

Transitioning to In-person Services by Audiologists and Speech-Language Pathologists

May 31, 2020

Please be aware that:

1. NSCASLP registrants are required to follow the directives of Public Health, the Chief Medical Officer of Health (CMOH) and the government of Nova Scotia in order to ensure public, client, and registrant safety. It is your responsibility to follow regular updates and stay informed about any changes to the requirements. You must also ensure that all staff are kept informed about public health advice applicable to your office and that they fully understand the advice and requirements.
2. NSCASLP will update this document as based on recommendations from the government of NS, the Dept. of Health and Wellness and the CMOH.
3. Limiting in-person appointments will still be a priority. Whenever appropriate care can be provided via distance, such as through telepractice or practices like drop off/pick up for repairs to hearing aids, it should be continued.
4. To facilitate contact tracing if necessary, a record of all visitors to your clinic (e.g., client, accompanying caregiver, delivery person, etc.) should be kept. A client and staff registry documenting patient/staff names, patient/staff contact information, date and time of patient visit and staff work schedules should be kept. In addition, you should keep a record of your contacts (inside and outside work).
5. If you are employed by Hearing and Speech Nova Scotia or a Regional Centre of Education, those institutions will be developing policies and procedures in compliance with the government's directives.

General Considerations for Business Owners

Business owners have a responsibility to take all reasonable measures to protect the safety of their clients and staff. When reopening a business, practitioners must take care to identify risks to clients related to COVID-19 transmission and take steps to minimize these risks. Each client's needs will need to be considered in addition to standard routine practices and have an individualized plan in place. Staff and others on site must be provided with information about COVID-19 and infection prevention and control practices. If a staff member is feeling ill, they must immediately advise their supervisor or employer and seek guidance from NS Telehealth (811) and only attend if they are not told they need to be tested for COVID-19.

Health care professionals and office staff must stay home if they are ill or experiencing symptoms compatible with COVID-19.

- 1. All health care professionals and staff must self-monitor for symptoms.**
- 2. If a health care professional/staff develops symptoms of COVID-19 in the workplace s/he must immediately apply a surgical/procedure mask and be excluded from work. The individual should be directed to call 811 to arrange for COVID-19 testing.**
- 3. Adjust absenteeism policies to enable staff to stay home when ill, in quarantine (self-isolation), or if they are taking care of children or someone who is ill.**
- 4. Ensure plans are in place for increased worker absences due to illness or isolation.**

Adapting the Physical Environment and Routine Practices for a Safe Workspace

Careful consideration of adaptations to the physical environment and routine practices will be important for ensuring the health of the public, clients, and our registrants. Below are physical adaptations and changes of practice that will promote physical distancing and infection prevention and control. You should identify a space where staff or patients can be isolated from others if they have symptoms of COVID-19.

Waiting Rooms

1. Alternative solutions to waiting in the office should be considered, such as asking people to wait in vehicles and text messaging or calling when appointments are ready
2. Remove any items that cannot be cleaned from waiting rooms (e.g., magazines, books, toys, cloth covered furnishings).
3. Arrange furnishings in waiting rooms to ensure 2 metres between clients (e.g., remove chairs, mark the spot where chairs should stay).
4. Physically mark where clients should stand when checking in for their appointment.
5. Provide a physical barrier between administrative support staff and clients (e.g., plexiglass, place furnishings in such a manner to ensure 2 metres of physical distancing). A 2 metre/6 feet separation also applies to staff workspaces (e.g., between desks).
6. Eliminate paper check-in processes as much as possible (e.g., do not use pen and paper or case history forms; provide electronic payment options and avoid cash payments).
7. Post the Point of Care Risk Assessment for COVID-19 symptoms at the door before entering your office and at the reception desk so it can be used at each client check-in.
8. Post instructions advising clients of the necessary actions they should take if they do not pass the Point of Care Risk Assessment at check-in.
9. Post instructions for hand hygiene and cough / sneeze etiquette in the waiting room.
10. Make hand sanitizer (minimum 60% alcohol), tissue, and a touchless lined garbage container available in the waiting room.

11. Devise a cleaning and disinfection procedure that is aligned with public health advice for the waiting room and washrooms including a record with date, time, and person. A minimum of twice daily cleaning is required. Ensure that staff has the necessary products (e.g., sanitizing wipes) to clean their own workspace. Surfaces that need to be cleaned and disinfected include, but are not limited to:

Doorknobs/handles	Counters
Light switches	Pens (and other shared objects)
Railings	Cash machines/pin pads
Shelves	Sinks (including faucets), toilets (including flush handle), towel bars
Chairs: armrests/backseats	Telephones
Tables	

The following resources provide directions on how to effectively clean workspaces to reduce the transmission of COVID-19:

“COVID-19: Working”, Government of Nova Scotia

<https://novascotia.ca/coronavirus/working-during-covid-19/#cleaning>

“Infection Prevention and Control (IPAC) Guidance Document”, NSHA

http://policy.nshealth.ca/Site_Published/covid19/document_render.aspx?documentRender.IdType=6&documentRender.GenericField=&documentRender.Id=76462

12. Clean and disinfect surfaces in the waiting room prior to client visits.
13. When it is feasible, consider propping open doors to reduce the need to touch door handles.
14. Be knowledgeable about cleaning processes for high touch surfaces on the path to the office (e.g., elevators, door latches, railings). Ensure that adequate cleaning and disinfection is taking place.

Assessment and Treatment Rooms

1. Remove any items that will not be used or that cannot be cleaned from assessment and treatment rooms (e.g., stored books, toys, and equipment not used with each client).
2. Arrange furnishings as possible in assessment and treatment rooms to ensure 2 metres between client and staff (e.g., mark placement of chairs).
3. Plan ahead to work to the side of clients as much as possible.
4. Avoid paper transfer during assessment and treatment (e.g., have client provide relevant history verbally, provide recommendations electronically if possible).
5. Post instructions in the assessment and treatment rooms advising clients of the necessary actions they should take if they do not pass the screening for COVID-19 symptoms.
6. Have personal protective equipment (PPE) available.

7. Where possible, provide soap, paper towels, and touchless lined garbage containers in assessment and treatment rooms to allow for hand washing by staff and clients at the beginning of each client visit.
8. Make hand sanitizer (minimum 60% alcohol) and tissue available in each assessment and treatment room.
9. Post instructions for hand hygiene and cough / sneeze etiquette in assessment and treatment rooms.
10. Plan ahead to ensure performance of hand hygiene following exchange of items as feasible.
11. Devise a cleaning and disinfection procedure that is aligned with public health advice for each assessment and treatment room including a record with date, time, and person. Surfaces that need to be cleaned and disinfected include, but are not limited to:

Doorknobs/handles	Keyboards, mice, monitors, iPads
Light switches	Printers and photocopiers
Worktables/workstations	Telephones
Desks	Pens (and other shared objects)
Chairs (armrests, backs, seats)	Sinks (including faucets)
Countertops	Shelves

12. Clean and disinfect all surfaces in assessment and treatment rooms prior to client visits.
13. Clean and disinfect all toys and equipment to be used with clients prior to visits.
14. Use single-use items wherever possible during assessment and treatment.
15. For client services that take place off site, ensure that the Point of Care Assessment is completed by phone when the appointment is booked and at the beginning of the visit. Any equipment used in the provision of the service must be cleaned and disinfected prior to its next use. This includes bags or suitcases in which equipment is stored or transported.

Screening and Scheduling of Clients for In-person Service

Clients should be provided with information about what services are available, what measures have been put in place to protect their safety for in-person services when telepractice is not feasible, when services may need to be postponed (e.g., if possible signs of COVID-19 are identified on screening), and the availability of alternative services in order to make informed decisions about their care.

Pre-booking Phone Calls

1. Determine the need for in-person service (e.g., urgency of need, appropriateness of telepractice, or other service). If an in-person visit is deemed essential for care,

consideration should be given to planning an initial virtual care visit with patients prior to the in-person visit. This will ensure that patients are only seen in-person for the portion of their care that requires direct assessment

2. Restrict service to by-appointment only (i.e., no walk-ins).
3. When calling to book the appointment:
 - a. Complete a Point of Care Risk Assessment for COVID-19 symptoms. Ask whether they have travelled outside of Nova Scotia in the last 14 days, whether they have been in contact with a known COVID-19 case and whether they have any symptoms. A current list of symptoms can be found on the NS COVID-19 site. The link is provided below.
<https://novascotia.ca/coronavirus/when-to-seek-help/>
 - b. Advise clients when they make an appointment that they cannot attend if they have symptoms that could be COVID-19 the day of the appointment. The client should be advised to use the 811 on-line self-assessment if they are unwell the day of the appointment and only attend if they are not told they need to be tested for COVID-19.
 - c. Confirm how appointments are scheduled, with allotted amount of time between appointments to allow for cleaning and disinfection.
 - d. Stress the importance of being on time for scheduled appointments.
 - e. Confirm that only the client is to enter the A/SLP's office unless there is a required caregiver or guardian. This second person would count in determining the maximum number of people permitted in a space.

Confirmation Phone Calls the Day Before the Appointment (if appointment booked 1 week or more before appointment date)

1. Call the day before the appointment to confirm and complete the following:
 - a. Complete the Point of Care Risk Assessment for COVID-19 symptoms.
 - b. Confirm how appointments are scheduled, with allotted amount of time between appointments to allow for cleaning and disinfection.
 - c. Review the importance of being on time for the scheduled appointment,
 - d. Instruct the client how many minutes prior to their appointment they should arrive at reception in order to confirm their personal details.
 - e. Ask the client to send their signed consent form by email or bring in the signed consent form when possible.
 - f. Remind the client to bring their health card, a pen, and any other required documentation.
 - g. Confirm that only the client may enter the A/SLP's office unless there is a required caregiver or guardian.
 - h. Remind the client that there will be no toys, magazines, books, etc. in the reception area.

- i. Remind the client of the physical distancing rules.
- j. Advise the client to bring all necessary PPE (as defined by the practitioner) or that PPE will be provided. Non-medical masks are recommended for individuals in the community while travelling to access health care services and experiencing symptoms or if they will be in close contact with others while symptomatic
- k. Review appropriate hand hygiene and cough / sneeze etiquette that must be followed in assessment and treatment rooms.

When the client arrives

1. Complete the Point of Care Risk Assessment for COVID-19 symptoms.
2. Anyone who arrives for an in-person office appointment and is experiencing COVID-19 symptoms should immediately be asked to wear a surgical/procedure mask and isolated in a space within the office away from others. Clients should be referred to 811 to arrange for COVID-19 testing

During the Client's Visit

Proximity to Clients

When possible, maintain 6' / 2 metres of separation between yourself and the client. When being closer is clinically necessary, use of PPE (surgical mask and gloves at a minimum) or a physical barrier (e.g., plexiglass shield) is necessary. When a plexiglass shield is not available, practitioners should use additional PPE such as a long-sleeved gown when there is a risk of exposure to bodily fluids such as saliva or mucous. When gowns are not available, clinicians could consider having a change of clothing available with appropriate disposal and disinfecting protocols in place.

Infection Prevention and Control

Practitioners must follow the guidance provided by public health and their employer regarding infection prevention and control appropriate for COVID-19, including use of personal protective equipment, hand hygiene, and disinfecting. You should promote the use of individual measures (e.g. frequent hand hygiene, avoid touching face, respiratory etiquette, disinfect frequently touched surfaces). Reinforce general practices to maintain physical distancing, such as avoiding greetings like handshakes.

The following resource provides specifications for a variety of products for use against COVID-19 such as PPE and hand sanitizer:

"Specifications for COVID-19 Products", Public Works and Government Services Canada
<https://buyandsell.gc.ca/specifications-for-COVID-19-products>

Personal Protective Equipment

The following resources provide guidance on the appropriate use of PPE:

“COVID-19: Personal Protective Equipment (PPE) Recommendations at a Glance”, NSHA
http://policy.nshealth.ca/Site_Published/covid19/document_render.aspx?documentRender.IdType=6&documentRender.GenericField=&documentRender.Id=78465

“Putting on Personal Protective Equipment”, Winnipeg Health Authority
<https://www.youtube.com/watch?v=B5ew8020fwc>

“Taking off Personal Protective Equipment”, Winnipeg Health Authority
<https://www.youtube.com/watch?v=Lly8DjGcvDM>

“Routine Practices – Personal Protective Equipment”, Canadian Centre for Occupational Health and Safety
<https://www.ccohs.ca/oshanswers/prevention/universa.html>

Information about alternatives when gowns are not available:

“Conserving the Use of Gowns in Healthcare Settings when Supplies are Limited”, Health Canada
<https://www.canada.ca/en/health-canada/services/drugs-health-products/medical-devices/covid19-personal-protective-equipment/gowns.html#a3>

Recommendations on when to use PPE: Quick Reference

Activity	Type of PPE Suggested			
	Gloves	Mask	Eye Protection	Shield or Gown*
Any patient contact where distance >2m	n/a	n/a	n/a	n/a
Any patient contact (without touch) where distance <2m	yes	yes	yes	optional
Patient contact when physical touch is necessary	yes	yes	yes	optional
Administrative work without patient contact	n/a	n/a	n/a	n/a
Contact with co-workers where distance <2m	n/a	yes	n/a	n/a
“Curbside” contact with patient items (e.g., hearing aids)	yes	n/a	n/a	n/a
Damp cleaning workspaces	yes	n/a	n/a	n/a

*A gown, other covering that covers neck to knee to wrist, or a change of clothing. Consider using when there is a risk of exposure to bodily fluids such as saliva or mucous.

Surgical/procedure masks should be considered in the workplace for all health care professionals and staff providing direct patient care with a patient who has symptoms compatible for COVID-19.

Gloves should be removed and replaced between each patient contact or cleaning activity. A single mask can be used throughout the day. It is acceptable, but not required, to request clients to wear a non-medical mask or gloves.

Given the work of audiologists and speech-language pathologists, there may be cases where visibility of the face is critical to providing appropriate care. Examples of these are working with a child with developmental apraxia of speech on their sound production, a minimally verbal child with autism who is dependent on nonverbal cues for social interaction and language comprehension, or a person with a severe hearing loss who relies on facial cues to supplement auditory input. In cases such as these, use of a face shield or plexiglass barrier without a mask, or a clear mask may be appropriate. As with all services, the approach to be used and the possible risks must be discussed with the client or caregiver. Informed consent for the approach should be obtained and documented.

Hand Hygiene

Hands should be cleaned immediately before and after leaving a room, donning and doffing gloves/masks/gowns, and handling shared office equipment.

The following resources provide guidance on appropriate hand hygiene practices:

“Hand Washing: Reducing the Risk of Common Infections”, Canadian Centre for Occupational Health and Safety

https://www.ccohs.ca/oshanswers/diseases/washing_hands.html

“Good Hygiene Practices - Reducing the Spread of Infections and Viruses”, Canadian Centre for Occupational Health and Safety

https://www.ccohs.ca/oshanswers/diseases/good_hygiene.html

“Hard-surface Disinfectants and Hand Sanitizers (COVID-19): List of Hand Sanitizers Authorized by Health Canada”, Health Canada

<https://www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19/hand-sanitizer.html>

Hard Surface Disinfectants

Only use hard-surface disinfectants that have a Drug Identification Number (DIN) or Natural Product Number (NPN) from Health Canada indicating that the product is approved for use in Canada.

The following resource provides a searchable list of hard surface disinfectants for use against COVID-19:

“Hard-surface Disinfectants and Hand Sanitizers (COVID-19): List of Disinfectants for Use Against COVID-19”, Health Canada
<https://www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19.html>

Therapy Materials

When clients must be seen in person, clinicians must consider the risk of COVID-19 transmission posed by therapy materials. The following considerations should be made:

1. Reduce the overall number of toys and materials in therapy rooms and used during sessions (and use only when necessary).
2. Do not use items made of soft materials (e.g., dolls with a fabric body, felt materials) which are difficult to disinfect.
3. Use alternate methods than use of toys when it is feasible (e.g., requesting action rather than requesting objects).
4. It may be appropriate for the client or parent to bring their own devices (e.g., iPad) or toys. When a client must bring in an object (e.g., AAC device or book), there must be a process in place for appropriately disinfecting the item before entering the workplace.
5. Consider opportunities for hands-off parent coaching when this method isn't feasible via telepractice.

Audiology-Specific Considerations

In addition to other guidelines, some audiology-specific suggestions are:

1. Consider use of telepractice when possible for counselling, troubleshooting, or hearing aid adjustment.
2. During audiometric assessment, use of a hand-raise response instead of a button-press is recommended.
3. Consider use of test-box verification instead of real-ear when possible.
4. Consider mailing batteries or cleaning supplies directly to clients instead of in-clinic pickup.

Considerations for Home Visits

When services are provided within a client's home, clinicians should practice the following:

1. Screen all members of the household for COVID-19 symptoms and other illnesses. The resource below provides guidance on screening:
“COVID-19 Quick Reference for Primary Care Providers in Family Practice”, NSHA

http://policy.nshealth.ca/Site_Published/covid19/document_render.aspx?documentRender.IdType=6&documentRender.GenericField=&documentRender.Id=77571

2. Hands should be cleaned when you enter the client's home and after you leave.
3. Have a pair of shoes that are only for wearing when inside clients' homes. The soles of these shoes should be cleaned between homes.
4. Use toys and activities that are already present in the home; avoid bringing in outside materials as much as possible. When materials, equipment, or bags must be brought in, they must be disinfected prior to and at the end of the session.

After the Appointment

1. Clean the assessment/treatment space between every client including furniture and high touch areas as outlined above.
2. Only use damp cleaning methods (e.g., damp cloth, wet mop). Do not dry dust or sweep because this can distribute the virus droplets in the air.
3. Clean all equipment and supplies used.
4. Dispose of all single-use items (e.g., wax removal tools, tongue depressors, gloves) after each appointment.
5. In multi-practitioner clinics, halls should be free of individuals before sending a client down the hallway.
6. Digital note-keeping methods should be used whenever possible.
7. Provide contactless purchasing/fee payment whenever possible.

Quick Sources

Screening and Risk Assessment

"COVID-19 Quick Reference for Primary Care Providers in Family Practice", NSHA

Description: A guide which outlines screening, booking, and office procedures. NOTE: list of symptoms has not been updated.

http://policy.nshealth.ca/Site_Published/covid19/document_render.aspx?documentRender.IdType=6&documentRender.GenericField=&documentRender.Id=77571

"COVID-19: Personal Protective Equipment (PPE) Recommendations at a Glance", NSHA

Description: A guide to support decision making about risk of exposure and appropriate use of PPE.

http://policy.nshealth.ca/Site_Published/covid19/document_render.aspx?documentRender.IdType=6&documentRender.GenericField=&documentRender.Id=78465

"Point of Care Risk Assessment", NSHA & IWK Health Centre

Description: A printable poster to assist health care workers to evaluate their risk of exposure and identify the appropriate routine practices and additional precautions required to provide care.

http://policy.nshealth.ca/Site_Published/covid19/document_render.aspx?documentRender.IdType=6&documentRender.GenericField=&documentRender.Id=76565

Infection Prevention and Control

“Infection Prevention and Control Guidelines”, Canadian Interorganizational Group for Audiology and Speech-Language Pathology

Description: These guidelines were jointly developed by Canadian regulatory colleges and associations for audiology and speech-language pathology. Separate guidelines for each of the professions are available.

<https://www.sac-oac.ca/professional-resources/resource-library/infection-prevention-and-control-guidelines>

Hand Hygiene

“Your 5 Moments for Hand Hygiene”, World Health Organization

Description: A printable poster about when to perform hand hygiene during patient interactions.

https://www.who.int/gpsc/5may/tools/workplace_reminders/Your_5_Moments_For_Hand_Hygiene_Poster_Chair.pdf?ua=1

“Reduce the Spread of COVID-19. Wash Your Hands”, Public Health Agency of Canada

Description: A printable poster about effective hand washing technique.

<https://www.canada.ca/content/dam/phac-aspc/documents/services/publications/diseases-conditions/coronavirus/covid-19-handwashing/covid-19-handwashing-eng.pdf>

“How to Handrub?”, World Health Organization

Description: A printable poster about effective use of hand sanitizer.

https://www.who.int/gpsc/5may/How_To_HandRub_Poster.pdf?ua=1

“COVID-19: Cover Your Cough”, Pan American Health Organization

Description: A printable poster about cough and sneeze etiquette.

<https://www.paho.org/en/documents/infographic-covid-19-cover-your-cough>

“WHO: How to Hand rub with Alcohol-Based Formulation”, World Health Organization

Description: This video provides a demonstration of the appropriate technique for using hand sanitizer.

<https://www.youtube.com/watch?v=ZnSjFr6J9HI>

Environmental Cleaning and Disinfecting Surfaces

“Infection Prevention and Control (IPAC) Guidance Document”, NSHA

Description: This document outlines cleaning and disinfection requirements for devices and the environment in primary care settings.

http://policy.nshealth.ca/Site_Published/covid19/document_render.aspx?documentRender.IdType=6&documentRender.GenericField=&documentRender.Id=76462

“COVID-19: Working - Cleaning Your Workplace”, Government of Nova Scotia

Description: This webpage provides information on how to clean workplaces to reduce the spread of COVID-19.

<https://novascotia.ca/coronavirus/working-during-covid-19/#cleaning>

Guidance from the Government of Canada

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

“Hard-surface Disinfectants and Hand Sanitizers (COVID-19): List of Disinfectants for Use Against COVID-19”, Health Canada

Description: Health Canada provides a searchable list of products that have been approved.

<https://www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19.html>

Occupational Health and Safety

“COVID-19: Occupational Health and Safety”, Government of Nova Scotia

Description: This webpage provides guidance to employers on how to keep workplaces and employees safe during the pandemic.

<https://novascotia.ca/coronavirus/occupational-health-and-safety/>

Canadian Centre for Occupational Health and Safety

Description: The CCOHS has a large collection of resources on occupational health and safety.

<https://www.ccohs.ca/topics/hazards/health/pandemics/>

General Information on COVID-19

“COVID-19 Hub for NSHA Team Members & Physicians”, NSHA

Description: This is a collection of clinical information to guide the care and management of COVID-19 patients and the NSHA’s response to COVID-19. There are useful recommendations for outpatient, ambulatory care, and community-based services.

<https://covid19hub.nshealth.ca/About>

“COVID-19: Staying Healthy”, Government of Nova Scotia

Description: This webpage provides information about staying healthy and stopping the spread of COVID-19 in the community.

<https://novascotia.ca/coronavirus/staying-healthy/>

“Risk-informed Decision-making Guidelines for Workplaces and Businesses During the COVID-19 Pandemic”, Canadian Public Health Agency

Description: This resource provides a decision-making framework and risk mitigation strategies for workplaces and businesses.

<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/guidance-documents/risk-informed-decision-making-workplaces-businesses-covid-19-pandemic.html>

“COVID-19 Pandemic Information and Updates”, Alberta College of Speech-Language Pathologists and Audiologists

Description: The ACSLPA has a wealth of information related to COVID-19 on their website.

<https://www.acslpa.ca/covid-19-pandemic-information/>