MEMO

DATE: 5/11/2020
TO: Community and Family Physicians
FROM: Dr. Kathy Lawrence, Provincial Head Family Medicine
RE: Guidelines for Expanding Services in Community Clinics

Last week, the Government of Saskatchewan announced a Re-Open Saskatchewan Plan, beginning on May 4, 2020. The plan is built on a methodical and phased-in approach to slowly and responsibly lift restrictions on businesses and services. Below is a list of guidelines for Community and Family Physicians during the first phase of re-opening.

General

- **Medical Professionals Guidelines**: All medical services providers must continue to take measures as outlined by the Chief Medical Health Officer to promote physical distancing where possible and, where not, to use appropriate personal protective equipment (PPE). Specific Medical Professional Guidelines can be found on pages 24-25 in the downloadable Re-Open Saskatchewan Plan located on this page.

- **Personal Protective Equipment**: There are protocols for donning, doffing and disposing of PPE. Information on appropriate use can be found here. Watch a video for a PPE four-step removal process. Physicians unable to source PPE through their usual means can order appropriate PPE through Schaan Healthcare Products.

- **Continuous Masking and Screening**: While the SHA’s continuous masking and screening policies are not mandated for private physician offices, these policies have been developed to protect physicians, staff and patients and should be implemented in community offices. All healthcare providers should maintain physical distancing or wear appropriate PPE.

- **Virtual Care**: Virtual care through telephone or video consultation should remain the first choice to protect physicians, staff and patients unless an in-person visit is deemed essential for care. Learn more

- **Self-Monitoring**: All physicians and staff must self-monitor for symptoms. Use the self-assessment tool at www.saskatchewan.ca/COVID19. Learn more about Daily Fitness for Work Screening.

- **Patient Considerations, Clinic Considerations, Cleaning and Disinfection, Worker Health/Preventative Measures, Resources**: See below.

Patient Considerations

Patient Bookings

- Workplaces are exempt from the restriction on indoor and outdoor gatherings of 10 or more people. However,
two-metre distancing between individuals should still be maintained. Initial patient bookings will need to be limited to maintain necessary public health measures but may need to be prioritized by urgency.

- Consideration should be given to planning an initial virtual care visit with patients prior to an in-person visit. This will ensure that patients are only seen in-person for the portion of their care that requires direct assessment, appropriate planning for in-person visits and compliance with public health orders.
- Physician offices that have lab, diagnostic and ancillary services within their clinic should consider pre-booked appointments and other measures to maintain public health requirements for physical distancing.
- All patients should be screened at the time of their appointment booking and upon arrival for symptoms consistent with COVID. At the time of booking or in advance of an appointment, patients should be informed that they will be screened.
- Patients who screen positive should be referred for testing. [Testing Sites – How to Refer](#)
- Patients who screen positive at time of booking should be seen virtually (telephone or video). When a physical examination is required they should be redirected based on the severity of their symptoms to the ER or Assessment and Treatment Sites. [Assessment and Treatment Sites – How to Refer](#)
- If patients must attend with children or other family members, those individuals must be included in the maximum number of people allowed in the area. Should scheduling errors result in more than 10 people, alternate waiting areas should be planned.

### Patient Arrivals/Waiting Area

- Alternate solutions to waiting in the office should be considered, such as asking people to wait in vehicles and texting or calling their appointments are ready.
- Seats in waiting areas must be spaced to maintain a minimum physical distance of two metres. Household contacts are not required to sit separately.
- Visual cues for areas where patients/clients are required to queue should be marked and a directional flow through the facility established.
- Non-essential items should be removed from client waiting areas, including magazines, toys and remote controls.
- Common areas and other high-touch surfaces and objects should be cleaned and disinfected after each use, including reception counters, seating areas (including clinic room seats), doors, handrails, and objects or machines used in therapies.
- Commonly touched areas and shared equipment must be cleaned and disinfected at least twice daily or when visibly soiled. These include light switches, door handles, toilets, taps, handrails, countertops, mobile devices and keyboards.

### Clinical Considerations

- Consider reviewing your patient panel and care plans to identify people that should pro-actively be contacted to review their chronic disease care.
- Consider whether there are patients in your practice who are behind on preventive care and should have a visit to discuss.
- Take the opportunity to do med reviews on your patients (particularly as prescription renewals come in) and arrange virtual appointments to discuss any appropriate changes.
- Review your patients’ summary regarding end-of-life planning and offer to arrange a virtual appointment to discuss.
- Limit the exchange of papers. If documents must be exchanged, leave them on a clean surface while maintaining a two-metre distance. Avoid sharing pens and office equipment. Disinfect after each use.
- Many Primary Health Care Services have continued but in different formats. As the SHA moves toward resumption of services, more information on expansion of these activities will become available.
- The SHA will provide updates as lab and imaging services become more available. Consider whether a lab assessment can be safely delayed or if it requires necessary investigation. This is in consideration of the ongoing need to preserve capacity and resources in the lab. There are limitations in availability for imaging throughout the province. [Update to Laboratory Patient Result Reporting / Testing, Screening and Medical Directives](#)
Cleaning and Disinfection

- The COVID-19 virus can survive for several days on different surfaces. Frequent cleaning and disinfection is necessary.
- Assign staff to dedicated work areas as much as possible. Discourage them from sharing phones, desks, offices and other tools and equipment.
- Clothing and fabric items should be laundered and dried on the highest temperature setting possible. Ensure items are thoroughly dried.
- Employees should be provided access to tissues, no-touch trash receptacles, hand soap, alcohol-based hand sanitizers approved by Health Canada (DIN or NPN number), disinfectants and disposable towels.
- Hand sanitizers should be approved by Health Canada (DIN or NPN number) to ensure they are effective.
- For information on what you need to know and do to prevent the spread of COVID-19, click here.
- For information on infection prevention and control, click here.
- For Health Canada information on hard surface disinfectants and hand sanitizers, click here.

Worker Health/Preventative Measures

- Employers should have plans in place for increased worker absences due to illness or isolation.
- All businesses must have a workplace illness policy. If a policy does not currently exist or does not align with COVID-19 recommendations, the following should be included:
  - Sick employees must stay home or be sent home from work.
  - For employees housed in workplace accommodations (i.e. work camps), sick employees must be confined to their rooms until cleared for re-entry into the workforce.
  - Sick employees must use the Government of Saskatchewan’s self-assessment tool for COVID-19 and follow the subsequent directions.
  - When employees go home sick, their work areas must be cleaned and disinfected.

Resources

- Clinical Practice Resources
- Canadian Family Physician Choosing Wisely Canada Series
- College of Medicine Continuing Medical Education
- British Columbia College of Family Physicians
- ASCCP Interim Guidance for Timing and Treatment Procedures for Patients with Abnormal Cervical Screening Tests