

GUIDELINES - RETURN TO WORK

Provincial COVID-19 resources for health-care providers: The New Brunswick Association of Optometrists (NBAO) 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 patients and staff management in adopting physical distancing. The personnel must have training on the proper use of PPE, and implementation of proper infection control protocols. Government and the Provincial Public Health Office hold the formal authority to set the parameters of return to work patient care. Processes during and following a pandemic are fluid and members must be vigilant in staying current with health-related updates and government orders.

Every effort must be made to maintain appropriate physical distancing of 2m (6 ft.) between everyone in the clinic (staff, doctors, patients). For 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.

PRECAUTIONARY SCREENING:

- Prior to entering the office, all staff, patients, and optometrists should self-declare the status of their health. Patients must be asked whether they have travelled outside of New Brunswick in the last 14 days, whether they have been in contact with a known COVID-19 case and whether they have any symptoms.
- 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 that cannot wait should be directed to the nearest available ophthalmologist.
- Staff and optometrists who do not pass the screening should be directed to return home and follow appropriate self-isolation/quarantine processes (14 days).
- 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 have the patient wait in their car for a phone call when it is their turn.

WORK ENVIRONMENT:

- **Staff/optometrists**

- ⇒ Staff/optometrists must wash or sanitize hands immediately upon entry to the clinic.
- ⇒ Avoid sharing workstations wherever possible.
- ⇒ Try to stagger break times to limit overcrowding in staff areas.
- ⇒ Increase the space between staff/optometrists and patients.
- ⇒ Be aware of common touch points in your clinic and disinfect them regularly (doorknobs, counters, keyboards, phones, POS, pens, patients and staff washrooms, faucets, etc.).
- ⇒ Consider adding plexiglass/acrylic partitions to reception and dispensary desks.
- ⇒ Consider marking the floor in staff workstations to ensure appropriate spacing between staff.
- ⇒ Consider staffing in “teams” to minimize interaction between staff members.
- ⇒ Staff should wear attire that can easily be washed and/or removed if contamination occurs (some may prefer scrubs for ease of use).
- ⇒ Avoid wearing jewellery, scarves, or other loose-fitting items and consider tying up long hair. It is recommended staff/optometrists change their clothes before entering the main living space of their homes.

- **Patients**

- ⇒ Patient volumes must be managed to maintain appropriate physical distancing and minimize wait times.
- ⇒ Patients must wash or sanitize hands immediately upon entry to the clinic.
- ⇒ Patients should be instructed to wear a mask or cloth face covering from the time they enter until the time they leave the building.
- ⇒ Arrange the seating in patient areas to provide a minimum of 2m in between chairs.
- ⇒ Remove all magazines, toys and other peripheral items from waiting areas and exam rooms.
- ⇒ Ask the patient to leave unnecessary items in their car or outside.
- ⇒ Ask the patient to come in alone unless another person is necessary (parent of child, mobility aide, or 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).

PHYSICAL EXAMINATION OF THE EYES:

- Optometrists should follow COS guidelines when conducting an ocular health exam <https://www.cosprc.ca/wp-content/uploads/2020/04/Guidelines-for-Ophthalmic-Care-March-19-12PM-ef-1.pdf>.
- As detailed in the document, optometrists must wear appropriate PPE during an ocular health exam and adhere to strict disinfection protocols of equipment and surrounding areas.

CONSIDERATIONS FOR SPECIFIC PROCEDURES:

- During procedures that require close face-to-face distancing, 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.
 - ⇒ Non-contact tonometry may not be performed at this time (acceptable alternatives include iCare, applanation tonometry, and tonopen).
 - ⇒ At this time, full threshold visual fields (i.e. Zeiss / Humphrey / Octopus / Medmont) may be conducted for emergency cases only, as the interior of the bowl is not able to be disinfected without damaging the instrument. If this procedure is deemed necessary, patients must wear a mask and the staff member or optometrist must wear appropriate PPE and limit the amount of time spent near the patient as much as possible.

Dispensing Glasses

- ⇒ New glasses may be fitted, observing proper use of PPE during the encounter.
- ⇒ Frames must be cleaned and sanitized immediately after contact by each patient, before being placed back on display.
- ⇒ 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 sanitized 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

⇒ Routine contact lens training may not be done at this time due to extended periods of close contact with patients and repeated touching of the face and eyes.

PPE:

- Masks (surgical, KN95, or N95) must be worn at any time that physical distancing from others cannot be maintained. One mask may be used for an entire work shift.
- Eye protection must be worn (goggles, full coverage safety glasses or face shield).
- 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.
- At this time, gowns are not required in an outpatient setting unless the patient is COVID positive or has respiratory symptoms. These patients should not be seen at an optometry clinic.
- Staff must be educated on proper techniques for donning and doffing PPE.

DISINFECTION/SANITIZATION FOR OPTOMETRY SPECIFIC DEVICES:

- **Tonometry**
 - ⇒ Applanation probes must be disinfected by soaking in 3% hydrogen peroxide for 10 minutes.
 - ⇒ iCare probes and tonopen covers must be disposed after use on each patient.
- **Glasses frames**
 - ⇒ may be sanitized by cleaning with warm soapy water (the lipid bilayer that coats the coronavirus is susceptible to surfactants).
- **Gonio lens**
 - ⇒ Must be washed in soap and water and the ocular contact zone must be soaked in 3% hydrogen peroxide for 10 minutes.

VIRTUAL CARE:

- Optometrists are encouraged to continue providing virtual care (telephone/video consultations) wherever 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>
- Français: https://youtu.be/M_yJBBobclk

Provincial PPE requirements in outpatient settings:

<https://www2.gnb.ca/content/dam/gnb/Departments/h-s/pdf/PrimaryCareProvidersCommunitySetting.pdf>

Provincial COVID-19 resources for health-care providers:

https://www2.gnb.ca/content/gnb/en/departments/ocmo/h/cdc/content/respiratory_diseases/coronavirus/HealthandAlliedHealthProfessionals.html