



## **Return to Work Guidelines, following the SARS-CoV-2 Epidemic (COVID-19)**

### **Introduction**

During the current COVID-19 pandemic the IFPA guidance to members is that face-to-face consultations and 'hands-on' sessions should not take place unless the member is operating under clinical supervision or directive, or unless released from lockdown by the government in the country where they work.

It may be useful for members to prepare their practice for when they can reopen in a post lock-down environment. These preparations should be focused on infection prevention and control.

These guidelines, along with the recommended further reading, are to help inform your approach and to work safely in your environment. In addition, members are expected to use their common sense, professional education and training in their decision making.

The safety of members and their family, clients and the general public is our overriding concern. In drawing up these guidelines, we have taken note of scientific and government advice, largely that issued in the UK where IFPA is based.

Members should familiarise themselves with and follow all guidelines issued by their government and other relevant bodies in their own country of practice. Members should also be aware that in-country approaches can differ between devolved administrations, for instance between England, Scotland, Wales, Northern Ireland, and the Crown Dependencies.

The IFPA guidelines are advisory only and will change in line with official government guidelines which will always take precedence.

The overriding aim of these guidelines is to reduce identified COVID-19 transmission risk to the lowest reasonably practicable level by taking preventative measures so that the working space is safe, stays safe, and makes the client feel safe.



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## **Risk Assessments**

- IFPA members should carry out a risk assessment before returning to work. This will differ between members, as individual working situations vary widely. The risk assessment which should focus on infection risk and control measures, should include the working environment, access to and from it and client contact. The Health and Safety Executive offers a range of tools and information including a COVID-19 Risk Assessment Template which is available here: - [Health and Safety Executives Risk Assessment Template](#)
- Keep a record of your risk assessment and review it periodically. This is best practice and provides an audit trail for insurers.

## **Training**

- We strongly recommend that members undertake COVID-19 awareness training. There are several courses available on-line. Any course taken should include infection control, recognising signs and symptoms and minimising contagion risks. Courses need not be directed at complementary therapists so some aspects of the training chosen may not be directly relatable, but any training that increases understanding of this virus will help members prepare for a return to work. Members can claim CPD points for attending such training courses.
- We recommend the Skills for Health training (UK provider), details here: - [Skills for Health COVID-19 Training](#)



### **Before Appointment Days:**

- Vet your clients for COVID-19 symptoms before booking appointments - talk to them by phone or video link. Include questions specifically aimed at identifying COVID-19 symptoms or history on your consultation forms. We have provided a suggested list of questions as an appendix to this guidance. NHS UK provides information on the main symptoms of the virus here: - [NHS UK COVID-19 Information](#).
- Stress to clients the importance of advising you as soon as possible if they become unwell with possible or confirmed COVID-19 any time up to 14 days after their appointment.
- Advise the client of the additional precautions and measures you will take, and which you need them to take before, during and after their visit, to mitigate COVID-19 transmission risk and to keep both them and you as safe as possible.
- Consider whether any advisory signage is needed in your premises to communicate these additional measures.
- Do not treat clients who have, have had, or have been in contact with someone who has COVID-19 symptoms until they are outside the contagious period which is currently assumed to be 14 days after the last symptoms.
- If there is a risk you have had or have been in contact with someone who has had the virus, do not treat anyone until you yourself are outside the contagious period, and consider taking a test yourself, if possible or available. At the time of writing, UK government funded tests are not accessible to all. They are available for essential workers. Additionally, anyone experiencing COVID-19 symptoms is permitted (and expected) to be tested. More information is available here: - [UK Government COVID-19 - Getting Tested](#) It is expected that wider and more reliable home testing will become available in the near future.
- Carry out usual client consultations remotely before the appointment, preferably using video. Digitise consultation forms and questionnaires to email to clients.
- Revise appointment times and scheduling to minimise contact between clients arriving and departing and to allow sufficient time for enhanced hygiene routines. Consider spacing out clients by extending opening hours.
- If it is unavoidable for clients to come into contact with each other, ensure social distancing is maintained.
- Remove unnecessary items from the treatment and access areas to minimise touch and cleaning time.
- Carry out any re-arrangement of the treatment and access areas that are required to minimise face to face contact.



## **On Appointment Days:**

### **Hygiene and Cleaning**

- Reinforce the frequency of cleaning, sanitising and airing of spaces. Note that these spaces should include routes to and from your workspace, toilet and washing facilities, if provided.
- Consider having a list of tasks involved in cleaning and make a record each time you complete a cycle. This can be a visible affirmation for your clients as well as an insurance audit trail.
- Clean before and at the end of each working day and between each client session. Include frequently touched surfaces and objects such as door handles, taps, essential oil bottles and containers, massage couch, headrest, chairs, tables etc.
- Open the window in your workspace to change the air in your workspace between clients. Air conditioning is not recommended.
- Allow sufficient time between appointments to carry out your cleaning routine.
- Regular cleaning products or disinfectant can be used, as normal cleaning does kill the virus. Waste should be disposed of as normal in your household waste.
- If a client informs you they have possible or confirmed COVID-19 and this is within 14 days of the appointment, or if you are returning to work after possible or confirmed COVID-19 yourself, you must adopt a different cleaning protocol. Our suggestion is to follow the UK Government directive on COVID-19 decontamination available here: - [UK Government Covid-19 Decontamination in non-healthcare settings](#) . In these situations, waste is treated as clinical waste and must be double bagged and stored for 72 hours before disposal with your household waste.
- We would recommend you close your business for at least 72 hours after a possible or confirmed case of COVID-19.
- Wash hands before and after each client session using an approved hand-washing methodology, including soap and water for at least 20 seconds. An example is found here: - [NHS UK - How to Wash Your Hands](#)
- Consider minimising or closing the use of toilet facilities to clients.
- Observe good respiratory hygiene – avoid touching your eyes, nose or mouth and cover coughs and sneezes with your elbow or a tissue.
- Provide foot operated pedal bins for tissues, paper hand towels, couch roll, etc.
- If making up client massage blends on the day, ensure your hands are washed before and after preparing these.

### **Client Considerations**

- Re-confirm with the client on arrival that they have not developed any COVID-19 symptoms and decline to work with anyone who presents with any relevant symptoms or is running a temperature.



- Provide suitable hand sanitiser for clients to use on entry and exit. Note that homemade aromatherapy sanitisers may not meet required industry standards. Members should also check with their insurers regarding providing homemade sanitisers before using. We recommend using commercial products.
- Remind your clients of the need to observe good respiratory hygiene (as above).
- Do not provide water cups/glasses for clients. Ask clients to bring their own water bottle.
- If closing or reducing your toilet facilities make your client aware of this before the day of appointment.
- Minimise non-treatment related physical contact, for example open doors for your clients, do not shake their hands, do not share paper documents or pens. Obtain digital signatures wherever possible.
- Provide a storage device (bin or laundry basket) for all the client's clothes and belongings which can be sanitized after their visit.
- Consider only accepting electronic payments such as bank transfer and/or PayPal. If using a card machine remember to sanitise this at appropriate intervals. Try to avoid accepting cash or cheques. If the client insists, then provide an envelope for clients to place their payment inside. Remember to wash hands after handling the envelope and cash/cheque.
- Follow up your client's visit with an email reminding them of the requirement to advise you if they become unwell.
- If you, or anyone in your household becomes unwell with COVID-19 you should contact all clients who have visited you within the last 14 days.

## **Treatments**

- Minimise face-to-face contact before and after treatments.
- Maintain social distancing measures if you need to spend time talking to your client.
- Use prone or side lying positions rather than supine, wherever possible.
- Consider removing face and neck massages from your routines.
- The risk of contracting COVID-19 from an infected person may be reduced with shorter contact time. As such, members may wish to consider reducing the average treatment time to 30 minutes.
- No soft covers, including top blankets should be used on more than one client.
- Ensure that all reusable items are placed in sealable plastic bags after each client, prior to laundering. All laundry should be washed at 60 degrees.

## **Personal Protective Equipment (PPE) - Face Masks**

- At the time of writing, UK government guidance regarding face masks and coverings only covers health and social care professionals and using public transport. This may change and it is possible that in the near future wearing masks or face coverings and other PPE



may become a necessity for complementary therapists. We will issue further information when available.

- Until clear central guidance is available, we recommend that members wear a face covering throughout the duration of each treatment (from initial contact to bidding clients farewell) and at the minimum make them available for clients should they request them. You may wish to ask your clients to wear face coverings throughout, paying particular consideration to when they are not on the massage couch, or are lying supine on the massage couch.
- We currently recommend using cloth or non-surgical face masks because surgical masks and N95 respirators are critical supplies for healthcare workers and medical first responders. This situation may change in the near future. Further information on face coverings is available here: - [UK Government Face Coverings](#) & [Medical News Today - Face Masks](#)

### **Personal Protective Equipment (PPE) – Other**

- Members may choose to wear gloves in their practice in which case we recommend latex free single use disposable gloves.
- The IFPA would consider the wearing of aprons a personal choice.

### **Mobile Working**

- Mobile work requires special consideration as the working environment is outside the control of the therapist, therefore the infection risk to both therapist and client may be raised. Before returning to work, mobile therapists should carefully consider how to best manage hygiene, social distancing and other general infection control measures as recommended in this guidance.

### **Clinic Based Therapists**

- Therapists who are employed, rent space or volunteer in externally owned or managed workspaces also need to take note of directives issued by their employer or premises manager, including regarding hygiene, PPE, and social distancing.

### **IFPA Membership and Insurance**

- Before returning to practice, check that your IFPA membership is valid – contact the office if you are not sure, or if you need to renew your membership.
- Check that you have valid public liability insurance.
- Members should also check with their insurance provider (public liability and any other business-related cover) to ensure that all work preparations are in-line with insurance



requirements, bearing in mind that providers may have updated their policy requirements in response to COVID-19.

### **Further Reading and References:**

- [UK Government Coronavirus](#)
- [UK Government List of Guidance](#)
- [Dutch Guidance \(useful information for practitioners in general\) CAM sector wide guide to infection prevention COVID-19](#)
- [UK Government Working Safely during coronavirus](#)
- [UK Government COVID-19 Infection prevention and control](#)
- [UK Government PPE at work guidance](#)
- [UK Health and Safety Executive PPP at work guidance](#)
- [UK Government: Working safely during COVID-19 in offices and contact centres](#)
- [CNHC COVID-19 guidance for Registrants- Preparing to return to work](#)
- [World Health Organization Coronavirus disease \(COVID-19\) pandemic](#)
- [Center for Disease Control and Prevention - Cloth Face Coverings](#)
- [Covid-19 - Chartered Institute for Personnel and Development](#)
- [Skills for Health COVID-19 course](#)
- [Science Media Centre, expert reaction to questions about COVID-19 and viral load](#)

### **Contact us**

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## **Appendix**

### **Essential Health Questionnaire - COVID-19 specific questions template**

This might include (but is not limited to) the following questions:

- 1. Have you tested positive or had treatment for COVID-19?**
- 2. Have you, or has anyone you are in close contact with, had any of the following signs or symptoms associated with coronavirus: -**
  - High temperature – this means you feel hot to touch on your chest or back.
  - New, continuous cough – this means coughing for a lot more than an hour, or 3 or more coughing episodes in 24 hours (if you usually have a cough, it may be worse than usual).
  - Loss or change to your sense of smell or taste – this means you have noticed you cannot smell or taste anything, or things smell or taste different to normal.
- 3. Have you been following the social distancing measures outlined by the government during COVID-19?**
- 4. Have you been in contact with someone currently suffering COVID-19 or who is self-isolating?**
- 5. Are you or anyone you live with in the high risk (clinically extremely vulnerable) group?**

People at high risk from coronavirus include people who:

- have had an organ transplant.
- are having chemotherapy or antibody treatment for cancer, including immunotherapy.
- are having an intense course of radiotherapy (radical radiotherapy) for lung cancer.
- are having targeted cancer treatments that can affect the immune system (such as protein kinase inhibitors or PARP inhibitors).
- have blood or bone marrow cancer (such as leukaemia, lymphoma, or myeloma).
- have had a bone marrow or stem cell transplant in the past 6 months or are still taking immunosuppressant medicine.



- have been told by a doctor they have a severe lung condition (such as cystic fibrosis, severe asthma, or severe COPD).
- have a condition that means they have a very high risk of getting infections (such as SCID or sickle cell).
- are taking medicine that makes them much more likely to get infections (such as high doses of steroids or immunosuppressant medicine).
- have a serious heart condition and are pregnant.

**6. Are you or anyone you live within the moderate risk group (clinically vulnerable)?**

People at moderate risk from coronavirus include people who:

- are 70 or older.
- are pregnant.
- have a lung condition that is not severe (such as asthma, COPD, emphysema, or bronchitis).
- have heart disease (such as heart failure).
- have diabetes.
- have chronic kidney disease.
- have liver disease (such as hepatitis).
- have a condition affecting the brain or nerves (such as Parkinson's disease, motor neurone disease, multiple sclerosis, or cerebral palsy).
- have a condition that means they have a high risk of getting infections.
- are taking medicine that can affect the immune system (such as low doses of steroids).
- are very obese (a BMI of 40 or above).

People classed as clinically extremely vulnerable are advised to take additional action to prevent themselves from coming into contact with the virus. Clinically extremely vulnerable people are strongly advised to stay at home as much as possible and avoid face to face contact.

Always use your professional judgement to decide if the potential benefits of treatment outweigh the risks. If you do proceed, take extra care with social distancing and hygiene measures.



Useful links: -

<https://www.nhs.uk/conditions/coronavirus-covid-19/symptoms/>

<https://www.nhs.uk/conditions/coronavirus-covid-19/social-distancing/what-you-need-to-do/>

<https://www.nhs.uk/conditions/coronavirus-covid-19/people-at-higher-risk/whos-at-higher-risk-from-coronavirus/>

<https://www.nhs.uk/conditions/coronavirus-covid-19/people-at-higher-risk/living-with-someone-at-high-risk/>