultation and that you wish to proceed. If accompanied, they would do the same.
- The physiotherapist will then perform a subjective examination and ask you more detailed questions about your problem.
- The physiotherapist may ask you to undress, they will step out of the room whilst you do
 this, the physiotherapist will provide you with a plastic box to put your clothes in whilst
 you are being examined. At the end of the examination, you can retrieve your clothes
 from the box.
- The physiotherapist will perform an objective assessment and may ask you to perform movements or to lie on the treatment plinth. The treatment plinth will be covered in disposable bed roll and the pillows are wipeable.
- The physiotherapist may touch you during the examination and any subsequent treatment, but this will be kept to a minimum to reduce the time of the contact ideally for less than 15 minutes.
- The physiotherapist will not ask you to exercise so hard that you become breathless and therefore increase the generation of aerosol droplets (Aerosol Generating Procedure).
- After the examination you will be asked to dress whilst the physiotherapist leaves the room.
- The physiotherapist will discuss your possible diagnosis and the proposed plan of treatment, they may send you a treatment plan by email or post to reduce the time spent in contact with you.
- The physiotherapist will discuss your next appointment and give you a date and time for this. The physiotherapist may suggest that your future management could be done via a



virtual appointment if they feel this is appropriate, they will explain why they have come to that decision.

- You will be asked to pay for your appointment either over the phone, by BACS or using the contactless facility on our card machine. You can pay by cash if necessary. The card machine will be cleaned after you have used it.
- The physiotherapist will accompany you from the building opening the doors for you. Please use the hand sanitiser station on your way out.
- When you have left the physiotherapist will remove their PPE and clean the treatment area and any surface you and they have made contact with. This will be documented.
- The physiotherapist will dispose of any waste and used PPE safely.
- The physiotherapist will then replace their PPE for the next patient.
- The physiotherapist will only work in one treatment area to prevent cross contamination of surfaces.
- At the end of the day the Caledonian Physiotherapy Services Staff will clean the building in preparation for patients the next day.
- All physiotherapists will come to work in their own clothes and change into uniform when they arrive, this will be changed if soiled/contaminated and at the end of the day. Uniforms will be taken home at the end of the day and washed at the recommended temperature.
- All staff will be asked to declare their COVID-19 status and have their temperature taken at beginning and middle of the working day and this will be recorded.
- Wherever possible the windows in the treatment areas will be opened to allow throughput of air.
- In the event of a fire the physiotherapist would follow the Fire Procedures and policies
- In the event of the patient becoming acutely unwell the physiotherapist would follow the care of the Acutely unwell patient procedures and Policies, where as much as possible social distancing and the use of equipment creating a barrier between patient and physiotherapist/first aider.

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