# Coronavirus (COVID19) Practice Plan – RECEPTION

## Triage

*“If you have cold and flu symptoms and have recently travelled overseas or believe you may be at risk of coronavirus (COVID19) DO NOT come into the practice. Please call us instead \*\*\*\*\*.”*

Ask **every** patient making an appointment at the clinic if they are currently experiencing cold or flu symptoms. If YES proceed to extra Triage Questions (below) which have been set to identify any patients who are at risk of having the coronavirus.

|  |
| --- |
| Additional questions |
| * How unwell are you? Fever, cough, shortness of breath. * Have you recently travelled overseas? Where and how long ago? * In the past 14 days before onset of symptoms: China, Hong Kong, Indonesia, Japan, Singapore, Thailand, South Korea, Iran or Italy. * Have you been in contact with a confirmed case of Coronavirus? * Do you have any concerns that you might have Coronavirus? |

* If YES to any of the above questions to send info to the treating GP or the nurse if doctor is not available.
* Doctors will respond to reception staff to advise acceptance for appointment or alternative arrangements
* If possible, book long appointment

1. Management of patient contact from arrival

|  |
| --- |
| * After phone triage and acceptance of appointment. Advise patient to call and notify reception when they have arrived and must wait in car. DO NOT COME INTO CLINIC UNTIL DOCTOR IS READY. Also, advise patient of protocol at end of appointment. * Reception staff to call the patient (who is waiting in the car) once the doctor is ready to see them * Reception staff to don standard fluid resistant face mask and gloves. NOTE: other patients in waiting room do not require any PPE * Reception staff are to meet patient at clinic entrance. Receptionist to open and close door for patient. Hand patient a mask to apply before they enter the building. Ensure they put it on correctly. Avoid contact with patient. * Direct the patient directly to Doctor’s room * Patient is to leave the building without stopping at reception area. They are to take their mask with them and can settle account over the phone or later * After patient leaves – clean the front door handle and Doctor’s door handle with detergent/disinfectant (Vibactum to be sprayed and left for 5 minutes and then wiped dry) * Restock Equipment (PPE) in each Doctor’s room kit on a weekly basis or additionally as needed * Dispose of gloves and mask in regular rubbish  3. Review Daily review of COVID19 updates by \*\*\*\*\*\*\*\*\* (Practice Manager). Notify all staff of any new changes  Weekly review of plan to be completed by Dr \*\*\*\*\*\* & Ms \*\*\*\*\* daily.  Coronavirus (COVID19) Practice Plan - DOCTORS |
| 1. Triage  * Reception will notify treating Doctor if patient identifies as at risk for Coronavirus based on additional triage questions.   **If moderate to severe respiratory symptoms suggestive of Pneumonia:**   * Patient to be referred to hospital rather than attending the clinic. Hospital to be notified by phone \*\*\*\*\*\* of suspected case. Patient needs to be aware their info will be given to ED.   2. Management of patient over the phone   * If the patient needs to be sent for a test, the request form will be printed and faxed to the pathology centre. The patient needs to be told to call the pathology centre before arriving. * Notify relevant Public Health Unit ph: \*\*\*\*\*\*\*\*\*\* of suspected case via phone or fax back sheet (located in COVID19 kit) * Respond to reception message with action required * Patient must be told to self-isolate until results are received   **If you feel the patient needs to be seen due to other clinical concerns, but does not require hospitalisation:**  3. Management of patient contact from arrival (if attending the practice)   * Patient will remain in their car until contacted by reception that the Doctor is ready to receive them for appointment. (Doctor toperform hand hygiene before donning gown, eye protection, gloves and a surgical mask). * Review current Department of health guidelines prior to seeing patient * Limit consultation to 15 minutes with emphasis on examination and clarifying history * Minimise touching of office equipment and pay attention to any surfaces you and patient touch as these will need to be cleaned * If performing COVID testing, follow appropriate protocols and cleaning procedures during and after. * At conclusion of consult escort patient from room directing them to return to car without stopping at reception. Any outstanding account can be settled by phone. They should wait in car for phone call to advise re management. Patient should leave their mask on. * Remove PPE, excluding mask and goggles, and place in a biohazard bag, perform hand hygiene. * Don new gloves and clean any contacted/contaminated surfaces (including door handles) with detergent/disinfectant (Vibactum to be sprayed and left for 5 minutes and then wiped dry). Place used cleaning towels in regular rubbish * Doctor to complete Public Health Case Report Form and call Public Health Unit for advice – Ph \*\*\*\*\*\*\* * Write any scripts and pathology/imaging request forms. Call patient to advise re management plan and take forms to car. Leave mask and goggles on for this, don new set of gloves. Remove goggles and mask then gloves prior to re-entering clinic. Hold in one hand and place in biohazard bag and then perform hand hygiene. * Notify any imaging/pathology collection centres of patient’s planned attendance. Note patient should be advised to leave mask on and call on arrival at these places, staying in car until advised to come in. * Samples are currently being collected at any S&N collection centre * Include details of PPE/infection control in patient’s notes (\*\*\*\*) |
|  |

## 3. Review

Daily review of COVID19 updates by \*\*\*\*\*\* (Practice Manager) & Dr \*\*\*\*\*\*\*\*\*\* (Clnical Lead) . Practice manager to advise all staff of any new changes

.