



RISE Health

IPAC Assessment and Recommendations May 11th 2020

MITRA Infection Prevention Consultants Inc.

Infection Prevention and Control (IPAC) Rapid COVID-19 Assessment

RISE Health is a multidisciplinary collaborative health and wellness clinic which has been in operation since March 2014. Services offered at the clinic include: Physiotherapy, Massage Therapy, Chiropractic and Naturopathic Medicine, Clinical Counselling, Holistic Nutrition, Acupuncture., Orthotics, Pilates and Restorative Yoga. There are approximately 27 practitioners and 11 administration staff at RISE Health.

This second 'Infection Prevention Assessment' was carried out over a 1-hour period on May 11th 2020 when the clinic was closed. The assessment was initiated by the COVID-19 situation and preparations to re-open the clinic after it had been closed for 2 months, except for telehealth. While the focus of this assessment is on implementing measures to stop the spread of COVID-19, the Infection Prevention and Control (IPAC) best practice recommendations in this report apply to other communicable diseases and antimicrobial resistant organisms that are transmitted via the contact and/or droplet route.

This report is broken down into several sections:

1. **IPAC PLUSES (or factors that ↓ IPAC risks of transmission/ contamination)** require no changes, only monitoring and maintenance, as RISE Health is competently carrying out current IPAC best practice standards. *NB: Changes will be required when/if standards change.*
2. **IPAC IMPROVEMENT AREAS (or factors that ↑ IPAC risks of transmission/contamination)** require change or improvement work to meet IPAC current best practice standards.
3. **RECOMMENDATIONS (or practices to ↓ IPAC risks of transmission/contamination)** include suggestions of how to meet current IPAC best practice standards, or embed IPAC processes into everyday work so they become a habit and more easily achieved.

It should be noted that:

- *No detailed comments can be made about operational practices that were not observed (or fully observed) during this assessment (for example, environmental cleaning practices)*
- *The recommendations in this report are guided by current IPAC best practice standards, and current COVID-19 information, the sources of which can be found in the reference section. Where best practice standards and IPAC principles can be used to direct IPAC practices in a clinical setting, implementation/operationalization of these standards is the responsibility of RISE Health and its employees; this may influence the effectiveness of IPAC best practices.*

RISE Health
Infection Prevention and Control (IPAC) Rapid COVID-19 Assessment

May 11th 2020

INDEX

PAGE #	TOPIC
3 - 4	COVID-19 IPAC Best Practices to Prevent Transmission
5 – 6	Key IPAC Best Practices for Hand Hygiene, Glove Use And Cleaning
7 - 9	Resources and Links

Infection Prevention and Control (IPAC) Rapid COVID-19 Assessment

IPAC BEST PRACTICES TO PREVENT TRANSMISSION OF COVID-19

- **Declutter**
 - ONLY keep what is needed in each area/room to prevent items from becoming contaminated, and to increase the effectiveness of cleaning/disinfecting practices (less clutter → easier to clean → less places for pathogens to hide)
- **Prescreen Clients/Others Entering Clinic (only asymptomatic individuals should enter RISE Health)**
 - Prescreen clients before/on arrival and advise them to call 811 for direction/possible testing if they have cold, influenza or **COVID-19-like** symptoms (which may include: fever, chills, cough, shortness of breath, sore throat, painful swallowing, runny nose, nasal congestion, loss of sense of smell, headache, muscle aches, fatigue or loss of appetite)
 - Prescreen 'necessary' companions before/on arrival
 - Screen anyone entering clinic, such as trades people
- **Routine Practices: Hand Hygiene (HH)/Respiratory Etiquette/Point of Care Risk Assessment (PCRA)**
 - **HH** for staff (on entering/before leaving RISE Health; before/after client treatments; between a 'dirty' to a 'clean' procedure on the same client [i.e., from manipulation to dry-needling, after using the bathroom, and before eating])
 - HH for clients (on entering/before leaving the clinic; before/after using any equipment; after using the bathroom)
 - HH for any person entering RISE Health (on entering/before leaving and when hands are contaminated)
 - HH before/after removing a mask or touching face/eyes, to prevent self-contamination/spread
 - Respiratory etiquette: **Cough/Sneeze** into a tissue and discard immediately, or into elbow and carry out HH after
 - PCRA: Practitioners should carry out a PCRA at every encounter to assess the risk of exposure to blood and body fluids and determine what precautions are necessary (i.e., which personal protective equipment (**PPE**) needs to be worn)
- **Physical Spacing/Maintaining Physical Distance**
 - Stagger appointments so there is no overlap of clients arriving, leaving or waiting
 - Avoid clients at reception desk where possible (i.e., complete payments/appointment bookings online or by phone)
 - Space chairs in the waiting room at least 6 feet/2meters from each other and from a walk-way/door (or wait in car)
 - Wear a mask if physical distancing is not possible (practitioners at a minimum; admin staff/clients if necessary)
 - Establish one-way clinic flow for both staff and clients to avoid close contact in hallways
 - Minimize the number of people in the clinic (i.e., companions should only accompany client to appointment if necessary)
- **Cleaning/Disinfecting Process to decrease environmental bioburden and mitigate transmission of pathogens**
 - ↓ Contamination of supplies/items/equipment/environment by establishing clear processes for cleaning/disinfecting, and
 - ↓ Cross-contamination by keeping 3 feet between dirty and clean items/equipment, and storing clean equipment/items in a clean area, and away from a high traffic area so they remain clean

IPAC BEST PRACTICES TO PREVENT TRANSMISSION OF COVID-19**1. Clients should:**

- a. Bring minimal personal belongings to their appointments, such as coats, phones etc. (i.e., only what is necessary)
- b. Clean their hands when entering/ leaving the clinic and before/after they use shared gym equipment or when they are soiled
- c. Be asked to rebook their appointment if they are sick (even if they have a mild respiratory, or other acute illness)
- d. Be made aware of the new clinic guidelines to prevent transmission of infections before they arrive for their appointment
- e. Be screened by phone when they book an appointment and, on the day of their visit. Asymptomatic clients: Enter RISE when called → carry out HH → be accompanied to the treatment room → after treatment, be accompanied to the exit (Note: clients can wear a mask if they prefer to - either their own clean cloth mask, or one from RISE if supplies are available)

2. Staff should:

- a. Be provided with IPAC training to support mitigating the risks of transmission (i.e., HH, Cleaning/Disinfecting, Safe PPE use)
- b. Space appointments to ensure no overlap and enough time to effectively clean/disinfect equipment/room between clients
- c. **Self-Monitor** their own symptoms daily and NOT come to work if they have signs & symptoms of a respiratory illness/communicable disease. Staff should arrange to be tested for COVID-19 where appropriate by calling 811
- d. Minimize personal items brought to work and clean/disinfect these items between clients, when contaminated, and at end of the work day, (i.e., phones, laptops, stethoscopes)
- e. Clean their hands when entering/ leaving RISE Health, between clients, before/after caring for a client, between a 'dirty' to 'clean' procedure on the same client (i.e., manipulation to dry needling), and when contaminated
- f. Keep their nails short with no nail polish/false nails, and wear no hand/wrist jewelry to support effective hand hygiene
- g. Wear dedicated work clothes/shoes, change at work if possible (transport in a plastic or cleanable bag), and launder at the end of a work day (If staff don't change at work, they should be advised to **not** stop at a public place on their way home)
- h. Wear work clothing that decreases the risk of contamination (i.e., sleeves that can be pulled up to the elbows to avoid contamination while carrying out a procedure or performing hand hygiene, water-resistant shoes that can be cleaned daily)
- i. Bring food/water in a labelled container/bottle which can be cleaned on the outside before storing in shared space/fridge
- j. Avoid sharing food
- k. Maintain their health/immune status (exercise, eat well, sleep etc.)
- l. Know their vaccine status and keep their vaccines up-to-date

KEY IPAC BEST PRACTICES FOR HAND HYGIENE, GLOVE USE AND CLEANING**Hand Hygiene is one of the most effective practices to stop the transmission of pathogens**

- HH can be carried out with [ABHR or Soap and Water](#) if your hands are visibly soiled. Friction is important to remove pathogens.
- Effective HH involves cleaning all [areas/surfaces of the hands](#) and wrists in the correct [moments](#) to stop transmission and the spread of pathogens, and decrease contamination of the environment, equipment and items
- HH should be carried out by anyone entering the clinic (staff, clients, companions, trades people etc.).
- HH should be performed before and after using any [shared equipment/items](#). This not only decreases the bioburden on equipment/items, but also prevents transmission of infections.

Hand Hygiene and Appropriate Glove Use

- HH should be carried out BEFORE you take a pair of gloves out of a glove box to avoid contaminating the gloves in the box, and the outside surface of the gloves you are putting on
- Gloves should ONLY be worn if there is a risk of blood and/or body fluid exposure, and should NEVER replace HH
- Gloves should ALWAYS be changed between clients and when leaving the area you are using them in (to avoid spreading pathogens to the environment, transmitting infections or self-contaminating)

KEY IPAC BEST PRACTICES FOR HAND HYGIENE, GLOVE USE AND CLEANING**IPAC Best Practices for Cleaning/Disinfecting**

- Cleaning/Disinfection of **clinic spaces** and equipment should follow an established cleaning process that outlines what, when (between clients, daily, monthly), who (trained healthcare cleaners and staff), where and how (using Health Canada approved healthcare grade disinfectants with a Drug Identification Number (DIN), microfibre cloths, and following contact 'wet' times and manufacturer's instructions) to clean. Without a process or guidelines things may be missed, or not cleaned adequately, and the risk of transmission increases. It is also important to have a procedure to identify what has been cleaned, and how to store an item so it does not become contaminated before use. In addition, a plan should be made to assess, and retire or repair, damaged fixtures, fittings, items, and equipment that can no longer be cleaned effectively.
- Clean equipment/items should be stored in a clean, low traffic area, or in a covered container, to prevent re-contamination after cleaning. Clean again before use if not used frequently
- **High touch** office equipment/items should be cleaned on a daily basis and between staff
- Treatment Rooms should only contain necessary supplies to avoid contamination of items and enable effective and efficient cleaning/disinfecting practices between clients and at the end of the day (less clutter → easier and faster to clean/disinfect)
- Avoid bringing food, drinks or personal items into a clinical room to minimize the risk of self-contamination and to ↓ cleaning time
- All laptops/monitors/phone screens/keyboards etc. that are used in exam rooms should be cleaned on a daily basis, when contaminated or between rooms and/or clients (follow manufacturer's instructions for cleaning/disinfecting screens, and electronic/computer equipment)

IPAC RESOURCES

RESOURCE	WEBLINK
COVID-19 Resources	
<p>British Columbia Centre for Disease Control (BCCDC)</p> <p>COVID-19 POSTERS AND TOOLS</p> <p>(Check regularly as updated frequently)</p>	<p><u>General Resources</u> http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care/new-today</p> <p><u>Clinic Entrance</u></p> <ul style="list-style-type: none"> ○ Physical Distance http://www.bccdc.ca/Health-Professionals-Site/Documents/COVID19_PhysicalDistancingPoster.pdf ○ STOP, Wear a Mask if Symptomatic http://www.bccdc.ca/Health-Info-Site/Documents/COVID19_Poster_002_English.pdf <p><u>Hand Hygiene</u> http://www.bccdc.ca/Health-Professionals-Site/Documents/COVID19_Handwashing%20Poster_MD%20offices.pdf</p> <p><u>Environmental Cleaning and Disinfecting in Clinic Settings</u> http://www.bccdc.ca/Health-Professionals-Site/Documents/COVID-19_MOH_BCCDC_EnvironmentalCleaning.pdf</p> <p><u>Symptoms to Use When Screening Clients (COVID-19 Testing Guidelines)</u> http://www.bccdc.ca/Health-Professionals-Site/Documents/BCCDC_PHL_Updated_nCoV_Lab_Guidance.pdf</p> <p><u>Staff Information/Resources</u></p> <ul style="list-style-type: none"> ○ Staff Monitoring Forms http://www.bccdc.ca/resource-gallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/Epid/CD%20Manual/Chapter%201%20-%20COVID19-Contact-monitoring-form.pdf ○ BCCDC COVID-19 Symptom Self-Assessment Tool https://bc.thrive.health/covid19/en ○ COVID-19 Prevention Poster

Infection Prevention and Control (IPAC) Rapid COVID-19 Assessment

RESOURCE	WEBLINK
	<p>http://www.bccdc.ca/Health-Info-Site/Documents/COVID19-Prevention.pdf</p> <ul style="list-style-type: none"> ○ How to Wear a Mask http://www.bccdc.ca/Health-Professionals-Site/Documents/COVID19_SurgicalMaskPoster.pdf ○ Putting on Droplet/Contact PPE http://www.bccdc.ca/Health-Professionals-Site/Documents/COVID19_MOH_BCCDC_Donning.pdf ○ Removing Droplet/Contact PPE http://www.bccdc.ca/Health-Professionals-Site/Documents/COVID19_MOH_BCCDC_Doffing.pdf ○ Management of PPE-Related Skin Damage http://www.bccdc.ca/Health-Professionals-Site/Documents/COVID19_SkinDamagePPEPoster.pdf
General IPAC Resources	
IPAC Canada Medical Gels 2016	https://ipac-canada.org/photos/custom/Members/pdf/Medical%20Gel%202016_final_Jan2017.pdf
Provincial Infection Control Network BC (PICNet) IPAC Guidelines	www.picnet.ca/guidelines/
Public Health Ontario (PHO) IPAC for Clinical Office Practice 2015	http://www.publichealthontario.ca/en/eRepository/IPAC_Clinical_Office_Practice_2013.pdf

Infection Prevention and Control (IPAC) Rapid COVID-19 Assessment

RESOURCE	WEBLINK
Environmental Cleaning	
PICNet British Columbia Best Practices for Environmental Cleaning for Prevention and Control in all HealthCare Setting and Programs	September 2016 https://www.picnet.ca/wp-content/uploads/British-Columbia-Best-Practices-for-Environmental-Cleaning-for-Prevention-and-Control-of-Infections-in-All-Healthcare-Settings-and-Programs.pdf
PHO Best Practices for Environmental Cleaning for Prevention and Control of Infections in all Health Care Settings (2 nd ed.)	April 2018 https://www.publichealthontario.ca/-/media/documents/B/2018/bp-environmental-cleaning.pdf
First Nations Health Authority (FHNA) Housekeeping Manual	September 2016: Easy to read guidelines http://www.fnha.ca/wellnessContent/Wellness/HP_Housekeeping-Manual.pdf
Hand Hygiene	
BC MOH Best Practices for Hand Hygiene in all Healthcare Settings and Programs	July 2012 (currently being revised) https://www.picnet.ca/wp-content/uploads/BC_Best_Practices_for_Hand_Hygiene_2012.pdf