

Providing In-person Community Care in British Columbia During COVID-19

Guidance to enable registrants to begin to safely resume providing in-person community care for patients in British Columbia is now available.

Thank you for your patience as we awaited further direction from the Provincial Health Officer. That direction arrived, and we are pleased to share it with you so that you can begin to plan how to safely resume in-person services.

This guidance has been developed by the Provincial Health Officer, the Ministry of Health, the BC Centre for Disease Control and WorkSafeBC in collaboration with BC Health Regulators including the College of Dental Hygienists of BC.

With BC now in a position to ease restrictions on health care services [in line with BC's Restart Plan](#), registrants can begin to resume in-person practice in a way that promotes safe care to patients and, continues to prevent the spread of the virus. As this new normal is being defined, registrants will have to adjust how they deliver care, conduct business, and attend to physical environments to ensure best infection and prevention control practices.

Guidance

The situation regarding COVID-19 will continue to evolve over the coming weeks and months. The guidance provided reflects the best evidence available at this time and it will change as required to reflect updates in our understanding of COVID-19 and its transmission.

Resources that are linked to in the guidance are also subject to change. This means registrants need to be prepared for updates and closely watch for communications from the CDHBC as well as updated guidance from the Provincial Health Officer, BC Centre for Disease Control and WorkSafeBC.

- [COVID-19: Important Update from the Provincial Health Officer](#)
- [Guidance on Infection Prevention and Control for Health Care Providers in Community Care \(BC Centre for Disease Control\)](#)
- Personal Protective Equipment (BC Centre for Disease Control)
Updates expected following May 19, 2020
- [Health professionals: Protocols for returning to operation \(WorkSafeBC\)](#)

Registrants should review all guidance material and carefully consider how to adjust their community practice to ensure the health and safety of their patients and clients, colleagues, and support staff. While in-person services may resume on May 19, 2020 there is no requirement to re-open by this date, and registrants must ensure they can practice safely, in line with this guidance before resuming in-person community care services.

Registrants should regularly check the College website – particularly the COVID-19 page – for updates.

Thank you to all registrants for your patience and collaboration as we respond to this pandemic. We are in this together, and the CDHBC will continue to support you in providing the best patient care possible in these challenging times.

Providing in-person community care during COVID-19 Guidance for regulated health-care providers

Date: May 15, 2020

The following guidance has been developed collaboratively by BC Health Regulators with expertise and direction provided by the provincial health officer (PHO), the BC Centre for Disease Control (BCCDC) and WorkSafeBC. It is intended for all registrants in community practice. It is applicable for the duration of the COVID-19 pandemic.

Note: This guidance reflects the best evidence available at this time and it will change as required to reflect updates in our understanding of the virus and its transmission.

Overview

During COVID-19, registrants of the College of Dental Hygienists of BC (College) were directed to refrain from providing in-person non-essential care.

With recent announcements from Premier John Horgan and Dr. Bonnie Henry, registrants can begin to resume in-person practice in a way that promotes safe care to patients and, continues to prevent the spread of the virus. As this new normal is being defined, registrants will have to adjust how they deliver care, conduct business, and attend to physical environments to ensure best infection and prevention control practices. In some cases, the ongoing use of digital technology to provide virtual care may still be a very good option.

This guidance to registrants will assist in determining which services are reasonable to resume in the coming weeks remembering that the goal is to gradually resume services from where we are today to levels of in-person care that support physical distancing of 40%-50% in community practice. The College recognizes that registrants would like very clear and specific direction on what is considered **reasonable**; however, it is not possible to address all scenarios.

As professionals, the College expects registrants to collaborate with colleagues in similar practices when making these decisions and to use professional judgement to determine what is in the patient's interest. The BCCDC has developed interim guidance for registrants who work in outpatient and ambulatory care settings which has been approved by the Provincial Health Officer. The College expects registrants to read this guidance and follow the expectations for infection prevention and control as they resume work in community settings.

BC Centre for Disease Control: *Infection Prevention and Control for COVID-19: Interim Guidance for Outpatient and Ambulatory Care Settings*. At the time this document was published the BCCDC document was not yet available. When it becomes available, the College will notify registrants and update the appropriate documents.

The College encourages all registrants to take the time required to review all guidance documents and make the necessary adjustments to community practice to ensure safe practice. While in-person services may resume on May 19th there is no requirement to re-open by this date.

Guiding principles and assumptions

The following guiding principles and assumptions have been identified as foundational for reintroducing health-care services in the context of COVID-19:

- All registrants will follow the guidance, expectations, and direction provided by the PHO.
- Registrants employed by hospitals, health authorities, and long-term care facilities should refer to guidance provided by their employers and the PHO.
- The direction in this document pertains to the delivery of care outside of these settings. These include, but are not limited to, private practice clinics, private mobile or community-based practices, and school-based practices.
- Some services can be safely and effectively provided virtually. Other services require in-person visits including direct patient care. College standards apply, regardless of whether services are provided virtually or in-person.
- Wherever possible, physical distancing will be maintained during the delivery of care.
- In-person services must only proceed when the anticipated benefits of such services outweigh the risks to the patient and the health care provided.
- The registrant is accountable and is the person best positioned to determine the need for, urgency and appropriateness of in-person services.
- Appropriate personal protective equipment (PPE) must be used for the safe delivery of in-person services; however, all registrants must also act to conserve PPE through its judicious use.
- Registrants must consider if they are the most appropriate health-care provider to address the patient's needs, referring patients to other members of the health-care team when in the patient's interest.
- Registrants must not recommend unproven therapies for treating COVID-19.
- Registrants must not prescribe or offer any COVID-19 treatments or therapies if infectious diseases if not within their scope of practice.
- Registrants are accountable to provide clear, honest, transparent communication regarding their policies and procedures related to COVID-19.

Prioritization of patient care services

When services resume registrants may face difficult decisions regarding which patients to see and the prioritization of service provision. The registrant is accountable for prioritizing access to in-person services based on clinical judgment and with consideration given to the patient perspective and the referral source.

When determining priority for in-person care, registrants should reflect upon the following considerations:

- acuity of the patient's condition
- functional impairment or impact of the condition on health-related quality of life
- the impact of not receiving services
- appropriateness of service provision via virtual care
- necessity of services which can **only** be provided in-person
- duration of patient wait-times for care

Ongoing pandemic best practices

Public health officials have indicated that COVID-19 is expected to continue to circulate in the general population for an extended period. As such, ongoing measures to control the spread of the disease are anticipated, including requirements to practise physical distancing of at least two metres (six feet) and increased screening for signs, symptoms and risk factors for COVID-19.

1. First and foremost, registrants must adhere to the BCCDC's *Infection Prevention and Control for COVID-19: Interim Guidance for Outpatient and Ambulatory Care Settings* regarding IPC measures applicable to the practice environment, including PPE use and environmental cleaning best practices to enable safe practice.
2. Adherence to all BCCDC and WorkSafeBC guidance regarding occupational health and safety exposure control plans is also required to ensure a safe work environment for staff. This includes robust policies, procedures and organizational cultures that ensure that no one (employees or contractors) associated with the practice attend work when they have symptoms of illness.
3. Registrants are reminded that if they are exhibiting signs of COVID-19 or respiratory illness, including cough, runny nose or fever, they **must not** provide in-person care and should not be in attendance at clinics or other practice settings where other staff and patients are present.
4. Registrants must follow BCCDC and WorkSafeBC guidance for self-isolation when an employee is sick with any respiratory illness, support access to primary care provider assessment and testing, and provide sick-leave support where possible until symptoms have resolved and it is safe to return to work.
5. Registrants must implement COVID-19 screening practices for patients:
 - Patients should also be encouraged to make use of COVID-19 resources by calling 811 or visiting healthlinkbc.ca.
 - Screen for risk factors and symptoms of COVID-19 prior to attendance at the practice environment.
6. If patient screening reveals the patient may be at risk of COVID-19, registrants should refer the patient to a COVID-19 testing centre and defer treatment until signs and symptoms have resolved.
7. The College does not expect any registrant to provide treatment unless, in their professional opinion, it is safe to do so for both patients and staff.

Personal protective equipment

Recommendations regarding use of PPE in the practice environment should follow the directives and recommendations provided by BCCDC and WorkSafeBC. BCCDC has general PPE information found at [PPE](#) which should be updated next week. Please check the BCCDC site regularly for any updates.

Resources

Practice standards and guidelines

- [CDHBC Practice Standards](#)
- [CDHBC IPAC Guidelines](#)

BCCDC

[*Infection Prevention and Control for COVID-19: Interim Guidance for Outpatient and Ambulatory Care Settings*](#)

[BCCDC Clinical Resources for Health Professionals](#)

WorkSafeBC

[Guidelines for Health Professionals](#)