

AOI COVID-19 guidelines v. 6

Valid as of 19th December 2021

This is a living document subject to change with Public Health advice.

COVID guidelines should be followed whether or not an individual coming into the practice or staff are vaccinated. There is now evidence that a vaccinated person can transmit the virus to others, so it is best practice that we continue to follow all Public health advice, SOP's and guidelines to prevent the spread of the virus.

All the Standard Operating Procedures and documents are still required and should be reviewed at this time. All guidelines and practice policies should be reviewed with staff and the Lead worker to ensure everyone is updated and understands what the policies are and their role in applying them. *The Standard Operating Procedure (SOP) document drawn up by each practice in line with HSE guidelines, the Government's "Return to Work Safely Protocol" and public health advice should be adapted to align with this advice as it is updated and based on the experiences you have had while working within the guidelines and your practice.*

It is up to each Practice/Registrant to operate within the CORU Code of Professional Conduct & Ethics for Optometrists; see specific sections below. These guidelines are to assist in practising safely within the code. Your primary responsibility is to do everything, insofar as it is within your control to enhance the health, safety and wellbeing of service user and colleagues. This should be an overriding principle when making or reviewing all the practice protocols and policies and carrying out your risk assessment whether as an employer or employee.

The SOP must include:

- Updated safety statement
- Updated occupational Health and Safety risk statement
- Staff induction and training programme
- Appointment of a lead worker who will ensure adherence to the policies introduced

The SOP should include:

- Protocols for practice staff
- Protocols for the management of patients in the practice
- Hygiene and health protocols
- Cleaning and disinfection protocols

Processing COVID-19 Vaccination Data

In line with advice furnished by the Data Protection Commission, Optometry is considered a health care setting and therefore it is legitimate to process Covid 19 vaccination data.

Employers may ask employees to share their vaccination status for the purpose of risk assessment and maintaining workplace health and safety measure, particularly if the employee has direct patient contact. There is no obligation for any healthcare worker to be vaccinated or to disclose their vaccination status. Visit www.dataprotection.ie for further details.

Practices are entitled to make their own decision around treatment of patients based on their vaccination status. It is a matter for each practice to decide on their own standard operating procedure, following a risk assessment, around treatment of patients based on vaccination status.

You may find the following link useful;

[https://www.hsa.ie/eng/topics/biological_agents/biological_agents_introduction/vaccination/vaccination - frequently asked questions](https://www.hsa.ie/eng/topics/biological_agents/biological_agents_introduction/vaccination/vaccination_-_frequently_asked_questions)

COVID-19 close contact protocols

If you are a close contact

Advice given by the HSE will depend on

- Vaccination status
- Type of contact household/non-household
- Type of variant

According to the HSE there are now three types of close contacts.

Household close contact is a person who is domiciled in the same residence as you.

Non-household close contact is one with whom you have had **unprotected** face-to-face contact, for over 15 minutes at less than 2m distance over a 24 hour period.

Close contact with a variant of concern; If you are a close contact of a variant of concern, ie a more infectious strain of the virus, you will be advised by the HSE and directed accordingly to isolate, a PCR test will be arranged for you, regardless of vaccination status or symptoms.

The following link will give you the most up to date guidance on healthcare workers and close contacts.

<https://www.hse.ie/eng/staff/workplace-health-and-wellbeing-unit/covid-19-guidance/quick-guide-for-healthcare-worker-management.pdf>

Close contacts are determined by the HSE track and trace team. If you are determined to be a close contact, the HSE will contact you and advise you of the correct protocols to follow. Protocols are determined by vaccination status and the type of close contact. Full information is available at <https://www2.hse.ie/conditions/covid19/contact-tracing/close-contact>

Symptoms of COVID-19

Due to the different variants of COVID, it is not possible to give a comprehensive list of all symptoms. Should you feel in any way unwell, you should seek a PCR test.

Protocol for antigen tests

If you are using Antigen tests, these tests should be used only if you are asymptomatic. If you are in any way symptomatic, a PCR test is recommended as best practice.

COVID-19 Prevention & Control measures

- Ensure the practice is well ventilated.
- Staff are required to participate in COVID-19 induction and refresher training.
- Staff training and refresher training must include-appropriate use of PPE, hand hygiene, practice hygiene, cleaning routines, waste disposal, respiratory etiquette, signs and symptoms of Covid 19, how it spreads and what a worker should do if they develop symptoms of COVID-19.
- Further details of how the workplace is organised to address the risk from COVID-19 should be included in the Occupational Health and Safety Risk statement.
- Mandatory self-reporting of symptoms for staff.
- Recording names and times when staff enter and leave the premises each day
- Maintain social distance, avoid physical contact with other staff members and patients where possible. Reduce contact time as much as possible and ensure adequate time between examinations/appointments to ensure Infection Prevention & Control procedures can be implemented.
- Use of PPE or barrier when less than 2m from any individual or for over 15mins with any individual.
- Staff should be protected by physical barriers/screens where 2m distance cannot be maintained, or the use of PPE is not practical (at reception, dispensing area, till points).
- Staff displaying COVID-19 symptoms should be isolated, returned home to seek medical advice and not use public transport. The practice is required to provide an area for staff and patients to isolate when suspected of having COVID. Follow the HSE and Back to Work Safely guidance on how COVID suspects should be managed to develop your practice policy.

- Considerations must be given to how staff who are vulnerable will manage their role in the practice.
- It is mandatory that all staff are protected and feel safe in their role.
- Other considerations for the management of staff include taking breaks, access to hand washing facilities, access to disinfection gel, use of toilet and canteen facilities within the practice.
- Staff must be provided with PPE according to their level of risk.
- Risk levels may differ according to the role in the practice.
- PPE includes a face covering and gloves where appropriate.
- Links to the use of PPE are provided in the appendix section.
- Hold a regular review with staff of protocols and their operation. Make any amendments required as Public Health advice evolves.
- Staff should be appraised of the implications to the practice of each level change and any changes to Public health advice and their concerns addressed as these happen.
- A confidential reporting system should be in place to report symptoms, illness etc.

COVID-19 Prevention & Control measures for patient journey

Practice policy should be determined with regard to who can come to the practice at this time, routine or essential eye exams, contact lens patients etc.

Is the practice doing Repairs / breakage etc.? Should they be dropped at the door and the patient asked to return when phoned to collect or how will they be managed to reduce footfall?

Will the Practice have an open or closed door policy?

Are all practice visits (eye exams, collections repairs) by appointment only?

What are the maximum numbers allowed on the premises? Staff and or patients.

Pre-appointment triage of patient

- Use of tele-triage is strongly encouraged to minimise the time a patient must spend in the practice.
- Use of an advance screening form for history and symptoms should be also considered.
- Include a COVID-19 risk assessment for anyone wanting to come into the practice.
- Advise patients that contact time will be minimised.

- Ask patients to attend the practice alone if possible and they must be wearing a face covering. Advance notice of a medical exemption should be requested and a decision then made as to whether it is appropriate from a staff and patient safety perspective within the current Level for them to attend the practice.
- A face covering should cover the mouth and nose and go under the chin. Visors are not sufficient.
- Although under 9s are not required to wear a face covering because of time and proximity if examining children, it is advised that they would also wear a face covering while in the practice and for some elements of the examination.
- Advise patient not to touch their face covering once it is on and their hands are sanitised or remove items from pockets, bags etc. (e.g. mobile phones)
- Patients reporting COVID-19 symptoms should be advised to contact their GP and not to come to the practice.
- Advise patients of new practice protocols; face coverings, COVID risk assessment, possibility of a dilated eye examination and any other changes.
- Ask patients to let you know if there are any issues arising from the new protocols that the practice needs to be aware of.

Reception and waiting room

- Determine the number of patients who can safely be in the practice at any one time allowing for 2 m social distancing (remembering to include staff when assessing how many persons may be in the practice)
- Methodology to control traffic in and out of the practice in line with your practice safety policy. Decide whether the practice will have an open or closed door. One in /one out policy or similar.
- Covid-19 signage is mandatory – this should direct patients and inform them of your safety procedures.
- Regular cleaning and disinfection of all areas contacted by patients (surfaces, furniture etc.)
- Floor markings at reception indicating 2m social distance.
- Separate seating to maintain required social distance.
- Use signage to alert people to the number of people allowed on the premises or in each area at a time.
- Hand sanitizer must be provided at entry and exit.
- Remove magazines, leaflets, toys etc.
- All bins should have plastic bags which can be tied off and sealed.

Patient arrival

- Patient should be advised to check in immediately at reception and asked not to handle anything thereafter.
- Patient is required to use Hand sanitizer or fresh gloves.
- Record details of accompanying person on the patient record
- Reconfirm COVID-19 risk assessment.
- Where possible bring patient straight to consultation/dispensing/collection area.

Vulnerable patients

Consideration should be given to patients in a vulnerable group (older, immunocompromised or unwell). You might offer a dedicated time for this group in the practice schedule. At what levels is it no longer appropriate for this group to come to the practice?

Consulting room and examination

- Agree with Optometrist/Dispensing Optician the time required for each patient to be seen and room to be cleaned and ventilated afterwards/ ensure adequate time between examinations to ensure Infection Prevention & Control procedures can be implemented.
- Bearing in mind both patient and staff safety.
- Hand hygiene of patient is essential; advise patient to wash hands/use of hand sanitiser.
- Consideration should be given as to when it is appropriate to wear PPE gloves in the examination room e.g. when examining eye lids, everting eyelids, handling contact lenses, examining red/sore eyes and other cases as deemed necessary. Gloves should be donned and doffed safely and appropriately.
- Where you have any cuts / grazes or open abrasions on your hands you should consider wearing gloves.
- Optometrist/Dispensing Optician must use appropriate PPE and observe hand hygiene.
- Optometrist /Dispensing Optician should regularly disinfect hands throughout examination between procedures.
- Good hygiene protocols for furniture and equipment must be practiced; all surfaces making patient contact should be cleaned and disinfected.
- Minimise conversation and close contact as much as possible.
- Face shield on slit lamp is recommended.
- Non-contact “air-puff” tonometry may be performed by following the appropriate protocol and using the appropriate PPE.
- Avoid direct ophthalmoscopy if possible.

- Consider dilated fundus assessment and thus minimise close contact time.
- Supplementary tests used only when necessary i.e. when clinically indicated (based on optometrist's clinical judgement) or done at return visit
- Room and equipment to be cleaned and disinfected between patients.
- Ensure the room is well ventilated.

Contact lenses

- New fits can be done at your own clinical discretion and are not contraindicated.
- Ask patient to insert/remove their own lenses, bring their own case.
- Observe strict hygiene protocols.
- Use hand washing to clean hands prior to CL handling; not hand sanitiser.
- Any staff member carrying out CL "teaches" should use the appropriate PPE, taking account of the nature of the task, its duration, and proximity to the patient.

Foreign body removal

- As per normal procedures.

Spectacle dispensing

- Consider whether the use of a screen or other PPE is most appropriate.
- Staff member should only deal with one patient at any time.
- Disinfect frames after handling (provide a box or an area where frames to be sterilised should be placed to avoid replacement onto shelving.)
- Use of PD rule that can be disinfected after use (or other non-contact method).
- Practice hand hygiene after each patient interaction.

Spectacle collections

- Spectacle collections by appointment where possible.
- Repeat COVID-19 protocol on arrival.
- Use of designated collection point; social distancing and/or PPE as required.
- Clean and disinfect all tools, pliers etc used in adjustments.
- Practice hand hygiene after each patient interaction.

Additional resources

Using an antigen test

- <https://www.rte.ie/news/coronavirus/2021/1115/1260097-antigen-test/>

Posters and info HSE

- <https://www.hse.ie/eng/services/news/newsfeatures/covid19-updates/partner-resources/>

WHO online course

- <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/training/online-training>

Risk assessment; <https://www.besmart.ie>

Face Masks

Safe donning and doffing of face mask

- <https://www.youtube.com/watch?v=z-5RYKLYvaw>

Gloves; Use of gloves For safe use of gloves see this video

- <https://www.youtube.com/watch?v=1zwmny4vwel>

Staff wellbeing posters HSE

[Occupational Safety and Health Newsletter COVID-19](#)

[COVID -19 Tips for managing stress A4 Poster](#)

[COVID-19 Don't Bring it Home -A4 Poster](#)

[COVID-19 Fatigue in the workplace advise for managers poster](#)

[COVID-19 Psychosocial tips for staff](#)

[COVID-19 Fatigue -A4 Poster](#)

[COVID-19 How to combat fatigue -A4 poster](#)

[COVID-19 Managing Stress A4 Poster](#)

[COVID-19 promoting positive relationships in the workplace -tips for managers](#)

<https://www.hse.ie/eng/services/news/newsfeatures/covid19-updates/partner-resources/hse-face-covering-guidelines-poster-screen.pdf>