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## GUIDANCE

# Returning to the workplace: Safety considerations for practising psychologists

During the recovery phase following Covid-19, there will be significant challenges facing psychologists when returning to the workplace. Psychologists aim to make people they work with feel secure and this can only be done when they themselves are feeling safe and are physically protected from immediate infection danger. Government policy varies between nations and this guidance sets out the need for balanced decision-making about ways of working, and the ongoing safety considerations for psychologists and their clients.

UK Government has [guidance for people working in offices](#), which can be used alongside Health and Safety regulations (e.g. [HSE](#)) and other relevant employment laws. However, these principles do not fully address psychologists' own sense of personal safety, nor client safety, arising from working in the current situation. Situations that may have otherwise been deemed safe and meet risk assessment criteria, are now subject to new considerations regarding safety from both physical and psychological perspectives.

As psychologists work in diverse settings, different sections of this document will be relevant to each individual psychologist. Individuals can use their judgement to decide what is useful to their setting and type of employment. The decision about when it is safe to return to the workplace will need to be carefully considered. This is particularly important for vulnerable people and high-risk groups, including psychologists from the BAME community, given that people from BAME backgrounds have been significantly impacted by Covid-19.

The safety of both clients and psychologists is important when making decisions about entering the workplace. Psychologists should have conversations about safety with clients and their families, including deciding collaboratively how assessments and interventions could take place. Decision-making on working safely is complex and psychologists can refer to policies and guidance from different sources such as government, professional bodies, employing organisations or unions. Psychologists should be able to determine whether work they would typically undertake can be done safely, or whether adaptations are required to ensure this is the case. Any psychologist who is directed by their employer to work in a situation where they do not feel safe should discuss their concerns with their management. Advice can be sought from their union or staff-side association. Information may also be obtained from [ACAS](#).

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## WORKPLACE SETTINGS CONSIDERED HIGH RISK

Below are examples of where psychologists may feel unsafe at work; this is not an exhaustive list as specific settings will pose specific challenges.

Physical restrictions which make it difficult or impossible to maintain at least two metres from others.

Settings with poor ventilation, such as small windowless offices, or small rooms with limited airflow.

Spending considerable time in the company of others, even when maintaining two metres physical distance.

No access to sufficient personal protective equipment (PPE) when required.

Inadequate hygiene facilities in work settings.

Communal areas such as staff rooms which may not be cleaned regularly.

Entering people's homes or other settings for consultations.

Psychologists should consider the whole workplace including all areas used by clients and workers. Psychologists whose workplaces are identified as high risk should be supported to work remotely or given appropriate access to PPE. If they are directed to return to the workplace and feel this is unsafe, they should refer to their trade union or staff-side association for advice.

## USE OF PERSONAL PROTECTIVE EQUIPMENT (PPE)

Due to the different work settings, and varied groups psychologists work with, the need for PPE and the form this takes will depend on a number of factors such as type of setting, work being undertaken and needs of client groups. The decision to wear PPE is informed by employing organisations and health and safety directives. All directions on frequency of changing PPE equipment, and safely removing PPE should be carefully followed.

Prior to any face-to-face appointments with clients, psychologists should inform the client whether or not they will be wearing PPE. They should also inform the client if they expect them to wear PPE.

## CHALLENGES OF WEARING PPE

Despite being considered part of safe-working, the use of PPE presents many challenges. Face masks and visors can be painful to wear, make it difficult for others to hear and appear threatening to some clients. Additionally, it may be difficult to fully express facial emotions when wearing masks, so alternatives such as visors may be considered. All forms of PPE hold the risk of presenting a psychological and emotional barrier between psychologists and their clients.

In some settings additional barriers can also arise from wearing ‘uniforms’ such as PPE gowns, which may signal power imbalance, institutionalisation or create confusion about professional roles. Psychologists may adapt their practice, focusing on the needs of clients but at the same time undertaking their work in a way that is safe for all parties.

**TABLE 1: SOME SUGGESTIONS TO HELP OVERCOME PPE CHALLENGES**

PPE CHALLENGE	SUGGESTIONS
<b>Depersonalisation</b>	Print photo of face on A4 paper to attach to torso, with name badge.
<b>Negative connection with PPE</b>	Use psychological techniques to create new positive associations with PPE. This will require gradual exposure, behavioural and cognitive techniques.
<b>Barriers to interaction</b>	Practise a range of different interactional techniques, such as exaggerating movement, slowing down talk, smiling with eyes. Acknowledgment of strangeness and normalisation of PPE and new procedures. Transparent masks might alleviate some issues for deaf or hard of hearing groups. Consider virtual consultation.

## CASELOAD FLEXIBILITY

Time and resources will need to be flexible. Regular cleaning will be required regularly (e.g. between all appointments) therefore employers will need to allow a reduction of workload to accommodate the extra time needed for safe working. Responsibilities for cleaning should be set out in local agreements. Reduced caseloads, and dispersing appointments across the day, will also be important to mitigate busy communal areas such as waiting rooms. More administrative time may be needed so that psychologists can send resources to clients via email rather than handing over leaflets in sessions. Additionally, people with significant caring responsibilities affected by the pandemic will need the flexibility to work remotely.

## CREATING SAFE SETTINGS

Physical safety is paramount for the current situation in the workplace and flexibility and adaptability are essential. This means that working remotely should continue where possible. Significant progress has been made by psychologists using [video-conferencing](#) for team meetings and client work, including with [children](#), since the onset of the pandemic, so there is no immediate imperative to return prematurely to face-to-face work with clients.

The current situation may need to include working practices that previously were regarded as unusual or unconventional. For example, outdoor consultations may be an alternative, with care being taken to maintain client confidentiality. This will require thoughtful discussion with clients in advance, so that all views on risk and opportunity are considered. Psychologists will need to bring their ingenuity and adaptability into their new practice. This will include being aware of physically safe boundaries, weighing up the need for face-to-face contact, with considerations of social distancing and time spent with people.

**Other considerations include:**

Avoiding the use of physical resources that are shared, for example, stationery, paper, assessment tools and physical therapy tools.

Reviewing practices which involve toys and play when working with children.

Using e-tools and resources where possible.

Reviewing the use of waiting rooms.

Safely managing work clothing, for example, laundering, transporting, storing and changing.

There will be complex considerations for psychologists when considering their return to the workplace. There will be objective risks to be weighed up alongside subjective factors such as not feeling safe. Psychologists are encouraged to raise concerns about their own feelings of safety with their supervisor or manager, to help inform decisions surrounding their work practices.

This guidance will be subject to review as pandemic circumstances change and new learning emerges. The British Psychological Society (BPS) is continuing to publish [guidance](#) related to the impact of Covid-19 on the workplace on its website. To ensure the guidance remains relevant and useful, the BPS welcomes members to contribute their feedback to the online [Member Connect](#) platform.

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