


Company name:	Anna Gray Counselling
Assessor name:	Anna Gray
Date completed:	13 September 2023

Location:	Gracelands Yard, 102 Liddell Gardens, London NW10 3TQ
Signature:	
Date for review:	1 January 2024

Scope of assessment:	This assessment covers all activities in relation to face to face therapy sessions, taking place inside and in a designated therapy room. It focuses on the required control measures to prevent the spread of Coronavirus (COVID-19).
Hazard description:	Coronavirus disease (COVID-19) is an infectious disease caused by a newly discovered coronavirus (SARS-CoV-2). 'When someone with COVID-19 breathes, speaks, coughs or sneezes, they release droplet and aerosol particles containing SARS-CoV-2 virus. SARS-CoV-2 is primarily transmitted between people through these infectious respiratory particles (droplet and aerosol) when they are inhaled, or come into contact with the eyes, nose or mouth. Aerosol generating procedures (AGPs) can result in the release of aerosols from the respiratory tract when these are performed in health and care settings. Transmission risk is highest in close proximity to an infectious person (particularly within 2 metres). The number of infectious respiratory particles is greatest close to the nose and mouth. Being in poorly ventilated indoor spaces, particularly for an extended period of time, also increases the risk of becoming infected.' (Source: UK Health Security Agency Coronavirus Guidance , accessed 13/9/2023).
Details of who may be affected:	<ul style="list-style-type: none"> • Therapists • Clients • Vulnerable groups – elderly, pregnant workers, those with existing underlying health conditions • Anyone else who comes into contact with therapist in relation to the activities stated below.

Activity	What are the hazards?	Who might be harmed and how?	Required control measures	Action	Action by who and when?	Done yes/no /ongoing
Face-to-face counselling/therapy	The spread of covid-19	Clients and counsellor	<u>Communication and consent</u>	Publish risk assessment on website and inform face-to-face clients in session. Include as part of intake of new clients.	AG	Yes
			<ul style="list-style-type: none"> • For face to face sessions, discuss with the client to confirm how the session will be carried out. 			
			<u>Hand-washing / sanitation</u>			
			<ul style="list-style-type: none"> • Anti-bacterial gel available in therapy rooms. • Therapist will wash their hands or sanitise between sessions. • Handwashing facilities already exist 		AG	Yes
			<ul style="list-style-type: none"> • Handwashing facilities already exist 		AG	Yes
			<u>Cleaning</u>		AG	Yes
			<ul style="list-style-type: none"> • Surfaces are cleaned each day 			

Activity	What are the hazards?	Who might be harmed and how?	Required control measures	Action	Action by who and when?	Done yes/no /ongoing
Face-to-face counselling/ Therapy (continued)	The spread of covid-19	Clients and counsellor	<u>Other mitigations</u> <ul style="list-style-type: none"> Face coverings are currently not mandatory. Vaccination status The therapist is fully vaccinated. Client vaccination status is information they can choose to share but will not be requested. 		AG AG	N/a Yes
Working in rented premises	Spread of covid-19	Client and counsellor; Others who use the same rented premises	<p>No one else will be permitted in the dedicated room during sessions apart from the therapist and the client.</p> <p>Request a copy of the premises risk assessment and follow actions identified if possible.</p> <p>Contact other users of the premises to ensure they are adhering to the required COVID-19 risk mitigation protocols</p>	<p>Ensure others using your premises are aware of risk control measures and know which spaces they must not enter</p> <p>Make any necessary amendments to risk assessment if required and inform clients</p> <p>Amend risk assessment to mitigate any transmission risks caused by other users of the premises</p>	AG AG AG	Ongoing Yes Yes
Working in rented premises (continued)	Spread of covid-19	Client and counsellor; Others who use the same rented premises	Others may have been working in room prior to client appointment	Air room before use if it has been used by another therapist beforehand	AG	Ongoing
Working with vulnerable groups	Spread of covid-19 in Vulnerable groups elderly, pregnant workers, those with existing underlying health conditions	Clients who are elderly, pregnant, those with existing underlying health conditions	<p>Any client in one of the vulnerable groups should where possible not attend a face to face session.</p> <p>The counsellor has a family member who is immunosuppressed so is continuing to follow the steps outlined in this risk assessment.</p>	Confirm this protocol in writing with your clients	AG	Yes

Activity	What are the hazards?	Who might be harmed and how?	Required control measures	Action	Action by who and when?	Done yes/no /ongoing
Illness and suspected COVID-19 cases	Spread of covid-19	Clients, counsellor, and other users of the premises.	<u>Therapist</u> If the therapist develops a high temperature or a persistent cough, or loss of taste/smell, or has a positive lateral flow test result, they should: <ul style="list-style-type: none"> Cancel/reschedule all face-to-face appointments Take a Lateral Flow Test (LFT) Appointments should not go ahead until a negative test result or they have completed the self-isolation period (current guidance is 5 days). 	Confirm this protocol in writing with clients	AG	Yes
			<u>Clients</u> Clients should not attend an appointment where they have any COVID related symptoms, are feeling unwell, or have themselves had a positive LTD or PCR test result within the past 5 days. If possible clients are requested to consider having an online session if they are living with someone who has tested positive, or are still feeling unwell / testing positive themselves.	Confirm this protocol in writing with clients	AG	Yes

Confirmation

By signing this form, you confirm that this assessment is a true reflection of the hazards, that you understand the risks and that the health, safety and welfare arrangements specified in the assessment will be implemented.

Name: Anna Gray

Signature:



Date: 13/9/23