

# Exposure Control Plan

## Issues Pertinent to COVID-19 Include:

- Impact of physical setting on infection control, including implementation of social distancing
- Personal Protective Equipment (PPE) supplies needed and on hand
- Implementation of enhanced disinfection procedures
- Updating communications to patients

## Hierarchy of Decision-making

- Acupuncture providers fall under different provider definitions in different U.S. states. Follow guidance issued pertinent to the definition issued by your licensing authority.
- In general, you should follow guidance issued by your licensing authority. If there are none specific to you, follow state mandates issued from the Governor's office, then follow local (county or city) health departments. In the case of conflicting guidance issued by different authorities, follow the most restrictive guidance (especially in terms of later dates to open).
- Guidance from state and local authorities is subject to change. Stay informed.

## Examine SETTINGS:

- Identify potential high touch surfaces encountered by patients from their mode of transportation to your clinic entry
  - High touch surfaces to treatment room entry include:
    - Doorknobs of door to building
    - Staircase bannister
    - Doorknobs of treatment room
    - Table and/or chair for patient items
- Assess modifications to clinic entry setting for appropriate infection control during screening
  - Table set-up outside of entry with signage alerting patient to
    - Sanitize their hands
    - Wear a mask
    - Wait to be pre-screened and have their temperature taken
  - Hand sanitizer and tissues provided outside
  - Sign with WiFi and password provided for virtual consultations
- Assess number and layout of treatment rooms (allowable distance, ventilation, surfaces to disinfect)
  - 2 treatment rooms, separated by a hallway
  - HVAC ventilation
  - Surfaces to disinfect include:
    - Doorknobs
    - Light switches
    - Instrument tray
    - Counter or shelf
    - Chair or table for patient items
    - Treatment table
    - Bolster
- Assess number of patients treated in a single room

- One
- Space between treatment tables/chairs
  - Single treatment table in each room
- Assess patient access to hand sanitizer
  - Hand sanitizer provided at building entry and in each treatment room
  - Bathroom available
- Assess provision of tissues and non-touch waste disposal for cough etiquette
  - Tissues available at building entrance and in each treatment room
  - Non-touch garbage cans in each treatment room and in bathroom
- Document your inventory of supplies needed for infection control (do not stockpile supplies needed in biomedical settings). In addition to standard supplies for acupuncturists described in the *Clean Needle Technique Manual, 7<sup>th</sup> Edition* you will need at minimum:
  - Gloves
    - 3 boxes as of clinic re-opening 6/3/20
  - Facemasks, for providers, staff and patients
    - 3 boxes as of clinic re-opening 6/3/20
- Review requirements for disinfection of environmental surfaces
  - Do not use high-level disinfectants or alcohol on environmental surfaces. Use routine cleaning and disinfection procedures (e.g., using cleaners and water to pre-clean surfaces prior to applying an EPA-registered, hospital-grade disinfectant that specifies its use against COVID-19).
    - Hospital-grade disinfectant wipes purchased via Henry Schein
  - Keep housekeeping surfaces (e.g., floors, walls, tabletops) visibly clean on a regular basis
  - Clean and disinfect high-touch surfaces (e.g., doorknobs, light switches, and surfaces in and around toilets in patients' rooms) on a more frequent schedule. Consider phones, tablets, keyboards, and any clipboards or pens frequently touched as high-touch surfaces. You can ask patients to bring their own pens if signatures are required, but it is best to eliminate practices that require a patient to fill out a form through telehealth and electronic access to needed documents. If you provide a pen, the patient takes it home.
- Realistically assess the physical infection control requirements needed to assess potentially infectious patients. During the COVID-19 outbreak, the CDC is encouraging biomedical facilities to use alternatives to face-to-face triage including advice lines, patient portals, telephonic and telehealth interactions to assess symptomatic patients. Unless you have a clinic within a biomedical facility or that otherwise meets control requirements, you should practice source control, i.e., instruct symptomatic patients to stay home and contact their primary care provider.
  - Patients will be sent a pre-screen email and instructed to cancel their appointment if they have any symptoms of Covid-19
    - The email will inform patients that there will not be a fee for appointments cancelled due to potential Covid-19 symptoms
  - Patients will be screened for Covid-19 symptoms and temperature taken with a contactless thermometer in foyer prior to entry to clinic beyond foyer. Temperature is taken in foyer rather than outside due to operating instructions of contactless thermometer. If patient has fever or potential Covid-19 symptoms, patient will immediately exit the building and will be advised to contact their primary care provider.

## Examine PROCEDURES and PROTOCOLS

### Source Control Procedures

- Instruct patients which presenting symptoms will lead to immediate referral for biomedical care and inform them they will be screened upon arrival
  - See above
- Instruct patients and anyone accompanying them to stay home rather than seek your treatment if they exhibit any symptoms of respiratory infection (fever, cough and shortness of breath/difficulty breathing). Refer to biomedical care provider.
  - See above
- Notify patients that persons accompanying them to their appointment must wait outside of clinic, such as in personal vehicle or practice social distancing outside.
  - Patients notified via pre-screen email
  - If patient needs a parent, family member, or other support person to accompany them inside, this must be pre-authorized
    - The parent, family member or other support person must sanitize their hands, wear a mask, have their temperature taken and be pre-screened for Covid-19 symptoms upon arrival.
    - The parent, family member or other support person must remain in the treatment room with the patient.
- Create visual alerts in multiple languages on your website, emails, written appointment reminders, texts, posted at your clinic entrance, posted at reception, informational flyers
  - Patients will be sent pre-screen email with this information
  - Flyer posted outside clinic stating screening protocol
  - Posters posted inside clinic
- Reduce or eliminate cancellation fees
  - Cancellation fees eliminated if cancellation due to potential Covid-19 symptoms
- Consider alternate means (biomedical care referral, telehealth, virtual consultations) for telehealth treatment, and for relevant intake for scheduled treatments
  - Consultations to be conducted outside, socially distanced, weather permitting. If weather does not permit, consultations will be virtual.
- Develop curbside pickup of herbs or supplements
  - Curbside option is available
- Notify patients that they must wear a cloth facemask upon arrival and during treatment. Provide a facemask for any patient not able to bring one.
  - Patients notified of facemask requirement via email and outside signage
  - Patients must wear a mask to be permitted into the building
  - Facemasks are available should patient not bring one
- Develop strategies to eliminate need for patients to use a waiting room. For example, patients may wait in their car until they can come through screening and directly into your treatment room.
  - Waiting room is closed
  - Kitchen area is closed to patients
  - Patients are informed via email and exterior signage to wait in their car until practitioner comes outside to greet them, screen them, and take their temperature. Patients are instructed to email practitioner if practitioner does not quickly step outside to greet them.

- Escort patients as needed into your clinic, ensuring social distancing and appropriate infection safeguards while using elevators, depending on your office setting.
  - After screening, patients will be escorted either directly to the treatment room or to a private consultation area outside, maintaining social distancing
- Provide / post hand hygiene instructions/flyers
  - Posted
- Provide / post cough etiquette instruction/flyers
  - Posted
- Provide / post wellness instruction/flyers
  - Posted
- Some clinics are including communications about what they are doing to enhance infection control to reassure patients and model appropriate response
  - Some new infection control measures described in email
  - Exposure control plan will be posted in office

### **Entrance Screening Procedures**

- Determine which of the screening symptoms or combinations of symptoms will result in immediate referral to biomedical care.
  - Patients with new onset of symptoms described in pre-screen, not otherwise attributed to underlying conditions, will be advised to contact their biomedical provider
- All staff and patients must be screened upon entry into your clinic space
  - A log has been created for practitioner screening upon entry to clinic, including temperature and Covid-19 symptoms
- Provide hand sanitation at entry, all persons must sanitize hands. Hand sanitizer is preferred by the CDC in medical settings
  - Hand sanitizer provided at entry
- Screen for temperature. Non-contact thermometers are preferred and should be disinfected between uses according to manufacturer's instructions (often with alcohol wipe).
  - Patients will be screened for temperature with non-contact thermometer. Thermometer will be disinfected with alcohol wipe after each use.
  - As per CDC guidelines, a temperature of 100 deg F or higher or a sensation of fever is considered positive for fever.
- Screen for COVID-19 symptoms
  - New cough\*
  - New shortness of breath\*
  - New fever, or feel feverish
  - New chills, or repeated shaking with chills
  - New fatigue\*
  - New sore throat\*
  - New loss of taste or smell
  - New nasal congestion\*
  - New muscle aches that are not caused by specific activity such as exercise\*
  - New diarrhea\*
  - \*cannot be attributed to another health condition
    - Patients will be screened for symptoms upon arrival
- Provide a facemask for the patient, if the patient has not brought one. Patients may use cloth faces masks. Multiple layers of fabric such as cotton-silk, cotton-flannel, and cotton-chiffon

provide significantly more particulate filtration. The patient must sanitize hands before donning the facemask wear the mask over mouth and nose, and not remove the facemask while in your clinic.

- Facemask requirement included in pre-screen email
- Hand sanitizing and facemask requirement included in outdoor signage
- Facemask will be provided for patient if patient has not brought one

### **Social Distancing Procedures**

Written procedures must be developed to ensure social distancing. Examples of these procedures include:

- Staggering patient appointments
  - Appointments will be staggered such that patients, after screening, will be escorted directly to an available treatment room. The waiting room will not be used.
  - There will be a minimum of 15 minutes of “down-time” in each room between the end of one appointment and the beginning of another
- Having patients isolate themselves in a car or by social distancing and wait for a phone notification that a staff member will meet them at the entry to provide screening and escort them directly to the treatment room
  - Patients instructed via pre-screen email and exterior signage to wait to be escorted into foyer of building where they will be screened and have their temperature taken
  - Waiting room is closed
- Use telehealth as much as possible to limit time patient is physically in the clinic
  - Consultations will be conducted outside, socially distanced, weather permitting. If weather does not permit, consultations will be conducted virtually via telehealth. Patients are informed of this via pre-screen email and earlier communications
  - Patients will remain at least 6 feet apart from practitioner, except during treatment
- Eliminate time spent in check out. If at all possible, use electronic methods for payment and scheduling.
  - Check-out will be handled electronically

### **Disinfection Procedures**

Written enhanced disinfection procedures should be implemented, including but not limited to:

- After every patient visit:
  - Clean and disinfect treatment table, instrument tray, countertop, chairs/stools, door handle, sink, faucets, light switches, hand sanitizer pump handle as well as any other identified high touch surface. Apply EPA-registered hospital grade disinfectant for the appropriate contact time indicated on the product label.
- Daily
  - Vacuum treatment room floor
  - Clean and disinfect high contact surfaces in office and dispensary area.
- Weekly
  - Clean and disinfect staff area floors.
    - Floors will be cleaned

### **Disinfection Checklists**

- Create checklists with grids for disinfecting procedures to be carried out after each treatment, and daily disinfecting procedures. Tape the checklist to the inside of a treatment room cabinet,

or post in or near a treatment room. Refer to checklist, initial and date for each instance of disinfection. Upload or file completed sheets.

- Checklists have been made and will be maintained in Policies and Procedures binder

### **Laundry Procedures**

- Wear gloves when handling used laundry. These gloves may be reusable rubber gloves. After use, disinfect gloves according to the manufacturer's instructions. Always wash hands before and after removing gloves.
  - Gloves will be used in accordance with the above
- Clean laundry should be stored outside of treatment rooms, or if inside treatment room, clean laundry should be stored in a closed cabinet or sealed container (not on an open shelf).
  - Clean laundry will be stored in treatment room closets and office closet
- No sheets, pillow cases, drapes, cloth heating pads, mattress pads, cloth pulse pillows, or blankets can be re-used without laundering in patient care.
  - All linens will be used for one patient and then placed in hamper
  - Heating pads have been removed
  - Blankets will not be used
  - Disposable pillow cases are available
- Roll used laundry so that areas in direct contact with patients is inside. Don't carry used linens against the body.
  - Laundry will be rolled as indicated and not carried against the body
- If you are processing laundry, it must be processed separately from personal items. Do not shake out laundry before washing.
  - Laundry will be processed accordingly

### **De-Clutter Procedures**

- Remove decorative items, books, office supplies, or infrequently used items should be removed from treatment rooms
  - Such items have been removed
- Remove toys, magazines, clipboards, pens or other shared items
  - Such items have been removed from treatment rooms

### **Use Personal Protective Equipment (PPE)**

Acupuncturists will have additional requirements for the use of PPE to prevent the spread of COVID-19.

- As per Kentucky mandate, a 14-day supply will be maintained for all necessary PPE (facemasks and gloves)

### **Facemasks**

- N95 masks should be used only during sterile procedures, exposure to high velocity splash or spray, or during aerosolizing procedures. N95 masks should be reserved for providers providing care in biomedical facilities.
  - Surgical masks or KN95 will be used
- Wear a surgical face mask at all times in the clinic. Ideally, a single face mask would be used per patient encounter. If supplies need to be conserved, a surgical mask can be used for an entire day in clinic. Using a single mask for multiple days may be considered if supplies are not

otherwise available. The CDC has allowed for extended use of a disposable surgical facemask under the following conditions:

- The facemask must be removed and discarded if soiled or damaged.
- The acupuncturist may not touch the face mask. If the face mask is touched, immediate hand hygiene is performed.
- The acupuncturist should leave the patient area to remove their face mask.
- If the mask is to be stored, the mask is folded with the outer surface folded inward (to reduce contact of outer surface), and the mask can be placed inside a clean sealable paper bag.
- To don a mask, the practitioner performs hand hygiene, visually inspects the mask for soil or defect, then applies the mask, taking care to not touch the inner surface
- To doff a mask, first, hand hygiene is performed. The mask is removed, taking care not to touch the inside of the mask. The mask is stored or discarded, and hand hygiene is repeated.
  - Practitioner is aware of best practices and intends to use at least one mask a day

### **Gloves**

Because acupuncture as a procedure does not typically involve exposure to mucous membranes, blood or body fluids, the routine use of gloves is not required of acupuncturists, although use of gloves may be mandated by some state laws. During the COVID-19 outbreak, gloves become an important PPE to prevent exposure to potential contamination.

- Upon entry into patient treatment room, perform hand hygiene, and put on a single pair of nonsterile gloves.
- Remove and discard gloves when leaving the treatment room. Immediately perform hand hygiene after discarding gloves
- Wear gloves to remove used laundry after the patient treatment
- Wear gloves during cleaning and disinfecting
  - Practitioner is aware of best practices regarding use of gloves

### **Lab Coats**

- Lab coats must be worn only when there is the expectation of contamination by contact with body fluids. Lab coats are not required for safer-at-home patient care in typical acupuncture offices.
  - Practitioner does not intend to use a lab coat, but may choose to do so in the future

### **Personal Clothing**

- Acupuncturists should wear clean clothes into the clinic. Scrubs are an acceptable option.
  - Practitioner intends to wear clean clothes or scrubs.
- Remove jewelry, and avoid clothing accessories such as ties and scarves
  - Practitioner will wear minimal jewelry and avoid ties and scarves
- Clinic clothing should be immediately removed upon returning home from clinic, and laundered.
  - Upon returning home, clinic clothing will be placed in a hamper for laundering

## **Miscellaneous Additional Policies/Protocols Relevant to this clinic**

- Patients will be required to initial and sign a Covid-19 Risk Informed Consent addendum
- Tea and water will no longer be served for the time being, but patients may bring a drink and place it in the area designated for their personal belongings
- Space blankets will be stored in a labeled Ziploc bag for each individual patient
- Eye pillows will be available for purchase for \$10 and will be kept in a labeled Ziploc bag

## **Safety Meeting Assessment of Clinic Setting and Protocols**

Meeting Date: 6/1/2020 and 6/2/2020 and 6/3/2020

Safety Officer: Dr. Virginia Mims

Protocols adopted 6/3/2020

Review schedule: To be reviewed and updated annually, or earlier as needed. The Safety Officer will monitor evolving guidelines.

Primary Reference Document for these policies and procedures: CCAOM Clinic Infection Control Advisory (dated April 30, 2020)

Additional Reference Documents:

- CMS "Opening Up America Again" (4/19/2020)
- KSAA "Acupuncture Covid-19 Safe Operating Procedures" Draft
- AAC "Covid-19 Suggested Office Safety Practices"
- KY Cabinet for Health and Family Services letter dated May 8, 2020

Local Health Department: Call placed to Jessamine County Health Department (859-885-4149) on 5/20/20. After speaking with receptionist, left message for Lisa Bolton, Environment Supervisor, stating that the purpose of my call was to do my due diligence in preparation for opening and inquire as to whether or not there are any additional local requirements or limitations beyond or in addition to what has been issued by the State of Kentucky that would impact the practice of acupuncture in Jessamine County. Received a call back from Lisa Bolton on 5/26/20 stating that there were no such additional local requirements or restrictions.

Dr. Virginia Mims tested negative for Covid-19 on Friday, May 29<sup>th</sup>, 2020.