

NOTES on NHS Lothian risk assessment for Physical Spacing for Covid-19

The subject of this assessment is the risk of transmission of Covid-19 arising out of close proximity working and patient pathways. This applies to transmission between anyone on our sites: patients, staff, contractors and partners.

It is intended to assess the risk of transmission of Covid-19 in all primary and secondary care facilities, from the entrance to the building (in a community setting), or to the department (in a hospital). Separate risk assessments will be undertaken for arrival at and circulation around each hospital.

Community staff attendance of patients in their own homes is subject to further specific risk assessment.

All staff and other attendees at the facility may <u>contract or transmit</u> Covid-19, which can have significant consequences for the individual, their family and any other contacts.

Guiding principles

- 1. Patients should only attend for an appointment or be admitted to hospital if the benefits clearly outweigh the risks.
- 2. 2 metre physical spacing where practical and benefits outweigh risks
- 3. Frequent Hand Washing is undertaken
- 4. PPE as appropriate to task and setting is worn

The standard of 2m spacing between people is used. This relates to spacing between all people in the facility, and where activities require this gap to be closed and/or physical contact, current HPS and IPCT guidance must be adhered to. In wards, HPS guidance stipulates 3.6m from the centre of a bed to the centre of the next bed.

Mitigation must be appropriate and in line with current guidance. Possible actions for both staff and patients include but are not limited to:

- Written and audible messaging for staff and patients urging caution and compliance
- Limit (or prohibit) chaperones / family / visitors
- Queue markings and management
- Furniture layout to create spaces, barriers and designated routes
- Removal of excess furniture / equipment
- One-way systems
- Hand hygiene facilities / supplies
- PPE supplies specifically fluid resistant surgical face masks
- Regular and effective cleaning of surfaces, furniture and equipment by users
- Limit or stagger use of communal patient spaces e.g. dining rooms, day rooms, ward based therapy rooms

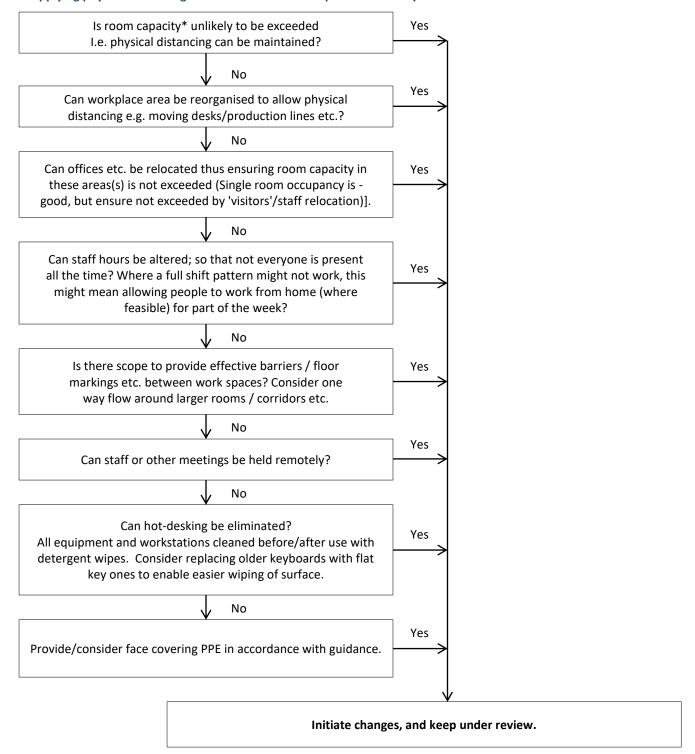
Additional mitigation where staff work in close proximity might include:

- Facilitate working from home for as many staff as possible
- Limiting / stopping hot desking or sharing of computing / telephone equipment within a session
- Reorganisation of working days, including evenings and weekends
- Stagger shift start / finish and break times
- Meetings to be held virtually wherever possible
- Ensure all work station equipment and desks are cleaned at the end of each day/session

It is assumed that **communal or difficult to clean items are removed** from all areas, for example:

- Leaflets, reading materials, toys, pens
- Soft furnishings
- Water jugs and cups (cups for dispensers available on request)
- Food and cutlery in staff rooms

Applying physical distancing for staff within the workplace - Hierarchy of control measures



Regardless of the measures in place, the following behaviours must be observed by all staff

- Not to attend work if they have symptoms identified in current guidance, no matter how mild, and line management to arrange for appropriate testing
- Strict hand hygiene in accordance with guidance
- PPE guidance, including when and where to take off / dispose of PPE before entering another area
- Avoid visits / throughput to areas unless strictly required.
- Maintaining 2 metre physical distance at breaks / mealtimes in all staff and public areas