



MTAA COVID-19 Pandemic Practice

COVID-19 Pandemic Practice Directive for MTAA Members.

It is with sincere gratitude that we thank the Alberta College and Association of Chiropractors for allowing their return to practice guidelines to serve as the basis for this MTAA directive. Through their generosity, we are able to provide our members with guidance to help keep themselves and the public safe during this COVID-19 pandemic.

- MTAA Board of Directors -

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Introduction

Effective – June 1st, 2020

The Government of Alberta introduced plans to “Re-Open Alberta” on April 30, 2020. This directive defines the requirements that healthcare professionals in a community setting must follow to decrease the risk of COVID-19 transmission. When the government enacts Stage 2 of this plan, massage therapists who return to practice must follow this directive to ensure safe practice in accordance with pandemic public health measures as a result of COVID-19. This directive is an addendum to Standard of Practice 5: Risk Identification and Management for an Outbreak of Infectious Diseases.

In response to the current environment, the circumstances and requirements asked of health providers and massage therapists when they return to practice may change rapidly. Clinicians will need to respond quickly to changes signaled from Government and the MTAA.

Note to massage therapists: This directive is current as of the date of publication and reflects the rules and requirements for MTAA members. In the event of a discrepancy between this information and the directives of provincial public health authorities, the directions of the provincial public health authority take precedence.

As health professionals, all MTAA active member massage therapists are required to:

1. Follow all mandates and recommendations from Public Health and the Government of Alberta regarding your personal and professional conduct. As an MTAA member, you have a fiduciary responsibility to follow all civil orders that originate from any level of government.
2. Read and adhere to all communication from the MTAA.

The MTAA continues to consult with external stakeholders, including the Ministry of Health and the Chief Medical Officer of Health (CMOH) and will adapt this directive based on expert recommendations. The MTAA exists to support its members through competent, engaged members participating fully in a collaborative health care system. This directive is created to ensure the health and safety of both the public and massage therapists while instilling patient confidence as they safely access massage therapy care.



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Requirements

This directive includes requirements regarding:

1. Screening
2. Hand hygiene
3. Environmental cleaning and disinfection
4. Physical distancing
5. Use of PPE
6. Exclusion or work restrictions during staff or massage therapist illness

Standard of Practice 5 -*Risk Identification and Management for an Outbreak of Infectious Diseases* and this directive must be completely reviewed and applied before you open your practice to the public. Massage therapists and clinic owners are responsible to ensure staff have read and are able to ask questions regarding this directive. Staff must be trained and audited on the implementation of all policies and procedures.

Patient screening

Massage therapists must assess and screen patients for symptoms of COVID-19 as per the requirements of Public Health ([CMOH 05-2020](#)). Patients exhibiting signs and symptoms consistent with COVID-19, should not present for clinical services during the pandemic. Any patients who are not exhibiting symptoms but have screened “yes” to being an asymptomatic person who is isolating or required to quarantine (question 2 and 3 of the following screening guideline) should not receive in person massage therapy treatment at this time.

Clinic staff should collect simple screening information at the time of booking the appointment and again in-person at the time of the patient’s visit to the clinic. People who accompany patients, such as parents, caregivers, or companions, must be screened with the same questions as the patient.

Screening questions that must be asked of patients and companions:

1. Do you have current symptoms of COVID-19, such as:
 - a. a fever,
 - b. a new or changed chronic cough,
 - c. a sore throat that is not related to a known or pre-existing condition
 - d. a runny nose that is not related to a known or pre-existing condition
 - e. Nasal congestion that is not related to a known or pre-existing condition
 - f. Shortness of breath that is not related to a known or pre-existing condition
2. Have you traveled internationally within the last 14 days?
3. Have you had unprotected close contact with individuals who have a confirmed or presumptive diagnosis of COVID-19 (e.g. individuals exposed without appropriate PPE in use).

Patients and/or companions exhibiting symptoms or answering yes to any of the screening questions should not receive massage therapy at this time and should be directed to call Health Link 811 or use the [AHS Covid-19 Self-Assessment Tool](#) .

Signage indicating screening criteria should be posted in a location that is visible before entering the clinic (main building door, main clinic entrance etc.)



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A registry of all people entering the clinic/place of work should be kept to aid in contact tracing if required. This would include people in the clinic aside from patients (e.g. couriers, guardians accompanying a patient, etc.). This is not an open sign-in book and should be kept and managed privately by the clinic or clinician in the case of an independent therapist. This registry must be kept while this directive remains in place.

If a massage therapist encounters a patient who has gone through the screening process and enters a treatment room yet still exhibits signs and symptoms consistent with COVID-19, the massage therapist must:

- Establish and maintain a safe physical distance of two metres.
- Have the patient complete hand hygiene.
- Provide a new mask for the patient to don.
- Segregate the patient from others in the clinic/place of work.
- Explain the concern that they are symptomatic, discontinue treatment and reschedule the appointment.
- Inform patient of telehealth options for care.
- Advise the patient they should self-isolate and call Health Link 811 or conduct the [AHS online Self-Assessment Tool](#).
- Clean and disinfect the practice area immediately.

Massage therapists must not attempt an assessment or clinical impression of patients who present with signs and symptoms of COVID-19.

Massage therapists are required to call Health Link (811) to receive guidance if they are aware of a patient who has visited their practice within the last 14 days and is now testing (or has tested) positive for COVID-19.

Hand hygiene

Hand hygiene is recognized as the single most important infection prevention and control (IPC) practice to break the chain of transmission of infectious diseases, including respiratory illness such as COVID-19.

Hand hygiene can be accomplished by either washing hands with soap and water and then drying with single use cloth or paper towels or using alcohol-based hand sanitizer. Alcohol-based hand sanitizer must be approved by Health Canada (DIN or NPN number), with a final concentration of 60-80 per cent ethanol or 60-75 per cent isopropanol.

When hands are visibly soiled, they must be cleaned with soap and water as opposed to using alcohol-based hand rub.

Single use cloth towels that are used in the clinic for hand hygiene must be laundered in hot water (above 60°C) with regular laundry soap and fully dried before being used again. Staff that is handling towels should be gloved for both dirty and clean laundry processing. Staff must always use new gloves when handling clean laundry.

A significant component of hand hygiene is not touching your face. In addition to proper hand hygiene, massage therapists and staff must also avoid touching their face and practice respiratory etiquette by



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coughing or sneezing into their elbow or covering coughs and sneezes with a facial tissue and then disposing of the tissue immediately. When contact with the face or a tissue is made, hand hygiene must occur before resuming any activities in the clinic environment.

Hand hygiene is required to be performed by:

- Massage therapists when:
 - entering the clinic / place of work
 - before contact with each patient
 - before clean/aseptic procedures
 - after body fluid exposure or risk of body fluid exposure
 - after contact with each patient
 - after contact with a patient's surroundings or belongings
 - before donning PPE
 - after donning PPE
 - after doffing PPE
 - after cleaning contaminated surfaces
- Staff when:
 - entering the clinic / place of work
 - before interaction with a patient
 - before clean/aseptic procedures
 - after body fluid exposure or risk of body fluid exposure
 - after interaction with a patient
 - before donning PPE
 - after doffing PPE
 - after cleaning contaminated surfaces
 - after financial transactions or administration of paperwork involving patients
- Patients when:
 - entering the clinic / place of work
 - entering the treatment area if the patient does not proceed directly to a treatment room upon entering the clinic
 - before and after use of weights, exercise equipment or similar shared equipment
 - prior to processing payment

Environment cleaning and disinfection

Effective cleaning and disinfection is essential to avoid the possible spread of COVID-19, which is spread through contact with respiratory droplets or contact with contaminated surfaces. The COVID-19 virus can survive for differing periods of time depending on the surfaces it lands on. Frequent cleaning and disinfection is necessary to prevent spread of the disease.

Cleaning products remove soiling such as dirt, dust, and oils, but do not always sanitize surfaces. Disinfectants are applied after cleaning to sanitize resulting in the destruction of germs.

Read, understand, and apply the cleaning standards from the Health Canada guide on cleaning and disinfecting public spaces during COVID-19.



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Proper disinfectant products

Disinfectants with an 8-digit Drug Identification Number (DIN) are approved for use by Health Canada. During the pandemic, only the Health Canada-approved disinfectants with a virucidal claim are appropriate for the elimination of viruses in the clinic / massage therapy environment. The disinfectant product manufacturer's instructions must be followed for use, safety, contact time, storage, and shelf life.

Alternatively, per Alberta Health Service cleaning guidelines, you can make a 1000ppm bleach water solution by mixing 20 ml (4 teaspoons) of unscented, household bleach with 1000 ml (4 cups) of water. Ensure the surface remains wet with the bleach water solution for 1 minute.

This bleach solution is only effective for 24 hours and a new solution must be made daily.

Vinegar, tea tree oil solutions, Thieves' oil, essential oils, and similar solutions are **not** proven to be effective disinfectants and cannot be used in place of Health Canada-approved disinfectants. It is a requirement that only approved disinfectants with a virucidal claim are used to limit the spread of COVID-19.

Be sure you and your staff take appropriate precautions when using chemicals for cleaning and disinfecting. This can be done by consulting the Manufacturer's Safety Data Sheets when using cleaners and disinfectants. Staff must be supplied with the appropriate safety equipment (gloves and masks) to protect themselves when they clean and disinfect.

The frequency of cleaning and disinfection is dependent on the nature of use/contact of the surface/item in question:

- Patient care/patient contact items must be cleaned and disinfected between each patient/use. Examples of patient contact items include but are not limited to:
 - treatment tables, all contact surfaces, and the entire headpiece and hand rests
 - discontinue use of any permanent treatment material that cannot be cleaned and disinfected (for example, upholstered cloth treatment tables where the cloth cannot be properly disinfected must be discontinued)
 - exercise equipment
 - therapeutic tools and devices
 - diagnostic tools and devices
 - procedural work surfaces
- Commonly touched areas must be cleaned and disinfected a minimum of twice daily or whenever visibly soiled. Commonly touched areas include but are not limited to:
 - light switches, doorknobs, toilets, taps, handrails, counter tops, touch screens/mobile devices, phones, and keyboards
 - The payment machine must be cleaned after each patient encounter.
 - Clipboards that patients contact must be disinfected after each patient encounter.
 - Pens/pencils used by patients must be disinfected after each patient use or be single use only
- Any cloth items, such as towels, sheets, headrest coverings, etc., that are used in the clinic must be laundered in hot water (above 60°C) with regular laundry soap before being dried and used again. Staff that is handling these items should be gloved for both dirty and clean laundry processing. Staff must always use new gloves when handling clean laundry.



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Required clinic environment adaptations

- Massage therapists must remove all communal items that cannot easily be cleaned and disinfected from the treatment and reception area.
- Books, magazines, toys, and remote controls must be removed from patient areas.
- Discontinue patient-accessible literature displays and directly dispense to patients or move to electronic distribution.
- Self-serve candy dish, baked goods and other open or unsealed consumables are not permitted.
- All pillows used in the treatment room must be covered with a vinyl or PVC cover that is fully sealed with a zipper. Pillows without a case, that cannot be properly sanitized must be removed from the treatment environment.
- Massage table surfaces with tears must be immediately repaired and then replaced as soon as reasonably possible.
 - At no time may patient care be provided on a table with exposed foam.
 - Duct tape is acceptable for emergency repair use only. It is expected that the arrangement for suitable long-term repair or replacement is initiated within two business days of the discovery of the tear.
- Cloth upholstery on furniture and treatment tables that can be properly disinfected may continue to be used.
 - If the cloth upholstery cannot be properly disinfected, it must be removed from the clinic environment.
- A regular schedule for periodic environmental cleaning must be established and documented.

Physical distancing

Requirements for managing clinical space:

- Physical distancing requirements take priority over occupancy limits.
- Members of the public must be two metres from each other. This applies in the following spaces:
 - treatment areas
 - waiting areas - seats must be spaced to maintain two metre distance
 - transition areas
 - People who live together are exempt from this requirement with each other.
 - Caregivers and companions that are required to attend with patients are exempt from this requirement.
- Non-clinical employees and the public must be two metres from each other.
 - Reception and payment area - If two metres cannot be maintained at reception/payment area, either staff must be continuously masked, or the installation of a plexiglass or plastic barrier must occur to protect reception staff.
- The treating practitioner must be two metres from the public when conversing.
- Restrict access to the practice environment to those who must be present, including patients, patient chaperones or companions, and staff members.
- Occupancy and gathering limits include all individuals in the office, including staff.



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- To aid in physical distancing, give consideration to:
 - Having patients wait in their vehicle until their appointment time.
 - Using Telehealth as a substitute for in-person care as appropriate.
- Ensure there is no more than one patient in the waiting room at any given time, if possible

Managing the clinical schedule:

- Ensure that booking practices (duration of treatment visits and number of patients in the practice at any given time) comply with ongoing CMOH directives on group gatherings and occupancy limits.
- This includes ensuring booking practices enable physical distancing between patients during treatment sessions and provide adequate time to clean and disinfect clinic equipment between patients.
- When scheduling, consider dedicated and/or off-hours treatment for high risk populations.

Personal Protective Equipment

Personal protective equipment (PPE) is an essential element in preventing the transmission of disease-causing microorganisms. If used **incorrectly**, PPE will fail to prevent transmission and may facilitate the spread of disease.

Staff and practitioner PPE

On April 23, 2020, Alberta Health Services announced “*Effective immediately, AHS is advising all health-care workers providing direct patient care in both AHS and community settings to wear a surgical/procedure mask continuously, at all times and in all areas of the workplace if they are involved in direct patient contact or cannot maintain adequate physical distancing from patients and co-workers*”. As MTAA members, we have agreed to uphold standards consistent with regulated healthcare professions. To ensure MTAA members are able to participate fully in a collaborative healthcare system, MTAA members must also abide by this directive.

PPE requirements

- Surgical or procedure masks are the minimum acceptable standard.
- Massage therapists and clinical staff: must be masked at all times while providing patient care.
- Non-clinical staff: must be masked when a physical distance of two metres cannot be maintained.

One mask may be used for the entire work shift, but must be discarded and replaced when wet, damaged, or soiled, when taking a break, going to the washroom and at the end of the day. N95 respirators are not required. Cloth masks are not permitted as they are not approved for health-care settings.

PPE masks must be donned and doffed using the following specific sequence to prevent contamination. AHS has provided further instructions for health-care workers (please refer to the reference section at the end of this document).

Donning mask:

1. Perform hand hygiene.
2. Open mask fully to cover from **nose to below chin**.



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3. Put on mask.
4. Secure ties to head (top first) or elastic loops behind ears.
5. Mould the flexible band to the bridge of nose (if applicable).
6. Ensure snug fit to face and below chin with no gaping or venting.

Doffing mask:

1. Perform hand hygiene.
2. Do not touch the front of the mask.
3. Carefully remove mask by bending forward slightly, touching only the ties or elastic loops. Undo the bottom tie first then undo the top tie.
4. Discard the mask in the garbage.
5. If the mask itself is touched during doffing, perform hand hygiene.
6. **Never reuse masks.**

It is essential that all massage therapists and staff providing services in a clinic or any other massage therapy setting are aware of the proper donning and doffing of PPE. The use of PPE must be precise and ordered to limit the spread of COVID-19.

AHS PPE Resources must be reviewed and understood before all massage therapists and staff provide patient care. Training and practice of donning and doffing PPE within your place of work are essential to ensure the proper use of PPE in support of limiting the spread of COVID-19.

Patient provision of PPE

The Chief Medical Officer of Health (CMOH), Dr. Hinshaw, has recommended that all members of the public should wear a non-medical mask when in public spaces and unable to maintain two-meter physical distancing. In the Alberta government, Guidance for Wellness Services document, it recommends that clients should always wear a non-medical mask during a massage therapy session. If a client has difficulty breathing while prone, their mask may be removed. Once a client is supine, or the treatment has concluded, proper hand hygiene should be preformed, and the client should put on a face mask.

It is the practitioner's legal responsibility to attempt to comply with all relevant guidance documents issued by Alberta Health. To comply with the government relaunch guidelines, the MTAA recommends all members request that their patients wear some form of non-surgical / non-medical mask during their appointment. If a patient does not arrive wearing a mask, the massage therapist should have appropriate non-medical, or surgical/procedural masks available for the patient. These masks do not need to be provided free of charge, but they should be made available to the patient. If a massage therapist provides masks for patients, the massage therapist or staff must educate the patient on the proper donning and doffing of masks and observe that it occurs properly.

If a patient refuses to wear a mask, it is expected the therapist will use their professional judgement to determine if they are able to safely perform an assessment or treatment session. If a therapist cannot ensure safety and physical barriers to possible transmission, they should re-schedule the appointment until such a time when mask wearing is not required.

If a massage therapist encounters a patient who has gone through the screening process and enters a treatment room yet still exhibits signs and symptoms consistent with COVID-19, the massage therapist must:



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- Establish and maintain a safe physical distance of two metres.
- Have the patient complete hand hygiene.
- Provide a new mask for the patient to don if they are not already masked.
- Segregate the patient from others in the clinic.
- Explain the concern that they are symptomatic, discontinue treatment and reschedule the appointment.
- Advise the patient they should self-isolate and call Health Link 811.
- Clean and disinfect the practice area immediately.

Massage therapists must not attempt an assessment or clinical impression of patients who presents with signs and symptoms of COVID-19.

Clinic clothing

Clean clothes must be worn by the practitioner and staff each day.

If the practitioner and staff drive directly from their home to the clinic/place of work, no change of clothes is required. However, if they stop at other locations on their way to the place of work, then donning new clean clothes in the clinic is required.

Clothes worn in the clinic must not be worn in public afterwards. Practitioners and staff must change into different clothes at the end of their shift.

To clean clothes worn in the clinic, wash clothing in hot water (above 60°C) with regular laundry soap.

Mobile Massage Therapy

Massage therapists who are providing mobile massage therapy sessions must ensure they follow the same pandemic practice guidelines as previously stated. In addition to adhering to all the previously outlined practice measures, a mobile massage therapist must:

- Maintain social distancing as much as possible
- Ensure COVID-19 screening on all people in the treatment area
- Record a log of all people encountered during treatment session
- Ensure all hand hygiene and sanitization procedures are followed
- Always wear a surgical / procedural mask when providing care or when 2m distance from person(s) cannot be maintained.
- After treatment, remove all linens and supplies. Stow linens and supplies in a sealed bag and place in the trunk of the massage therapist's vehicle, separate from anything else, until proper sanitization can be completed.
- Sanitize all doorknobs, handles, and surfaces in the treatment area.

Exclusion or work restrictions in the case of staff or massage therapist illness

Staff and massage therapists must self-screen for symptoms before arrival at work with the same symptom screening questions used for patients. If screening is positive, staff and massage therapists must not come to the clinic/place of work.



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Staff and massage therapists must complete a recorded formal screening upon arrival at work. This screening history must be kept while this directive remains in place.

Screening questions that must be asked with staff and massage therapists, and a record kept:

1. Do you have current symptoms of COVID-19, such as:
 - a. a fever,
 - b. a new or changed chronic cough,
 - c. a sore throat that is not related to a known or pre-existing condition
 - d. a runny nose that is not related to a known or pre-existing condition
 - e. Nasal congestion that is not related to a known or pre-existing condition
 - f. Shortness of breath that is not related to a known or pre-existing condition
2. Have you traveled internationally within the last 14 days?
3. Have you had unprotected close contact with individuals who have a confirmed or presumptive diagnosis of COVID-19 (e.g. individuals exposed without appropriate PPE in use).

Per the [CMOH order 05-2020](#), massage therapists and staff who screen positive for the questions above are not eligible to work. Current requirements from Alberta Health state that self-isolation must continue, and workers must not return to work, until 10 days have passed from symptom onset or until symptoms resolve, whichever is longer. This requirement for self-isolation is waived if the person tests negative for COVID-19 and has not had any known exposure to the virus.

Per the CMOH, massage therapists and staff must also immediately inform their direct supervisor at the onset of any symptoms from the screening questions. Massage therapists who become symptomatic while treating patients must stop seeing patients immediately and follow self-isolation procedures.

This requirement is subject to change and massage therapists are directed to stay up to date with the directives of the CMOH. Massage therapists are reminded that employers may also set requirements for return to work, so long as those requirements are not less stringent than those established by the CMOH.

All workplaces must develop a workplace illness policy, as per the Government of Alberta's requirements. A link to a reference guide is included in the resource page at the back.

Massage therapists are required to call Health Link 811 to receive guidance if they are aware of a patient who has visited their clinic in the last 14 days and is now testing (or has tested) positive for COVID-19.



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Resources

General

- [CMOH order 05-2020: 2020 COVID-19 response](#)
- Alberta Government [COVID-19 Relaunch Guidance for Wellness Services](#)
- Alberta Health - [Interim IPC Recommendations COVID-19](#)
- Health Canada - [Risk-informed decision-making guidelines for workplaces and businesses during the COVID-19 pandemic](#)
- Alberta Health Services - [Routine Practices in Community-Based Services](#)
- MTAA - [Standard of Practice 5 – Risk Identification and Management for an Outbreak of Infectious Diseases](#)
- MTAA - [Temporary Telehealth Policy](#)
- MTAA - [COVID-19 Information](#)

Screening

- [Sample Screening checklist – Alberta College and Association of Chiropractors](#)

Hand hygiene

- Health Canada – [Authorized list of hard-surface disinfectants and hand sanitizers](#)
- Alberta Health - [How to Use Alcohol-based Hand Rub](#)
- Alberta Health - [How to Hand Wash](#)
- Alberta Health - [4 Moments of Hand Hygiene \(poster\)](#)

Environmental cleaning and disinfection

- Health Canada – [Authorized list of hard-surface disinfectants and hand sanitizers](#)
- [COVID-19 Public Health Recommendations for Environmental Cleaning of Public Facilities](#)

Personal Protective Equipment

- [AHS Provided: Personal Protective Equipment \(PPE\): FAQs](#)
- Alberta Health - [Cover Your Cough \(poster\)](#)
- Alberta Health - [Guidelines for Continuous Masking in Healthcare settings](#)
- [AHS Provided: For Healthcare Workers: How to Wear a Mask](#)
- AHS PPE Resources
 - [Donning Poster](#)
 - [Doffing Poster](#)
 - [Donning and Doffing of PPE \(Video\)](#)
 - [For Healthcare worker: How to wear a Mask Poster](#)

Exclusion or work restrictions during staff or massage therapist illness

- [Sample Screening checklist – Alberta College and Association of Chiropractors](#)
- [COVID-19 assessment tool for health-care workers](#)
- [COVID-19 information: Workplace Guidance for Business Owners](#)
- [COVID-19 Alberta website for guidance for workplaces](#)