



## Covid-19 Pandemic Guidance

### Point of Care Risk Assessment Resource for Occupational Therapists

Prior to each client interaction, occupational therapists must complete a Point of Care Risk Assessment (PCRA) to assess the risks posed by the client, environment and task to themselves, other care providers, other clients and visitors. Occupational therapists should refer to employer PCRA resources if applicable.

A PCRA is based on the occupational therapist's judgement about the specific clinical situation (including the client's condition, physical, emotional and mental health) and effective infection prevention and control practices, as well as up-to-date, accurate information on the communicable disease (e.g., COVID-19). Control measures must then be implemented based on the evaluation of the risk factors identified.

Conducting a PCRA involves asking questions before *every* interaction with the client to determine the risk of exposure to a potential hazard. Examples of such questions include:

#### 1. Is the hazard present in this situation?

Consider situations in which there might be a greater risk of exposure:

- Close contact with the client who has a suspected or confirmed communicable disease
- Close contact with surfaces/items that are contaminated with body fluids/droplets
- Likelihood of splashes or sprays of body fluids during the task(s)
- Additional precautions are required for infectious agents (e.g., droplet, contact, airborne).

#### 2. What is the health status of the client?

Consider situations in which there might be a greater risk of exposure:

- Client requires assistance with self-care and/or has difficulty managing hand hygiene
- Client has copious respiratory secretions, is frequently coughing and/or sneezing and has difficulty managing respiratory hygiene
- Client has difficulty maintaining or understanding infection prevention and control measures
- Client is immunocompromised or identified as high risk for increased negative outcomes

#### 3. What type of task(s) am I doing in this specific interaction?

Consider situations in which there might be a greater risk of exposure:

- Direct care task(s) requiring close contact (e.g., wound care, feeding, assistance with bathing, dressing, transfers, etc.)
- Indirect care tasks that do not require close contact, but involve surfaces/items that may contribute to contact transmission (e.g., housekeeping, delivering or removing equipment, etc.)
- Being unprepared in terms of training, equipment, and readiness to complete the task safely.

#### 4. Where am I doing my task?

Consider situations in which there might be a greater risk of exposure include:

- In an environment with prolonged and frequent contact with a known infection source
- In an environment with inadequate/unknown infection prevention and control practices
- In an environment where there is shared equipment with inadequate/unknown cleaning and disinfection practices between client use
- In an environment where physical distancing of 2 metres is not possible/realistic
- In an environment where there is concern about inadequate ventilation
- In an environment where there is concern about inadequate client placement or grouping

#### 5. What action(s) do I need to take?

To mitigate the identified risks for this situation, the following actions should be taken, as recommended by the BC CDC, in the order of most to least protective (select all that apply):

- Enact public health measures (e.g., Orders from the Provincial Health Officer, vaccination, etc.)
- Use alternative assessment/treatment options (e.g., telehealth, postpone appointment, etc.)
- Implement environmental controls (e.g., being outdoors, ventilation systems, etc.)
- Enhance environment/equipment cleaning and disinfection practices (e.g., therapeutic equipment, toys, mobile documentation devices, sharps safety, handling of waste/linen, etc.)
- Implement administrative measures (e.g., development/revision of policies, procedures, screening protocols, collection of information for contact tracing, etc.)
- Provide additional education and signage for clients, families and visitors
- Reinforce hand hygiene practices (e.g., washing hands frequently, availability of hand sanitizer)
- Reinforce respiratory hygiene practices (e.g., coughing into the elbow, refrain from touching eyes, nose or mouth with unwashed hands, refrain from sharing any food, drinks utensils, etc.)
- Ensure appropriate use of PPE (for occupational therapist, client, caregivers and/or other staff)

Occupational therapists must select and implement appropriate actions to minimize the risk of COVID-19 exposure to themselves, their clients, care providers and other staff. Recommendations for specific infection prevention and control measures are available on the BC Centre for Disease Control's website and may vary depending on your specific practice contexts and environments.

<http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care>

*Be Calm, Be Kind, Be Safe.*

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#### Acknowledgement

Adapted from the BC Centre for Disease Control's Infection Prevention and Control for Novel Coronavirus (COVID-19) Point of Care Risk Assessment. [http://www.bccdc.ca/Health-Professionals-Site/Documents/COVID19\\_PointOfCareRiskAssessTool.pdf](http://www.bccdc.ca/Health-Professionals-Site/Documents/COVID19_PointOfCareRiskAssessTool.pdf)