

This is a preliminary “return to work” plan in order for our office to prepare for re-opening when your provincial government and our own provincial governing boards deem it is safe to do so.

To date, there have been no policies and procedure directives released from any governing colleges or the ministry of health in relation to return to work for multidisciplinary sport medicine health care clinics. When these details are released, the following plans and procedures are subject to change in order to comply with all requirements.

## **RETURN-TO-WORK PLAN**

### **What we know**

COVID-19 is a virus that has a myriad of symptoms, and it does transmit for a period of time before people have symptoms. So, being suspicious of people who have been in high risk situations or locations is warranted.

The virus enters the body by large respiratory droplets containing the virus that adhere to mucous membranes (eyes, nose, mouth) or by touching a surface/object contaminated with the virus and then touching one’s eyes, nose, and mouth.

The infectious period can extend for up to 14 days after a person first exhibits signs of the infection. The majority of viral spread is by symptomatic individuals.

The virus is transmitted with droplets, and can live on surfaces for up to three days on plastic/stainless steel, and up to 24h on cardboard.

Incubation period for the virus is up to 14 days, but median estimates of 5 to 6 days between infection and the onset of clinical symptoms. However, the WHO recommends that the follow up of contacts of confirmed cases is 14 days.

## **CLEANING AND DISINFECTING**

Effective cleaning and disinfection is essential to avoid infecting oneself, and stop the spread of COVID-19. The COVID-19 virus can survive for a period of time on different surfaces and objects therefore frequent cleaning and disinfection is necessary to prevent the spread of the disease.

Common cleaning products remove soiling such as dirt, dust, and oils, are not always 100% effective at killing all virus/bacterial contamination, so can not be used to sanitize/disinfect surfaces. For more information on approved solutions and information, [an updated governmental website can be found here.](#)

All rooms and areas of Reactivate have been stocked with a Ministry of Health approved disinfectant (includes a DIN number). This is the product that must be used in order to properly disinfect any soiled surfaces. The disinfectant product manufacturers instructions must be followed for use, safety, contact time, storage and shelf life.

The frequency of cleaning and disinfecting is dependent on the nature of use/contact of the surface/item in question:

- High touch hard surfaces should be cleaned after each patient contact.
  - Treatment tables
  - Chairs
  - Rehabilitation equipment
  - Diagnostic equipment
  - Therapeutic equipment
  - Door handles
  - Point of sale machine if touched
    - Consider covering surface with plastic wrap
- Low touch surfaces can be cleaned per half day
  - Computer screens, mice, and keyboards
  - Cell phones
  - Toilets
  - Sink taps
  - Handrails
  - Front desk
  - Protective screens

Hand washing techniques

- With hot soapy water:
  - For a minimum of 20 seconds, front and back, and between fingers
  - Arms and exposed areas that came into contact with patients should be washed additionally for the same amount of time.
- With hand sanitizer:
  - For a minimum of 15 seconds of hand rubbing, front and back, and between fingers ([link to reference](#))
  - Arms and exposed areas that came into contact with patients should be sanitized additionally.

After each patient contact if no patient is waiting for you, a thorough cleaning of each of these areas should be performed in accordance to the high vs low touch areas. If there are patients waiting, then we will be asking the front staff to help with the cleaning of clinical rooms. The low touch areas that should be cleaned every half day will be cleaned by front staff.

Vacuuming the clinic will be done daily at the end of the day, as will mopping the physiotherapy area.

Essentially, **there can not be enough cleaning done. This will be a full team effort!**

We want to feel confident that we are providing as clean and safe of a space for our patients to come into. If you can't remember if you've cleaned a surface or an item, it's better to do it twice than not to have done it.

### REQUIRED CLINIC ENVIRONMENT ADAPTATIONS

- Books, magazines, water cooler, patient handouts and toys have been removed from the waiting room and treatment rooms.
- Food, including communal foods/baked goods should no longer be present/eaten at the front desk or in treatment rooms
- Cloth covered furniture and treatment surfaces will be removed from the clinic due to inability to clean/disinfect the surface and underlying cushioning. Plastic chairs have been brought in to replace these for the time being.
- A regular schedule for periodic environmental cleaning will be established and documented (ie - disinfecting surfaces in washrooms will be documented each time it is performed)

### CLINICAL SCHEDULE MANAGEMENT

- At this point in time, there is no evidence to suggest that the Ministry of Health will be placing a protocol for a maximum occupancy for health care offices.
  - However, if they decide to place a maximum we may have to work together to schedule shifts efficiently in order to ensure that between practitioners/patients and staff numbers we are always compliant with this rule.
- Regardless of maximum occupancy rules (or lack thereof), the ability for practitioners/patients/staff in the office to maintain physical distancing (minimum of 6' apart) is the priority and our scheduling practices will be strategic in order to avoid patient overlap (the best we can) and provide sufficient time for each practitioner to properly disinfect their treatment area between each patient encounter.

### SCREENING AND DIRECTION FOR APPOINTMENT BOOKING AND CONFIRMATION

Due to current public health directives, the clinic will be pre-screening **ALL** patients and providing additional information regarding clinic visits so the patient knows what to expect during their upcoming visit.

## **Before an appointment (booking and reminder calls)**

Front staff to ask client:

1. Have you had any of the following symptoms within the past 14 days: chest pain or shortness of breath, fever, cough, sore throat or runny nose?
  2. Have you had close contact with a confirmed or presumptive case of COVID-19?
  3. Have you travelled out of Canada within the last 14 days?
- **If the patient answers YES to any of the screening questions:**
    - “I apologize but at this time we are not able to book you an in person appointment. A practitioner may be able to perform a virtual session if required, or we can”.
  - **If the patients answers NO to the screening questions:**
    - We will accept the booking request and confirm the appointment date/time as we normally would.
  - **Document, document, document:** Please document the conversation and the responses to their questions in their chart. If the system is able, please use preformatted text to save you time.

Before ending the call/email we will remind patients that:

- On the day of the appointment, we will be asking them complete and sign our screening document once again using the online screening tool (<https://covid-19.ontario.ca/self-assessment/>) and let our front staff know if anything has changed with regard to their health.
- All practitioners and employees at Reactivate will be wearing masks. While masks are not mandatory for patients to wear during their visit, we recommend they bring one to wear (especially for those in the at-risk population)
- If clients usually have a family member or individual that comes to support them during their appointment, we are asking that clients will only be allowed to have one person with them during their visit to the clinic, and these individuals cannot be interchanged from one person to another in the middle of their appointment
- Clients should arrive right on time for their appointment - Not early, Not late. Due to current restrictions, we need to minimize the use of the waiting room and ensure that all patients are seen at their booked time so practitioners can finish appointments on-time to accommodate cleaning and hygiene practices between patients.
  - We have a **5 minute rule** where we will ask patients not to arrive any earlier than 5 minutes before their appointment, and if they are more than 5 minutes late for their appointment, we will ask that they reschedule their appointment so that we can maintain the flow of patients in our clinic as the day progresses

## WHAT TO DO IF PATIENT IS NOT TRUTHFUL IN THEIR SCREENING

If a patient is not truthful during their health screening and enters the practice environment while exhibiting (or it becomes apparent that they have been exposed to somebody who has) signs/symptoms consistent with respiratory illness or it becomes clear that they have travelled outside of Canada within 14 days, the staff member or practitioner must:

- Have the patient immediately complete proper hand hygiene (preferably wash with soap and water for a minimum of 20 seconds, or use hand sanitizer for 15 seconds)
- Provide a new unused mask for the patient to put on immediately
- Ensure the patient is minimum of 6 feet from others in the clinic
- Explain that we are unable to continue with the visit and must reschedule the appointment.
- Advise the patient to contact their primary care provider, visit the emergency room (if they do not have a primary care provider), or use the new Ontario virtual walk in clinic as soon as possible
- Clean and disinfect the practice area immediately including all surfaces touched by the patient.

## carrying out a PATIENT ENCOUNTER

1. Patient calls to book an appointment - active screening occurs (script above)
  - Reinforce to patients that it's important they show up to their appointment time (not early, not late). If it is a new patient who is unable to fill out intake forms online - ask them to come early and fill out forms in an empty room

### **Patient flow upon arrival at clinic**

- They should arrive no earlier than 5 minutes before their appointment, and are considered late and their appointment will need to be rescheduled if they are more than 5 minutes late for their appointment
- The office door will be propped open so patients do not need to touch the door handle
- Patients will need to clean their hands with hand sanitizer for 15 seconds (minimum) or use the bathroom to wash their hands with soap and water for 20 seconds (minimum) before proceeding to the check in counter.
- After cleaning their hands, they will proceed to the front counter to check in using a touchless technique.
- The patient will proceed directly to their treatment room for appointment as advised by the front staff member that is greeting them.
  - If the patient has to wait, they will wait in the designated seating area of the waiting room to be brought into the treatment area by their treating health professional.
  - Chairs will be wiped down after each use by the front staff
- The patient will pay for their appointment prior to their treatment and then will immediately be instructed which room is available for them to enter (if the

room/practitioner is not available yet, the patient can remain in the waiting room if no other patient is waiting as well. If there is another patient waiting, then front desk staff can find an empty room for the patient to wait until their practitioner comes and gets them (the decompression room is most often empty)

- Payment will be based on what the patient booked their appointment for
- If a person comes into the clinic but does not have an appointment, the front desk staff will enter that person's name and time into the non-patient log book
- Before the practitioner ends the session, the practitioner should re-book the patient for their next appointment (if a follow up is required).
  - This will allow the patient to leave immediately after the appointment without the need for a second encounter at the front desk and limiting patient time in the waiting room.
- Once the treatment is complete and patient leaves the treatment room, the patient can use hand sanitizer to wash their hands for 15 seconds, or they can use the washroom to wash their hands for 20 seconds, as they leave (sanitizer will be placed on side edge of front counter so easily accessible as they walk past the desk)
- Patients should exit the clinic immediately upon completion of the treatment to limit exposure in common areas of the clinic

#### **After the patient leaves the treatment room**

- Practitioner performs proper disinfection of the required surfaces and items in the treatment room (treatment table, equipment, tools, chairs)
- If there is another patient waiting for the practitioner, then the front staff will clean the treatment room

#### **Reception area cleaning**

- Front desk staff performs proper wipe down of the reception area as noted in the cleaning procedure noted on page 1.

### HEALTH PRACTITIONER AND STAFF personal care GUIDELINES

Health practitioners and staff at Reactivate will wash their hands with soap and water for a minimum or 20 seconds, or with hand sanitizer for 30 seconds, when:

- They are entering the clinic
- Before/after each patient contact
- After body fluid exposure
- Before donning PPE
- After removing PPE
  - The proper technique of manipulating the mask it to adjust it by the ear straps and not touching the mask itself
- After cleaning contaminated surfaces

We will be providing each practitioner with two masks that they can use. These should be worn for each half day. Masks should be washed in warm to hot soapy water at the end of use and then hung

to dry in a spot where it is clearly marked whose masks they are. Masks are rendered ineffective once they get wet from respiratory condensation, and should be swapped out with a new mask until the first mask is dry.

### Handwashing Guidelines

Proper hand washing and/or sanitizing procedures should be followed by all practitioners, staff, patients, clinic attendees. See the following graphics to review proper hand washing

# How to handwash

(when hands are visibly soiled)



## Lather hands for 15 seconds



1 Wet hands with warm water. 2 Apply soap. 3 Lather soap and rub hands palm to palm. 4 Rub in between and around fingers. 5 Rub back of each hand with palm of other hand. 6 Rub fingertips of each hand in opposite palm. 7 Rub each thumb clasped in opposite hand. 8 Rinse thoroughly under running water.



9 Pat hands dry with paper towel. 10 Turn off water using paper towel. 11 Your hands are safe.

For more information, please contact [handhygiene@oahpp.ca](mailto:handhygiene@oahpp.ca) or visit [publichealthontario.ca/JCYH](http://publichealthontario.ca/JCYH).

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# How to handrub

(preferred method)



## Rub hands for 15 seconds



1 Apply 1 to 2 pumps of product to palms of dry hands. 2 Rub hands together, palm to palm. 3 Rub in between and around fingers. 4 Rub back of each hand with palm of other hand. 5 Rub fingertips of each hand in opposite palm. 6 Rub each thumb clasped in opposite hand. 7 Rub hands until product is dry. Do not use paper towels. 8 Once dry, your hands are safe.

For more information, please contact [handhygiene@oahpp.ca](mailto:handhygiene@oahpp.ca) or visit [publichealthontario.ca/JCYH](http://publichealthontario.ca/JCYH).

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and sanitizing techniques. (Note: hand washing should be for 20 seconds; hand rubbing for 15 seconds)

## PHYSICAL DISTANCING MEASURES:

### Clinical Space Management Requirements:



- Members of the public must be two meters from each other. This includes:
  - - treatment areas
  - - waiting areas
  - - Transition areas
  - - family members who live together are exempt from this requirement
- We will have only 2-3 chairs available for sitting in the waiting area, spaced at least 6 feet apart (mainly for patients who have a hard time standing for any length of time) (each chair will need to be wiped down after somebody sits in it)
- Physical distancing indicators placed in the waiting area will include strips of tape on floor to mark 6' distances and signage throughout to remind patients of the 6' distancing rule
- Front staff employees and the patients must be two meters from each other
  - reception and payment area: since the two meter distance cannot be maintained, a plexiglass barrier will be installed to protect the staff member. When not protected by the plexiglass barrier, staff member must wear a mask
- When possible, health practitioners should remain two meters from the public and staff when conversing/interacting
- Patients are allowed to have one support person with them at any visit. Other support individuals must remain in the car if they are present.
- To aid in physical distancing, we will have patients wait in their vehicle until their appointment time. If patients are non-compliant, or too much patient overlap in common areas of the clinic are noticed, we will begin calling each patient's cell-phones and informing them when it is okay for them to enter the clinic

## PPE Requirements

- All practitioners must wear a mask at all times when providing patient care, or when unable to maintain a 6' physical distance while conversing with each other, a staff member, or patient.
  - ◆ Two reusable cloth masks will be provided for each staff member and practitioner. They should be cleaned with soap and water after every use and hung to dry so they can be reused the next shift.
  - ◆ At this time, N95 respirators are not required and cloth masks are accepted. If this changes, Reactivate will purchase and provide acceptable disposable masks.
- Eye protection, gloves and gowns are not required at this point and will not be provided (practitioners should follow regular/standard college guidelines for glove use) and gloves will be available if required/requested
- Front office staff: Must be masked when unable to maintain a 6' physical distance and not protected by the plexiglass barrier.
- It is recommended that practitioners and staff change clothes after entering and before leaving the clinic so clothes worn in the clinic are not worn outside of the clinic and could potentially limit the spread of contaminated clothing.
  - ◆ Consider bringing a weeks worth of clothes to the office and then take it home at the end of the week to wash all together.

PPE face masks must be put on and taken off with a proper sequence to prevent contamination. Please review the following instructions for the proper ways to wear and remove a mask.

### **Putting Mask On:**

1. Perform proper hand hygiene
2. Open Mask fully to cover from **nose to below chin**
3. Put mask on
4. Secure ties to head (top straps first) or elastic loops behind ears
5. Mould the flexible band to the bridge of the nose (if applicable)
6. Ensure snug fit to face and below chin with no gaping or venting

### **Removing the mask:**

1. Perform proper hand hygiene
2. Do not touch the front of the mask
3. Carefully remove the mask by bending forward slightly, touching only the ties or elastic loops.
4. Undo the bottom tie first then undo the top tie.
5. Place mask in a secure place, ready to bring home or wash with soap and water in the clinic and hang to dry for next use

## Coronavirus Disease 2019 (COVID-19)

# When and How to Wear a Mask

## Recommendations for the General Public

Wearing a mask can help to prevent the spread of some respiratory illnesses, but it can also become a source of infection if not worn or discarded properly. If you need to wear a mask, you should also be sure to clean your hands frequently with soap and water or alcohol-based hand sanitizer.

### Wear a mask if:

- You have symptoms of COVID-19 (i.e., fever, cough, difficulty breathing, sore throat, runny nose or sneezing) and are around other people.
- You are caring for someone who has COVID-19.
- Unless you have symptoms of COVID-19, there is no clear evidence that wearing a mask will protect you from the virus, however wearing a mask may help protect others around you if you are sick.



### How to wear a mask:

- Before putting on your mask, wash your hands with soap and water for at least 15 seconds or use alcohol-based hand sanitizer.
- Secure the elastic loops of the mask around your ears. If your mask has strings, tie them securely behind your head.
- Cover your mouth and nose with the mask and make sure there are no gaps between your face and the mask.
- Do not touch the front of the mask while you wear it. Wash your hands with soap and water for at least 15 seconds or use alcohol-based hand sanitizer if you accidentally touch your mask.

### How to throw away your mask:

- Do not touch the front of your mask to remove it.
- Remove the elastic loops of the mask from around your ears or untie the strings from behind your head.
- Hold only the loops or strings and place the mask in a garbage bin with a lid.
- Wash your hands with soap and water for at least 15 seconds or use alcohol-based hand sanitizer after you have discarded your mask.

### More information about masks:

- When a mask becomes damp or humid, replace it with a new mask.
- Do not reuse a single-use mask. Discard your mask when you have finished using it.

The information in this document is current as of April 10, 2020.

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## EXCLUSION OR WORK RESTRICTIONS DURING STAFF OR PRACTITIONER ILLNESS

Staff and practitioners must complete a recorded formal self screening process upon arrival at work.

Self-screening for symptoms before arrival at work is to be performed with the same symptom screening questions used for patients. If screening is positive, staff or practitioners must not come into the clinic to work. The practitioner or staff member will need to contact their primary care provider to discuss their symptoms and be considered for being swabbed at the local COVID-19 assessment centre. If COVID-19 is suspected or diagnosed, the staff or practitioner must remain off work until symptoms are fully resolved and negative laboratory tests have been confirmed.

If practitioners begin to feel symptomatic while treating patients, they must stop seeing patients immediately and the following appointments will be postponed, or an appointment time with another practitioner will be offered.



Natural Health Practitioners of Canada  
Praticiens de la Santé Naturelle du Canada

## COVID-19 Waiver

Due to the COVID-19 pandemic, we are taking extra precautions with the intake of each client. Please answer these questions truthfully so we may continue to do our best to stop the spread.

Symptoms of COVID-19 may include:

- fever
- fatigue
- dry cough
- difficulty breathing
- sore throat
- loss of smell or taste

I, \_\_\_\_\_, accept the following affirmations  
(print your name)

when engaging in a treatment from \_\_\_\_\_:  
(print your NHPC practitioner's name)

- I understand the above symptoms and affirm that I, as well as all members of my household, do not currently have nor have experienced COVID-19 symptoms within the last 14 days.
- I affirm that I, as well as all members of my household, have not been diagnosed with COVID-19 within the last 14 days.
- I affirm that, to my knowledge, I have not been in contact with anyone who has been diagnosed with COVID-19.
- I affirm that if I travelled outside of Canada in the last month, I isolated in my home for 14 days upon my return.
- I understand that this business and my NHPC holistic health practitioner (identified above) cannot be held liable should I experience exposure to the virus or any other contagion as a result of my providing misinformation on this form.
- I understand that, because massage therapy and other natural health practices involve maintaining prolonged and close physical contact, there may be an elevated risk of disease transmission, including COVID-19.

By signing this form, I acknowledge that I am aware of the risks involved and give consent to receive massage therapy and bodywork.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_