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## Introduction

Effective 05/11/2020

On April 30, 2020 the Government of NL introduced their plan, “A Foundation for Living with COVID-19”. With the anticipation that chiropractors will be included in re-openings that will be permissible at alert level 3 ( tentatively June 8, 2020) the Newfoundland and Labrador Chiropractic Board (NLCB) has released this practice directive. This directive defines the requirements that chiropractors must follow to ensure a safe practice environment with the current pandemic measures as a result of COVID-19.

In response to the current environment, the circumstances and requirements asked of health providers upon return to practice may change rapidly. Clinicians will need to respond quickly to changes signaled from the Government of NL and the NLCB. As a result, this directive is current as of the date of publication and reflects the rules and requirements for chiropractors at this time. In the event of a discrepancy between this information and the directives of provincial public health authorities, the directions of the provincial public health authority will take precedence.

As regulated health professionals, chiropractors are required to:

1. Follow all mandates and recommendations from Public Health and the Government of NL regarding your personal and professional conduct. As a regulated health professional, you have a responsibility to follow all civil orders that originate from any level of government.
2. Read and adhere to all communication, policies and practice directives from the NLCB.

The NLCB continues to consult with external stakeholders, including the Department of Health and Community Services (DHCS) and will adapt this directive based on expert recommendations. The NLCB exists to protect the interest of the public with respect to the practice of chiropractic in NL and this directive is created to ensure the health and safety of both the public and chiropractors while instilling patient confidence that they can safely access chiropractic care at this time.

## Requirements

This directive includes requirements regarding:

1. Screening
2. Hand hygiene
3. Environmental cleaning and disinfection
4. Physical distancing
5. Use of PPE
6. Exclusion or work restrictions during staff or chiropractor illness

This directive must be completely reviewed and applied before you open your practice to the public. Chiropractors and clinic owners are responsible to ensure staff have read and have the opportunity to ask questions regarding this directive. Staff must be trained and audited on the implementation of all policies and procedures. In addition, the NLCB requires that you complete, sign, and return the *Infection Control Checklist for Chiropractors*. Only clinics who have returned this document will be allowed to re-open once instructed.

## Patient screening



Chiropractors must assess and screen patients for symptoms of COVID-19 as per the requirements of existing public health orders. Patients exhibiting signs and symptoms consistent with COVID-19, should not present for clinical services during the pandemic.

Clinic staff should collect simple screening information at the time of booking the appointment and again in-person at the time of the patient's visit to the clinic. People who accompany patients, such as parents, caregivers or companions, must be screened with the same questions as the patient.

## Screening questions that must be asked of patients and companions:

Do you currently or in the past 14 days have you had symptoms of COVID-19, such as:

1. severe difficulty breathing (e.g., struggling for each breath, speaking in single words)
2. severe chest pain
3. having a very hard time waking up
4. feeling confused
5. lost consciousness
6. Unable to lie down due to shortness of breath

Do you currently or have you in the past 14 days had any **Two (2)** of the following symptoms

7. Fever (or signs of a fever such as chills, sweats, muscle aches and light-headedness)
8. cough
9. headache
10. sore throat
11. painful swallowing
12. runny nose
13. unexplained loss of appetite
14. diarrhea
15. loss of sense of smell or taste

Or

16. are you experiencing small red or purple spots on your hands and/or feet?
17. Have you traveled outside of NL within the last 14 days?
18. Have you had close contact with individuals who have a confirmed or presumptive diagnosis of COVID-19. A close contact is defined as a person who:
  - provided care for the individual, including healthcare workers, family members or other caregivers, or who had other similar close physical contact without consistent and appropriate use of personal protective equipment OR
  - who lived with or otherwise had close prolonged contact (within 2 meters) with the person while they were infectious OR
  - had direct contact with infectious bodily fluids of the person (e.g. was coughed or sneezed on) while not wearing recommended personal protective equipment

Patients exhibiting symptoms or who answer yes to any of the above questions should not receive in-office treatment at this time and should be directed to call the 811 HealthLine.

Signage indicating screening criteria should be posted in a location that is visible before entering the clinic.



A registry of all people entering the clinic should be kept to aid in contact tracing if required. This would include people in the clinic aside from patients (e.g. couriers, guardians accompanying a patient, etc). This is not an open sign-in book and should be kept and managed privately by the clinic. This registry must be kept while this directive remains in place.

If a chiropractor encounters a patient who has gone through the screening process and enters a treatment room yet still exhibits signs and symptoms consistent with COVID-19, the chiropractor must:

- Establish and maintain a safe physical distance of two metres.
- Have the patient complete hand hygiene.
- Provide a new mask for the patient to don.
- Segregate the patient from others in the clinic.
- Explain the concern that they are symptomatic, discontinue treatment and reschedule the appointment.
- Advise the patient they should self-isolate and call the 811 HealthLine.
- Ensure the patient is escorted from the clinic in a manner that does not compromise the safety of staff or other patients
- Discontinue all treatments immediately and until the clinic and practice area has been sufficiently cleaned and disinfected.

Chiropractors must not attempt a differential diagnosis of patients who present with signs and symptoms of COVID-19.

Chiropractors are required to call the 811 HealthLine or the NLCB to receive guidance if they are aware of a patient who has visited their clinic within the last 14 days and is now testing (or has tested) positive for COVID-19.

## Hand hygiene

Hand hygiene is recognized as the single most important infection prevention and control (IPC) practice to break the chain of transmission of infectious diseases, including respiratory illnesses such as COVID-19.

Hand hygiene can be accomplished by either washing hands with soap and water for at least 20 seconds and then drying with single use cloth or paper towels, or using alcohol-based hand sanitizer. Alcohol-based hand sanitizer must be approved by Health Canada (DIN or NPN number), with a final concentration of 60-80 percent ethanol or 60-75 percent isopropanol.

**Chiropractors and their staff are expected to use handwashing as their principle method of hand hygiene** before and after each patient interaction and alcohol-based hand rubs should only be used when hand washing is not immediately available. When hands are visibly soiled, they must be cleaned with soap and water as opposed to using an alcohol-based hand rub.

Single use cloth towels that are used in the clinic for hand hygiene must be laundered in hot water (above 60°C) with regular laundry soap and fully dried before being used again. Staff that are handling towels should use proper infection control protocols for both dirty and clean laundry processing.

A significant component of hand hygiene is not touching your face. In addition to proper hand hygiene,

chiropractors and staff must also avoid touching their face and practice respiratory etiquette by coughing or sneezing into their elbow or covering coughs and sneezes with a facial tissue and then disposing of the tissue and performing hand hygiene immediately.

## Hand hygiene is required to be performed by:

- Chiropractors when:
  - entering the clinic
  - before contact with each patient
  - before clean/aseptic procedures
  - after body fluid exposure or risk of body fluid exposure
  - after contact with each patient
  - after contact with a patient's surroundings or belongings
  - before and after donning PPE
  - before and after doffing PPE
  - after cleaning contaminated surfaces
- Staff when:
  - entering the clinic
  - before interaction with a patient
  - before clean/aseptic procedures
  - after body fluid exposure or risk of body fluid exposure
  - after interaction with a patient that requires contact with shared surfaces
  - before and after donning PPE
  - before and after doffing PPE
  - after cleaning contaminated surfaces
  - after financial transactions or administration of paperwork involving patients
- Patients when:
  - entering the clinic
  - entering the treatment area if the patient does not proceed directly to a treatment room upon entering the clinic
  - before and after use of weights, exercise equipment or similar shared equipment
  - prior to processing payment

## Environment cleaning and disinfection

Effective cleaning and disinfection are essential to avoid the possible spread of COVID-19, which is spread through contact with respiratory droplets or contact with contaminated surfaces followed by hand-face contact. The COVID-19 virus can survive for differing periods of time depending on the surfaces it lands on. Frequent cleaning and disinfection are necessary to prevent spread of the disease.

Cleaning products remove soiling such as dirt, dust, and oils, but do not always sanitize surfaces. Disinfectants are applied after cleaning and are intended to result in the destruction of germs.

Read, understand and apply the cleaning standards from the Health Canada guide on cleaning and disinfecting public spaces during COVID-19.

## Proper disinfectant products

Disinfectants with an 8-digit Drug Identification Number (DIN) are approved for use by Health Canada. During the pandemic, Health Canada-approved disinfectants with a virucidal claim are appropriate for

the elimination of viruses in the clinic environment. The disinfectant product manufacturer's instructions must be followed for use, safety, contact time, storage and shelf life.

According to Health Canada, *"Coronaviruses are one of the easiest types of viruses to kill with the appropriate disinfectant product when used according to the label directions. Health Canada has published a [list of hard surface disinfectants](#) that are likely to be effective for use against COVID-19.*

*Although they do not claim to kill COVID-19, cleaners can play a role in limiting the transfer of microorganisms. Health Canada recommends cleaning high-touch hard surfaces often, using either regular household cleaners or diluted bleach according to the label directions. This bleach solution should be prepared according to the instructions on the label or in a ratio of 250 mL (1 cup) of water per 5 mL (1 teaspoon) of bleach. Directions are based on bleach that is 5% sodium hypochlorite, to give a 0.1% sodium hypochlorite solution. Never mix bleach with other chemical products and use it in a well-ventilated area."*

Ensure the surface remains wet with the bleach water solution for 1 minute.

Be sure you and your staff take appropriate precautions when using chemicals for cleaning and disinfecting. This can be done by consulting the Manufacturer's Safety Data Sheets when using cleaners and disinfectants. Staff must be supplied with the appropriate safety equipment (gloves and masks) to protect themselves when they clean and disinfect.

The frequency of cleaning and disinfection is dependent on the nature of use/contact of the surface/item in question:

- Patient care/patient contact items must be cleaned and disinfected between each patient/use. Examples of patient contact items include but are not limited to:
  - treatment tables, all contact surfaces, and the entire headpiece and hand rests
    - discontinue use of the central holding bar for headrest paper
    - discontinue the use of headpiece mounted headrest paper rolls as these can easily become cross contaminated by contact with the patient's hands. Headrest paper should be in the form of single use **sheets** from this point forward.
    - discontinue use of any permanent treatment material that cannot be cleaned and disinfected. For example, upholstered cloth treatment tables where the cloth cannot be properly disinfected after each use must be discontinued.
  - Therapeutic exercise equipment
  - Therapeutic treatment tools and devices
  - Diagnostic tools and devices
  - Procedural work surfaces
- Commonly touched areas must be cleaned and disinfected a minimum of twice daily or whenever visibly soiled. Commonly touched areas include but are not limited to:
  - light switches, doorknobs, toilets, taps, handrails, counter tops, touch screens/mobile devices, phones and keyboards
  - The payment machine must be cleaned after each patient encounter.
  - Clipboards that patients contact must be disinfected after each patient encounter.
  - Pens/pencils used by patients must be disinfected after each patient use or be single use only
  - Arms of clinic waiting chairs or any other surface that is likely to be contacted by a patient's hands should be disinfected after each use
- Any cloth items, such as towels, sheets, headrest coverings, etc., that are used in the clinic must be laundered in hot water (above 60°C) with regular laundry soap before being dried and used

again. Staff that are handling these items should always use proper infection control precautions.

## Required clinic environment adaptations

- Books, magazines, toys and remote controls must be removed from patient areas.
- Discontinue patient-accessible literature displays and directly dispense to patients or move to electronic distribution.
- Self-serve candy dishes, mints, or other unsealed consumables are not permitted.
- Chiropractic table surfaces with tears must be **immediately** repaired and then replaced as soon as reasonably possible.
  - At no time may patient care be provided on a table with exposed foam.
  - Emergency repair must be performed by using a product that is non-porous and can be effectively disinfected in a manner consistent with table disinfection protocols. It is expected that the arrangement for suitable long-term repair or replacement is initiated within two business days of the discovery of the tear.
  - If clinic furniture contains cloth upholstery in areas of high contact and cannot be properly disinfected, it must be removed from the clinic environment.
- A regular schedule for periodic environmental cleaning must be established and documented.

## Physical distancing

### Requirements for managing clinical space:

- Physical distancing requirements take priority over occupancy limits in most businesses however all measures that can reasonably be implemented to reduce the number of patients in a clinic at a given time are encouraged. These include, but are not limited to:
  - Having patients wait in their cars until they are ready to be seen by the chiropractor.
  - Scheduling appointments in a manner that avoids multiple patients being present during a given period of time.
- Members of the public must always remain two metres from each other. This applies in the following spaces:
  - treatment areas
  - waiting areas - seats must be spaced to maintain two metre distance
  - transition areas
  - people who live together are exempt from this requirement **with each other**.
  - caregivers and companions that are required to attend with patients are exempt from this requirement only with those who they are attending with.
- Non-clinical employees and the public must always be two metres from each other.
  - Reception and payment area - If two metres cannot be maintained at the reception/ payment area, staff must be continuously masked, or the installation of a plexiglass or plastic barrier must occur to protect reception staff and patients.
- The treating practitioner must be two metres from the public when conversing.
- Access to the practice environment should be restricted to those who **must** be present, including patients, patient chaperones or companions, and staff members.
- Gathering limits currently do not apply to businesses however any future recommendations that may be imposed by DHCS on businesses should be assumed to include all individuals in the office, including staff.



- To aid in physical distancing, chiropractors should give consideration to the use of Telehealth as a substitute for in-person care where appropriate.

## Managing the clinical schedule:

- It is important to ensure that your clinic booking practices (duration of treatment visits and number of patients in the practice at any given time) comply with ongoing Chief Medical Officer of Health (CMOH) directives on occupancy limits for private health clinics.
- This includes ensuring booking practices enable physical distancing for patients between treatment sessions and provide adequate time to clean and disinfect clinic equipment between patients.
- When scheduling, it is important to give consideration to providing dedicated and/or off-hours treatment for high risk populations.

## Personal Protective Equipment

Personal protective equipment (PPE) is an essential element in preventing the transmission of disease-causing microorganisms. If used **incorrectly** however, PPE will fail to prevent transmission and may in fact facilitate the spread of disease.

### Staff and practitioner PPE

Information on the use of surgical or procedural masks by health practitioners to prevent the transmission of respiratory illness to patients continues to evolve however, it appears that the use of surgical masks may aid in reducing droplet spread from those wearing them. As such, it is a requirement that all chiropractors and staff who are providing patient care wear a surgical mask until further notice.

### PPE requirements

- 3 ply surgical masks are the minimum acceptable standard.
- chiropractors and clinical staff must always be masked while providing patient care.
- non-clinical staff must be masked when a physical distance of two metres cannot be maintained.

One mask may be used for the entire work shift if it is not removed or otherwise compromised. Masks must be discarded and replaced when wet, damaged or soiled, when removed, and at the end of the day or the end of a shift. N95 respirators are not required. Cloth masks are not permitted to be worn by chiropractors or clinic staff as they are not formally approved for health-care settings.

### Donning and Doffing of Masks

Careful attention to the process of Donning (putting on) and Doffing (taking off) personal protective equipment is as important a part of the infection prevention/control process as the equipment itself. For this reason, it is essential that chiropractors adhere to proper donning and doffing procedures.

Masks must be donned and doffed using the following specific sequence to prevent contamination. Additional resources are contained in the reference section following this document.

#### Donning mask:

1. Perform hand hygiene.
2. Open the mask fully to cover from **above the nasal openings to below the chin**.
3. Put on mask.
4. Secure ties to head (top first) or elastic loops behind ears.





5. Carefully mould the flexible band to the bridge of nose (if applicable).
6. Ensure snug fit to face and below chin with minimal gaping or venting.
7. Perform hand hygiene

### **Doffing mask:**

1. Perform hand hygiene.
2. Do not touch the front of the mask.
3. Carefully remove the mask by bending forward slightly, touching only the ties or elastic loops. Undo the bottom tie first then undo the top tie.
4. Discard the mask in the garbage.
5. Perform hand hygiene.
6. **Never reuse masks**

It is essential that all chiropractors and staff providing services in a clinic are aware of the proper donning and doffing procedures for PPE. The use of PPE must be precise and ordered to limit the spread of COVID-19.

The referenced PPE Resources in this document must be reviewed and understood by all chiropractors and staff before providing patient care. Training and practice of donning and doffing PPE within your facility are essential to ensure the proper use of PPE in support of limiting the spread of COVID-19.

### **Patient provision of PPE**

Clinics are not required to provide surgical masks for patients however patients should be encouraged to wear masks when recommended for the public by the province's CMOH. Patients must not wear previously worn surgical masks and cloth masks must be properly cleaned before being worn in the clinic. Chiropractors who choose to provide masks for patients must educate the patient on the proper donning and doffing of masks as outlined above and observe that it occurs properly.

If a chiropractor encounters a patient who has gone through the screening process and enters a treatment room yet still exhibits signs and symptoms consistent with COVID-19, the chiropractor must:

- Establish and maintain a safe physical distance of two metres.
- Have the patient complete hand hygiene.
- Provide a new mask for the patient to don.
- Segregate the patient from others in the clinic.
- Explain the concern that they are symptomatic, discontinue treatment and reschedule the appointment.
- Advise the patient they should self-isolate and call 811 HealthLine.
- Ensure the patient is escorted from the clinic in a manner that does not compromise the safety of staff or other patients
- Discontinue all treatments immediately and until the clinic and practice area has been sufficiently cleaned and disinfected.

Chiropractors must not attempt a differential diagnosis of patients who present with signs and symptoms of COVID-19.

### **Clinic clothing**

Clean clothes must be worn by the practitioner and staff each day.

If the practitioner and staff drive directly from their home to the clinic, no change of clothes is required. However, if they stop at other locations on their way to the clinic, then donning new clean clothes in the



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clinic is required. Clothes worn in the clinic must not be worn in public afterwards. Practitioners and staff must change into different clothes at the end of their shift.

To clean clothes worn in the clinic, wash clothing in hot water (above 60°C) with regular laundry soap.

## **Exclusion or work restrictions in the case of staff or chiropractor illness**

Staff and chiropractors must self-screen for symptoms before arrival at work with the same symptom screening questions used for patients. If screening is positive, staff and/or chiropractors must not come to the clinic.

Staff and chiropractors must complete and record a formal screening upon arrival at work. This screening history must be kept while this directive remains in place.

**Screening questions that must be asked with staff and chiropractors are the same as those that must be asked of patients and contained on page 3 of this document. A record of these attestations must be kept either electronically or in paper format and should be completed in accordance with the Staff Screening Questionnaire.**

Chiropractors and staff who are deemed at risk based on the predetermined screening questions are not eligible to work. Chiropractors and staff who are not eligible for work based on the screening criteria are encouraged to self-isolate for 14 days from the onset of symptoms. If further guidance is required, chiropractors and their staff are encouraged to call the 811 HealthLine.

Chiropractors and staff must also immediately inform their direct supervisor at the onset of any symptoms referenced in the screening questions. Chiropractors who become symptomatic while treating patients must stop seeing patients immediately and follow self-isolation procedures.

This requirement is subject to change and chiropractors are directed to stay up to date with the directives of the NLCB and DHCS/CMOH. Chiropractors are reminded that employers may also set requirements for return to work, so long as those requirements are not less stringent than those established by the NLCB or the DHCS/CMOH.

All workplaces must develop a workplace illness policy. A link to a reference guide is included in the resource page at the end of this document.

Chiropractors are required to call the 811 HealthLine to receive guidance if they are aware of a patient who has visited their clinic in the last 14 days and is now testing (or has tested) positive for COVID-19.



Table 1. Standard Infection Prevention/Control Measures

	Action	When
Patients	Sanitize or wash hands	<ul style="list-style-type: none"> <li>• Upon entering the clinic</li> <li>• Upon entering a treatment room</li> </ul>
		<p>Before and after use of weights, exercise equipment or similar shared equipment</p> <p>Prior to processing payment</p> <ul style="list-style-type: none"> <li>•</li> <li>•</li> </ul>
Administrative employees (not involved in patient care)	Sanitize or wash hands	<ul style="list-style-type: none"> <li>• Upon entering the clinic</li> <li>• Upon completion of a payment or other patient transaction</li> <li>•</li> </ul>



**Practitioners and employees supporting patient care**

Sanitize or wash hands

- Upon entering the clinic
- Before and after donning and doffing PPE
- Before and after each patient encounter
- Upon entering a treatment room
- Upon exiting a treatment room
- After contact with patient belongings
- Before and after handling laundry
- After cleaning and/or disinfecting patient contact surfaces
- Before preparing patient contact services

*\*Hand sanitizing units should be installed at the clinic entrance, treatment room entrances and at the reception desk.*

	Action(s)	Frequency
<b>Chiropractic table head piece and thoracic piece</b>	Use single use paper on both pieces to shield patient's face	During every patient encounter
	Clean and disinfect head and thoracic pieces, following product guidelines on contact time to achieve proper disinfection	After every patient encounter
<b>Face cushion (high risk due to proximity of patient's mouth while in prone position)</b>	Clean and disinfect face cushion, following product guidelines on contact time to achieve proper disinfection	After every patient encounter



<b>Chiropractic table hand pieces</b>	Clean and disinfect hand pieces, following product guidelines on contact time to achieve proper disinfection	After every patient encounter
<b>Chiropractic table lumbar and pelvic pieces</b>	Clean and disinfect lumbar and pelvic pieces following product guidelines to achieve proper disinfection	<ul style="list-style-type: none"> <li>• After every patient encounter</li> </ul>
<b>Central metal paper depressor bar (high risk of contaminating clean face paper)</b>	<ul style="list-style-type: none"> <li>• Advise not using this central bar at all for headrest paper.</li> <li>• If used, clean and disinfect bar, following product guidelines on contact time to achieve proper disinfection</li> <li>•</li> </ul>	After every patient encounter, before new paper is pulled through
<b>Therapeutic tools and devices (e.g. instruments used for soft tissue mobilization, handheld manipulation tools, lasers, shockwave, etc.)</b>	Clean and disinfect, following product guidelines on contact time to achieve proper cleaning and disinfection	After every patient encounter
<b>Surfaces that contact mucous membranes. This may include but is not limited to diagnostic equipment such as otoscopes, or ophthalmoscopes.</b>	Clean and disinfect, following product guidelines on contact time to achieve proper cleaning and disinfection	<ul style="list-style-type: none"> <li>• After every patient encounter</li> </ul>
<b>Therapeutic surfaces (e.g. exercise mats, therapy equipment such as weights, balls, etc.)</b>	Clean and disinfect, following product guidelines on contact time to achieve proper cleaning and disinfection	After every patient encounter

## Resources

### General

- <https://www.gov.nl.ca/covid-19/>

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## Hand hygiene

- Health Canada – [Authorized list of hard-surface disinfectants and hand sanitizers](#)

## Environmental cleaning and disinfection

- Health Canada – [Authorized list of hard-surface disinfectants and hand sanitizers](#)
- [An investigation of bacterial contamination on treatment table surfaces of chiropractors in private practice and attitudes and practices concerning table disinfection](#)

## Personal Protective Equipment

- <https://www.gov.nl.ca/covid-19/files/Guidance-on-Personal-Protective-Equipment-PPE-for-Employers.pdf>

## Exclusion or work restrictions during staff or chiropractor illness

- <https://www.gov.nl.ca/covid-19/files/Guidance-for-Workplaces.pdf>