

POLICY ON COVID-19 INFECTION PREVENTION AND CONTROL

PREAMBLE:

The COVID-19 pandemic has created a very fluid, evolving environment and clinicians and clinics will need to respond quickly to the changes signaled from Government. The CAS remains committed to providing direction and guidance to help chiropractors address this challenge. During this time of transition, the provincial health system is continuing to adhere to COVID-19 related infection prevention and control policies. CAS 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 communications from the CAS.
3. Consider virtual care services as an option to meet patient care needs, when indicated by the risks associated with providing in-person services and the services required. (see ***Policy UU – Policy on Virtual Care***)

The CAS is consulting with the Ministry of Health and others and will adapt this policy based on ongoing provincial 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, 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

1. Screening

It is recommended that members advise patients and staff to self-screen for symptoms of COVID-19. Members should advise patients to reschedule their chiropractic appointment if they are feeling ill or exhibiting symptoms of COVID-19. If a 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 before returning to work.

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).

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 (hand sanitizer)

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

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

3. Environmental Cleaning and Disinfection

Frequent cleaning and regular disinfection is important for infection prevention and control. Cleaning products remove dirt, dust and oils, but don't always kill germs. Disinfectants are applied after cleaning to destroy germs.

- It is recommended that clinical contact surfaces (e.g. chiropractic tables, therapeutic tools and devices, procedural work surfaces, clinic room seats, etc.) be cleaned after each patient encounter.
- It is further recommended that clinical contact surfaces be disinfected daily.

A regular schedule for periodic environmental cleaning should be established.

4. Physical Distancing

Physical distancing has proven to be an effective way to reduce the spread of COVID-19. It is recommended that members maintain physical distancing in their clinics, such that members of the public are (2) metres from each other in treatment areas, waiting areas and transition areas.

Consideration should be given to scheduling off-hours treatment for high-risk populations.

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.

It is recommended that a Health Canada authorized Level 1 medical mask be worn by the member when treating patients where 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.

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.

Members may wear eye protection when treating patients where a physical distance of two metres cannot be maintained, but it is not required.

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.

More information on proper PPE use can be found at

<https://www.saskhealthauthority.ca/intranet/about-sha/news/covid-19-information-health-care-providers/ppeinfection-prevention-and-control>.

Additional Resources:

[Policy UU – Policy on Virtual Care](#)

[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](#)

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

Effective date: May 4, 2020

Amended: May 7, 2020

November 16, 2020

March 12, 2021

July 11, 2021

September 17, 2021

November 25, 2021

January 25, 2022

February 28, 2022

November 1, 2022

APPENDIX "A"

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.