



**College of Alberta
Dental Assistants**

COVID-19

Return to Non-essential Practice

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Introduction

The Government of Alberta introduced Alberta's Relaunch Strategy on April 30, 2020. It included that the dental industry could begin reintroducing non-emergency oral health care services as of May 4, 2020. The Alberta Dental Association and College (the ADA&C) started by adding urgent treatment effective May 4, 2020, provided that its practitioners follow the updated *Guidelines on Emergency and Urgent Treatment*.

Alberta implemented Stage 1 of the Relaunch Strategy on May 14, 2020. In Stage 1 regulated health professionals can return to offering full services as long as they follow approved guidelines set by their professional colleges. Dental Assistants must follow the guidelines in this document. On May 12, 2020, the ADA&C released *Expectations and Pathway for Patient Care during the COVID-19 Pandemic (Expectations and Pathway)*. We also expect Dental Assistants providing support to regulated members of the ADA&C follow *Expectations and Pathway*.

The purpose of this document is to identify the methods that Dental Assistants can use to protect the public, their patients and colleagues as well as themselves as they provide routine oral health care services subject to the orders of Alberta's Chief Medical Officer of Health (the CMOH).

The information in this guideline has been gathered from provincial and federal references. The College of Alberta Dental Assistants (the College) looks for best practice and evidence-based information to disseminate to Dental Assistants. Dental Assistants are health care professionals who practice to the highest standards to ensure protection of the public.¹ As regulated health care professionals, Dental Assistants understand and adapt to evolving health care systems and expectations of patients, the public, governments, employers and the dental industry.²

These guidelines are effective May 14, 2020 and are subject to change. We will update and modify them as needed. Dental Assistants must stay up to date with changes to these guidelines and the directives of the CMOH.

¹ Standards of Practice 2.1

² Standards of Practice 2.2 e)

Communication

Dental Assistants use appropriate communication strategies to ensure successful outcomes for patients, team members and others.³

We expect Dental Assistants to incorporate positive communication techniques through self-education on current developments related to COVID-19. We recommend Dental Assistants rely on the College, their employer(s) and the guidance provided to their employer(s) by their respective regulatory body, the provincial health authority and the provincial and federal governments to keep informed of the latest information. Refer to the sources below for applicable information (order does not imply priority). We have also included links to these and other resources near the end of these Guidelines.

- [Alberta Dental Association and College](#)
- [Alberta Government](#)
- [Alberta Health Services](#)
- [Canadian Government](#)
- [College of Alberta Denturists](#)
- [College of Registered Dental Hygienists of Alberta](#)

As Dental Assistants cultivate their knowledge, they are better able to share sound information with their patients. When possible, information should be shared in the patient's primary language and/or multiple formats (e.g. spoken and written) in order to ensure comprehension.

- 1) information on physical distancing (use [posters](#) as visual reminders to stay 2m or 6 ft apart)
- 2) hand hygiene importance (encourage hand sanitizer or wash station is available at entrances and treatment areas, and use [posters](#) to emphasize technique)
- 3) ways to help limit the spread of infection (use [posters](#) including information for coughing or sneezing into your sleeve, avoiding touching your face)
- 4) resources for mental health wellness (websites such as [Canadian Mental Health Association](#))

Dental Assistants respect the patient's right to choose and therefore seek informed consent from the patient prior to providing services by presenting complete information, recognizing the patient's right to withdraw consent at any time.⁴ Informed consent is much more than having a patient sign a form. This is a process of explaining treatment and the potential risks involved, so that the patient understands the consequences of consenting or denying treatment. The ADA&C has a [patient consent form template](#) for use in dental offices.

Communicating in a professional, respectful and timely manner⁵ continues to be an important and essential skill for a Dental Assistant to possess. Colleagues need to work together to understand and implement the steps being taken by the practice to prevent the risk of transmission of COVID-19 infection. Each individual's role greatly impacts the outcomes for patients and the team.

³ Standards of Practice 6.1

⁴ Code of Ethics 1.3 Consent

⁵ Code of Ethics 3.5a)b)

Workplace Considerations

While specific treatments and procedures may vary based on a variety of circumstances, including patient need, materials, equipment and operator preference, the standards for professional practice do not change.⁶ Dental Assistants must practice within the College's standards, guidelines, policies and procedures while continuing to work within the policies and procedures of their place of practice.⁷ Ideally, these mutually align. It's important for Dental Assistants to have a clear understanding of the requirements set by their employer and the employers' respective regulatory body, provincial standards and federal requirements.

The Alberta Government's Workplace Guidance for Community Health Care Settings directive⁸ provides some specific workplace considerations, including:

- a) Changes to the Employment Standards Code will allow full- and part-time employees to take 14 days of job-protected leave if they are:
 - i. required to isolate
 - ii. caring for a child or dependent adult who is required to isolate.
- b) Employees are not required to have a medical note.
- c) To enable quick contact with employees, community health care settings should maintain an up-to-date contact list for all staff and volunteers, including names, addresses and phone numbers.
- d) For the purposes of public health tracing of close contacts, employers need to be able to provide:
 - i. roles and positions of persons working in the workplace;
 - ii. who was working onsite at any given time;
 - iii. names of clients/patients in the workplace by date and time; and
 - iv. names of staff members who worked on any given shift.
- e) Where feasible, a barrier (e.g. plexiglass) should be installed to protect reception staff. (The reception staff would likely be responsible for screening clients/patients, accepting payment, rebooking appointments, etc.)
- f) Minimize the need for clients/patients to wait in the waiting room (e.g. possibly by spreading out appointments, and/or having each client/patient stay outside the clinic until the examination room is ready for them and then call in, by phone preferably).

⁶ Standards of Practice 1.1

⁷ Standards of Practice 2.2 c)d)

⁸ Appendix A to Record of Decision CMOH Order 16-2020

Alberta [Occupational Health and Safety requirements](#) continue to be applied throughout all workplace environments. Employers are required to provide a safe work environment and employees have a right to refuse dangerous work. Review the legislation to ensure you understand your obligations when addressing dangerous work. [Employment Standards](#) continue to have temporary workplace rules in effect, such as unpaid job-protected leave for employees caring for children affected by school and daycare closures or ill or isolated family members.

- 90-day employment requirement is waived.
- Leave length is flexible and linked to guidance from the Chief Medical Officer.
- Medical note is not required.
- Regular personal and family responsibility leave rules apply for all other circumstances.

Screening

Dental Assistants are trained and practice daily infection control measures. The concept of routine practices protects both the patient and practitioner as oral care is provided. It is based on the premise that all persons potentially carry microorganisms capable of causing disease or infections. This principle forms the foundation for the standard of care for patients in all healthcare settings across the continuum. Routine practices should be used for every patient interaction to prevent transmission of infectious agents.⁹

The concept of patient pre-screening for every appointment adds another layer to the routine practices procedures and further reduces the risk of cross contamination. Dental Assistants critically consider all available information prior to providing services to patients.¹⁰ Below is information to consider as an aid in the screening process.

Patients requesting treatment must be screened prior to booking.

Questions about COVID-19 symptoms must be asked and responses documented. We recommend that a standardized form be used for all bookings to ensure clear record keeping. As an example, refer to the Sample Patient Screening Form in the ADA&C's *Expectations and Pathway*.

Use the patient's answers to your screening questions to determine the level of COVID-19 risk and the best way to proceed. Refer to *Determining Patient COVID-19 Risk* in the ADA&C's *Expectations and Pathway*.

CMOH Order 05-2020 further clarifies requirements if it is deemed appropriate to treat a symptomatic patient.¹¹

⁹ *Routine Practices in Community-based Services* AHS

¹⁰ Standards of Practice 12.2 e)

¹¹ Appendix A to Record of Decision CMOH Order 16-2020

The dentist may consider providing some care virtually even if an in-person visit is needed in order to minimize the in-person time required (i.e. an essential post-operative extraction patient who is experiencing potential osteomyelitis can be prescribed medications with a brief in-person radiograph for assessment).

- Provide the patient with a surgical/procedural mask.
- Additional Infection Prevention and Control precautions (contact and droplet precautions) and Personal Protective Equipment (eye protection, gloves, masks and gowns) may be required depending on assessment and care that is needed.
- Spread out appointments.
- Set a dedicated time of day specifically for symptomatic individuals, in settings where patients may be presenting for the purpose of symptom assessments.
- Have a dedicated exam room.
- Thorough cleaning between each patient.
- Have patient stay outside the clinic until the exam room is ready and then call them in.

If a patient becomes symptomatic **while** at the site, the following requirements apply:

- A patient who develops cough, fever, shortness of breath, runny nose, or sore throat while at the site, should be given a mask and sent home immediately in a private vehicle and avoid public transportation if possible.
- Patients should complete Alberta's online COVID-19 self-assessment tool once they have returned home and be tested for COVID-19.
- Once a symptomatic individual has left the site, clean and disinfect all surfaces and areas with which they may have come into contact.
- The employer should immediately assess and record the names of all close contacts of the symptomatic patient. This information will be necessary if the symptomatic patient later tests positive for COVID-19.

This information, together with the degree of urgency of the patient's dental condition will be important in determining the patient management approach. In accordance with the ADA&C *Infection Prevention and Control Standards and Risk Management for Dentistry* (IPC Standards) Principles of Infection Prevention and Control in the Dental Setting,¹² and Medical History of Patient and Infection Prevention and Control Risk Assessment, the patient should be asked a series of questions to be tracked in the patient chart. This information is an additional component of the medical history in the patient chart, to be asked at every visit.

Screening also applies to staff and should be performed daily. The same questions regarding COVID-19 symptoms and risk factors should be answered and recorded in a logbook. This health assessment should be completed daily before reporting to work. Maintaining complete and accurate patient/staff records and respecting confidentiality is an example of how Dental Assistants place patients' well-being first¹³. Record keeping will be a critical step in contact tracing should the need arise.

¹² ADA&C *Infection Prevention and Control Standards and Risk Management for Dentistry*

¹³ Standards of Practice 3.1, 3.2 c)d)

Symptomatic and COVID-19 Positive Staff

Dental Assistants take responsibility to care for themselves to ensure they are able to provide the attention and treatment to patients required to ensure services in the best interest of patients.¹⁴ Staff who are sick with COVID-19 like symptoms **MUST NOT** be in the workplace and should complete Alberta's online COVID-19 self-assessment tool and be tested for COVID-19. **CMOH Order 05-2020** legally requires individuals who have a cough, fever, shortness of breath, runny nose, or sore throat (that is not related to a pre-existing illness or health condition) to be in isolation for 10 days from the start of symptoms, or until symptoms resolve, whichever takes longer. These requirements must be followed **regardless** of whether the individual has been tested for COVID-19.

If a patient or staff member is confirmed to have COVID-19, and it is determined that other people may have been exposed to that person, Alberta Health Services (AHS) will be in contact with the health care setting to provide the necessary public health guidance. Records/contact lists will be requested for contact tracing and may be sought for up to two days prior to the individual becoming symptomatic.

Health care settings need to work cooperatively with AHS to ensure those potentially exposed to the individual receive the correct guidance.¹⁵

Links to sample Staff Consent forms can be found in the ADA&C's *Expectations and Pathway*.

Prevention

Personal Protective Equipment (PPE)

Personal protective equipment (PPE) is required when providing treatment in a dental clinic. These items are well known and include gloves, gowns, masks and protective eyewear. A Dental Assistant also wears scrubs that should be changed into upon arrival at the clinic and changed out of prior to leaving work. The ADA&C's *Expectations and Pathway* indicate the type of PPE that they deem appropriate based on the procedure being performed. At minimum the PPE requirements are as follows:

Aerosol Generating Medical Procedures (AGMPs)

AGMPs may represent a higher risk for COVID-19 transmission. Aerosols may be produced by a Dental Assistant using low speed handpieces, other rotary hand pieces, ultrasonic devices and tri-syringes. Therefore, AGMPs should be limited, and when AGMPs are deemed necessary, added precautions should be taken to minimize risk. Added precautions for AGMPs include:

- use of enhanced PPE as shown in the following table
- following proper [Donning](#) and [Doffing](#) of PPE
- patient use of a 1% hydrogen peroxide pre-procedural mouth rinse for 30-60 seconds
- use of isolation techniques like a dental dam

¹⁴ Standards of Practice 14.1

¹⁵ Appendix A to Record of Decision CMOH Order 16-2020

- use of high volume suction
- use of 4-handed dentistry
- minimize movement in/out of treatment areas as well as between treatment areas and reception/common areas

Appropriate PPE must be used based on the type of procedure being performed. If appropriate PPE is unavailable, patient treatment must not be performed.

USE OF PERSONAL PROTECTIVE EQUIPMENT (PPE) FOR CORONAVIRUS DISEASE 2019 (COVID-19)*

Setting	Staff or Patients	Procedure/Activity	Required PPE
Operatory	Dentist/ Assistant/ Hygienist	<u>Low risk</u> Non-aerosol-generating medical procedures (NAGMP)	<ul style="list-style-type: none"> • Level 2 or 3 mask • Face shield or appropriate protective eyewear • Scrubs • Gloves • Lab coat or gown if contact with patient
		<u>Moderate and High risk</u> Aerosol-generating medical procedures (AGMP) High risk patients should not be treated in a general dental office	<ul style="list-style-type: none"> • N95 or equivalent respirator (fitted), with appropriate protective eyewear or, a Level 3 mask and Face shield • Scrubs • Cap/bouffant • Lab coat (with cuff) or gown • Gloves
	Disinfecting operatory for all procedures	Follow ADA&C IPC Standards	<ul style="list-style-type: none"> • Level 1 mask minimum • Appropriate protective eyewear • Gloves
Reception	Front office staff	Arrival screening	<ul style="list-style-type: none"> • Level 1 mask minimum or Plexiglas separation • Appropriate protective eyewear • Scrubs

*From Alberta Dental Association & College *Expectations and Pathway for Patient Care during the COVID-19 Pandemic*

Note: Respiratory Protection – A respirator fit test ensures the practitioner is receiving the expected level of protection by verifying the practitioner is wearing a correctly-fitting model and size of respirator.¹⁶ In accordance with the Alberta *Occupational Health and Safety Code*, an employer must ensure that respiratory protective equipment required at a work site is approved (a) by NIOSH, or (b) by another standards setting and equipment

¹⁶ Duling MG, Lawrence RB, Slaven JE, Coffey CC [2007]. *Simulated workplace protection factors for half-facepiece respiratory protective devices*. J Occup Environ Hyg. 4(6):420-431.

testing organization, or combination of organizations, approved by a Director of Occupational Hygiene.¹⁷ Employers must also ensure that respiratory protective equipment used at a work site is selected in accordance with CSA Standard Z94.4-02, Selection, Use and Care of Respirators.¹⁸

Dental Assistants engage in continuing competence activities to enhance the provision of services to their patients and to remain current in knowledge and application of that knowledge. One of the ways of implementing this knowledge is that you meet or exceed the most recent ADA&C IPC Standards, as approved by the College from time to time, and any other applicable guidelines or legislation necessary to meet the current standard of care.¹⁹ This means Dental Assistants are obligated to educate themselves as to what is current best practice.

Additional PPE measures are ordered from the CMOH that include **CMOH Order 05-2020**:²⁰

- a) All staff providing direct patient care or working in patient care areas must wear a surgical/procedure mask continuously, at all times and in all areas of the workplace if they are either involved in direct patient contact or cannot maintain adequate physical distancing (2 metres) from patient and co-workers.
 - i. The rationale for masking of staff providing direct patient care is to reduce the risk of transmitting of COVID-19 from individuals in the asymptomatic phase.
- b) Any staff who do not work in patient care areas or have direct client/patient contact are required to mask at all times in the workplace if a physical barrier e.g. plexiglass is not in place or if physical distancing (2 metres) cannot be maintained.
- c) N95 masks and full PPE is not routinely required for Community Health Care settings unless performing Aerosol Generating Medical Procedures (AGMP). If performing AGMP refer to specific regulatory body guidance.
- d) Staff providing care to any patient with symptoms suggestive of COVID-19 must do a [point of care risk assessment](#) and utilize the appropriate PPE for protection.
- e) For more information refer to: [Infection Prevention and Control for Healthcare Workers and Proper PPE](#)

Environmental Cleaning

The pandemic has highlighted how enhanced environmental cleaning is necessary. Surfaces should first be cleaned and then disinfected. Areas throughout the clinic that are often neglected include doorknobs, light switches, computers and phones. Items that cannot be easily cleaned and disinfected should be removed from the waiting room and any other common rooms such as staff and meeting rooms. In the operatory, be sure to disinfect items such as blood pressure cuffs, thermometers and if a patient presents in a wheelchair or walker, be sure to wipe the handles. When preparing to disinfect, refer to manufacturer's directions when possible.

¹⁷ Occupational Health and Safety Code s.246

¹⁸ Occupational Health and Safety Code s.247

¹⁹ Standards of Practice 11.1, 11.2 e)

²⁰ Appendix A to Record of Decision CMOH Order 16-2020

Physical Distancing and Gathering Requirements

CMOH Order 07-2020 prohibits gatherings of more than 15 people, however this does not prohibit healthcare settings from having more than 15 staff in a workplace. However, physical distancing requirements must be implemented. Patients and visitors to the office must remain at least two meters from each other. It is also best to restrict the number of staff and patients in the clinic at any one time. Where feasible physical barriers and increased separation between individuals should be used. Increased separation may include staggered lunch breaks and taping markers at 2-meter distances to support physical distancing.²¹

Patient flow is addressed in the ADA&C's *Expectations and Pathway*.

²¹ Appendix A to Record of Decision CMOH Order 16-2020

Resources

These resources are intended as sources of information. They are not listed in any order or priority.

Alberta Oral Health Care Regulators

- [Alberta Dental Association and College](https://www.dentalhealthalberta.ca/covid-19-info/) (https://www.dentalhealthalberta.ca/covid-19-info/)
- [College of Alberta Denturists](https://www.abdenturists.ca/) (https://www.abdenturists.ca/)
- [College of Dental Technicians of Alberta](https://cdta.ca/) (https://cdta.ca/)
- [College of Registered Dental Hygienists of Alberta](https://www.crdha.ca/) (https://www.crdha.ca/)

COVID-19 Information

- Alberta [CMOH order 16-2020](https://open.alberta.ca/publications/cmoh-order-16-2020-2020-covid-19-response) which amends CMOH Order 07-2020:2020 COVID-19 response (https://open.alberta.ca/publications/cmoh-order-16-2020-2020-covid-19-response)
- [Alberta Government](https://www.alberta.ca/coronavirus-info-for-albertans.aspx) (https://www.alberta.ca/coronavirus-info-for-albertans.aspx)
- [Alberta Health Services](https://www.albertahealthservices.ca/topics/Page16947.aspx) (https://www.albertahealthservices.ca/topics/Page16947.aspx)
- Alberta Health Services [Novel Coronavirus \(COVID-19\) FAQs](https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-ncov-2019-staff-faq.pdf) (https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-ncov-2019-staff-faq.pdf)
- Alberta [Public Health Disease Management Guidelines](https://open.alberta.ca/publications/coronavirus-covid-19) (https://open.alberta.ca/publications/coronavirus-covid-19)
- [Canadian Government](https://www.canada.ca/en/public-health/services/diseases/coronavirus-disease-covid-19.html) (https://www.canada.ca/en/public-health/services/diseases/coronavirus-disease-covid-19.html)

Employment Standards

- [Alberta Employment Standards](https://www.alberta.ca/employment-standards.aspx) (https://www.alberta.ca/employment-standards.aspx)

Infection Prevention and Control and Personal Protective Equipment

- Alberta Dental Association & College [Infection Prevention and Control Standards and Risk Management for Dentistry](https://www.dentalhealthalberta.ca/wp-content/uploads/2019/03/Standard-of-Practice-Infection-Prevention-and-Control.pdf) (https://www.dentalhealthalberta.ca/wp-content/uploads/2019/03/Standard-of-Practice-Infection-Prevention-and-Control.pdf)
- Alberta Government [Infection prevention and control](https://www.alberta.ca/infection-prevention-and-control.aspx) (https://www.alberta.ca/infection-prevention-and-control.aspx)
- Alberta Health Services [Donning PPE](https://www.albertahealthservices.ca/assets/Infofor/hp/if-hp-ipc-donning-ppe-poster.pdf) (https://www.albertahealthservices.ca/assets/Infofor/hp/if-hp-ipc-donning-ppe-poster.pdf)
- Alberta Health Services [Doffing PPE](https://www.albertahealthservices.ca/assets/Infofor/hp/if-hp-ipc-doffing-ppe-poster.pdf) (https://www.albertahealthservices.ca/assets/Infofor/hp/if-hp-ipc-doffing-ppe-poster.pdf)

- Alberta Health Services [Healthcare Workers with Underlying Medical Conditions and Potential Risk Factors for Severe COVID-19 Disease](https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-hwc-medical-conditions-position-statement.pdf) (https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-hwc-medical-conditions-position-statement.pdf)
- Alberta Health Services [Personal Protective Equipment](https://www.albertahealthservices.ca/info/Page6422.aspx) (https://www.albertahealthservices.ca/info/Page6422.aspx)
- Alberta Health Services [Point of Care Risk Assessment](https://www.albertahealthservices.ca/ipc/hi-ipc-routine-practices-algorithm-cc.pdf) (https://www.albertahealthservices.ca/ipc/hi-ipc-routine-practices-algorithm-cc.pdf)

Occupational Health and Safety

- Alberta [Occupational Health and Safety](https://www.alberta.ca/ohs-act-regulation-code.aspx) (https://www.alberta.ca/ohs-act-regulation-code.aspx)