

# CDSS Alert – COVID-19 Pandemic: IPC Interim Protocol Update

# Phase 6 Update – Effective July 11th, 2021

### **CDSS Rationale:**

Saskatchewan is poised to lift all COVID public health measures on July 11, 2021, as outlined in the Re-Open Saskatchewan Plan.

SOHP Members support the Re-Open Saskatchewan Plan.

However, this does not mean that COVID 19 has disappeared and as health care workers, we must continue to protect the public and ourselves.

Guidance for the general public is not healthcare guidance and is not intended to be applied in the health care setting where extra precautions are necessary to protect vulnerable patient populations as well as high risk SOHP members.

Health care facilities and providers, including all SOHP members, are still expected to provide COVID mitigation strategies to minimize COVID exposure, especially for patients and SOHP members that are not fully vaccinated.

### **CDSS Objectives:**

- 1. Safe dental care provision in coordination with the Re-Open Saskatchewan Plan.
- 2. Safety for patients, families, and communities.
- 3. Safety for dental providers, staff, and their families.

All CDSS members are required to review this CDSS Alert and be aware of its recommendations.

# **NEW:** All Phase 6 recommendations are based on SOHP members having <u>both immunizations</u> + 2 weeks (fully immunized).

Members that are not fully immunized should consider maintaining Phase 5 recommendations for the protection of themselves, patients and SOHP members.

CDSS members are urged to make this point on a regular basis when discussing COVID mitigation policies with team members.

Previous Phase recommendations can be found on the CDSS member section of the website.



- 1. NEW: CDSS Phase 6 recommendations will be a return to the SOHP IPC Standard for Oral Health Care Facilities (04-01 to 04-05)
- 2. **NEW:** Aerosol Control Environments (ACE), along with settle times, and isolated operatories are no longer required.

However, with respect to Saskatchewan Public Health contact tracing, it is advisable that dental facilities, especially those with open concept designs, inform SOHP members and patients not fully immunized of the possibility of being deemed a close contact and consequently being required to self-isolate.

- 3. **NEW:** A Level 3 mask under a face shield is recommended for situations where an AGP is completed using <u>dental dam and high-volume suction</u>.
- 4. **NEW:** N95 respirator under a face shield may be considered for AGPs that do not use rubber dam e.g., complex oral surgery, ultrasonic instrumentation.

### **CDSS members must:**

- 1. Continue to operate under all current CDSS Standards, Bylaws and Alerts relating the most current COVID-19 mitigation strategies and recommendation.
- 2. Utilize professional judgement in collaboration with their dental teams to provide the highest level of PPE and maintain the safest facility requirements.
- 3. Understand that AGPs are still high risk for spreading the active virus.
- 4. Regularly update their IPC facility manual with the most current CDSS COVID-19 mitigation strategies and to inform, educate and train all clinical and non-clinical staff.
- Use clinical judgement and weigh the risks of every situation to minimize COVID transmission even in an environment when most staff and patients are immunized. COVID transmission and infection is still possible in and between fully immunized individuals.
- 6. Ensure adequate supply of PPE based on the current recommendations for the treatment being provided.
- 7. Continue current SHA COVID patient and staff screening protocols, including temperatures.
- 8. Maintain physical distancing between staff and patients in the dental clinical setting.



- 9. Maintain cleaning and disinfection of clinical settings as outlined in previous Phases.
- 10. Maintain hand hygiene protocols as outlined in previous Phases.
- 11. Utilize professional judgment to consider COVID 19 best practices preprocedural rinse, indoor mask protocols, rubber dam AGP mitigation, high volume evacuation, AGP point of source extraoral evacuation, ventilation improvements.