

Questions and Answers

COVID-19 Primary Care In-Person Visits

Date: September 3, 2021

Infection prevention and control measures

Q1. Do I still need to wear a medical mask?

- Health-care facilities including acute care settings, family doctors' offices and community-based clinics are distinct from other public settings because there is a higher risk of exposure to respiratory illness and other communicable diseases.
- The [ministry's medical mask requirements for health-care facilities](#), including physician and nurse practitioner offices/outpatient clinics remain in effect.
- This means you, other health-care providers and staff working at your/community clinic must continue to wear medical masks in patient care areas, including in common areas (e.g., reception areas and waiting rooms) and break rooms unless eating and/or drinking.

Q2. Do my patients still need to wear medical masks?

- Yes. Patients must wear medical masks when entering and moving around your/community clinic, except when requested to remove their masks by you and/or another health-care provider for assessment.

Q3. Do I still need to follow infection prevention and control (IPC) procedures?

- Yes. You should continue to follow the recommendations in the [IPC guidance](#) that the Ministry of Health and the BC Centre for Disease Control developed for community-based physicians, nursing professionals and midwives in clinic settings. This guidance is regularly updated as circumstances or knowledge changes.
- COVID-19 safety plans as required by WorkSafeBC have transitioned to [communicable disease prevention plans](#). The IPC recommendations including

regular cleaning and disinfecting of high touch surfaces, bathrooms, equipment and waiting areas, rigorous hand hygiene, the use of medical masks and respiratory etiquette, remain important in reducing the risk of COVID-19, influenza and other infectious diseases.

Q4. Is physical distancing still required in my waiting room?

- No. Physical distancing (two metres between two or more people) and capacity limits for higher occupancy waiting rooms/areas are no longer required.
- This means patients, visitors, health-care workers and staff no longer have to maintain physical distance from each other in the clinic. However, they are required to put on a medical mask upon entry and follow diligent hand hygiene and respiratory etiquette (cough/sneeze into their elbow sleeve, dispose used tissues in the garbage bin) while they are inside your clinic.

Q5. Will there be updated direction on masking or infection prevention and control as we enter influenza seasons to let me know what, if any, additional precautions are needed?

- Yes. The ministry, the BCCDC and health authorities continue to review provincial policy on IPC practices including the use of medical masks in health-care facilities. We will keep you informed of all updates relevant for primary care providers in the future.

In-person visits

Q6. Is it safe to see more patients in the office?

- Yes. We are now at a different stage in the COVID-19 pandemic in BC. COVID-19 is now a vaccine preventable disease that we will be living with into the future.
- With appropriate measures in place, you can safely provide care to your patients based on their clinical needs and care preferences, which includes ready access to in-person care.

- With a highly immunized population and health-care workforce and effective IPC measures, COVID-19 is no longer a determining factor for limiting in-person health-care services.

Q7. Is it safe to see immunocompromised patients in my clinic?

- Yes. By wearing the appropriate personal protective equipment (PPE) and continuing with IPC measures at your clinic, it is safe to see patients who are immunocompromised in-person.
- To select the appropriate action and PPE, please conduct a [point-of-care risk assessment](#) before the patient interaction. For more details on the recommended IPC measures, please refer to the [IPC guidance](#).

Q8. Should I still pre-screen all patient visits by phone prior to an in-person visit?

- Yes. If you and your office have been conducting pre-appointment screening with patients either by phone or online, please continue to do so in case a patient has similar symptoms. This would allow your office to make arrangements before their visit, to reduce the risk for yourself, staff and others.
- For clinics seeing patients on a walk-in basis, consider setting up screening stations for all individuals entering the facility at each designated entry point. Please see the “patient screening and management” section (pg. 7) of the [IPC guidance](#) for more information.
- Doctors of BC has also developed a sample template that your medical office assistant can use to screen patients by phone or for online-booking, it is available [here](#).

Q9. Should I be doing more routine visits in person (e.g., health screening) or saving in-person visits for more urgent issues?

- Care should be provided to patients based on their clinical needs and care preferences, which includes ready access to in-person care.
- There are situations where it is simply not appropriate, or safe, to see a patient virtually or where a patient may prefer to be seen in person and you should use

your professional judgement to make sure that you are adequately meeting the medical needs of each patient seeking your care.

Q10. If I know a patient is not fully immunized, should I handle them differently than those who are fully immunized?

- Based on the statistics from the BCCDC, more than 80% of British Columbians 12 years and older have received their first dose of the COVID-19 vaccine and over 70% are fully immunized (seven days after their second dose). In addition to immunization, there are other IPC measures that you can continue to take to reduce the risk for yourself, your staff and other patients.
- We know that there are a variety of reasons why a patient may not be immunized, including due to medical contra-indications.
- We are now at a different stage in the COVID-19 pandemic in BC. COVID-19 is now a vaccine preventable disease that we will be living with into the future.
- Regardless of whether a person is fully-immunized against COVID-19, you should continue to follow local processes for COVID-19 screening and management of COVID-19 like symptoms. Implementing IPC measures such as wearing medical masks, frequent handwashing and regular cleaning still apply and are protective against other non-COVID communicable respiratory illnesses.
- As such, you should provide hands on in-person care as their clinical situation requires.

Q11. How should I handle patients who have been in regions where there are high cases counts of COVID-19?

- We are now at a different stage in the COVID-19 pandemic in BC. COVID-19 is now a vaccine preventable disease that we will be living with into the future.
- Processes for COVID-19 screening and management of COVID-19 symptoms should continue to be undertaken.

- You should provide in-person care as a patient’s clinical situation requires. If they are reporting symptoms of COVID-19 and have been in direct contact with a confirmed case, you should refer them for testing and follow the advice on BCCDC’s website.
- Continue to follow the recommendations in the [IPC guidance](#) for community-based physicians, nursing professionals and midwives in clinic settings.
- In the case of a positive test result, public health officials in your regional health authority will contact them and your office if any action is required.

Personal protective equipment

Q12. Will I still have access to personal protective equipment at no cost through the Health PPE portal?

- Yes. The [Health PPE Portal](#), which launched last fall, continues to be available for you to order PPE and critical supplies for your practices free of charge.