

RETURN TO WORK GUIDELINES FOR OPTOMETRISTS IN NOVA SCOTIA

June 22, 2020 UPDATE

The Nova Scotia Association of Optometrists (NSAO) and the Nova Scotia College of Optometrists (NSCO) recognizes that each member will need to review their internal policies and operations to implement a safe and effective return to work plan. Plans should include patient and staff management, physical distancing, training on the proper use of PPE, and implementation of proper infection control protocols. Processes during and following a pandemic are fluid and members must be vigilant in staying current with health-related updates and government orders.

Providing optometric care occasionally requires examination of the patient within a very close range. This places optometrists, staff and patients at higher risk for transmission of the COVID-19 virus.

Optometrists, staff and patients must maintain appropriate physical distancing of 2m (6 ft) between everyone in the clinic, and for any specific procedures where physical distance cannot be maintained, staff and optometrists must wear appropriate PPE.

Adhering to strict disinfection and infection control protocols is mandatory.

PRE-APPOINTMENT SCREENING:

- Patient/Staff Screening: In terms of pre-visit screening the appropriate protocol is to 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. The same process should be in place for staff who feel unwell.
- Optometrists should not see any patients in office who do not pass the screening criteria. Any patient who does not pass screening criteria and has an urgent/emergent eye issue should be directed to the nearest available ophthalmologist, or other health care provider equipped to handle these cases.
- Staff and optometrists who do not pass the screening should be directed to return home and call 811 for instructions on testing and follow appropriate self-isolation/quarantine processes.
- Any patient deemed as being symptomatic should be instructed to call 811 for further instruction.

- Signage indicating screening criteria must be placed in a location that is visible before entering the building.
- Patient flow into optometry clinics must be controlled (consider locking doors and/or having staff control entry/exit to limit capacity and control exterior spacing line ups, or having the patient wait in their car for a phone call when it's their turn).

WORK ENVIRONMENT:

- ***Staff/Optometrists***
 - ⇒ Staff/optometrists must wash or sanitize hands immediately upon entry to the clinic.
 - ⇒ Optometrists and staff must wash or sanitize hands immediately before and after each patient examination, each testing procedure, and any dispensing encounter.
 - ⇒ Avoid sharing workstations wherever possible.
 - ⇒ Stagger break times to limit overcrowding in staff areas.
 - ⇒ Increase space between staff /optometrists and patients when possible.
 - ⇒ Be aware of common touch points in your clinic and disinfect them regularly (doorknobs, counters, keyboards, phones, POS, pens, patient and staff washrooms, faucets, etc.).
- Any objects touched by a patient must be disinfected immediately after use.
- Attempt to use the “tap option” for payment on debit/credit transactions. If this is not available, the machine must be sanitized between each use.
 - ⇒ Consider adding plexiglass/acrylic partitions to reception and dispensing desks.
 - ⇒ Consider marking the floor in staff workstations to ensure appropriate spacing between staff.
 - ⇒ Consider staffing in “teams” to minimize interaction between staff members.
 - ⇒ Optometrists and staff should wear attire that can easily be washed and/or removed if contamination occurs (some may prefer scrubs for ease of use).
- Ensure all external service providers and suppliers adhere to provincial COVID-19 health and safety requirements when entering your office. Implement strategies to maintain physical distancing and hygiene practices.
- Optometrists and staff must change their clothing and head coverings daily. Best practices include removing work clothing before entering into your home living areas and washing work clothing daily/before being worn again.
 - ⇒ Avoid wearing jewelry, scarves, or other loose-fitting items and consider tying up long hair.

- ***Waste Management:***

All wastepaper bins/garbage receptacles must contain garbage bags. It is strongly recommended that the waste bins/receptacles used have a lid and foot pedal. At the end of the working day, all bins must be emptied and placed outside in a proper garbage receptacle. Staff/therapist must thoroughly wash their hands after completing this task.

- ***Patients***

⇒ Patient volumes must be managed to maintain appropriate physical distancing and minimize wait times.

⇒ A ledger, including the names of all individuals entering the clinic, should be maintained.

⇒ Patients must wash or sanitize hands immediately upon entry to the clinic.

⇒ Patients are recommended to wear a mask or cloth face covering from the time they enter until the time they leave the building.

⇒ Arrange seating in patient areas to provide a minimum of 2m between chairs.

⇒ Remove magazines, toys and other peripheral items from waiting areas and exam rooms.

⇒ Ask patients to leave unnecessary items in their car or at home.

⇒ Ask patients to come in alone unless another person is necessary (e.g. parent of child, mobility aide, translator).

⇒ In order to minimize the amount of time spent in office, optometrists and staff should try to update as much information as possible prior to the appointment (e.g. insurance or third party coverage information, address/phone # changes, patient ocular and medical history).

PERSONAL PROTECTIVE EQUIPMENT (PPE):

- Masks (medical or surgical,) must be worn at any time that physical distancing from others cannot be maintained. One mask may be used for an entire work shift. The NSCO/NSAO recognizes KN95 or N95 masks are in short supply. The Nova Scotia Medical Officer of Health advises that for the purpose of these guidelines KN95 and N95 are unnecessary and should not be used in an optometry setting.

- Eye protection may be worn (goggles, full coverage safety glasses or face shield) at any time that physical distancing and physical barriers (for example, plexiglass barriers) from others cannot be maintained.

- Single use latex or nitrile gloves may be used, once only, in a single patient encounter. If not using gloves, hands must be washed or sanitized immediately before and after any patient encounter.
- Optometrists and staff must be educated on proper techniques for donning and doffing PPE.

CONSIDERATIONS FOR SPECIFIC PROCEDURES:

- During procedures that physical distancing cannot be maintained, the patient should be instructed not to speak, and the staff/optometrist should make every attempt to provide verbal instruction prior to beginning the procedure.

Pretesting/auxiliary testing

⇒ Staff and doctors must wear appropriate PPE throughout all patient encounters.

⇒ All equipment must be disinfected after each use.

- Auxiliary testing equipment (slit lamp biomicroscopes, etc.) should have breath shields attached to prevent possible transmission by breathing, coughing, or sneezing.
- Tonometry procedures have a very low risk of virus transmission and can continue to be performed. Proper disinfection must occur after each use. Optometrists should use their clinical judgement and evolving clinical evidence when deciding the method of IOP measurement. If the risks outweigh the benefits in obtaining an IOP, it should be deferred until it is safer to do so.
 - ⇒ Visual field testing can resume provided that patients wear a mask and the staff member or optometrist wears appropriate PPE and limits the amount of time spent near the patient as much as possible. Physical distancing and infection precautions should be maintained. It would be recommended to use tape on the top of the patient's mask in an attempt to prevent fogging of the trial lenses in the machine. Perimetry cleaning instructions are available here: https://mcusercontent.com/3823d4d7fbb829009d81dc095/files/76c9ffe7-d13b-4ad3-8213-184dcde34c8d/hfa_covid_guidance.pdf
 - ⇒ Any additional machines used for ancillary testing must be sanitized after every use. If a machine cannot be effectively sanitized, it should only be used with extreme care and caution on an as needed basis.
- Single use diagnostic drops should be utilized when possible. If multi-drop containers are used, the container must be discarded if it comes into contact with the patient's eyelid, eyelashes, facial skin or tears.
- Taking a patient's temperature, using a non-contact device, is at the discretion of the optometrist.

Glasses dispensing

- ⇒ New glasses may be fitted, observing proper use of PPE during the encounter.
- ⇒ Frames must be washed using warm, soapy water, or cleaned with disinfectant immediately after contact by each patient, before being placed back on display.
- All staff involved in the dispensing of glasses must clean or sanitize their hands before and after every patient encounter.
 - ⇒ Efficiency in frame and lens selection is strongly encouraged to minimize the length of time of the encounter.
 - ⇒ Adjustments and repairs may be made to a patient's personal frames
- Frames should be washed in warm, soapy water, or cleaned with disinfectant prior to making the adjustment/repair and tools must be sanitized after use (hands must be washed/sanitized, or gloves donned/doffed immediately before and after handling the patient's glasses).
 - ⇒ Consider mounting plastic shields on pupilometers and using a ruler or other automated measuring device to maintain extra distance whenever possible.
 - ⇒ Consider booking appointments for dispensing glasses and repairs.

Contact lens training

⇒ Contact lens trainings/new CL fittings can be performed provided that proper PPE is worn and physical barriers between the trainer and patient are used (for example, plexiglass barriers). Use of technology like CL training videos may also reduce risk by reducing the exposure time between the CL trainer and patient. Patients must handle their own contact lenses and staff must handle their own trial disposable lens when demonstrating proper contact lens insertion, removal, care and handling. Staff should not touch a patient's face or eyelids during the instruction session. Contact lenses handled by staff should be discarded immediately following each contact lens instruction session.

DISINFECTION/SANITIZATION FOR OPTOMETRY SPECIFIC DEVICES:

- Tonometry
 - ⇒ Applanation probes must be disinfected by soaking in 3% hydrogen peroxide for 10 minutes followed by a rinse with saline afterwards.
 - ⇒ iCare probes and tonopen covers must be disposed after use on each patient.
- Hand-Held Lenses (90D, Super Field, 20D, etc.)

⇒ Must be sanitized or cleaned with warm soap and water after each patient. Any Lenses which are not being used should be stored in a closed drawer.

- Gonio lens

⇒ Must be washed in soap and water and the ocular contact zone must be soaked in 3% hydrogen peroxide, 70% alcohol or a 10% bleach solution for 10 minutes.

VIRTUAL CARE:

- Optometrists are encouraged to continue providing virtual care (telephone/video consultations) if possible, to minimize the number of in-person visits, especially for more vulnerable patients.

RESOURCES:

Donning and doffing PPE:

- Alberta Health video (more detail, shows common mistakes):
https://ahamms01.https.internapcdn.net/ahamms01/Content/AHS_Website/Information_For/if-hp-ipc-donning-and-doffing.mp4
- Donning: <https://www.youtube.com/watch?v=B5ew8020fwc&feature=youtu.be>
- Doffing: <https://www.youtube.com/watch?v=Lly8DjGcvDM&feature=youtu.be>
- French: https://youtu.be/M_yJBBobclk

Provincial COVID-19 resources:

<https://novascotia.ca/coronavirus/>