

# COVID-19 guidance for Registrants: Preparing to return to work

*29 May 2020*

## Contents

<b>Context</b>	<b>3</b>
<b>CNHC advice</b>	<b>4</b>
<b>Preparing to return to work guidance</b>	<b>5</b>
A. Preparing yourself and your premises	5
B. Checking COVID-19 risk factors before seeing clients face to face	9
C. Preparing to work face to face with clients	11
D. Preparing to work face to face with clients	12
E. Working with clients face to face	13
F. Payment arrangements	13
G. Steps to take between clients	13
H. Steps to take at the end of the day	13

## Context

On 23 March 2020 the UK Government announced its lockdown and ‘Stay at Home’ message at which point all CNHC registrants were advised to cease working with clients face to face. The Scottish and Welsh Government’s announced lockdown the same day, with Northern Ireland’s lockdown commencing on 28 March.

On 13 May the UK Government updated its guidance for England and published its 3-step plan to lift restrictions and support people to get back to work, called [Our plan to rebuild](#). In this document the UK Government stated: *“For the foreseeable future, workers should continue to work from home rather than their normal physical workplace, wherever possible”* (at page 29). It also stated that the opening of *“establishments where close contact is inherent ... may only be fully possible significantly later depending on the reduction in numbers of infections”* (at page 21). The earliest date mentioned in the document is 4 July, but this may change.

Slightly later in May, the [Northern Ireland](#), [Welsh](#) and [Scottish Governments](#) set out their plans to ease lockdown measures in due course.

## CNHC advice

**Until the UK Government and devolved administrations make any further announcements CNHC advice is that CNHC Registrants must not work with clients face to face subject to the exception relating to personal trainers/coaches set out below.**

During this time, CNHC Registrants who can work from home should continue to do so, working with clients remotely by telephone or on online platforms as appropriate.

All CNHC Registrants can use the guidance which follows to prepare to return to face to face practice once the UK and devolved governments have updated their guidance to allow this.

Additional guidance specific to “hand-on” therapies is to follow. CNHC Registrants must not practise “hand-on” therapies until further notice.

**Exception:** On 13 May 2020 the Department of Digital, Culture, Media & Sport announced that personal trainers and coaches may work outside with clients individually at a social distance. As a result, any CNHC registrants who are qualified personal trainers or coaches who are able to work with clients on a 1:1 basis outside at a distance of 2 metres may do so, in parks and other public areas, subject to authorisation by the relevant local authority.

# Preparing to return to work guidance

## A. *Preparing yourself and your premises*

### 1. Check your insurance

- 1.1. Before any steps are made to return to face to face and 'hands-on' work, check with your insurance company that you will be covered under your professional indemnity insurance.
- 1.2. Most insurance companies have provided cover during remote working but may have very different requirements for face to face and 'hands-on' work, due to the increased risks involved.

### 2. Assess the risks of reopening

- 1.1. Before reopening it will be important to carry out a risk assessment of both the premises and treatment areas, as well as your way of working.
- 1.2. The UK Government has prepared guidance on how to work safely during the coronavirus outbreak – [Working safely during the coronavirus outbreak; a short guide](#).
- 1.3. Key actions to take when assessing risks:
  - **Identify** what work activity or situations might cause transmission of the virus.
  - **Think** about who could be at risk.
  - **Decide** how likely it is that someone could be exposed.
  - **Act** to remove the activity or situation, or if this is not possible, control the risk.
- 1.4. You can find general guidance on carrying out a risk assessment on the Health and Safety Executive (HSE) [website](#).
- 1.5. The HSE has identified the need to manage Legionella risks if the building to which you will be returning has been empty or unoccupied during the Covid-19 outbreak. You can find the details on the HSE [website](#).

### 3. Prepare for social distancing

- 3.1. The UK Government and the devolved nations have made clear that social distancing of 2 metres will continue for the foreseeable future.
- 3.2. When planning to reopen your clinic or premises, check how you can maintain social distancing between yourself or staff and clients, between clients and between staff.

3.3. Physical areas to consider are:

- the entrance to your premises;
- waiting areas;
- treatment rooms;
- toilet facilities.

3.4. The UK Government suggests you consider how to:

- physically arrange work areas to keep people 2 metres apart;
- mark areas using floor paint or tape to help people keep a 2 metre distance;
- provide signage to remind people to keep a 2 metre distance;
- use screens to introduce a physical barrier, for example at reception desks or payment areas.
- prepare to ensure your clinic or treatment area is well ventilated – do not use air conditioning.

#### **4 Appointment timings**

4.1. Plan your treatment schedule to allow 30 minutes between clients so clients can leave without meeting other clients and to allow time for disinfecting and cleaning between sessions (see section D below).

#### **5. Temperature checks**

5.1. You may wish to check each client's temperature before treatment using a no-touch thermometer.

5.2. If so, ensure you have a supply of no-touch thermometers available.

#### **6. Deep clean and prepare for ongoing deep cleaning and hygiene**

6.1. Before re-opening you will need to check, if necessary, that the water supply does not carry any Legionella risks (see section A.1.6. above), then carry out a deep clean of your premises. This means a full clean including disinfecting all hard surfaces such as doorbells, door handles, bannisters, taps, reception desks, computer keyboard and mouse, telephones, toilet and hand washing facilities.

6.2. You will also need to plan how to clean and disinfect your premises and treatment area between clients (see section G below).

6.3. Ensure you have an adequate supply of cleaning products in stock.

6.4. Ensure you have an adequate supply of couch roll for use on non-wipeable chairs and couches in waiting and treatment areas for use for each client.

6.5. Towels, couch covers, blankets, pillowcases and any other soft item should only be used once per client. This may represent a change in practice if you have previously used couch roll on top of a soft cover. Ensure you have a sufficient supply of washable items for each client or use disposable couch roll and covers.

- 6.6 Ensure you have a covered laundry bin to collect any used items following each client. Ideally this should be a foot pedal bin.
- 6.7 Ensure you have disposable gloves to handle used items and waste at the end of each day.
- 6.8 Ensure you have laundry facilities to be able to wash any items at 60 degrees.
- 6.9 Check with local authority in your area about waste disposal requirements of e.g. couch rolls, disinfectant wipes and other used items.

## 7. Handwashing facilities

- 7.1 Ensure both yourself and clients have access to hand washing or hand sanitising facilities.
- 7.2 Ensure you have an adequate supply of hand washing or hand sanitising products in stock.
- 7.3 If you use hand sanitising gel or wipes they should have an alcohol content of 70 per cent.
- 7.4 Hands should be washed for a minimum of 20 seconds. Guidance on the correct way to wash hands can be found on the [NHS website](#).

## 8. Communications and signage

- 8.1 Prepare signage for your clinic and treatment areas to remind clients to [wash](#) or to sanitise their hands and to keep a 2-metre distance from others.

## 9. Removing risk items from common areas

- 9.1 To reduce the risk of transmission from touch, remove from waiting rooms and treatment areas all non-essential items such as:
  - magazines;
  - samples;
  - water dispensers (ask clients to bring their own water);
  - pens;
  - any other items which clients may touch.

## 10. Contactless payment facilities

- 10.1 Put facilities in place to ensure clients can pay by contactless or online payment.
- 10.2 Card machines should be sanitised between clients.
- 10.3 If clients can only pay by cash, have a single-use envelope available where clients can place their cash following treatment. Use one envelope per day. Do not touch this until the end of the day. Wash hands thoroughly after handling the envelope and cash. Dispose of the envelope safely.

## 11. Seeing clients in their own homes

- 11.1. If you see clients in their own homes, check that your insurance will cover you for this and think carefully about how you will manage hygiene and social distancing in an environment that is not your own.
- 11.2. See also sections B.1. and B.2. below on high risk and moderate risk clients.

## 12. Update policies and agreements

- 12.1. Check your cancellation policies and update if necessary, to allow for greater flexibility and sensitivity if you or clients have to cancel an appointment at short notice due to COVID-19 infection. A cancellation charge for a client cancelling because they, or a member of their household, have COVID-19 symptoms would be inappropriate.
- 12.2. Seek advice from your insurance company about any disclaimers you may need to use for yourself and your clients regarding risks of COVID-19 infection.

## 13. Personal Protective Equipment (PPE)

- 13.1 Personal Protective Equipment (PPE) includes items such as disposable gloves, disposable masks and items of clothing such as disposable gowns and aprons.
- 13.2. The Department of Business, Energy and Industrial Strategy's most recent [guidance about PPE](#) states the following:

*“Where you are already using PPE in your work activity to protect against non-COVID-19 risks, you should continue to do so.*

*... When managing the risk of COVID-19, additional PPE beyond what you usually wear is not beneficial. This is because COVID-19 is a different type of risk to the risks you normally face in a workplace, and needs to be managed through social distancing, hygiene and fixed teams or partnering, not through the use of PPE.*

*The exception is clinical settings, like a hospital, or a small handful of other roles for which Public Health England advises use of PPE, for example, first responders and immigration enforcement officers”.*

- 13.3. If you have always used PPE as part of your work then you should continue to do so, ensuring you follow procedures for how to put on, fit, remove and dispose of PPE safely. You can find out further details about infection control on the [NHS website](#).
- 13.4. If have not always used PPE, then Government advice is that social distancing and hygiene are the ways to manage the risk of infection from COVID-19. We will update registrants if Government advice changes.
- 13.5. For further information, see Section 5 of the UK Government's guidance, [Working safely during coronavirus \(COVID-19\)](#).



## B. Checking COVID-19 risk factors before seeing clients face to face

Below we set out what you need to do before you see clients face to face.

This includes:

- **Identifying** any clients who are at increased risk of infection.
- **Screening** for COVID-19 symptoms.
- **Clarifying** when not to treat.

You may wish to use a checklist based on the areas outlined below.

### 1. Check if clients are in COVID-19 high risk categories

- 1.1. Check if any clients are in the '**high risk**' category which means they will have been contacted by the NHS and are shielding. Clients in this category have been identified as being at extremely high clinical risk of infection and must avoid face to face contact with anyone outside their household for at least 12 weeks following any period of lockdown.

They include those 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;
- have blood or bone marrow cancer (such as leukaemia, lymphoma or myeloma);
- have had a bone marrow or stem cell transplant in the past six months or are still taking immunosuppressant medicine.
- have been told by a doctor that they have a severe lung condition such as cystic fibrosis, severe asthma, or severe Chronic Obstructive Pulmonary Disease (COPD);
- have a condition that means they have a very high risk of getting infections such as Severe Combined Immunodeficiency (SCID) or sickle cell;
- are taking medicine that makes them much more likely to get infections (such as high doses of steroids);
- have a serious heart condition and are pregnant.

- 1.2. For more information, see guidance from the NHS [Who's at higher risk from Coronavirus](#).

- 1.3. **Do not treat clients in this high risk group.** Explain to your clients that you will keep up to date with Government guidance about when it is safe to see them.

### 2. Check if clients are in COVID-19 moderate risk categories

- 2.1 Check if any clients are in the '**moderate risk**' groups which include those who are:
- 70 or older;
  - Pregnant;
  - have a lung condition that's 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).

2.2. People in the moderate risk group are advised to stay at home and social distance but they are not required to shield.

2.3. For more information, see guidance from the NHS [Who's at higher risk from Coronavirus.](#)

2.4. What to do if a client is in the moderate risk group:

- Seek advice from your insurance company about the risks associated with treating clients in the moderate risk category before proceeding.
- 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.

### 3. Screening for COVID-19 symptoms and when not to treat

3.1. At the time of writing the NHS guidance for symptoms to look out for are as follows:

- High temperature;
- Persistent cough;
- Loss or change to your sense of smell or taste.

3.2. This guidance may be updated so check the [advice on symptoms](#) on the NHS website a regular basis.

3.3. **You:** Check daily if you are experiencing any COVID-19 symptoms. This could include taking your temperature each day.

**If you become aware of any COVID-19 symptoms you should immediately cancel any booked appointments and follow government guidance about self-isolation.**

3.4. **Your household:** Check daily if anyone in your household is experiencing any COVID-19 symptoms, which could include temperature checks.

**If anyone in your household experiences COVID-19 symptoms you must cancel all appointments and put yourself in quarantine for 14 days, as per government advice.**

3.5. **Your clients:** Check with clients 24 hours in advance of any appointment if they or anyone in their household is experiencing any COVID-19 symptoms.

**If a client or anyone in their household is experiencing symptoms they must not attend the session, They must follow government guidance and self-isolate for a minimum of 7 days if it is them, or 14 days if it is a member of their household.**

- 3.6. Call 111 for advice about what to do if you or a member of your household experience COVID-19 symptoms.
- 3.7. NHS advice about COVID-19 symptoms and what to do can be found [here](#).

#### **4. When you should not treat clients face to face**

- 4.1 To summaries, do not treat clients face to face if:
  - you or any member of your household have any COVID-19 symptoms.
  - a client has COVID-19 symptoms.
  - a client is self-isolating or in quarantine.
  - a member of a client's household or anyone the client has been in contact with in the last 14 days has COVID-19 symptoms.
  - a client is in the high risk group and is shielding (see section B.1. above for more details).
- 4.2. Think carefully before providing face to face treatment for any clients in the moderate risk group (see section B.2. above for more details).
- 4.3. Call 111 for advice if necessary and encourage clients to do the same.

### ***C. Preparing to work face to face with clients***

#### **1. Communication with clients in advance of treatment or care**

- 1.1. In advance of re-opening, communicate with clients to explain the new working arrangements.
- 1.2. Request that clients attend on their own to reduce the risk of additional contacts between people.
- 1.3. Ask clients to wait outside your premises until the appointment time.
- 1.4. Ask client to bring their own pen if relevant.
- 1.5. Ask client to bring their own water to drink. Do not provide plastic cups.
- 1.6. Request clients pay using a contactless card or via payment online. Only accept cash payment as a last resort.

## 2. Client consultations in advance of treatment or care

- 2.1. Aim to carry out all pre-treatment consultations online or by telephone wherever possible to reduce the length of face to face contact.

### *D. Working with clients face to face*

#### 1. Client arrival: Social distancing and hygiene

- 1.1. Open the door yourself wherever possible.
- 1.2. DO NOT shake hands or hug the client.
- 1.3. Ask clients to wash hands on entry to premises.
- 1.4. Maintain a minimum of 2 metres at all times (for face to face, non-hands-on treatments).
- 1.5. Show the client the social distancing arrangements.
- 1.6. Ensure couch roll is placed on any non-wipeable seats and couches used by client.
- 1.7. Only use your own pen.
- 1.8. If a client needs to write, they must use their own pen or you can supply a pen which the client then disposes of.
- 1.9. Take client's temperatures using a no touch thermometer. Record temperatures in client notes.
- 1.10. If a client shows signs of a fever or high temperature, do not treat the client. They must return home and may need to self-isolate. Suggest they call 111 for advice.
- 1.11. If a client has COVID-19, you may then need to self-isolate. Again, call 111 for advice.

#### 2. During treatment/session

- 2.1. Keep your premises well-ventilated, with windows open in your treatment room wherever possible, or use an extractor fan. Do not use air conditioning.
- 2.2. Remain a minimum of 2 metres from the client.

## ***E. Payment arrangements***

- 1.1. Ask client to pay by contactless method using contactless cash machine or online payment.
- 1.2. If client can only pay by cash, show the client the envelope for cash payments. Use one envelope per day. Do not touch this until the end of the day. Dispose of the envelope safely. Wash your hands thoroughly afterwards

## ***F. Steps to take between clients***

- 1.1. Wash hands thoroughly in hot water and soap.
- 1.2. Dispose safely in a bin with a lid all couch roll, disinfectant wipes and any other items used by or for the client. You may wish to use disposable gloves to do this. Wash your hands thoroughly for a minimum of 20 seconds afterwards.
- 1.3. Disinfect any surface(s) touched by a client – this might include couch, chairs, door handles, consultation table, toilet area, handwashing area.
- 1.4. Open doors and windows to ventilate the treatment and waiting areas.
- 1.5. Replace couch roll on chairs and treatment couches in readiness for the next client.
- 1.6. Keep doors to areas not used by client closed.
- 1.7. Change masks and/or other PPE if being worn.

## ***G. Steps to take at the end of the day***

- 1.1. Place all waste in sealable plastic bags and follow local waste disposal advice.
- 1.2. If worn place uniform in sealable plastic bag for laundering before leaving. Dispose of the bag afterwards.
- 1.3. Wash all uniforms, towels, coverings on a 60°C washing machine cycle.
- 1.4. Open doors and windows to ventilate the areas used by clients.

## Contact us

Tel: **020 3668 0406**  
Email: **[info@cnhc.org.uk](mailto:info@cnhc.org.uk)**  
Website: **[www.cnhc.org.uk](http://www.cnhc.org.uk)**

Connect with us on social media:

