



The Nova Scotia College of Nursing (NSCN) is the regulatory body for licensed practical nurses (LPNs), registered nurses (RNs) and nurse practitioners (NPs) in Nova Scotia. Our mandate is to protect the public by promoting the provision of safe, competent, ethical and compassionate nursing services by our registrants. The term nurse in this document refers to LPNs, RNs and NPs unless otherwise stated.

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Our practice support tools are developed using current reference material. The source of this material is available upon request.



The mandate of the Nova Scotia College of Nursing (NSCN) is public protection. These additional guidelines are specifically for **self-employed nurses whose practice includes direct contact with clients**. The guidelines support self-employed nurses, so they continue to be prepared to deliver safe and competent nursing services care in their self-employed practice.

The COVID-19 pandemic has brought focus on the importance of the safe delivery of health, social, community and commercial services in order to slow the spread of the virus. The Nova Scotia Chief Medical Officer of Health (CMOH), along with medical officers and government authorities worldwide, have based their public health orders on an ever-evolving base of knowledge and research relating to the unique properties and manifestations of COVID-19.

On March 23, 2020, the Chief Medical Officer in Nova Scotia issued an order under section 32 of the Health Protection Act. The 'Order' limited the practice of some self-regulated health professionals in private practice to in-person emergency or urgent care services and virtual care for non-emergency or elective services. The Order excluded nursing services primarily because of the service that nurses provide and the contexts in which this care is provided. However, some self-employed nurses voluntarily suspended their service until more was understood about the COVID-19 situation.

Effective June 5, 2020 all self-regulated professions were permitted to resume in-person care for non-emergency or elective services. **All health care providers in private practice, including self-employed nurses, must be compliant with the recommendations in this guideline before returning to or continuing their self-employed practice, regardless of the nature of the services provided or number of clients on their roster.**

As of December 1, 2020, there have been numerous directives by the Chief Medical Office. Strategies will evolve as the pandemic continues and it is anticipated there could be changes to health practices. Check regularly with the [Public Health Agency of Canada](#) (PHAC), the [Government of Nova Scotia](#) and/or the Government of Canada websites to ensure you are complying with the most recent directives. The [COVID-19](#) page on the NSCN website is also a source of information.

The New Normal and Minimizing the Transmission of COVID-19

Until immunity levels are adequate in the general population, COVID-19 will be present. Nova Scotians, and those around the world, will not be able to return to the norms of 2019. Instead, we must move to a new normal that balances the risks of transmission of COVID-19 with the benefits of safely re-opening society and providing health services.

The goals of minimizing transmission are to preserve the public health and health-care systems, minimize preventable mortality and morbidity and protect vulnerable populations. Nurses must implement the recommendations in this guideline in their self-employed practice to ensure the risk of transmission is reduced to the extent possible.

About These Guidelines

These guidelines were developed with guidance from Public Health and are based on core Public Health principles and current best evidence. They have been [approved for use by the Nova Scotia's Chief Medical Officer of Health](#). They do not replace the current [Self-Employment Practice Guidelines](#) and are intended to be used together. The information in this document may change over time as evidence and the epidemiological data around COVID-19 evolves.

Every health profession has been required to develop guidelines for their registrants. Effort have been taken to minimize any variation in recommendations across professions. Despite this, there may will be differences in requirements between professions.

Core Principles

To minimize the transmission of COVID-19, nurses in all contexts must adopt the following principles. These principles may overlap with some individual recommendations.

1. Maintain compliance with your [standards of practice](#) and [code of ethics](#).
2. Stay informed, be prepared and follow the measures or mandates as outlined by Nova Scotia's Chief Medical Officer of Health, Public Health, and/or [Health Orders under the Health Protection Act](#).
3. Follow recommendations from the [Government of Nova Scotia](#), [Government of Canada](#) and/or [Public Health Agency of Canada](#). As a regulated health professional, you are accountable to follow all civil orders that originate from any level of government.
4. Read all communication from NSCN.
5. Follow best practice recommendations from nursing organizations or nursing associations relevant to your individual self-employed practice.
6. Ensure physical distancing when outside of the home or workplace.
7. Practise personal public health measures and hygiene (e.g. practice hand hygiene, avoid touching face, ensure respiratory etiquette, disinfect frequently touched surfaces).
8. Limit non-essential travel.
9. Increase environmental cleaning and ventilation of common workspaces, equipment and tools.
10. Stay home and away from others when symptomatic and following public health advice.

Practice Settings of Self-Employed Nurses

The practice settings and services offered by self-employed nurses in Nova Scotia vary. Most self-employed nurses work alone, while others may have employees. Generally, self-employed nurses with direct client contact practice in client's homes, a clinic or shared workspace (often owned by a third party) or in a facility via a contractual relationship as an independent contractor.

The variety of self-employed practice types and contexts means that not every recommendation will apply to every self-employed nurse. **However, self-employed nurses are expected to meet or exceed the requirements of all the recommendations that do apply to them.**

Nurses whose self-employed practice do not include direct contact with clients need only refer to the [Self-Employment Practice Guidelines](#). Nurses employed by organizations may receive additional COVID-19 guidance from their employer.

Self-employed nurses who employ others are accountable to ensure their staff are aware of and compliant with the recommendations in their plan.

Components of your Plan

Consider the following. Where applicable, include as part of your plan before returning or continuing your self-employed practice. Specific recommendations for certain practice settings, such as a client's home, clinic or independent contractor, or self-employed nurses with employees or a team of staff will be identified as such.

1. [Communications Plan](#)
2. [Virtual Screening and Follow up](#)
3. [Contact Tracing](#)
4. [Self-Assessment](#)
5. [Personal Protective Equipment \(PPE\)](#)
6. [Supply Chain for PPE](#)
7. [Public Health Measures](#)
8. [Client Assessments](#)
9. [Managing Symptoms During an Appointment](#)
10. [Physical Distancing](#)
11. [Cleaning and Infection Control Practices](#)
12. [Resources](#)
13. [Appendix A: Hand Hygiene](#)
14. [Appendix B: Donning and Doffing PPE](#)
15. [Readiness Checklist](#)

Acknowledgment

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1 | COMMUNICATIONS PLAN

The goal of the communications plan is to ensure your clients are fully informed about COVID-19 related changes before their scheduled appointment. Your communications plan must also consider your practice context (client's home, clinic or independent contractor).

Recommendations to include in a Communications Plan

- The nature of the services you are providing, especially if services have been changed, discontinued or altered due to COVID-19.
- Any changes in your service delivery model, including the use of technology to virtually collect data, screen clients or provide follow up care virtually.
- The requirement of the client to self-assess for symptoms consistent with COVID-19 before their appointment.
- The promotion of individual and public health measures such as physical distancing, frequent hand hygiene, avoid touching face and respiratory etiquette.
- When a mask is required and when it is not.
- For clients coming to a clinic or facility:
 - Alternative appointment booking or notifications, such as waiting in their car until called to come into the space or the use of text messaging.
 - Physical distancing in waiting areas.

2 | VIRTUAL SCREENING AND FOLLOW UP

Virtual screening enables you to focus the in-person time directly on performing an assessment or intervention. Virtual screening can take place via the telephone or other form of technology.

Recommendations

- **Before** the scheduled appointment **and** upon arrival to the appointment screen all clients for; the presence of COVID-19 symptoms, travel outside the province in the past 14 days, exposure to someone who has tested positive for COVID-19, or is required for any reason to be self-isolating.
- Use the [online 811 assessment](#) to screen clients.
- Minimize the amount of time needed for an in-person appointment or visit by collecting relevant data and information during the pre-visit virtual screening call.
- Inform clients of the public health measures that will be in effect during the appointment or visit. See below for more details.
- When and where appropriate, consider the use of technology for follow up care to limit the face-to-face contact or unnecessary travel by you or the client.

Travel restrictions will vary over time. When screening clients use the most current and up to date government or public health recommendations.

3 | CONTACT TRACING

Contact tracing is a process used to identify and monitor people who have had close contact with someone known to be infected with COVID-19.

Recommendations

- Maintain a registry of names and appointment dates and times to facilitate Public Health contact tracing if required.

4 | SELF-ASSESSMENT

You must conduct self-assessments daily and as frequently as necessary, such as just before entering a client's home or your workspace. You should also encourage clients and others to conduct self-assessments before each appointment and validate their self-assessments upon arrival.

Recommendations

- Self-monitor for symptoms of COVID-19.
- Self-refer to 811 to arrange for testing if experiencing one or more symptoms compatible with COVID-19.
- Stay home and refrain from providing nursing services until negative COVID-19 testing is confirmed.
- Advise clients to cancel appointment, stay home and refer to 811 for testing if they are experiencing one or more symptoms compatible with COVID-19.
- If you provide self-employed nursing services in a clinic:
 - post accessible and easily understood signage to discourage clients or others from coming to the work area if they are experiencing symptoms of COVID-19 or have been exposed to someone with COVID-19 in the past 14 days.
- If you employ others:
 - require staff to self-assess for symptoms of COVID-19.
 - keep them informed about public health advice applicable to your self-employed practice.
 - adjust absenteeism policies to enable staff to stay home when ill, in quarantine (self-isolation), or if they are taking care of children or someone who is ill.
 - ensure plans are in place for increased worker absences due to illness or isolation.
- If you provide your self-employed nursing services as an independent contractor:
 - follow all applicable policies when working within the organizational space.

5 | PERSONAL PROTECTIVE EQUIPMENT

Personal protective equipment (PPE) is an essential element in preventing the transmission of all disease-causing microorganisms, including COVID-19. If not used correctly, PPE will fail to prevent transmission and may facilitate the spread of the virus. One mask may be used for the entire workday or shift, unless it becomes wet, damaged or soiled.

Non-medical masks (NMM) or face coverings with two or three layers can be made at home from fabric. If you are making your own masks, consider creating a pocket for a filter. When worn properly, non-medical masks can reduce the risk of transmitting the virus in the same way that following cough and sneeze etiquette can protect others. Go to <https://novascotia.ca/coronavirus/masks/#Choosing> for more information about non-medical masks.

Surgical or procedural masks provide greater protections and should be worn continuously during direct and indirect client interactions. N95 respirators are not required for any procedures in the community setting and should not be used in order to preserve supplies for appropriate settings.

Recommendations

- Know how to appropriately don and doff a mask (See [Appendix A](#) for more details). Review the Nova Scotia Donning/Doffing Mask Poster and other resources in the Resource Section. If you employ others, ensure they review the resources and have an opportunity to ask questions and practice donning and doffing a mask.
- Know when a surgical mask is required for you, client and others (providing direct/indirect care, symptomatic clients, unable to maintain physical distancing) and when a non-medical mask will suffice.

Surgical Masks

- Wear a mask whenever face-to-face (direct) or indirect contact with clients is required or adequate physical distancing from others cannot be maintained in the workspace.
- Identify alternate methods of communication when caring for a client who relies on lip reading. Maintain adequate physical distancing if the mask is temporarily removed.
- A surgical mask is required immediately if you, a client or staff member show symptoms compatible with COVID-19 during an appointment (See **Managing Symptoms During an Appointment** for more details).

Non-Medical/Surgical Masks

- Wear a non-medical mask in the workspace if physical barriers are not available, physical distancing of 2 metres/6 feet cannot be maintained or if there is potential exposure to crowded public spaces.
- Wear a non-medical mask is required at private indoor workplaces (like offices) in all common areas, places where there's interaction with the public, areas with poor ventilation and areas where people can't maintain a minimum physical distance of 2 metres (6 feet) from others
- Encourage clients and others to wear a non-medical mask while you are providing care for them. Provide instruction and guidance as needed.
- Encourage clients, family or others to use a non-medical mask when they are travelling to access health care services, especially if they are experiencing symptoms or if they are in close contact with others who are symptomatic.
- Keep informed about the appropriate use of non-medical masks by reviewing the [Public Health Agency of Canada](#) website.

6 | SUPPLY CHAIN

A supply chain represents the steps you will take to ensure you have an adequate supply of PPE for today and in possible subsequent waves of COVID-19.

Recommendations

- Know how to assess, store and maintain an adequate supply of masks and other PPE.
- Have a plan to manage your self-employed practice in the event of future supply chain issues, including:
 - the use of non-medical masks where appropriate
 - voluntarily suspending your self-employed practice until you can re-establish your PPE supply, and;
 - a communications plan for clients including how they can access care if your practice is temporarily suspended.
- If you choose to use non-medical masks while experiencing PPE supply chain issues, follow Public Health recommendations for non-medical mask type, use, storage, laundering and maintenance that are current at the time. Monitor Public Health communications frequently as recommendations may change over time.

7 | PUBLIC HEALTH MEASURES

Nurses must follow and encourage clients to follow public health personal hygiene recommendations. [Hand hygiene](#) is recognized as the single most important infection prevention and control practice to break the chain of transmission of infectious diseases, including respiratory illness such as COVID-19.

Recommendations

- Educate and remind clients and others of public health measure in effect. These include:
 - Cough or respiratory etiquette
 - Use a tissue or your elbow
 - Dispose of used tissues
 - Perform hand hygiene after
 - Hand hygiene (See [Appendix A](#) for more details).
 - Avoid touching the face as this a significant component of hand hygiene.
- Post accessible and easily understood signage to remind clients and others to practice good hygiene.
- Provide accessible handwashing facilities or hand sanitizer dispensers at critical places within the workspace. Post or provide instructions of the proper procedure.
- If providing care in a client's home, bring a supply of hand sanitizer and surface disinfectant to each appointment.
- Where possible, minimize the need for external service providers, suppliers and others to enter the workspace. When they must be onsite, ensure they adhere to provincial COVID-19 health and safety requirements related to physical distancing and hygiene practices.

8 | CLIENT ASSESSMENTS

The client's [care plan](#) is developed and evaluated on the findings of an assessment. The need and importance of the client assessment has not changed because of COVID-19. However, how it is performed may look different, especially when using technology to support virtual screening.

Recommendations

- Before the appointment, review any client data and information collected during the pre-visit screening so the in-person time can be minimized and your focus can be on the direct assessment or performing the required service. Ensure that the client is not required for any reason to be self-isolating.
- Validate the client's self-assessment before providing any services and re-book the appointment if the client arrives with any symptoms compatible with COVID-19.

9 | MANAGING SYMPTOMS DURING AN APPOINTMENT

Take action immediately if you, a client or others display symptoms compatible with COVID-19 during an appointment. Swift action can further prevent the transmission of the virus.

Recommendations

Nurse or Client Becomes Symptomatic – Overall Steps:

- perform hand hygiene (See [Appendix A](#) for more details)
- immediately apply a surgical mask (if not already wearing)
- inform the client if you have become symptomatic
- have the client perform hand hygiene and don a surgical mask
- discontinue appointment unless its urgent. Otherwise move to an isolated space in the work area or home before continuing
- refer yourself and/or client to 811 to arrange for COVID-19 testing
- clean and disinfect your reusable equipment or tools (See **Cleaning and Infection Control Practices** for more details)
- leave the area as soon as possible
- prepare a contact tracing list for Public Health in the event of a positive test
- suspend any in-person appointments until COVID-19 testing is negative
- advise your other clients how and where they can get service while you are self-isolating

Symptomatic Nurse

- If you become symptomatic in a client’s home, follow the overall steps and:
 - clean and disinfect any areas where you may have touched
 - advise client where they may receive ongoing service after negative testing has been confirmed.
- If you become symptomatic in a clinic setting, follow the overall steps and:
 - clean and disinfect any areas where you may have touched
 - advise others sharing the space and/or clinic owner
 - follow any applicable clinic policies
- If you become symptomatic while working in a facility as an independent contractor, follow the overall steps and:
 - clean and disinfect any areas where you may have touched
 - advise the management team and others in the facility
 - transfer the care to the client to another care provider if necessary
 - follow any applicable facility policies

Symptomatic Client

- If your client become symptomatic while you are in their home, follow the overall steps and:
 - clean and disinfect any areas where you may have touched
 - advise client that further service will be suspended until negative testing is confirmed
- If your client become symptomatic in clinic setting, follow the overall steps and:
 - clean and disinfect any areas where you may have touched
 - advise others sharing the space and/or clinic owner
 - provide PPE for the client support person
 - follow any applicable clinic policies
- If your client become symptomatic in a facility, follow the overall steps and:
 - clean and disinfect any areas where you may have touched
 - advise the management team and others in the facility
 - transfer the care to the client to another care provider if necessary
 - follow any applicable facility policies

10 | PHYSICAL DISTANCING

Following the physical distancing (PD) guidelines can reduce the spread of COVID-19. Where possible, limit your contact with other people and stay 2 metres (6 feet) away from them.

Recommendations

- Use a non-medical mask when PD is not possible.
- Wear a non-medical mask is required at private indoor workplaces (like offices) in all common areas, places where there's interaction with the public, areas with poor ventilation and areas where people can't maintain a minimum physical distance of 2 metres (6 feet) from others
- Reinforce other general practices to maintain PD, such as avoiding greetings like handshakes and maintaining 2-meter (6 feet) separation.
- If you provide self-employed nursing services in your clients' homes:
 - Educate clients and family about the PD requirements in the home.
 - Provide care in a space away from other residents or if this is not possible, ask others to wear a non-medical mask while you are in the space.
- If you provide self-employed nursing services in a clinic:
 - Use alternative to waiting rooms, such as having clients wait in their car until you are ready to see them.
 - Use visual cues to guide distancing and client flow.
 - Install barriers or partitions between workspaces or entry desks.
 - Ensure adequate space (2 meter or 6 feet) in waiting areas and between workspaces.
 - Ensure that booking practices (duration of appointment and number of clients in the space at any given time) comply with ongoing CMOH directives on group gatherings and occupancy limits.
- If you provide self-employed nursing services in a facility as an independent contractor:
 - Follow relevant facility PD specific policies.

11 | CLEANING AND INFECTION CONTROL PRACTICES

COVID-19 is spread through contact with respiratory droplets or contact with contaminated surfaces. Effective cleaning and disinfection are essential to avoid the possible spread of the virus because it survives for different periods of time on different surfaces. The frequency of cleaning and disinfection is dependent on the nature of use and contact of the surface or item in question. Not all cleaning products disinfect. Health Canada has created a [guide](#) on cleaning and disinfecting public spaces during COVID-19.

Recommendations

- Use disinfectants with an 8-digit Drug Identification Number (DIN) that are approved for use by Health Canada:
 - During the pandemic, only Health Canada approved disinfectants with a virucidal claim are appropriate.
 - Follow the manufacturer's instructions for use, safety, contact time, storage and shelf life.
 - As an alternative, use a 1000 ppm bleach water solution by mixing 20 ml (4 teaspoons) of unscented, household bleach with 1000 ml (4 cups) of water per the Nova Scotia Dept of Health and Wellness cleaning guidelines.
 - Ensure the surface remains wet with the bleach water solution for 1 minute.
 - **Do not use** vinegar, tea tree or Thieves' oil, or solutions not approved by Health Canada.
- Take appropriate precautions (such as gloves and masks) to protect yourself or your staff if you employ others when using cleaning and disinfecting products:
 - Consult the Manufacturer's Safety Data Sheets
 - Always follow directions.
- [Clean and disinfect](#) reusable client equipment between each use (See [Additional Resources](#)).
- Frequently assess and inspect reusable client equipment for visible soil or damage to the integrity which could make cleaning more difficult. Replace as needed.
- Consult relevant nursing association, organization or equipment manufacture for best practices in cleaning any equipment specific to your self-employed nursing practice.
- Identify high touch surfaces or objects specific to your self-employed practice (e.g. travel tote, or tray set-up) in addition to those listed below and assess them frequently, and clean and disinfect at least twice a day and as needed.
- Reduce the number of common surfaces that require touching (e.g. no-touch waste containers).
- Offer contactless payment methods and avoid the use of cash, if possible. Clean the payment machine after each use.
- Do not use upholstered cloth items where the cloth cannot be properly disinfected .
- If you provide self-employed nursing services in client homes:
 - Assess and regularly clean frequently touched surfaces
 - Clean and disinfect areas within your workspace before and after use (e.g., a table where you may set up a dressing tray).
- If you provide self-employed nursing services in a clinic setting:
 - remove non-essential items from workspace or waiting areas, including magazines, toys, and remote controls
 - clean and disinfect essential shared medical and non-medical equipment before and after use
 - clean and disinfect commonly touched areas, such as light switches, door handles, toilets, taps, handrails, counter tops, touch screens, mobile devices, keyboards, reception counters, seating areas including clinic room seats and objects, or machines used in therapies at least twice daily and whenever visibly soiled
 - remove cloth seating if it cannot be cleaned and disinfected
 - discourage the sharing of pens, phones, desks, offices and other tools or equipment, and if not possible, clean between use and at the end of the day
 - limit the exchange of papers. If documents must be exchanged, leave them on a clean surface while maintaining a 2 meter/6-foot distance
 - discontinue the use of client sign-in sheets and boards.
- If you employ others:
 - you must provide access to tissues, no-touch trash receptacles, hand soap, alcohol- based hand sanitizers approved by Health Canada with a DIN or NPN number, sanitizing wipes, disinfectants and disposable towels.

12 | OTHER RESOURCES

The following resources may be helpful as you develop a plan for your self-employed nursing practice.

CONTACT TRACING
Contact tracing process (NSHA)
NOVA SCOTIA COLLEGE OF NURSING (NSCN)
Self-Employment Practice Guidelines
Practice Support Tools
COVID-19 Information for Public, Nurses and Employers
Nursing Care Plan Guidelines
Telenursing and Providing Care Virtually by Technology
CANADIAN NURSES ASSOCIATION
Get the Facts: Coronavirus: COVID-19
GENERAL
Nova Scotia's Novel Coronavirus (COVID-19) Disease Health System Protocol
Canada's Centre for Digital and Media Literacy
SCREENING
COVID-19 Screening checklist (Nova Scotia Government)
HAND HYGIENE
Authorized list of hard-surface disinfectants and hand sanitizers (Health Canada)
How to Hand Wash (Nova Scotia Coronavirus Resources)
How to Use Alcohol-based Hand Rub (Nova Scotia Coronavirus Keeping Hands Clean)
ENVIRONMENTAL CLEANING AND DISINFECTION
Cleaning and sanitizing information (Nova Scotia Government)
Authorized list of hard-surface disinfectants and hand sanitizers (Health Canada)
COVID-19 Public Health Recommendations for Environmental Cleaning of Public Facilities (Health Canada)
PERSONAL PROTECTIVE EQUIPMENT
Alberta Health Services: Personal Protective Equipment (PPE): FAQs
Nova Scotia Donning/Doffing Mask Poster
Alberta Health Services: For Healthcare Workers: How to Wear a Mask
NSHA video – The Right PPE, the Right Time
Use of non-medical masks (Public Health Agency of Canada)
NSHA policy on masks
BUSINESS OWNERS
COVID-19 information: Workplace Guidance for Business Owners

13 | APPENDIX A: HAND HYGIENE

A significant component of hand hygiene is not touching your face. Nurses, clients and others should be encouraged to avoid touching their face after performing hand hygiene.

Recommendations

Soap and Water

- Wash hands with soap and water for 20-30 seconds and dry with single use cloth or paper towels.
- Use soap and water, rather than hand sanitizer, when hands are visibly soiled.
- Single use cloth towels for hand hygiene must be laundered in hot water (above 60°C) with regular laundry soap and fully dried before being used again.

Hand Sanitizer

- Use approved hand sanitizer for 20-30 seconds when hands are not visibly soiled. Hand sanitizer must be approved by Health Canada (DIN or NPN number). The list of approved products can be found at [HERE](#).

Performing Hand Hygiene

- Nurses and others if they employ them must perform hand hygiene:
 - upon arrival to the appointment
 - before contact with each client
 - before performing procedure or intervention
 - before handling any clean equipment
 - after body fluid exposure or risk of body fluid exposure
 - after contact with each client
 - after contact with a client 's surroundings or belongings
 - before donning PPE
 - after donning PPE
 - after doffing PPE
 - after cleaning any client or reusable equipment or contaminated surfaces
 - before and after charting, using a computer, telephone or other shared piece of equipment
 - before and after a financial transaction
 - any time they are unsure of the integrity of their hand hygiene
- Clients should perform hand hygiene:
 - upon arrival to the appointment
 - upon arrival to the treatment area if there has been a delay after arrival and a treatment area is part of your process
 - before and after touching any equipment
 - before and after a financial transaction
 - any time they are unsure of the integrity of their hand hygiene
 - upon departure

Laundry

If your self-employed practice involves handling clean or soiled laundry:

- Use gloves to handle soiled laundry.
- Perform hand hygiene before handling clean laundry.
- Avoid cross contamination by holding clean laundry away from body as well as treat linens that have been in contact with the floor as soiled.

14 | APPENDIX B: DONNING AND DOFFING PPE

Recommendations

Donning a Mask

1. Perform hand hygiene
2. Open mask fully to cover from nose to below chin
3. Put on mask
4. Secure ties to head (top first) or elastic loops behind ears
5. Mold 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 a Mask: Do not touch the front of the mask!

1. Perform hand hygiene
2. Carefully remove mask by bending forward slightly, touching only the ties or elastic loops. Undo the bottom tie first then undo the top tie
3. Discard the mask in the garbage (if required)
4. Perform hand hygiene, especially if the front of the mask was touched

15 | READINESS CHECKLIST

This checklist does not represent all the individual recommendations. However, it is designed to provide you with an overview of key processes to consider as you prepare a plan before returning or continuing your self-employed nursing practice.

	ITEM	YES	NO	N/A	NOTES
COMMUNICATIONS PLAN	Communications plan is developed				
	Alternative booking or appointment notifications				
VIRTUAL FOLLOW-UP CARE	Pre-screen clients by phone or technology				
	Follow up with clients by phone or technology				
CONTACT	Contact tracing process ready				
SELF-ASSESSMENT	Self-assessment process (811 screening) for nurse, client, staff, others				
	Signage or a way to communicate to clients the need for self-assessment before appointment				
	Process to advise clients when you can't see them (due to self-isolation)				
	Flexible cancellation policies when clients are self-isolating				

	ITEM	YES	NO	N/A	NOTES
PPE AND SUPPLY CHAIN	Adequate PPE supply				
	Able to don and doff (you and staff)				
	Able to teach clients to don and doff				
	Established supply chain for PPE				
PUBLIC HEALTH MEASURES	Capacity for hand hygiene				
	Signage posted or able to teach others				
ASSESS CLIENT & MANAGING SYMPTOMS DURING APPOINTMENT	Process to validate client self-assessment upon arrival				
	Process to address if you, a client or your staff become symptomatic during an appointment				
	Signage of information about public health measures in effect				
	You have adequate hand hygiene supplies in mobile kit				
PHYSICAL DISTANCING	Processes to facilitate PD in your practice setting				

	ITEM	YES	NO	N/A	NOTES
CLEANING AND INFECTION CONTROL PRACTICES	Do you know how to clean all your equipment				
	Have appropriate supplies (Health Canada approved)				
	Frequently assess and clean reusable supplies				
	Increase cleaning of high touch areas to twice daily and as required				
	Staff have access to necessary cleaning supplies				

OTHER NOTES