



CRITERIA FOR RE- OPENING
DURING COVID-19 2020:
NOVA SCOTIA ATHLETIC THERAPISTS
UNDER THE DIRECTION OF THE NOVA SCOTIA
DEPARTMENT OF HEALTH
AND
NOVA SCOTIA PUBLIC HEALTH
EFFECTIVE: 5 JUNE 2020

INTRODUCTION:

The Atlantic Provinces Athletic Therapists Association (APATA) was founded in the late '80's and represents both the Certified Athletic Therapists and athletic therapy students living and working in the 4 Atlantic Provinces. There are currently 32 Certified Athletic Therapists working and living in Nova Scotia, in a number of clinical settings including universities, private schools, multidisciplinary clinics, the Canadian Armed Forces, and private practice.

On or before 22 March 2020, all of our members closed their clinics and, to the best of our knowledge, have remained so.

The APATA is an organization dedicated to enhancing and promoting the delivery of the highest quality of care to active individuals. An Athletic Therapist will work to prevent injuries, and provide immediate care and rehabilitation of musculoskeletal injuries (e.g. sprains and strains). The APATA, along with its national body the Canadian Athletic Therapists' Association (CATA), ensures that all its' members are currently in good standing and have up to date continuing education in the area of Athletic Therapy, adhere to both National and Regional by-laws, code of conduct, and scope of practice.

The CATA is a progressive organization dedicated to the promotion and delivery of the highest quality care to active individuals through injury prevention, emergency services, and rehabilitative techniques.

The Association is a leader within the Sport Medicine Community of Canada through its continuing development, implementation, and monitoring of professional standards. In collaboration with other allied health professionals, the CATA creates a healthier environment that encompasses the needs of the active community through to the high-performance athlete.

THE RE-OPENING OF NOVA SCOTIA:

- We will be guided by The Nova Scotia Department of Health and Wellness and Nova Scotia Public Health. Each member will be required to stay current and be informed about the most recent public health criteria as we go forward until such time as COVID-19 is no longer a threat. No clinic will open until such time as permitted by the Chief Medical Officer of Health for Nova Scotia.
- Opening of an individual clinic, and the services provided, will be determined by the levels of risk and mitigation of risk for each individual clinic.
- You are responsible to not only operate in accordance with this directive, but also have an obligation to comply with them. Ultimately, it is your decision to open and on doing so, assume any liability arising from your respective operations.

CRITERIA FOR RETURN TO PRACTICE FOR CERTIFIED ATHLETIC THERAPISTS IN NOVA SCOTIA:

- This plan will serve as a guideline for all members as they safely re-open.
- Each member will have their own unique requirements for their clinic and patients (in addition to public health) and each member must make decisions determining what is best for themselves based on their own circumstances.

- All members are required to use these criteria for re-opening as approved by the Nova Scotia Department of Health and Wellness as of 2 June 2020 unless they are noted as “recommended”, in which case members are strongly encouraged to follow them.
- These Criteria for Re-Opening have been reviewed and approved by the Nova Scotia Department of Health and Wellness, Chief Medical Officer and Nova Scotia Public Health and will remain in effect until further notification.
- An accurate log or registry must be kept of everyone that enters your clinic (therapists, staff, and patients) should contact tracing be required; if contacted clinics would have to cooperate with Department of Public Health
- Each clinic MUST have a document (binder) on site with their own individual plan for mitigating risk.

YOUR OWN CLINIC OR PRACTICE RE-OPENING PLAN WILL INCLUDE:

- Description of pre-screening protocols to protect the patient, therapist, and staff, who will be in close contact during treatments
- Description of your clinic and the space used, including physical distancing and traffic flow measures, waiting room, plexiglass barriers, signage
- Description of your hand hygiene and cleaning protocols
- Description of how all COVID-19 risk mitigation measures will be communicated and shared
- Describe how information will be available and updated

CRITERIA FOR RE-OPENING IN NOVA SCOTIA:

- The protocol below will help you minimize the risk of transmission of COVID-19.
- Your own circumstances, professional judgement, and personal choices will determine whether and how you implement any other measures specific to you and your patients needs.
- Trust between the therapist and the patient is imperative to re-opening your Athletic Therapy practice. Trust, honesty, clear communication, well-informed explanations, and informed consent will help create an environment so that patients can receive treatment and therapists can safely work.

1. Screening of Patients, Staff, and Self

- Pre-Screening patients (at booking)
- Inform patients about new procedures, before or at the time they book
- Post relevant information consistently in advertising material and social media: keep it up to date
- For now, online booking should not be used
- Explain that informed consent is needed, include explanations about physical distancing not being possible during treatment, modified treatments may be used, risks associated with COVID 19, explain risk vs benefit
- Advise patient about PPE, which could include them bringing a mask and wearing it for the duration of their visit; explain best practises for wearing mask

- If the patient is a greater risk, be cautious, discuss options and alternatives including postponement of treatment or telehealth; in these cases, treatment benefit must outweigh risk
- Pre-screening questions according to public health guidelines, symptom self-assessment (<https://ca.thrive.health/covid19/en>)
- Make note in patient's file of pre-screening

Screening patients (pre-arrival, and upon arrival)

- 24-72 hours before their appointment, patients can be asked to complete the 811 on-line screening tool <https://811.novascotia.ca/> and follow the direction provided before coming for any appointment. This will allow the use of the up-to-date screening questions as well as direct people who may have COVID-related symptoms for testing before coming to your office.
- call to conduct symptom self assessment (<https://ca.thrive.health/covid19/en>), cancel appointment if any symptoms and recommend following protocol as per public health (call 811)
- your cancellation policy should be adjusted to allow for patients with these symptoms, which should help ensure honesty and compliance
- upon arrival, if patient appears with COVID 19 symptoms and does not meet pre-screening protocols, record symptom self-assessment results in their chart, follow appropriate guidelines
- ensure patient feels empowered to make their own decisions, to feel safe (while meeting minimum guidelines)
- patients at greater risk who meet the screening assessment may require modifications, such as first appointment of the day
- Patients who have fully recovered from COVID 19 and who can benefit from treatment can attend, if cleared by physician. Therapist and staff who have fully recovered from COVID 19 can treat if cleared by a physician.

Screening staff and self

- ensure therapists and staff have a complete understanding of the new procedures, why they have been implemented, and apply them consistently
- Therapist and staff must use the symptom self assessment tool (<https://ca.thrive.health/covid19/en>) daily and stay home, calling in to cancel if they have symptoms, and call 811 if appropriate
- upon arrival, if therapist or staff appears with COVID 19 symptoms and does not meet pre-screening protocols, record symptom self-assessment results in their chart, follow appropriate guidelines. Any therapist or staff that presents with COVID-19 symptoms cannot be penalized for following OHS and Public Health guidelines for not being able to work
- record symptom self-assessment results daily
- Therapists and staff should limit their potential exposures to protect themselves and their patients
- Therapist can, at their discretion, include screening questions beyond the guidelines such as: does your work put you in contact with the public? has patient isolated as per current guidelines? is the patient aware of anyone they may have been in contact with someone who is not following guidelines, who has Covid-19 symptoms, and/or who has travelled? It is also fair if the patient asks this of the practitioner.

2. Physical distancing (realizing all clinic spaces are unique)

Reception and Entry

- Distancing markers and protocols must be clear to understand and followed by all (therapists, staff, and patients)
- Where possible mark floor or use wall markers and create one-way flow
- Remove clutter, toys, magazines, fabric furnishings, and decorations that cannot be sanitized after touch
- Create distance between chairs in waiting areas
- Stagger appointment times to reduce traffic; consider other options (i.e. telehealth)
- Patient must come by themselves, unless a minor or requires assistance (decide ahead of time); others must wait outside clinic
- Patients should wait in car, call or text their arrival, when possible
- Greet patient and open door, (or leave door open); reverse for when they depart. Clean door surfaces after they leave.
- If possible have separate entrance and exit

Staff shared areas

- Storage, lockers, lunch rooms, meeting rooms etc: create protocols specific to each clinic, stagger one person at a time

Treatment Rooms

- It is not possible to maintain physical distancing. Therefore, pre-screening; hand hygiene; enhanced cleaning of high-touch areas; garbage and laundry disposal; removal of any items that cannot be sanitized are vital

Washroom Public:

- Specific to each clinic, physical distancing and cleaning protocols apply.

Washroom staff

- Specific to each clinic, physical distancing and cleaning protocols apply.

Elevators, Stairs and Entrance Ways

- Specific to each clinic, physical distancing and cleaning protocols apply

RECOMMENDED

- A gradual re-opening would allow a test to all protocols and measures put in place and allow to adjust as needed. For example, if 5 therapists use the clinic space start with 2
- If no waiting area is needed, removal of furniture could be considered
- Avoid socializing in the clinical setting
- Do not use shared devices (computers, tablets, phones)

3. Hand Hygiene:

REQUIRED

Reception and Entry

- Upon arrival and before departure (and if required in between) patient washes hands with soapy water, min 20 sec, to elbow, dry with disposable towel
- If soap and water is not available, appropriate hand sanitizer must be used
- Gloves are not meant to replace hand washing and must be removed and replaced if at the time it would have been appropriate to wash hands
- Post hand washing protocols in visible locations

In treatment room

- Therapist and staff must wash hands often using soap and water for 20 seconds, to elbow, dry with disposable towel
- Hand washing should occur before and after treatment and at any point where appropriate during treatment
- Except for under normal circumstances where a therapist would wear gloves, handwashing is preferred over glove wearing
- Once hands are washed therapist should be careful not to touch any surfaces including door knobs
- Post hand washing protocols in visible locations
- Staff must follow the same guidelines

RECOMMENDED

- Patients and therapist must be aware that each has washed their hands
- Payment arrangements should be made where possible to avoid touch of money (i.e. electronically) If there is touching, then follow hand washing protocols afterward

4. Face touching avoidance:

REQUIRED

- Share information with regard to the importance of not touching the face
- If a person has to sneeze or cough, use the elbow, tissue, and assure hands are washed afterwards
- If there is an itch use a tissue and wash hands afterwards
- Therapists, staff, or patients who touch their mask, must follow proper hand washing protocols and mask protocols
- All waste must be disposed of properly and according to protocols
- Post cough and sneeze protocols
- If perspiration is possible for patient or therapist during treatment, have available a towel or disposable wipe, and follow cleaning protocols

5. Enhanced Cleaning

REQUIRED

Clinic and treatment areas

- Protocols must be communicated to all staff and therapists

Cleaning supplies must be effective; where possible use unscented or lightly scented product

<https://www.canada.ca/en/public-health/services/publications/diseases-conditions/cleaning-disinfecting-public-spaces.html>

- Common areas and high touch surfaces should be cleaned frequently, regardless of appearance; between use is ideal (light switches, window coverings, phones, tablets, chairs, stools, desk and table surfaces, handles, doors, cabinets, faucets, fridge, microwave, computers, arm rests, water coolers, and other shared appliances)
- Plexiglass dividers must be cleaned between patients and with staff change
- All surfaces touched during treatment must be cleaned between patients
- Linens and blankets must be single use only; equipment such as pillows, table padding, heating pads etc that are shared and cannot be cleaned, must **not** be used, all laundry must be laundered in soapy water
- Levers, face cradles, lotion/oil bottles and nozzles are to be cleaned after use
- It is ok to clean within view
- Consider modalities that are shared; use disposable where possible and thoroughly cleaned between patients if not disposable (i.e. ultrasound or electric modalities, ice packs, heating packs, cupping, tuning forks, etc), or discontinue use
- Create cleaning protocols for any shared equipment in your clinic such as exercise, props for stretching, or discontinue use
- All waste must be disposed of in a covered and lined receptacle: garbage liners must be sealed and disposed of at the end of day or as needed during the day; garbage receptacle must be disinfected once liner is removed and disposed of, then liner replaced (for all areas of clinic)
- Laundry must go directly into the washer or be sealed in an enclosed space in the clinic or treatment room until ready for washing.

Washrooms

- All high touch surfaces must be cleaned frequently (ideally after every use); all contact areas must be cleaned several times a day
- Ensure soap and disposable wipes are available at all times
- Encourage disposable wipes for doors and surfaces
- Dispose of waste appropriately
- Post waste and hygiene protocols

Elevators and stairs

- All contact areas must be cleaned several times a day, doors, elevator buttons etc
- Wipes can be made available, or paper product to use as a barrier

RECOMMENDED

- Patients should not bring unnecessary items with them to their treatment
- More time may be required between patients to achieve these protocols

- Everybody (therapists and staff) must be prepared to clean even though such duties may not be part of their usual routine
- Training may be required
- Post protocols
- Post a checklist style cleaning schedule, which time can be marked and initialled
- Good airflow is important, do not recirculate air in an enclosed area, i.e. fan in enclosed treatment area

Resources:

<https://www.canada.ca/en/public-health/services/publications/diseases-conditions/cleaning-disinfecting-public-spaces.html>

6. Personal Protective Equipment:

REQUIRED

- Plexiglass barriers for reception area must be installed
- Therapists: surgical masks are required. <https://www.canada.ca/en/health-canada/services/drugs-health-products/medical-devices/masks-respirators-covid19.html>
- Staff: non-surgical masks are required. <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks/about-non-medical-masks-face-coverings.html>
- Patients/ clients: non-surgical masks are required. If appropriate, do so prior to entering. They must be clean, worn properly and protocols followed; they must not be touched or removed until patient has left the clinic. Mask protocol must be addressed by the therapist during pre-screening
- Protocols must be followed
- Proper training is required for use of PPE, and in no way should PPE replace physical distancing and proper cleaning
- Sizes of PPE may vary with therapists and patients
- post protocols: instruction list; poster with images (<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks/about-non-medical-masks-face-coverings.html>)
- the athletic therapist and staff will have separate clothing for wear when in the clinic. It will be washed at the end of each day.

RECOMMENDED

- An outer layer of clothing could be useful between patients (i.e. lab coat, scrub top and pants) and changed between patients. Launder with soapy water

RESOURCES:

<https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/medical-devices/products-authorized-interim-orde.html>

7. Modification to manual techniques

REQUIRED

- Where possible pick the technique option with the least amount of contact and risk
- Modify position for the least contact and risk
- If there is a higher contact or risk with a certain technique, explain to patient and let them be part of the decision to proceed or not
- If an online or telehealth options is available it should be considered (all protocols apply)

8. Professional Obligations:

REQUIRED

- Professional liability: all therapists are obligated to carry professional liability insurance and need to contact the company before they resume work to ensure coverage and to clarify exemptions; policies can vary
- No duty or obligation to return to practice: no individual therapist is obligated to engage in practice if they assess the risk is too great for their own personal situation; individual judgement is needed combined with guidance of appropriate government sectors
- If employed or under contract: relationship to employer must be clarified; legal counsel can be consulted (at your expense), the association may provide general advice to the membership
- if field work is part of your employment, check with your insurance coverage broker for advice/ limitations to your policy.
- Certified Athletic Therapists practicing in Nova Scotia are bound by NS Dept of Health and Public Health regardless of their employment.

RECOMMENDED

- If a therapist works in multiple clinics they should consider working in one location for now