



The purpose of this message is to provide our members with helpful links and considerations when preparing to re-open. The OPA role is not to direct or broker members to any position on reopening of their offices or clinics. OPA members should always consult the CPO guidelines when considering their decision.

The College of Psychology of Ontario has recently provided guidance and information for members on reopening clinics. The OPA recommends our members review and continue to look for updates both from the Government of Ontario and the College website.

The College reminds members that while the province may allow some businesses to re-open it is not a requirement. Psychologists need to make their own judgement on when it is appropriate.

It is important to note that both the provincial and College recommendations continue to emphasize the need for physical distancing and proper infection control. Some helpful reminders about Coronaviruses and reducing the risk of exposure include:

- Coronaviruses on surfaces and objects naturally die within hours to days. Warmer temperatures and exposure to sunlight will reduce the time the virus survives on surfaces and objects.
- Normal routine cleaning with soap and water removes germs and dirt from surfaces. It lowers the risk of spreading COVID-19 infection.
- Disinfectants kill germs on surfaces. By killing germs on a surface after cleaning, you can further lower the risk of spreading infection.

Some additional considerations and helpful thoughts common in much of the literature and articles on reopening of offices and clinics include the following:

- Create a 'Plan' for reopening which would include creating a calendar and chart out your expected reopening day and if possible, consider an incremental period for reopening.
- An incremental or gradual approach to reopening may quickly identify and address any practical challenges presented.
- Identify what visits can be done via telehealth or other modalities and continue to perform those visits remotely. Begin with a few in-person visits a day, working on a modified schedule. Direct administrative staff who do not need to be physically present in the office to stay at home and work remotely

Additional consideration most often cited in the literature include:

- Consider what new clinic guidelines you believe are necessary to implement for staff and patient safety? (e.g. will you require all individuals to wear a cloth face covering?)
 - If the answer is yes, then this needs to be clearly explained to patients and other visitors before they arrive at the office /clinic.
 - To assist in having patients comply consider providing patients to resources where to obtain covering or how to make a cloth face covering or mask from a household item if needed.
 - Consider if a visitor or patient arrives at the clinic/office without a cloth face covering or mask do you want to provide them with one if supplies are available.

- Assess your personal protective equipment (PPE) needs and alternatives such as cloth masks, what stockpile you have currently and will need in the future, and place the necessary orders.
- As much as possible, have supplies delivered in advance before you reopen so that sporadic deliveries and other visitors do not disrupt the order of your daily plan.
- Consider how to avoid patients coming into close contact with one another
 - Again, a modified schedule helps to provide greater sense of safety for patients and staff.
 - You may want to consider a flexible schedule, with perhaps a longer span of the day with more time in between visits to avoid backups.
- Limit patient companions to individuals whose participation in the appointment is necessary based on the patient's situation (e.g., parents of children)
- Plan in advance how you will handle staffing and cleaning if an employee or patient or visitor is diagnosed with COVID-19 after being in the clinic.
 - Develop guidelines for determining when and how long employees who interacted with a diagnosed patient will be out of the clinic.
- **Create signage** for the office/clinic warning not to come in if any Flu like symptoms and update your website as well
- A good practice is to screen patients in advance of an appointment to determine/verify as best you can that the patient does not have symptoms of COVID-19. (this creates both patient and staff confidence the office /clinic is doing everything possible to ensure their safety)

The OPA set up a committee to review recommendations for Virtual Care assessment guidelines across the lifespan. We will forward these to our members in the next month or so as this work is completed.

The following are some recommended links to read when considering re-opening.

- CPO guidelines. [May 14, 2020](#)
- Ministry of Health. [Ministry of Health COVID-19 Guidance for the Health Sector](#)
- http://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/2019_MHAS_Community_guidance.pdf
- http://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/2019_patient_screening_guidance.pdf
- http://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/2019_ihf_guidance.pdf<https://www.ontario.ca/page/develop-your-covid-19-workplace-safety-plan>
- <https://covid-19.ontario.ca/workplace-ppe-supplier-directory#no-back>
- <https://www.apaservices.org/practice/news/reopening-practice-covid-19>
-

