COVID-19 Update

Running Your Community Office Safely — A Primary Care and Specialist Perspectives' Q&A

- Dr. Brenda Hardie, Family Physician, North Vancouver
- Dr. Sharla-Rae Olsen, Internist & Respirologist, Prince George
- Dr. Trevor Hartl, Otolaryngologist and President, BC Otolaryngology Society
- Dr. Olivia Sampson, Clinical Services Manager, WorkSafeBC

June 11, 2020

Disclosures

- Dr. Brenda Hardie, Family Physician, North Vancouver
 - Other Relationships I provide consulting services on an education committee
 for WorkSafeBC. I am a member of the board of directors of BCCFP and the
 Vancouver Division of Family Practice. I work as the Director of Faculty
 Development for UBC Family Practice Residency program. I will declare these
 relationships, and do not believe they are a conflict of interest for this webinar.
- Dr. Sharla-Rae Olsen, Internist & Respirologist, Prince George.
 - Nothing to disclose
- Dr. Trevor Hartl, Otolaryngologist and President, BC Otolaryngology Society
 - Received fees: Medtronic I plan not to discuss anything related to Medtronic or their products; not relevant to the discussion.
- Dr. Olivia Sampson, Clinical Services Manager, WorkSafeBC
 - Other relationships: I am a salaried employee of WorkSafeBC. In planning the material and education session, I used evidence-based medicine and evidence based provincial and national public health guidance documents, and reviewed evidence based literature/epidemiology.

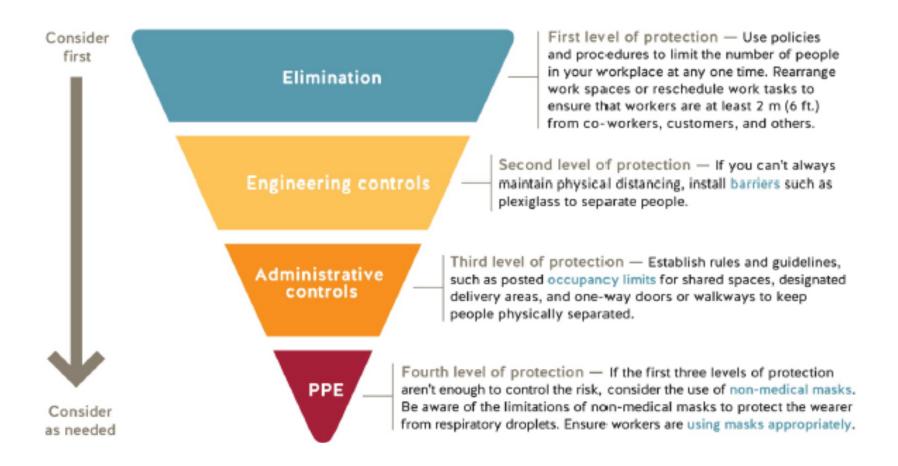
Learning Objectives

- 1. Identify the elements of a COVID-19 Safety Plan for your healthcare practice environment
- Describe best practices for office setup and patient flow to decrease risk of person-to-person transmission of SARS-COV 2
- 3. Develop a COVID-19 Safety Plan for your work environment

Review of the Hierarchy of Controls

Reduce the risk of person-to-person transmission

To reduce the risk of the virus spreading through droplets in the air, implement protocols to protect against your identified risks. Different protocols offer different levels of protection. Wherever possible, use the protocol that offers the highest level of protection. Consider controls from additional levels if the first level isn't practicable or does not completely control the risk. You will likely need to incorporate controls from various levels to address the risk at your workplace.



Workplace COVID Safety Plan Public Health Order May 15, 2020

- 1. Post a copy of your COVID-19 Safety Plan on your website, if you have one, and at your workplace so that it is readily available for review by workers, other persons who may attend at the workplace to provide services and members of the public;
- 2. Provide a copy of your COVID-19 Safety Plan to a health officer or a WorkSafeBC officer, on request.



ORDER OF THE PROVINCIAL HEALTH OFFICER (Pursuant to Sections, 30, 31, 32 and 39 (3) Public Health Act, S.B.C. 2008)

Workplace COVID-19 Safety Plans

The Public Health Act and Regulations are at:

http://www.bclaws.ca/civix/content/complete/statreg/08028/?xsl=/templates/browse.xsl

(excerpts enclosed)

Where can you look for guidance?

WorkSafeBC



COVID-19 Safety Plan

Employers must develop a COVID-19 Safety Plan. To develop your plan, follow the six-step process described at COVID-19 and returning to safe operation.

This planning tool will guide you through the six-step process. Each step has checklists with items you need to address before resuming operations. You may use this document, or another document that meets your needs, to document your COVID-19 Safety Plan.

Work SafeBC will not be reviewing or approving the plans of individual employers, but in accordance with the order of the Provincial Health Officer, this plan must be posted at the worksite.

CPSBC

College of Physicians and Surgeons of British Columbia

Serving the public by regulating physicians and surgeons

Providing In-person Community Care During COVID-19: Guidance for Registrants

The following guidance has been developed by the College with expertise and direction provided by the provincial health officer (PHO), the BC Centre for Disease Control (BCCDC) and WorkSafeBC. It is intended for all registrants in community practice. It is applicable for the duration of the COVID-19 pandemic.

Note: This guidance reflects the best evidence available at this time and it will change as required to reflect updates in our understanding of the virus and its transmission. Please continue to check for updates and new resources on the College website, the BCCDC website and the WorkSafeBC website.

Where can you look for guidance?

BCCDC

Coronavirus COVID-19 BC Centre for Disease Control | BC Ministry of Health Ministry of Health

COVID-19: Infection Prevention and Control Guidance for Community-Based Physicians, Nursing Professionals and Midwives in Clinic Settings

May 15, 2020

Doctors of BC



The Doctor is In: Recommendations for expanding in-person care in community-based physician practices (May 20, 2020)

How physicians determine if they need to register? ('Are you a worker or an employer')

INTRODUCTION

This document is a basic guide for physicians regarding WorkSafeBC registration, however the process and obligations of registration are often complex and unique to individual physicians' circumstances.

If you have questions or are uncertain about registration and/or classification after reading this guide, please contact WorkSafeBC or the Physician Advocacy department at Doctors of BC.

WorkSafeBC Assessment Department: 1-888-922-2768 (M-F 8:30am-4:30pm)

New Registration

Guide https://www.doctorsofbc.ca/sites/default/files/wsbc registration guide for physic ians 2020.pdf

Resources

- 1. COVID Safety Plan https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/covid-19 may 14 final.pdf
- 2. CPSBC https://www.cpsbc.ca/news/COVID-19-updates/providing-in-person-care
- 3. Resources from Doctors of BC https://www.doctorsofbc.ca/working-change/advocating-physicians/coronavirus-covid-19-updates
- **4. The Doctor Is In**: https://www.doctorsofbc.ca/news/doctor-supporting-physicians-re-opening-offices
- 5. New Registration
 - **Guide** https://www.doctorsofbc.ca/sites/default/files/wsbc registration guide for physic ians 2020.pdf
- **BCCDC**: http://www.bccdc.ca/Health-Professionals-Site/Documents/COVID19_IPCGuidanceCommunityBasedHCPsClinicSettings.pdf

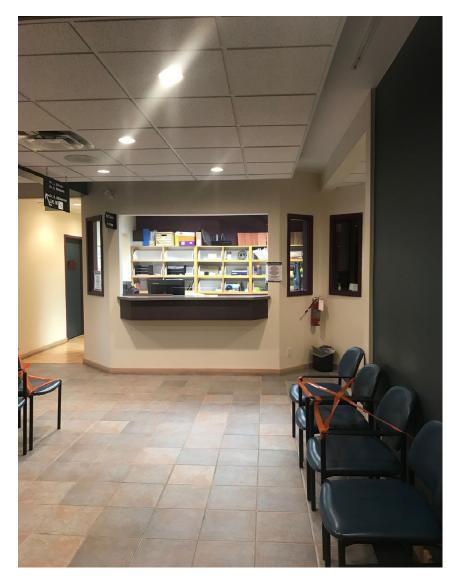
Dr. Sharla Rae Olsen, Respirology, Prince George Office Photos June 8, 2020

Booking tips: In-Person Appointments

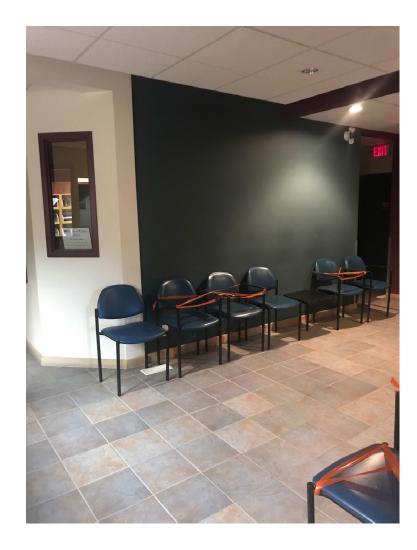
BOOKING APPOINTMENTS – INFO FOR IN PERSON APPTS

- Ask patient to phone us from the parking lot do not just walk into building.
- Ask patient to wear a mask if they have one if not they will be provided with one
- Ask patient not to bring family/friends unless absolutely necessary if so maximum of 1
 escort who will also need to be masked
- Patient will be phoned the day before (business day) for screening and medical history
 if Sharla's pt. Medical hx is normally done in office by Terry but in order to keep in
 person visit to absolute minimum will be done by phone
- Advise patient to phone us on the day of the appointment if they have any new/different symptoms (fever, sore throat, cough, sob, tickle in throat, loss of smell/taste). These would be different – not their normal sx

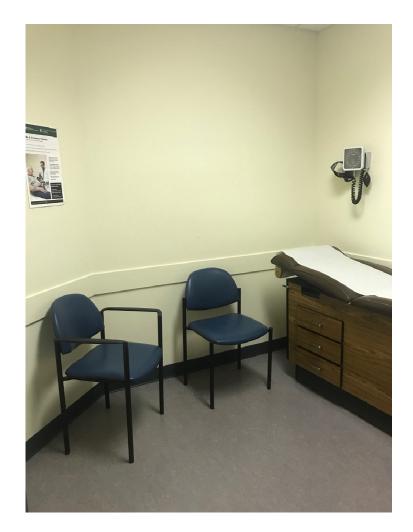
















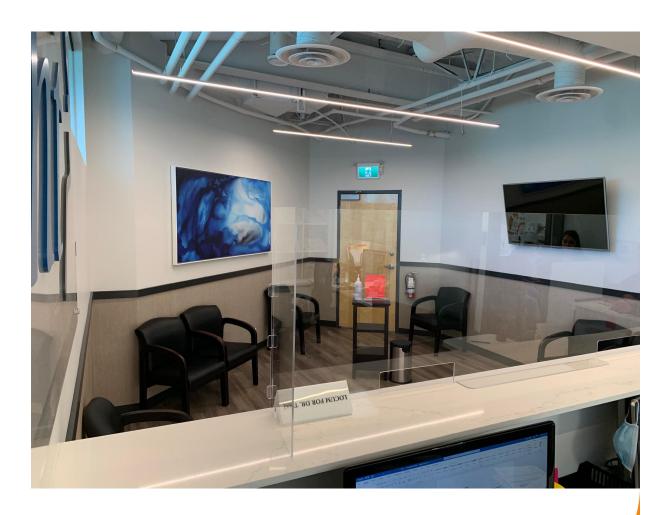
Dr. Trevor Hartl, BC Section President, Otolaryngology Head and Neck Surgery

> Considerations for a procedurefocused specialty clinic

Pre-visit: Front Office Measures

(Engineering and Admin Controls)

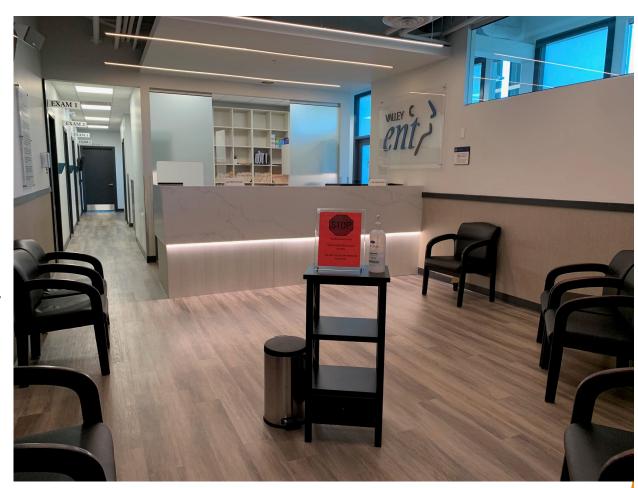
- Front desk barrier acrylic sneeze guard
- Space chairs 6 feet, consider carwaiting
- Remove clutter
- Staff wear mask all day (gloves to clean)
- Remove questionnaires & handouts
- Covered, no-touch trash bins
- Create (with staff) and post a touchpoint disinfection plan
- Consider an extra weekly cleaning

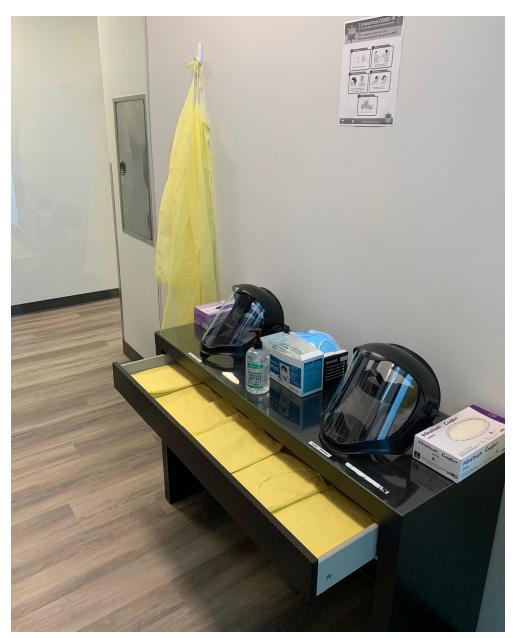


During Visit: **Check-In**

(Elimination, Substitution, Admin Controls, and PPE)

- Remind patient of phone instructions (no gloves, hand sanitizer, etc.)
- Verbal COVID screen again, behind barrier
- Consider a no-touch thermometer
- Limit paper in favor of verbal transcription
- Provide a mask (VENT?) if they forget



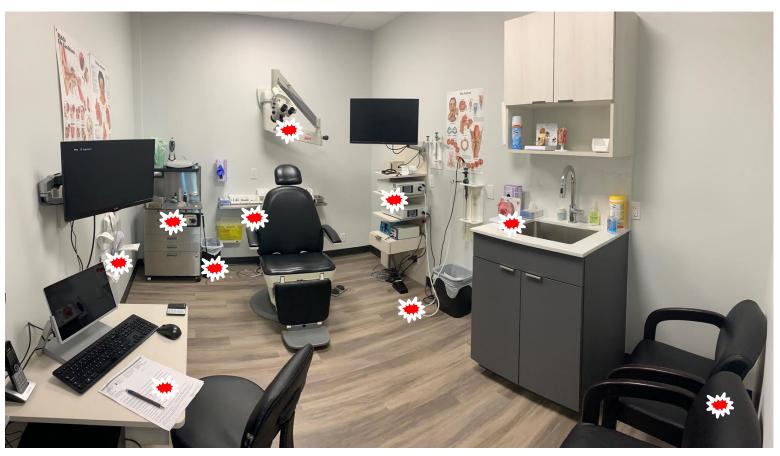


During Visit: **Assessment**

(Engineering controls, Admin Controls, PPE)

- Hand sanitize and PPE donning station with instructions posted
- Don appropriate PPE
- Perform H&P as quickly as possible
- Toss or put away soiled instruments in covered containers

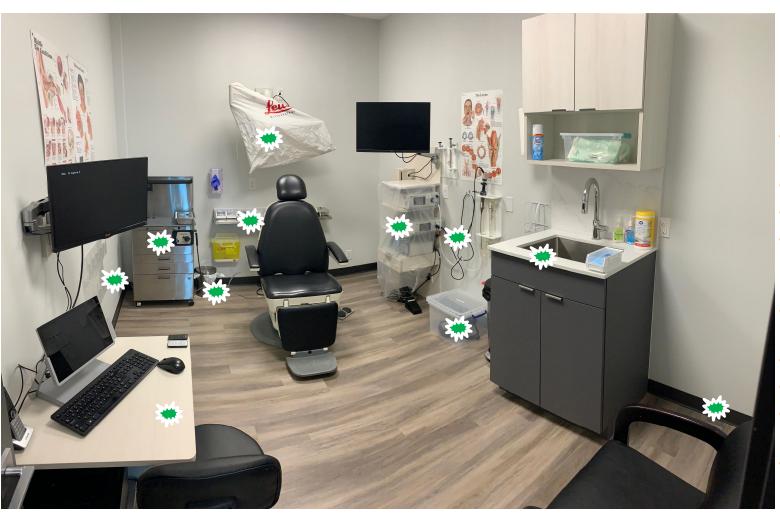
Exam Room Before



RISKS:

- Handouts & paper
- SMR cluttered
- Open trash
- Open instruments
- Uncovered equipment
- Cables, tubing
- Models, cups and tissues
- 2 guest chairs

Exam Room After



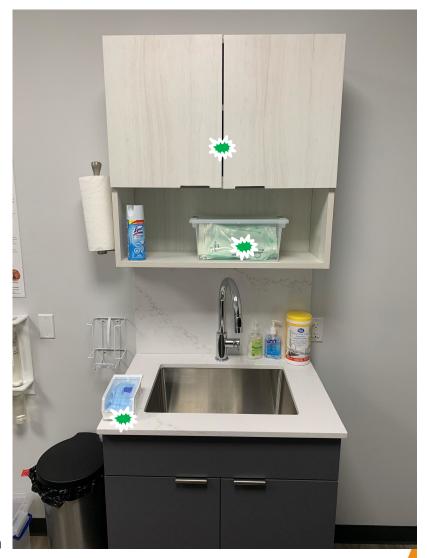
RISKS MITIGATED:

- No paper or handouts
- SMR Clear
- Closed trash
- Covered instrument bins
- Covered equipment
- Dirty PPE bin
- Cables up
- Clean sink area
 - 1 guest chair



(Admin Controls)

- Clear garbage bag
- Clear "dirty PPE" bin
- Footactivated, covered trash
- Hooks keep cords up
- Extra masks in covered container
- Models and clutter put away
- Instruments in clear bin



During Visit: **Procedure**



(PPE, Admin Controls)

- For endoscopy or mucosal procedures (in "asymptomatic COVID-unknowns")
 - FOR NOW, PROBABLY:
 - N95
 - +/- earloop mask
 - +/- headcover
 - +/- gown (disposable?)
 - face shield/goggles
 - gloves last!
 - Consider lido pledget to suppress sneeze or cough – no powered sprays
 - SNEEZE!: ask patient to warn you and to sneeze into their elbow, mask on, to minimize droplet spread. Consider VENT mask (hole for scope).

Post-Visit:

Soiled Instruments & Doffing

(Admin Controls, PPE)

- Initiate instrument/scope soak in room (virus neutralized for transport)
- Direct patient out
 - "Touch nothing, toss your mask, use hand sanitizer at the front before you go"
- Doff PPE in the room
 - Put face shield/googles in "dirty PPE box"
 - Hang up gown, headcover, outer mask, if not soiled, in the room
 - Keep N95 on
 - Toss gloves



Post-Visit:

Patient flow and MDR/cleaning

(Engineering Controls, Admin Controls, PPE)

- Patient exit of room triggers office assistant to get a telehealth visit on the line (stay efficient)
- Just before next patient, the office assistant/nurse:
 - · Wipes down room and faceshield
 - Brings out the clean/non-soiled PPE to donning area for restocking
 - Removes the scope using travel bin/tube
 - Finishes sterile reprocessing (CIDEX, etc).
- Wear gloves, goggles and N95 at the end of the day to take out garbage and clean suction canister



