



Shoreline Speech Therapy

In-Person Services during COVID-19: Quick Facts

IN-PERSON vs TELEPRACTICE

Assessments are done in person. **Treatment** is done in person or by telepractice.
 The **preference** is to use telepractice if it's possible.
 We must do a **Risk Assessment** before making the decision together.
 If you'll be seen in person, we must get your written **consent**.



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SCREENING

You must do a **pre-screening** the day **before** your visit (<https://www.shoreline-speech.com/covid>).
 When you **arrive** for your appointment, you will do the screening **again**.
 If you are **sick**, do not come to the office – contact us to cancel.



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HOW YOU PROTECT US AND OTHER VISITORS

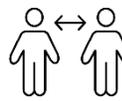
Stay outside until **5 minutes before** your appointment (unless you walked or took the bus).
 Be **on time**. We need time between visits to disinfect and limit people in the waiting room.
 Wear a **mask** (exceptions: children <2y, children 2-4 who cannot, medical reasons).
 Keep **6' distance** as much as possible.
 Use **hand sanitizer** *as soon as you enter our office*.



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HOW WE PROTECT YOU

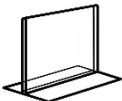
Touch points in the **building** and our **office** are regularly disinfected.
 We disinfect **treatment rooms** and **materials** between every session.
 Depending on the type of assessment/treatment, we use a combination of a face mask, face shield, plexiglass barrier, gown, and gloves. We frequently disinfect our hands.
 We follow Public Health orders and our sector plan.
 We must keep a **visitor record**. This might be requested by Public Health for contact tracing.



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For details about Shoreline's plan and the sector plan for SLPs, visit: <https://www.shoreline-speech.com/covid>

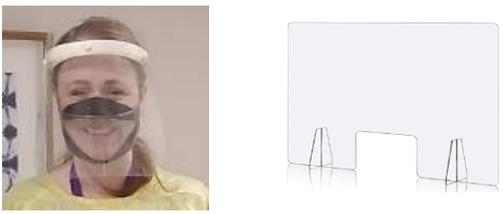
If you have questions, contact us at info@shoreline-speech or (902) 219-3065.

WHY WE WEAR CERTAIN PPE

We're often asked why we wear certain personal protective equipment (PPE). SLPs are in a group of community-based health professionals who are at a higher risk of catching COVID from **asymptomatic** or **pre-symptomatic persons**. This is because:

- we work close (often <6 feet) to *mouths* and *noses*,
- our clients must frequently remove their masks during treatment sessions, thus removing that layer of protection for our staff,
- we work with young children who are still learning how to control drooling, learn proper sneeze/cough etiquette, and other sources of bodily fluids,
- we work in enclosed spaces, and
- we are close to people from different households each day.

Depending on the activity and level of risk to our staff, you may see a combination of:

 <p>we wear three different types of masks depending on whether a client needs to see our mouth and whether there's a risk of droplet vs airborne transmission of COVID</p>	 <p>we wear a face shield or use a plexiglass barrier to protect our eyes from COVID particles</p>
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 <p>we wear a gown if we might be exposed to a child's bodily fluids from their mouth or nose so we don't spread the virus through contact transmission</p>	 <p>we wear gloves when touching clients to reduce the risk of contact transmission and so that the virus cannot enter our skin through cuts</p>	 <p>we use hand sanitizer to reduce the risk of contact transmission</p>
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The requirements for what SLPs must use in community settings are based on requirements and guidelines from Nova Scotia Public Health, the Public Health Agency of Canada, and the Nova Scotia College of Audiologists and Speech-Language Pathologists. We also follow evidence and guidelines from the World Health Organization and research literature.

If you ever have a question about our COVID precautions, just ask a staff member. We will be happy to explain.