Addendum to Guidance on Physical Distancing within NHSGGC –
Summary of changes for HSCP Settings

*Note – This is intended as a note of the minimum level of guidance in each particular setting with reference to NHSGGC staff, patients and visitors.

Any areas within Health & Social Care Partnerships (HSCPs) that identify the need to reduce distancing measures from 2m to 1m, must:

- Fall within the scope of the new guidance, refer to the table below
- Complete a robust risk assessment to determine the feasibility of reducing from 2m – use the Physical Distancing Risk Assessment template
- Review the risk assessment, in accordance with local HSCP approved governance routes to ensure that suitable controls are in place to protect staff, patients and visitors. Risk assessments will be approved through this route only. Approved risk assessments must then be submitted centrally to HealthandSafety.Partnerships@ggc.scot.nhs.uk where they will be recorded.
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| All non clinical areas – including, waiting areas, office spaces outside clinical areas, general circulation spaces such as lift halls, foyer areas, canteen, in-house cafes, meeting rooms (this list is not exhaustive) | Staff, Patients and Visitors | **Physical distancing in these areas should remain at 2m.**  
All individuals in these common circulating spaces (staff, patients, visitors, contractors, volunteers) must wear face masks/coverings in line with [Scottish Government guidance](https://www.gov.scot) or FRSM in line with extended use of FRSM policy.  
Where face coverings are removed for any reason e.g. eating, drinking, changing, 2m physical distancing must be maintained. |
| All in-patient areas, including acute admission, rehab, MHAU, IPCU, CAMHS, LD, adult and elderly wards, consulting rooms and office spaces within the in-patient setting (this list is not exhaustive) | In-patients, staff (including bank and agency), visitors | **Physical distancing should remain at 2m**  
Inpatients across all wards/ COVID-19 care pathways (low, medium and high risk) must **continue to physically distance by 2m** at all times from other patients, visitors of other inpatients and staff when not receiving direct care. This applies to in-patients when within their bed space or any other area of the health care setting.  
All individuals in these areas (staff, patients, visitors, contractors, volunteers) must wear FRSM in line with extended use of FRSM policy.  
Where FRSMs are removed for any reason e.g. eating, drinking, changing, 2m physical distancing must be maintained.  
For the latest visitor information and guidance please refer to [NHSGGC Hospital Visiting Info & Toolkit](https://www.nhslothian.scot.nhs.uk) |
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| Clinical settings (e.g. Treatment rooms, podiatry, physiotherapy, consulting rooms, counselling rooms) (this list is not exhaustive) | Staff, Patients and Visitors | **Physical distancing within these settings, should remain at 2m, unless services identify a need to reduce to 1m.**  
To reduce to 1m, services must:  
  - Undertake a risk assessment to demonstrate that the wider hierarchy of controls is in place prior to reducing to 1m physical distancing.  
  - 2m distancing continues to apply to suspected/confirmed COVID-19 cases.  
  - The completed risk assessment must be approved by the relevant governance route.  
Any patient answering yes to any of the triage questions should be placed in the high risk category which must remain at 2m physical distancing.  
Some community care areas will receive individuals who are considered extremely clinically vulnerable. In these areas, maintain 2m physical distancing.  
Children should be supported by parents/carers with hand and respiratory hygiene.  
Members of the same family/household do not need to physically distance in waiting areas.  
Services must ensure that local Triage arrangements are in place. |
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| All community/ home visiting                                           | Staff                  | **Physical distancing should remain at 2m**  
Where critical tasks involve staff working within 2m a risk assessment must be conducted to demonstrate that the wider hierarchy of controls is in place.  
Appropriate PPE must be used. |
| All areas – where NHSGGC staff are entering non-NHSGGC premises, (Care homes and building based services)  
(arrangements will normally be determined through Council health & safety professionals for these settings or independent care providers) | Staff                  | **Physical distancing will largely remain at 2m for ALL staff within these settings, however where there is consideration to move to 1m, in line with SG guidance, then this will be subject to a robust risk assessment and approval through established governance processes.**  
Line manager (NHS or Council) must ensure that a service specific SD Risk Assessment has been undertaken to demonstrate that the wider hierarchy of controls are in place for staff working/operating in locations where physical distancing may have been reduced to 1*metre*. The completed risk assessment must be approved by the relevant governance route.  
All COVID-19 pathways including care homes and building based day services must ensure that FRSM are in use.  
Appropriate PPE must be used  
Where staff remove face coverings/FRSMs for any reason e.g. eating, drinking, changing, staff are to maintain 2m physical distancing. |
| Other- car sharing | Staff and patients | **Car-sharing should be avoided** whenever practical and mitigations should remain in place.  

Please see NHSGGC use of pool and shared vehicles risk assessment for further details. |