



## Dermaplaning

### Transmission of COVID 19

Risk Assessment Page 1 of 3

<b>RISK DESCRIPTION</b> Please provide a short description of the risk	<b>Risk of transmission of covid-19 through performance of medical aesthetic treatment (specifically dermaplaning)</b>
<b>Cause and Effect</b> Clearly state what are the potential causes of this risk and what the effects would be should it be realised.	Performing dermaplaning requires: <ul style="list-style-type: none"> <li>• A patient to enter the clinic</li> <li>• A breach of 2m social distancing whilst treatment takes place</li> <li>• Potential for transmission between patient and nurse of covid-19 virus if either member has the disease.</li> </ul>
<b>Risk Source</b> How did this risk come to light? i.e., internal incident / complaint, external guidance (NICE, NPSA, MHRA), inspection reports, audit.	Covid 19 virus was first identified in the UK in January 2020, since then there have been frequent changes and government guidance to halt and manage spread of the disease.
<b>Controls in Place</b> Existing controls that are in place to manage the risk.	<ul style="list-style-type: none"> <li>• Medical history taking and assessment</li> <li>• Expertise in infection control and prevention due to clinical experience of clinician, such as aseptic technique, safe disposal of clinical waste and sharps.</li> <li>• Documentation of assessment and interventions for each patient.</li> <li>• Aftercare advice for patients and review appointment if required</li> </ul>
<b>Gaps in Controls</b> A gap in control is deemed to exist where adequate controls are not in place, or where collectively they are not effective. Where gaps in control are identified, action plans must be defined and allocated to an appropriate lead.	<ul style="list-style-type: none"> <li>• Ensuring patient is asymptomatic and unlikely to have covid-19</li> <li>• Ensuring clinician is asymptomatic and unlikely to have covid-19</li> <li>• Time spent at site</li> <li>• Breaching social distancing for treatment</li> <li>• Requirement to use toilet facilities</li> </ul>
<b>Assurances</b> To identify where assurance can be sought. These should be matched to controls.	<ul style="list-style-type: none"> <li>• Adherence to infection prevention and control policy, utilising sterile single use materials. Clinic disinfection between patients.</li> <li>• Adherence to documentation policy</li> <li>• Adherence to government guidelines around social distancing</li> </ul>
<b>Gap in Assurances</b> A gap in assurance is deemed to exist where there is a failure to gain evidence that the controls are effective. Where gaps in assurance are identified, action plans must be defined and allocated to an appropriate lead.	<ul style="list-style-type: none"> <li>• Inability to social distance for a small period of time (less than 15 minutes) whilst performing treatment.</li> </ul>



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Risk Assessment Page 2 of 3

#### **ACTION**

##### **Further actions required or being taken to mitigate the risk.**

1. Perform a pre-treatment medical history questionnaire with additional specific questions to determine if the patient has signs of covid-19 or has been exposed to covid-19, or is in a vulnerable category should they contract covid-19.
2. 24 hours prior to appointment contact patient to discuss any changes that may have occurred from time pre-treatment history taken.
3. Ensure patient aware and informed about risk and requirement for close contact to perform treatment.
4. Ensure patient aware of additional requirements of them to limit risk of spread of covid-19 (detailed #8&9)
5. Ensuring clinician is displaying no signs and symptoms of covid-19 on day of treatment and 14 days prior
6. Reducing time spent in clinic by performing some aspects of assessment (such as pre-treatment questionnaire and detailed discussion around consent) remotely, thus allowing procedure to be performed within 15 minutes.
7. Adhering to social distancing measures for as much of the time as possible.
8. Advising patients not to attend early and that if they do to wait in their car till invited in to the clinic.
9. Reducing risk of patient contamination of clinic with covid-19 by;
  - Performing a temperature check on arrival,
  - Requiring patients to place bag/coat in designated plastic box (first step encourage not to bring or keep on person)
  - Requiring patients to decontaminate hands on arrival
  - Ensuring wear of face mask (will be removed only when necessary if required for part of treatment)
  - Wearing of shoe covers,
  - Attend appointment alone,
  - Clean hands again prior to leaving.
10. If toilet facilities on site are required by patient ensure thorough cleaning and decontamination of bathroom immediately after.
11. Reduce risk of transmission by clinician:
  - Wearing a clean uniform for each session,
  - Ensure PPE is worn throughout beyond what is stipulated by PHE disposable gloves, disposable apron, surgical mask, face protector).
  - Ensures thorough hand hygiene prior to inviting patient into clinic, prior to treatment immediately after treatment, prior to cleaning clinical environment and after cleaning clinical environment.
12. Ensuring clinical environment and any areas that patient travels through are disinfected prior to and after arrival, ventilating areas as much as possible, and closing off all other areas of site.
13. Keeping only essential items in clinical environment that can be thoroughly cleaned and disinfected, and allowing enough time for this between each patient appointment.
14. Reducing the risk of disease spread by other persons from the clinic site by only operating clinics on days when the clinician is at the site alone.



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<p><b>Inherent Risk Grade</b></p> <p>Prior to risk assessment it is felt that the inherent risk of contracting covid-19 with the IPC measures and clinical assessments that were in place would be 9-12. It would be possible for disease spread to occur and the consequence of this could be that patients then spread the disease to other members of their households.</p> <p>The treatment of dermaplaning is a close contact treatment but it is non-aerosol generating. Strict IPC measures have always been adhered too. Further PPE has been introduced such as visor for staff and show covers for both staff and patients. In addition patients will be given face masks to wear. A thorough clinical history will ensure only patients fit and well will be in attendance.</p>	<table border="1"> <thead> <tr> <th></th> <th colspan="5">Severity / Consequence</th> </tr> <tr> <th>Likelihood</th> <th>1 Insignificant</th> <th>2 Minor</th> <th>3 Moderate</th> <th>4 Major</th> <th>5 Extreme</th> </tr> </thead> <tbody> <tr> <td>5 - Almost Certain</td> <td>5</td> <td>10</td> <td>15</td> <td>20</td> <td>25</td> </tr> <tr> <td>4 - Likely</td> <td>4</td> <td>8</td> <td>12</td> <td>16</td> <td>20</td> </tr> <tr> <td>3 - Possible</td> <td>3</td> <td>6</td> <td>9</td> <td>12</td> <td>15</td> </tr> <tr> <td>2 - Unlikely</td> <td>2</td> <td>4</td> <td>6</td> <td>8</td> <td>10</td> </tr> <tr> <td>1 - Rare</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>5</td> </tr> </tbody> </table>						Severity / Consequence					Likelihood	1 Insignificant	2 Minor	3 Moderate	4 Major	5 Extreme	5 - Almost Certain	5	10	15	20	25	4 - Likely	4	8	12	16	20	3 - Possible	3	6	9	12	15	2 - Unlikely	2	4	6	8	10	1 - Rare	1	2	3	4	5
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<p><b>Current / Residual Risk Grade</b></p> <p>Following risk assessment and planning and implementing further controls and assurances to minimize risk as much as can currently be conceive it ifs felt that the risk of transmission of Covid-19 has fallen to 2-4.</p> <p>Regular reviews of government guidance and scientific findings will continue to guide practice to ensure risk is kept to a minimum.</p>	<table border="1"> <thead> <tr> <th></th> <th colspan="5">Severity / Consequence</th> </tr> <tr> <th>Likelihood</th> <th>1 Insignificant</th> <th>2 Minor</th> <th>3 Moderate</th> <th>4 Major</th> <th>5 Extreme</th> </tr> </thead> <tbody> <tr> <td>5 - Almost Certain</td> <td>5</td> <td>10</td> <td>15</td> <td>20</td> <td>25</td> </tr> <tr> <td>4 - Likely</td> <td>4</td> <td>8</td> <td>12</td> <td>16</td> <td>20</td> </tr> <tr> <td>3 - Possible</td> <td>3</td> <td>6</td> <td>9</td> <td>12</td> <td>15</td> </tr> <tr> <td>2 - Unlikely</td> <td>2</td> <td>4</td> <td>6</td> <td>8</td> <td>10</td> </tr> <tr> <td>1 - Rare</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>5</td> </tr> </tbody> </table>						Severity / Consequence					Likelihood	1 Insignificant	2 Minor	3 Moderate	4 Major	5 Extreme	5 - Almost Certain	5	10	15	20	25	4 - Likely	4	8	12	16	20	3 - Possible	3	6	9	12	15	2 - Unlikely	2	4	6	8	10	1 - Rare	1	2	3	4	5
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<b>REVIEW DATE</b>	<b>August 2020 or if further government guidance or medical evidence occurs prior.</b>																																														