

BEST PRACTiCE



**How do we reopen and
remain compliant with
government guidelines**

April 25, 2020

Disclosure

- This presentation occurred on April 25, 2020. Timelines and recommendations are subject to change as we learn more.
- These are recommendations for best practices, presenters have cited their information where possible.
- Please check with your city & county health departments & state orders for regulations and recommendations specific to your clinic and state.
- *Dates and information may change from the date of this presentation.*

Speaker Bios

- **Dr. Valerie Hobbs, DOAM, L.Ac** - has been a practicing acupuncturist for 25 years. She is currently the Director of Postgraduate Doctoral Programs at the American College of Traditional Medicine at the California Institute of Integral Studies where she is also an Associate Professor. Prior to her current position, she worked as the head administrator at Southwest Acupuncture College in Boulder for eighteen years. She is a grateful recipient of a lifetime membership in the Acupuncture Association of Colorado in recognition for her work representing the profession in legislative efforts, including obtaining licensure. Since 2008, she has been the co-Chair of the Clean Needle Technique Committee for the Council of College of Acupuncture and Oriental Medicine, and is the lead author of the March 4 *CCAOM Clinic Infection Control Advisory*, an advisory on infection control decision making for acupuncture clinics at the onset of the Coronavirus epidemic.

Speaker Bios

- **Dr. Steve Shomo DAOM, L.Ac, AP, GCDMH, CSCS, ERYT, WFR** - Steve Shomo is a Doctor of Acupuncture and Oriental Medicine, NCCAOM board certified and dual licensed in multiple states. He is an international leader and educator in the field of Integrative Acupuncture with over 20 years of clinical and academic experience. He has completed postgraduate studies in Japan and the United States with specializations in; oncology, disaster mental health (traumatic stress & PTSD), public and global health, auricular acupuncture, pain management, acupuncture injection therapy, dry needling, laser bio-stimulation, TCM sports medicine and performance, emergency and disaster response. Dr. Shomo is a wilderness first responder and instructor, certified strength and conditioning specialist, Colorado Special Tactics and Rescue Team volunteer and the Training and Logistics Coordinator for the Colorado Acupuncture Medical Reserve Corps, the nation's first acupuncture based federally approved MRC responding to disasters and critical incidents. Dr. Shomo is VA provider and is credentialed and holds numerous local hospital privileges, providing both in-patient and out-patient care. He is faculty for several DAOM and Masters programs, has served or continues to serve on various state acupuncture and global health association boards, and as a subject matter expert for Veterans Administration (VA) and the Department of Defense (DOD).

Colorado Providers

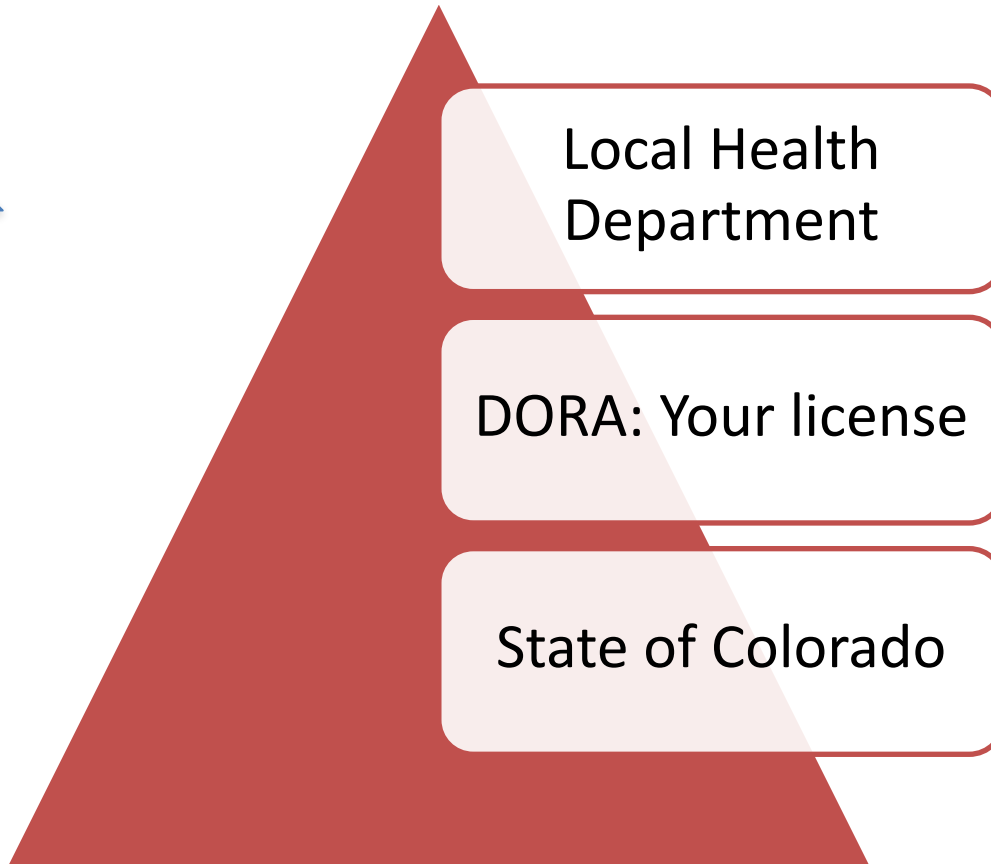
- Economic
- Provide care to existing patients
- Provide care for those on the front lines
- Our own physical, mental, emotional & spiritual well being

Primum Non Nocere – DO NO HARM

State/Local Public Health Authority Announcements

- State of Colorado lifted April 27
- Acupuncturists opening extended by DORA to May 1 using best practices
 - <https://content.govdelivery.com/accounts/CODORA/bulletins/28821be>
- Or **LATER** as determined by County or City

Who Governs?



Known Delayed Dates

Denver County

Jefferson County

Boulder County

Adams/Arapahoe

NOT UNTIL MAY 8

- NACCHO link to county health departments:
 - <https://www.naccho.org/membership/lhd-directory?searchType=standard&lhd-search=&lhd-state=CO>

What We Know

- Nature of infection prevention or virus has not changed just because we are reopening
- Duty of a health care provider is to keep their community safe and follow directives of local public health and medical facilities
- CNT Advisory: Safety Plan
 - Facility settings, Availability of PPEs, Disinfection Procedures
- Use good clinic judgment – practitioners are accountable for decisions
- Consider mental emotional health as we come back from trauma

Requirements of Colorado Governor's Order

Open only

- On officially announced date
- When requirements CAN be fully implemented
- When you can safely re-open
- When you choose to re-open

CNT Advisory - Facts

- WHO issued international public health emergency Jan. 30, 2020
- Earliest U.S. confirmed case Jan 19 (travel-related)
- Earliest U.S. death Feb 6 (community-spread)

CNT Advisory - Facts

- SARS-CoV-2 virus is shed in high concentration before symptoms appear.
- Shedding is from upper respiratory (nose)
- Screening by temperature and symptom tracking alone is INADEQUATE (NEJM)
- Facemasks are required

What To Do

- Hold a Safety Meeting: document!!
- Assess your clinic SETTING and PROTOCOLS
- Use PPE
- Implement and/or maintain infection controls: document!!
- Stay informed

Office Space

- Analyze your own setting: entry, treatment space, dispensary, staff area
 - Screening
 - Social distancing
 - Hand hygiene
 - Surface decontamination

Office Space – Screening

- Begins with visual and audio alerts on website, voicemail, posters
 - Alert that COVID-19 symptomatic or positive patients may not be treated on site
 - Alert to social distancing procedures
 - Reminder to bring face mask, pen

Office Space – Screening

- Screening upon **entry**
 - Temperature
 - Symptom questions
 - Perform hand hygiene
 - Provide facemask if needed

Office Space – Social Distancing

- Analyze entry to your clinic for distancing during screening
- Analyze treatment spaces
 - Minimum 6 ft distance between patients
- Analyze staff spaces
 - Minimum 6 ft distance/barriers
- Enact procedures to ensure distancing

Office Space – Social Distancing Procedures

- Utilize telehealth or phone intake as much as possible
- Patients wait in car until taken directly to treatment room
- People accompanying patient wait in car (no kids alone!)
- Physically mark space
- Curbside delivery of herbs

Office Space – Hand Hygiene

- Provide posters on hand hygiene
- Must be carried out by each person upon entry to clinic
- Provide hand sanitizer (min. 60% alcohol) throughout space or immediate access to soap and water
- Practice hand hygiene per CNT

Office Space – Cough Hygiene

- Provide posters on cough hygiene
- Provide tissues and no-touch waste receptacles

Office Space – Surface Decontamination

- Analyze setting
 - Minimize furnishings with cloth coverings
 - Minimize non-essential objects in treatment rooms, remove decorative items
 - Place clean laundry in cabinet or sealed storage container
 - Create checklist for cleaning all items in a treatment room

Office Space – Surface Decontamination

- All hard surfaces: clean and disinfect with EPA registered disinfectant for Corona virus according to label

<https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>

To kill virus, surface must remain wet for entire time specified on label. Look for “contact time” or “dwell time”

Office Space – Surface Decontamination

- Establish frequency of cleaning according to how often surface is contacted

[https://www.cdc.gov/coronavirus/2019-ncov/
community/disinfecting-building-facility.html](https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html)

[https://www1.nyc.gov/assets/doh/downloads/pdf/
imm/disinfection-guidance-for-businesses-
covid19.pdf](https://www1.nyc.gov/assets/doh/downloads/pdf/imm/disinfection-guidance-for-businesses-covid19.pdf)

Office Space – Surface Decontamination

- Treatment table and any surface touched by patient: after each patient
 - Doorknobs, check out counters, sinks, handles of hand sanitizer dispensers
- All surfaces in treatment room, including floor: daily
- All frequently touched surfaces by staff: daily
- Office/dispensary surfaces and floors: weekly

Office Space – Laundry

- Nothing may be used for multiple patients
 - Table liners/pads, blankets, sheets, gowns, pillow cases
- Hanging cloth room dividers
 - See manufacturer label for frequency of washing

Office Space – Checklist

- Create a checklist for cleaning after each patient
- Create a checklist for daily/weekly cleaning
- Use checklist to create a grid with spaces to initial and record dates of cleaning, post on inside of cabinet in treatment room and initial and date when completed. File sheet when completed.

PPE

- Eye Protection*
- Facemask
- Gloves
- Clinic apparel
 - jewelry

PPE - Facemasks

- Patients may wear DIY cloth mask
- Surgical masks are for HCP
- N95 for HCP treating COVID-19



PPE - Facemask

- Can be worn for a day if (currently HCP are reusing for up to 7 days)*
 - They are clean and dry
 - There is no visible defect
 - You don't touch them

PPE - Facemask

- Can be “donned and doffed” between patients
- Wash hands before putting mask on
- Don't touch interior
- Wash hands before taking mask off
- Place mask in a paper bag
- Wash hands before re-donning mask

PPE - Gloves

- Gloves are not usually required for acupuncture
- Best advice is that gloves should be worn now, and changed between patients
- Hands should be washed whenever gloves are removed
- Gloves should be worn whenever handling patient laundry and disposables
- Gloves should be worn to clean and disinfect treatment rooms

PPE – Clinic apparel

- Use a clinic coat or
- Strongly recommend wearing scrubs
- Keep change of clothes/scrubs on hand; change if exposed to patient droplets
- Laundering of clinic apparel: daily

Before Opening - Protocols

- START WITH UNIVERSAL PRECAUTIONS – assume every patient is a carrier
- Is your facility cleaned and equipped (safety meeting)
- Do you have enough PPE for you and your staff
 - is it sustainable
- Access to wash and/or sanitize station for providers and patients*
- Payment exchange procedures?

Screening - Protocols

- Phone screening recommended 24 prior to appointment
 - Is patient experiencing any fever or respiratory issues?
 - Secondary GI issues – last 30 days
- Day of service: Temperature, wash/sanitize hands before entering clinic
 - Direct to exam room (no waiting area)
 - What happens if patient doesn't bring mask to the clinic?

TX & Schedule - Protocols

- Analyze treatment protocols for increased infection by droplet
 - Patient positioning
- Allow minimum of 30 between appointments to disinfect exam/treatment room.
 - If you run multiple rooms; limit to ONE room to minimize risk (50% capacity equivalent)

Treatment - Protocols

- Contactless payment
- Follow the above described disinfection procedures (Treatment and Daily)
- Contact and prescreen next days patients if back to back days

Resources

- PPE Supplies are low and difficult to acquire
 - Acupuncture and medical supply vendors

Traumatic Stress

- COVID19 Patients
- Providers
- At Home

- Coming back from a place of trauma
 - *Transform FEAR into Calm, Clarity, and Creativity*
- Self Care practices

Referrals

- Refer to Western provider for any emerging sign of potential infection
- National Jewish Hospital will provide antibody testing (\$95) without physician referral
- NJH Active COVID-19 nasal swab testing available with physician referral
 - Current testing has been to those patients with symptoms that require hospitalization
 - Healthcare providers

Questions

