



Practice Guideline Related to Respiratory Therapists'

Requirements for Minimizing the Spread of COVID-19 under the:

**ORDER BY THE MEDICAL OFFICER OF HEALTH UNDER SECTION 32 of
the HEALTH PROTECTION ACT 2004, c. 4, s. 1.**

In response to the global COVID-19 pandemic, the Province of Nova Scotia declared a State of Emergency on March 22nd, 2020. The Provincial Medical Officer issued an Order under the Health Protection Act on March 26th to all individuals residing within Nova Scotia. <https://novascotia.ca/coronavirus/COVID-19-Global-Order-2020-03-26.PDF> Within this order are requirements for all residents, that are directed toward minimizing the spread of COVID-19 within the province and avoiding a surge of patients requiring urgent and critical care.

Definitions

In this Order,

(a.) "self-isolation" means the requirement of any person who has COVID-19 to remain separate from others in such places and under such conditions so as to prevent or limit the direct or indirect transmission of COVID-19.

(b.) "self-quarantine" means the requirement of any person who has been exposed or may have been exposed to COVID-19 during its period of communicability to restrict that person's activities in order to prevent disease transmission during the incubation period for this disease.

Purpose

Respiratory Therapists provide healthcare services within the population who are at greatest risk from COVID-19 and therefore must be vigilant about preventing spread to this population. The purpose of this guideline is to advise Respiratory Therapists (RRTs) of their practice accountabilities related to this order and recommendations for adjusting practice.

General Guideline

1. RRTs who have traveled outside of the province, have been or are being tested for COVID-19, or have been exposed to someone who is COVID-19 positive, must self-isolate or self-quarantine for fourteen (14) days.
2. RRTs must comply with section 5 of the Order and maintain social distancing of two (2) meters or six (6) feet and avoid gatherings of greater than five (5) people.

Practice Guideline

1. As per section 5 of the Order, social distancing requirements do not apply to RRTs working in homecare to provide essential services related to home oxygen equipment.
2. As per section 20 of the Order, “regulated health professionals may provide in-person emergency or urgent care services, and may provide virtual care for non-emergency/elective care services if authorized to provide this care within their scope of practice and as established by their governing college”.
3. Therefore, all non-essential visits to patients at home, within a long-term care facility or care home, must be suspended for the duration of this order.
4. RRTs should provide non-essential care to their patients in community settings through virtual care technologies. They must weigh the risk of potential exposure vs. the risk of potential deterioration of the patient when determining whether a home visit is urgent and therefore appropriate.
5. Virtual care is care delivered remotely by technology and includes by telephone, video call, or internet.
6. Virtual care provides for safe interaction with a patient and can apply to follow up care which includes but is not limited to:
 - a. monitor symptoms,
 - b. provide education on use of medication,
 - c. review care plans to reinforce best care,
 - d. monitor compliance with care plans, and
 - e. address questions or concerns a patient or family member may have.
7. As with in-person care, all virtual interaction with patients must be provided with the patients consent and must be documented in the patient record.
8. Examples of urgent care visits are:
 - a) Patients discharged from hospital with oxygen therapy;
 - To assess the patient’s current condition to set a baseline for care within the home.
 - To develop a care plan based on the oxygen prescription, respiratory medication prescription, and the patient’s current condition.
 - In an effort to limit the number of people interfacing with the patient, it is recommended that the RRT also provide the instruction on safe use of oxygen and oxygen equipment.
 - b) Follow up visits to the home may be urgent if:

- There is evidence of unsafe use of oxygen equipment or other respiratory equipment, or
 - There is evidence of failure to follow the care plan that is considered a risk to the patient or family.
8. The RRT should be aware of whether the patient is COVID-19 positive or has had possible exposure before going to the home. They must employ personal protective equipment (PPE) if there is potential exposure.
9. RRTs may be employed by both a provincial health authority and a private company. At this time of significant concern related to potential exposure to COVID-19, it is critical that RRTs who have multiple employers discuss their role within each employment setting and disclose the circumstances of the alternate employment setting. RRTs are required to work within the scope of employment and therefore must abide by policy and/or direction from each employer regarding movement from one practice area to another.
10. RRTs should monitor COVID-19 alerts at <https://novascotia.ca/coronavirus/#alerts> and updates from the NSCRT at <https://www.nscrt.com/covid-19-information>

References:

Nova Scotia College of Physiotherapists: COVID-19 Information guidance

<https://nsphysio.com/covid-19-information/guidance>

Nova Scotia Health Authority: COVID-19 Updates

<http://www.cdha.nshealth.ca/coronavirus>

Province of Nova Scotia COVID-19 Alerts

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