



CRITERIA FOR RE-OPENING
DURING COVID-19 (2020)

NOVA SCOTIA ASSOCIATION OF OSTEOPATHS
UNDER THE DIRECTION OF THE NOVA SCOTIA
DEPARTMENT OF HEALTH AND WELLNESS
AND
NOVA SCOTIA PUBLIC HEALTH
EFFECTIVE: June 2, 2020

INTRODUCTION:

The Nova Scotia Association of Osteopaths (NSAO) was established in 2006. Founded by a group of students studying manual osteopathy for continuing education who were dedicated to forming an association to promote manual osteopathy, create governance and to pursue government regulation in Nova Scotia. Initially called the Atlantic Canadian Association of Osteopaths representing primarily students, it became NSAO in 2007 to reflect the makeup of the membership being manual osteopaths who had completed their studies, who were living and working in Nova Scotia. NSAO is a provincial member of the Canadian Federation of Osteopaths (CFO) whose goal is to promote a standardized message about manual osteopathy in Canada. NSAO members are affiliate members of the Ontario Association of Osteopathic Manual Practitioners (OAO) or Ontario Osteopathy Association (OOA) for insurance billing. Members of NSAO are not Osteopathic Physicians nor would they claim to practice Medicine or qualify for membership in the College of Physicians and Surgeons of Nova Scotia (CPSNS). Our members have trained at schools that meet the Criteria for World Health Organization (WHO) Benchmarks for Osteopathic Training.

<https://www.who.int/medicines/areas/traditional/BenchmarksforTraininginOsteopathy.pdf>

We have Type One (full time programs) most often foreign trained members and Type Two (part time programs) who were already credentialed for example as Physiotherapists, Athletic Practitioners, Nurses and Massage Therapists and chose manual osteopathy to enhance their existing practices. Graduates of programs who do not meet the criteria set out by the WHO would not be able to obtain membership in our Association. Physician trained Osteopaths would pursue membership in the CPSNS. Requirements for membership are available upon request.

At present there are 74 members on our registry, with 7 recent graduates as potential members. On or before March 22, 2020, all of our members closed their clinics and to the best of our knowledge all members remain closed.

THE RE-OPENING OF NOVA SCOTIA:

This document was prepared by the NSAO to assist its members in re-opening their practice, at the request of the Nova Scotia Department of Health and Wellness (including Public Health) and with the guidance from the Department of Labour and Advanced Education. However, each member's practice is different, and the NSAO cannot anticipate all circumstances, which may arise. The NSAO is not responsible for how members choose to act on the information contained in this document and hereby disclaims any liability. Members are responsible for implementing these criteria, for understanding their legal obligations and ensuring that their own practices are compliant, and for preparing any consent forms, checklists, policies, or other documents that they choose to use. Members are strongly encouraged to review this document in the context of their particular practice, and to consult their legal advisors or government regulators where they require further guidance or assistance. Relevant links have been provided throughout the document as resources. When preparing your own documents for re-opening, we urge all members to refer to the document titled: Re-opening Guidance for Health Care Services Settings Updated Guidance- Prepared May 27, 2020.

<https://novascotia.ca/dhw/cdpc/documents/Re-opening-Guidance-HCP.pdf>

In addition, this document is current as of June 2, 2020. Regulations and public health guidance are regularly changing as we are learning more about the impacts of COVID-19 every day. NSAO Members are ultimately responsible for their own practices and should regularly check for updated regulatory requirements, public health guidance, and health care best practices.

In re-opening your practice and creating individualized documents and protocols, it is important to mitigate the risk of spreading COVID-19 and protect the health and safety of the public. The following provincial website offers some tips and advice for re-opening:

<https://novascotia.ca/reopening-nova-scotia/>

In preparing this document, we were guided by the following principles:

- We are balancing risk mitigation and the need to earn our living. There are unknowns about COVID-19 and there are unknowns with regards to our financial stability and what further aid may or may not be available.
- We want to keep our clients, our staff and ourselves safe, while meeting our obligations to Nova Scotia Public Health.
- We will be guided by The Nova Scotia Department of Health and Wellness and Nova Scotia Public Health. Each member will be required to stay current and be informed about the most recent public health criteria as we go forward until such time as COVID-19 is no longer a threat. No clinic will open until such time as permitted by the Chief Medical Officer of Health for Nova Scotia.

Resources:

State of Emergency Act; Health Protection Act; Police Act Order:

<https://novascotia.ca/coronavirus/alerts-notices/#provincial-state-emergency>

Nova Scotia Covid-19: <https://novascotia.ca/coronavirus/>

Canada.ca/coronavirus: <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/public-health-measures-mitigate-covid-19.html>

REQUIREMENTS FOR RETURN TO PRACTICE FOR MEMBERS OF THE NOVA SCOTIA ASSOCIATION OF OSTEOPATHS:

- As part of their membership in the NSAO, members are “required” to use these criteria for re-opening as approved by the Nova Scotia Department of Health and Wellness as of June 2, 2020, unless they are noted as “recommended”, in which case members are strongly encouraged to follow them.
- These Criteria for Re-Opening have been reviewed and approved by the Office of the Chief Medical Officer for Nova Scotia and will remain in effect until further notification.
- An accurate log or registry must be kept should contact tracing be required: if contacted, clinics would have to cooperate with the Department of Public Health.

REQUIREMENTS FOR RE-OPENING IN NOVA SCOTIA:

The criteria below will help you minimize the risk of transmission of COVID-19. Members’ circumstances, professional judgement and personal choices will determine whether it is necessary to implement any other measures above and beyond these criteria. Trust between the practitioner and the client is imperative to re-opening your manual osteopathy practice. Trust, honesty, clear communication, well-informed explanations and informed consent will help create an environment that optimizes workplace safety.

1. Screening of Clients, Staff and Self

Pre-visit screening of clients (guardians or assistants) (24 - 72 hours before appointment)

- These criteria apply to all member clinics, including those using online booking. Members may need to adjust online booking procedures to address these criteria.
- 24-72 hours before their appointment, contact clients to conduct pre-screening for COVID-19 symptoms. Cancel appointments for any clients reporting COVID-19 symptoms and recommend following the guidelines as per Nova Scotia Public Health.

- Pre-visit screening of clients, when they make an appointment, by advising them that they cannot attend if they are feeling unwell the day of the appointment. The client should also be advised to use the 811 on-line self-assessment tool if they are unwell.
- When a client wishes to book an appointment, he/she/they should be asked the following questions:
 - Have you tested positive for COVID-19 that you have not fully recovered from?
 - Are you experiencing any of the following symptoms? *(Not related to a previously documented health concern)
 - <https://novascotia.ca/coronavirus/when-to-seek-help>
 - a. fever (i.e. chills, sweats)
 - b. cough or worsening of a previous cough
 - c. sore throat
 - d. headache
 - e. shortness of breath*
 - f. muscle aches
 - g. sneezing
 - h. nasal congestion/runny nose
 - i. hoarse voice
 - j. diarrhea
 - k. unusual fatigue
 - l. loss of sense of smell or taste
 - m. red, purple or blueish lesions on the feet, toes, or fingers without clear cause
 - Have you travelled outside of Nova Scotia within the last 14 days?
 - Have you had unprotected close contact with individuals who have a confirmed or presumptive diagnosis of COVID-19 (e.g. individuals exposed without appropriate PPE in use)?

If the client answers yes to any of the above questions or if they become symptomatic at any point prior to their scheduled appointment, ask them to postpone their treatment until they are well and symptom free. They should be advised to use the 811 on-line self-assessment, if they are unwell the day of the appointment <https://811.novascotia.ca>. If they are not told they need to be tested for COVID-19, they can reschedule the appointment.

This list of questions and symptoms, for COVID-19, was current as of May 22, 2020. It is subject to change and must be updated as changes occur.

- Display relevant signage indicating screening criteria should be posted in a location that is visible before entering the clinic.
- Inform clients about any new clinic procedures they will be required to follow, before or at the time they book.
- Post relevant, up to date information regarding COVID-19, consistently in advertising material and social media.

- Explain that informed consent specific to receiving treatment during the COVID-19 pandemic will be required, which will include explanations about physical distancing not being possible during treatment, that modified treatments may be used, and explain risks associated with COVID-19 vs benefits of treatment.
- Advise clients that they are required to wear a clean Non-Medical Mask to their appointment
- If a client's health status puts them at greater risk, be cautious, discuss options and alternatives to treatment, including postponement of treatment. As in all cases, treatment benefit must outweigh risk.
- Inform the client that should a client's symptoms change since the pre-screening, the client is required to contact the clinic to inform the clinic regarding such changes.
- Document pre-screening communication and retain records in accordance with normal procedures for safeguarding personal health information.

Screening clients (guardians or assistants) (upon arrival)

- At the earliest opportunity upon client arrival, confirm that there have been no changes to symptom status since the pre-screening by conducting the Nova Scotia COVID-19 symptom self-assessment (see previous pages for list of symptoms and questions as of May 22, 2020).
- If a client arrives exhibiting COVID-19 symptoms, record symptom self-assessment results in their chart and follow appropriate guidelines according to the Nova Scotia Public Health.
- Clients who have fully recovered from COVID-19 who may benefit from treatment can attend appointments if cleared by Nova Scotia Public Health. They must follow relevant Nova Scotia Public Health guidelines.
- Obtain and document informed client consent to treatment in the context of COVID-19 at the start of each session.
- An accurate log or 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.

Screening staff and self

- Ensure practitioners and staff have a complete understanding of the new screening procedures, including their symptom assessment results daily, why they have been implemented and apply them consistently.
- Practitioners and staff must use the Nova Scotia COVID-19 symptom self-assessment tool before arrival at work, they must not come to work if they have COVID-19 symptoms, they must notify their workplace and must follow the appropriate guidelines according to Nova Scotia Public Health (see previous pages for list of symptoms and questions as of May 22, 2020).

- Practitioners and staff must record daily, the results of the Nova Scotia COVID-19 symptom self-assessment tool on a designated log or registry. Their screening results must be kept while this directive remains in place.
- Employers should consider the privacy rights of their staff, and only collect the minimum amount of information required to meet their obligation to provide a safe workplace and protect their clients.
- Practitioners and staff who have fully recovered from COVID 19 can return to work if cleared by Nova Scotia Public Health. They must follow relevant Nova Scotia Public Health guidelines.
- If in the event an individual was to present at your clinic (eg: no scheduled appointment or delivery personnel) with symptoms consistent with COVID-19, then the following guidelines must be followed as per Public Health:
 - Maintain physical distancing of 2 meters/6 feet
 - Obtain and document contact information, in the designated log or registry, of the individual, in case contact tracing is required
 - The individual must leave the clinic immediately, be instructed to return home, self-isolate and call 811 for further instruction
 - The treatment room and any other surfaces, that the individual may have come in contact with, must be cleaned and disinfected

Recommended:

- Cancellation policies should be flexible to accommodate circumstances related to COVID-19. This will encourage clients to accurately report any symptoms they are experiencing and to seek public health advice in a timely manner.
- Practitioners and staff should limit their potential exposures to protect themselves and their clients.
- Clinics should review their sick leave policies to consider whether change should be made to encourage staff to get tested.

Resources:

Government of Nova Scotia Self Assessment Tool: <https://novascotia.ca/coronavirus/>

NS Guidelines for self isolation: <https://novascotia.ca/coronavirus/when-to-seek-help/#self-isolate>

Masks: <https://novascotia.ca/dhw/cdpc/documents/OCMOH-Position-Statement-NMM.pdf>

Individuals at greater risk: <https://www.canada.ca/en/public-health/services/publications/diseases-conditions/how-to-care-for-person-with-covid-19-at-home-advice-for-caregivers.html>

<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/guidance-documents/lifting-public-health-measures.html>

Recovered and cleared by Public Health: <https://novascotia.ca/coronavirus/working-during-covid-19/#cleaning>

Privacy and collection of data: <https://beta.novascotia.ca/privacy>

Limiting exposure: <https://novascotia.ca/coronavirus/working-during-covid-19/#working-safely>

2. Physical distancing (recognizing all clinic spaces are unique)

Reception and Entry

- Maintain 2 meters /6 ft of distance between all individuals.
- Maintain 2 meters /6 ft of distance between all chairs in waiting areas.
- Physical barriers such as Plexiglass should be used where feasible.
- Distancing markers and guidelines must be clear to understand and be followed by all in the workplace.
- Where appropriate display signage for physical distancing (see link below in Resources)
- Remove items such as toys, magazines, fabric furnishings and decorations that cannot be sanitized after touch.
- Stagger appointment times and/or modify schedules to reduce traffic in clinic.
- Clients must attend appointments by themselves where possible. If the client requires accompaniment or assistance, they should be asked to make arrangements ahead of time with the clinic. All other persons must wait outside the clinic.

Staff shared areas: Storage, lockers, lunchrooms, meeting rooms etc.,

- Maintain 2 meters /6 ft of distance between all individuals, as per Nova Scotia Public Health guidelines.

Treatment Rooms

- It is not possible to maintain physical distancing during treatment; however, if space permits in the treatment room, when possible (e.g. during intake) maintain physical distancing of 2 meters/ 6ft as per Nova Scotia Public Health guidelines.

Washroom (Public)

- Maintain 2 meters / 6 ft of distance between all individuals, as per Nova Scotia Public Health guidelines.

Washroom (Staff)

- Maintain 2 meters /6 ft of distance between all individuals, as per Nova Scotia Public Health guidelines.

Elevators, Stairs and Entrance Ways

- Maintain 2 meters /6 ft of distance between all individuals, as per Nova Scotia Public Health guidelines.

Recommended:

- When possible, clients should wait in the car, and call or text their arrival.
- Where possible use floor or wall markers to create one-way flow of traffic.
- If possible, have separate entrance and exit.
- A gradual re-opening is recommended to allow a test of all protocols and measures put in place. For example, if five practitioners use the clinic space start with two. Make

adjustments to client bookings, staff and practitioner scheduling, staff and practitioner breaks, while adhering to Criteria for Re-opening as the minimum standard.

- If waiting area or shared area seating is not needed, removal of furniture should be considered.
- If possible, consider using a dedicated treatment room for each practitioner
- If conversing in the clinical setting, maintain 2 meters /6 ft of physical distance between all individuals, as per Nova Scotia Public Health guidelines.

Resources:

Physical distancing general: <https://novascotia.ca/coronavirus/staying-healthy/#social-distancing>

Physical distancing workplace/Plexiglass barriers: <https://www.canada.ca/en/public-health/services/publications/diseases-conditions/social-distancing.html>

Physical distancing poster:

https://novascotia.ca/coronavirus/docs/Social_Distancing_poster.pdf

<https://novascotia.ca/coronavirus/docs/Social-Distancing-Fact-Sheet-EN.pdf>

3. Hand Hygiene:

Proper hand hygiene is mandated to mitigate the spread of COVID-19. Everyone is expected to follow proper hand hygiene guidelines.

Reception and Entry: Staff, Client (guardian or assistant) and Practitioner

- Upon arrival and before departure (and if required in between) client must be directed to wash their hands with soap and water, for a minimum of 20 seconds. Dry hands with a disposable towel and use the towel to turn off the taps.
- If soap and water is not available, a Health Canada authorized alcohol-based hand sanitizer (with at least 60% alcohol) must be used.
- Once hands are washed, staff and clients should be careful not to touch any surfaces, including doorknobs.
- Gloves are not meant to replace hand washing.
- If a payment transaction or an exchange of paper occurs than handwashing must be performed.
- Display signage for hand-washing protocols in visible locations.

In treatment room: Practitioner and Client (guardian or assistant)

- Practitioners and clients must wash hands often using soap and water for a minimum of 20 seconds and dry with disposable towel.
- Hand washing must occur before and after treatment and at any point when appropriate during treatment.
- If soap and water is not available a Health Canada authorized alcohol-based hand sanitizer (with at least 60% alcohol) must be used.

- Except for under normal circumstances where a practitioner would wear gloves, handwashing is preferred over glove wearing.
- Once hands are washed practitioners and clients should be careful not to touch any surfaces, including doorknobs.
- Display hand washing protocols in visible locations.

Recommended:

- Greet client and open the door, leave door open, or clean door surfaces on arrival and departure.
- Client and practitioner should be aware that each has washed their hands.
- Payment arrangements should be made, where possible, to avoid touch of money, electronics, paper, and if there is touch, wash hands and sanitize payment devices as needed afterwards.
- Remove rings and other jewellery that may be difficult to properly clean.
- Loose hair should be tied back.
- Fingernails should be kept short.

Resources:

Handwashing protocols and Hand Sanitizer:

<https://novascotia.ca/coronavirus/staying-healthy/#hands-clean>

Gloves should not replace handwashing:

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/gloves.html>

Handwashing poster: <https://novascotia.ca/coronavirus/docs/Hand-Washing-Poster.pdf>

4. Face touching avoidance:

- Share information, with regards to the importance of not touching the face.
- This would include not touching eyes, nose and mouth and then washing of hands.
- **Respiratory Etiquette:** If a person needs to sneeze or cough, use a tissue or cough into the elbow and ensure proper disposal of the tissue and washing of hands afterwards.
- If there is an itch, use a tissue and wash hands afterwards.
- Practitioners, staff or clients who touch their mask, must follow proper hand washing guidelines and mask guidelines.
- All waste must be disposed of properly and according to guidelines.
- Display signage for respiratory etiquette (cough and sneeze) guidelines.

Recommended

- If there is a potential for perspiration during treatment, for either the client or practitioner, have a towel or disposable wipe available and follow cleaning and disinfecting guidelines.

Resources:

Do not touch your face: <https://novascotia.ca/coronavirus/when-to-seek-help/#reducing-spread>

Respiratory etiquette: <https://novascotia.ca/coronavirus/staying-healthy/#cough-sneeze>

Poster for Respiratory Etiquette: <https://novascotia.ca/coronavirus/docs/Staying-Healthy-Habits-EN.pdf>

Masks: <https://novascotia.ca/coronavirus/staying-healthy/#masks>

https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks/about-non-medical-masks-face-coverings.html# Appropriate_non-medical_mask

Waste Disposal: <https://novascotia.ca/coronavirus/staying-healthy/#clean>

5. Enhanced Cleaning and Disinfecting

All Clinic areas and treatment areas (including shared staff areas)

- Protocols must be communicated to all staff and practitioners.
- Cleaning routines must be signed off and recorded daily.
- Cleaning and disinfectant products must be known to be effective for the elimination of viruses and comply with Health Canada guidelines (approved disinfectants require an 8-digit Drug Identification Number (DIN)).
- Common areas and high touch surfaces must be cleaned and disinfected frequently in accordance with Public Health guidelines (between use is ideal).
- If a barrier between individuals is used, such as a Plexiglass window, it must be cleaned and disinfected as per Public Health guidelines.
- The client treatment area must be cleaned and disinfected between clients.
- Linens and blankets must be laundered after single use. Equipment such as pillows, table padding, heating pads etc, that were considered shared items prior to COVID-19, and cannot be disinfected, must not be reused. All laundry must be washed with regular laundry soap and hot water (60-90°) and dried well.
- Vinyl or plastic coverings must be used to encase pillows and bolsters and must be cleaned and disinfected between clients and when visibly soiled, as per Public Health guidelines.
- Levers, face cradles, lotion/oil bottles and nozzles are to be cleaned and disinfected after use.
- Consider modalities that are shared. Use disposable products where possible and thoroughly clean and disinfect between clients if not disposable or discontinue use. This includes such items as: ultrasound, electric modalities, ice packs, heating packs, cupping, tuning forks, etc.
- Create cleaning and disinfecting protocols for any shared equipment in your clinic such as exercise equipment, props for stretching, or discontinue use.
- All waste must be disposed of in a covered and lined receptacle. Garbage liners must be carefully sealed and disposed of at the end of each day, or as needed during the day.

Garbage receptacles must be disinfected once the liner is removed and disposed of and then the liner is replaced (for all areas of the clinic).

- Laundry must go directly into the washer or be contained in a closed in space in the clinic or treatment room until ready for washing.

Washrooms

- All high touch surfaces must be cleaned and disinfected frequently. All contact areas in washrooms must be cleaned and disinfected at least twice a day (between use is ideal).
- Ensure soap and/or hand sanitizer and disposable towels (e.g. paper towel), are available at all times.
- Encourage disposable wipes for doors and surfaces.
- Dispose of waste appropriately.
- Display signage for hygiene and waste disposal guidelines.

Elevators and stairs

- All contact areas must be cleaned and disinfected at least twice a day (doors, elevator buttons, etc).
- Disinfectant wipes can be made available, or paper product to use as a barrier.

Recommended:

- Clients should be advised not to bring unnecessary items with them to their treatment.
- More time may be required between clients to achieve these protocols.
- It is okay to clean within view of clients. It will reassure them that you are taking their safety seriously.
- Everybody must be prepared to clean even though that may not be their usual routine.
- Training may be required.
- Display protocols
- Display a checklist style disinfecting schedule, which time can be marked and initialled
- Good airflow is important, and the requirements for it fall under Occupational Health and Safety (OHS) regulations. You may want to consult with your building facilities manager to discuss airflow in your building.

<https://novascotia.ca/coronavirus/occupational-health-and-safety/>

Resources:

Cleaning and disinfecting: <https://novascotia.ca/coronavirus/staying-healthy/#clean>

High touch surfaces and items that can't be easily cleaned:

<https://novascotia.ca/coronavirus/working-during-covid-19/#working-safely>

<https://www.canada.ca/en/public-health/services/publications/diseases-conditions/cleaning-disinfecting-public-spaces.html>

<https://www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19.html>

Laundry and Waste : <https://www.canada.ca/en/public-health/services/publications/diseases-conditions/cleaning-disinfecting-public-spaces.html>

<https://novascotia.ca/coronavirus/staying-healthy/#clean>

6. Personal Protective Equipment (PPE):

- Physical barriers such as Plexiglass must be used where feasible.
- Practitioners, staff and clients (guardians or assistants) must wear clean, non-medical masks, where physical distancing of 2 meters/6 feet cannot be maintained and follow all other PPE guidance from Public Health.
- Public Health guidelines must be followed when wearing masks, including donning and doffing.

Donning a Non-Medical Mask:

- Ensure the face covering is clean and dry
- Wash your hands with soap and water for at least 20 seconds
- If soap and water is not available use alcohol-based hand sanitizer (minimum 60%)
- Ensure hair is away from the face
- Place the mask over your nose and mouth, ensuring they are fully covered and secure the ties to your head or elastic over the ears; should be snug to the cheeks with no gaps
- Wash your hands with soap and water for at least 20 seconds or use alcohol-based hand sanitizer (minimum 60%)

Doffing a Non-Medical mask:

- Wash or sanitize your hands as per the above hygiene guidelines
- Remove the mask by un-tying it or removing the elastic loops from your ears
- Avoid touching the front of the mask when removing
- If the mask is washable, put it directly in the washing machine using a hot cycle and then dry thoroughly. If it is a disposable mask, discard in a lined garbage bin
- Wash or sanitize your hands as per the above hygiene guidelines

- Clients (guardians and assistants) must be wearing masks at all times while they are in the clinic. Masks must be clean and worn properly in accordance with Public Health guidelines.
- Masks and gloves can give a false sense of security. If protocols are not followed, contamination can occur. Proper knowledge for use of PPE is essential and in no way should PPE replace physical distancing (where possible) and proper cleaning and disinfecting.
- Sizes of PPE may vary with practitioners and clients.
- Display signage for proper non-medical mask guidelines, including donning and doffing

Resources:

Non-Medical Mask protocol/ Donning and Doffing/ Cleaning/ Making Masks:

<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks/how-put-remove-clean-non-medical-masks-face-coverings.html>

<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks/sew-no-sew-instructions-non-medical-masks-face-coverings.html>

<https://www.goodhousekeeping.com/health/a31902442/how-to-make-medical-face-masks/?fbclid=IwAR2AVmPgBgJrgqjBoTLptaPctZCm62MyDILWZ7MFudIsYnkxmHJfgaVyo>

Mask poster:

<https://www.who.int/images/default-source/health-topics/coronavirus/risk-communications/general-public/protect-yourself/infographics/masks-infographic---final.tmb-1920v.png>

Gloves and masks can give a false sense of security:

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/gloves.html>

7. Considerations During Treatment

- Consider how best to mitigate the risk of COVID-19 transmission during treatment. For example, consider your choice of techniques, using modifications to techniques, modifying positions, and whether technique-specific PPE is required.
- If a technique with higher risk of COVID-19 transmission is identified during treatment, revisit and reobtain consent.
- As during the time of clinic closures, if tele-health or other options are appropriate and available, they should be considered (all relevant privacy laws and protocols apply).

Ontario Association of Osteopaths: OAO COVID-19 Update April 7, 2020:

<https://www.osteopathyontario.org/site/about/latestnews>

8. Professional Obligations: (Considerations)

- If a practitioner works in multiple clinics, they should consider working in one location, in order to limit contact and potential exposure. Should an exposure occur, and contact tracing be required, this information will assist Public Health.
- Professional liability: all practitioners are obligated to carry professional liability insurance and should contact their provider before they resume work to ensure coverage and to clarify exemptions. Policies can vary.
- There is no duty or obligation to re-open practice. No individual practitioner is obligated to engage in practice if they assess the risk is too great for their own situation. Individual judgement is needed, combined with guidance of appropriate government officials.

- We recommend that employees or independent contractors with questions about their rights or obligations consult their legal counsel.
- All NSAO members should bear in mind that they are required to follow all applicable Department of Health and Wellness **and** Nova Scotia Public Health requirements at all times. Members should regularly review public health resources to ensure compliance.
- Members are reminded that we are not licenced to give medical advice and that the NSAO is required to protect the public interest. In the context of COVID-19, members should avoid making claims about unproven preventions and cures.

RESOURCES:

Reopening Guidance for Health Care Services: (May 27, 2020)

<https://novascotia.ca/dhw/cdpc/documents/Re-opening-Guidance-HCP.pdf>

Health Protection Act:

<https://novascotia.ca/coronavirus/docs/health-protection-act-order-by-the-medical-officer-of-health.pdf>

Emergency Management Act Declaration and Orders (Renewal of Provincial State of Emergency):

<https://novascotia.ca/coronavirus/docs/Minister's-renewal-EMA-Covid->

Police Act Order: <https://novascotia.ca/coronavirus/docs/Minister-Furey-Directive-March-30-2020.pdf>

Nova Scotia Coronavirus Website:

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

Canada.ca/coronavirus: (May 30, 2020)

<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/public-health-measures-mitigate-covid-19.html>

Approved by Chief Medical Officer: June 2, 2020
Reviewed by Patterson Law