

POLICY ON COVID-19 INFECTION PREVENTION AND CONTROL

PREAMBLE:

The Government of Saskatchewan has outlined a *Re-Open Saskatchewan* plan that contains specific guidelines for residents of Saskatchewan, regulated health professions and businesses to limit the spread of COVID-19. In addition to the specific guidelines outlined in the *Re-Open Saskatchewan* plan applicable to the return to practice of chiropractic clinics, the operational practices below are requirements that all Chiropractors must follow. Understand that COVID-19 has created a very fluid, rapidly evolving environment and clinicians and clinics will need to respond quickly to the changes signaled from Government. Members are required to:

1. Follow all mandates and recommendations from Public Health and the Government of Saskatchewan regarding your personal and professional conduct. As a regulated health professional, you have a fiduciary responsibility to follow all civil orders that originate from any level of government.
2. Read and follow all communication from the CAS.

The CAS is consulting with the Ministry of Health and others, and will adapt this policy based on expert recommendations. The CAS exists to protect the public, and this policy is created to protect the public and instill confidence that patients can access safe chiropractic care.

To facilitate ongoing care of patients at this time, and as clinics are permitted to resume providing care, the Board has approved the following policy on infection prevention and control.

GUIDELINES:

This Policy includes guidelines regarding:

1. Screening
2. Hand Hygiene
3. Environmental Cleaning and Disinfection
4. Physical Distancing
5. Use of PPE
6. Exclusion or Work Restrictions during Staff Illness

1. Screening

Members must assess and screen patients for symptoms of COVID-19 as per the recommendations of Public Health.

Clinic staff should collect screening information on the phone at the time of booking the appointment and again in person at the time of patient's attendance at the clinic – **see Appendix "A" for screening questions.**

Signage indicating screening criteria should be posted in a location that is visible before entering the clinic.

Patients exhibiting respiratory symptoms that are not related to a known or pre-existing condition (e.g. seasonal allergies) should not receive chiropractic treatment at this time, and should be directed to call Healthline 811 or their physician's office. Those who have travelled outside of Canada, have been diagnosed with COVID-19, or have had close contact with a confirmed case of COVID-19, are subject to mandatory isolation orders and should not receive treatment. Please note some exceptions exist for essential workers as determined by the Chief Medical Health Officer. Professional judgement is required to determine whether treatment should be provided to patients who have travelled within Canada, informed by the recommendations of public health officials.

A registry of all people entering the clinic should be kept to aid in contact tracing if required. This would include people in the clinic aside from patients (e.g. couriers, guardians accompanying a patient).

Note:** Telehealth services may be appropriate pursuant to **Policy UU – Temporary Policy on Telehealth.

2. Hand Hygiene

Hand hygiene is the most effective way of preventing the transmission of infections to patients and staff in clinics. All employees shall be educated in proper hand hygiene techniques. Members shall ensure that hand hygiene products are available for employees and patients.

Hand hygiene includes washing hands with soap and water or using alcohol-based hand sanitizer. Washing hands is preferred whenever possible. Alcohol-based hand sanitizer must be approved by Health Canada (DIN or NPN number), with a final concentration of 60-80% ethanol or 60-75% isopropanol.

Hand hygiene shall be performed:

- Members – when enter clinic; before contact with a patient and after contact with a patient (hand wash)
- Patients - when enter clinic (hand sanitizer)
- Staff - when enter clinic; before and after patient interaction (hand sanitizer)

***Note:** if hand sanitizer is unavailable, hand washing is acceptable.*

See **Appendix “B”** for proper procedures for hand washing and sanitizing.

3. Environmental Cleaning and Disinfection

The COVID-19 virus can survive for a period of time on different surfaces and objects. Frequent cleaning and disinfection is important to prevent spread of the disease. Cleaning products remove dirt, dust and oils, but don't always kills germs. Disinfectants are applied after cleaning to destroy germs.

i. Proper disinfectant products:

- Many common household and commercial disinfectant products will destroy the COVID-19 virus. Common disinfectants include bleach solutions, quaternary ammonium (QUAT), alcohol (70%) and peroxide. Vinegar, tea tree oil solutions, etc. are not proven to be effective disinfectants.
- Disinfectants with an 8-digit Drug Identification Number (DIN) are approved for use by Health Canada. Ensure that the disinfectant used is appropriate for elimination of viruses.
- According to Health Canada, a disinfecting solution can be made by mixing one part of bleach into fifty parts of water.
- The disinfectant product manufacturer's instructions shall be followed for use, safety, contact time, storage, and shelf life.
- Apply the disinfecting solution using a spray bottle or clean wiping cloth.

ii. Disinfectant requirements:

- Clinical contact surfaces (e.g. chiropractic tables, therapeutic tools and devices, procedural work surfaces, clinic room seats, etc.) shall be cleaned and disinfected after each patient encounter. Allow sufficient time for process to be effective, in accordance with manufacturer's instructions.
- For chiropractic tables, it is recommended to not use the central holding bar for the headrest paper, in order to decrease the inability to effectively clean the metal rod.
- Any materials on clinical contact surfaces that cannot be properly disinfected shall not be used (e.g. fabric coverings, unless they can be changed in between each patient encounter and properly laundered. Proper cleaning and disinfecting of the underlying surface will still be required).
- Patient contact items including the payment machine, reception counter, seating areas, doors and handrails should be cleaned and disinfected after each patient encounter.
- Commonly touched areas should be cleaned and disinfected twice daily or whenever visibly soiled. Commonly touched areas include light switches, doorknobs, toilets, taps, handrails, counter tops, touch screens/mobile devices and keyboards. The payment machine should be cleaned and disinfected at least hourly, or ideally after each patient encounter.
- Books, magazines, toys and remote controls should be removed from patient areas.

- A regular schedule for periodic environmental cleaning shall be established and documented.

4. Physical Distancing

(a) Clinical space management:

- Members of the public should be two (2) metres from each other. This includes:
 - Treatment areas
 - Waiting areas - seats should be spaced to maintain two metre distance
 - Transition areas
- Employees and the public should be two (2) metres from each other.
 - Reception and payment area - If two metres cannot be maintained at reception/payment area, other non-contact electronic payment means can be used, or installation of a plexiglass or plastic barrier can protect reception staff.
- The treating practitioner should be two metres from the public when conversing.
- Consideration of patients waiting in vehicle until their appointment time.
- Consideration of off-hours treatment for high risk populations.

(b) Clinical schedule management:

- Patient appointments should be scheduled to facilitate physical distancing, and to ensure that no more than 10 patients are in waiting areas if physical distancing allows within the space.
- Sufficient time must be provided for the area the patient occupied to be cleaned and disinfected.

Note: Patients should be encouraged to use credit or debit cards for payment. Limit contact by allowing patients to scan/tap/swipe their own cards. Limit the exchange of paper – email receipts whenever possible.

5. Use of PPE

Personal protective equipment (PPE) is an essential element in preventing the transmission of disease-causing microorganisms. If used incorrectly, PPE will fail to prevent transmission and may facilitate the spread of disease.

In keeping with the recommendations of the Chief Medical Health Officer regarding appropriate PPE use when physical distancing cannot be maintained, a surgical/procedure mask must be worn by the member when treating patients when a physical distance of two metres cannot be maintained.

One mask may be used for the entire work shift, but must be discarded and replaced when wet, damaged or soiled, when taking a break, and at the end of the day. N95 respirators are not required. Cloth masks are not permitted as they are not approved for healthcare settings.

PPE must be donned and doffed using the following specific sequence to prevent contamination:

Donning mask:

1. Perform hand hygiene.
2. Put on mask. Secure ties to head or elastic loops behind ears. Mould the flexible band to the bridge of nose (if applicable). Ensure snug fit to face and below chin with no gaping or venting.

Doffing mask:

1. Perform hand hygiene.
2. Carefully remove mask by bending forward slightly, touching only the ties or elastic loops. Undo the bottom tie first then undo the top tie. Discard the mask in the garbage.
3. Perform hand hygiene.

More information on proper PPE use can be found at www.saskatchewan.ca/covid19-providers.

Single use gloves may be used, but are not required for most chiropractic services. If gloves are used, they must be changed in between each patient encounter and be accompanied by proper hand hygiene between every glove change.

Note: It is recommended that members practice in different clothes than they wear into the clinic. The clothes that you practice in should be cleaned each day. You should change back into the clothes you wore to the clinic to return home in.

6. Exclusion or Work Restrictions during Staff Illness

All members and staff must self-monitor for symptoms and use the self-assessment tool available on the Government of Saskatchewan's website. (<http://www.saskatchewan.ca/COVID-19>)

If member or staff exhibits any symptoms of COVID-19, they must stay home or be sent home and should follow the advice of public health officials before returning to work. When employees go home sick, their work areas must be cleaned and disinfected. Upon recommendation by public health officials, the member or staff may return to work at the clinic. The advice of Public Health officials shall be followed regarding impact on clinic operations during these periods.

All workplaces must develop a workplace illness policy, as per the Government of Saskatchewan's requirements.

Members are encouraged to call HealthLine 811 or the Government's Business Response Team at 1-844-800-8688 if they are aware of a patient who has visited their clinic and is now testing (or has tested) positive for COVID-19.

Additional Resources:

[Policy UU – Temporary Policy on Telehealth](#)

[Re-Open Saskatchewan Plan](#)

[Government of Saskatchewan COVID-19 Resource Page](#)

[COVID-19 Resources for Health Care Providers – Government of Saskatchewan](#)

[Government of Saskatchewan Support for Businesses and Business Response Team](#)

[CCA National COVID-19 Resource Centre](#)

[Government of Canada COVID-19 Resources](#)

Effective date: May 4, 2020

Amended May 7, 2020

APPENDIX "A"



Chiropractors'
Association of
Saskatchewan

COVID-19 Screening Questions

1. Do you have:
 - a fever
 - new onset of cough
 - shortness of breath? Yes
 No

2. Have you travelled internationally within the last 14 days?
 Yes
 No

3. Have you been diagnosed with COVID-19 or had close contact with a confirmed case of COVID-19 within the last 14 days?
 Yes
 No

Answering YES to questions 1, 2, or 3 indicates that an individual is symptomatic of COVID-19, or may have been exposed to COVID-19. Individuals should be told to self-isolate, and to call HealthLine 811 if symptoms develop or worsen. If the individual is a patient, they are not eligible for treatment at this time. If the individual is a practitioner or staff, they are not eligible for work at this time.

4. Have you travelled outside of Saskatchewan, but within Canada, within the last 14 days?
 Yes Where? _____
 No

If patient answers YES to question 4, the chiropractor's clinical judgement is required as to whether or not to treat the patient at this time based on the individual circumstances and any recommendations from public health regarding the area visited.

May 7, 2020

APPENDIX "B"

Proper procedures for hand hygiene:

- (i) Procedure for washing hands with soap and water:
- Wet hands with warm water and enough soap;
 - Apply enough soap to ensure lathering of all hand surfaces;
 - Vigorously rub all surfaces of hands and wrists, including palms, between fingers, back of hands, wrists, fingers, fingertips, and thumbs;
 - Rub hands for a minimum of 20 seconds;
 - Rinse hands under warm, running water;
 - Dry hands with disposable paper towels;
 - Avoid re-contaminating hands after washing. Turn off faucet and open doors with a paper towel;
 - Discard paper towels in waste receptacle.
- (ii) Procedure for using alcohol-based hand sanitizer:
- Ensure hands are not visibly soiled and are dry before use;
 - Apply an adequate amount of sanitizer to cover all hand surfaces;
 - Vigorously rub sanitizer over all surfaces of the hands and wrists, including palms, between fingers, back of hands, wrists, fingers, fingertips, and thumbs;
 - Hands should remain wet for a minimum of 15 seconds;
 - Hands should be rubbed until completely dry.