Coronavirus (COVID-19) Practice Plan

1. Appointment booking

* Internet booking – add notice:

*“If you have cold or flu symptoms Do NOT come into the practice. Please call us instead [practice number].”*

* Telephone booking – reception staff to ask every patient a simple question to identify COVID-19 suspects:

**“*Are you currently experiencing cold or flu symptoms?”***

1. Telephone triage

* Further questioning should be carried out by a nurse (or doctor) to assess:
  + Likelihood of COVID-19 infection – travel and contact history
  + Severity of infection – described symptoms and ease of breathing over the phone

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| Suggested questions – speak to the patient if possible |
| * ***“Describe your symptoms? Fever, cough, sore throat, shortness of breath, loss of smell, loss of taste, muscle aches, tiredness, headache, runny nose, diarrhoea, nausea?”*** * ***In the 14 days prior to illness onset:***   + ***“Have you been in close contact with a confirmed or probable case of COVID-19*** |
| * + ***“Have you travelled interstate or overseas in the past 14 days?”*** |
| * + ***“Are you a healthcare, aged care or residential care worker with direct patient contact***   + ***Have you lived in or travelled through a localised COVID-19 ‘hotspot’?”***   ***[Testing criteria for COVID-19 suspects and ‘hotspot’ locations should be checked daily on the Queensland Health website***  ***https://www.qld.gov.au/health/conditions/health-alerts/coronavirus-covid-19***  ***]*** |

* If telephone triage indicates low risk of COVID-19 infection, book a normal appointment. If the matter cannot be dealt with via telehealth appointment, the patient can attend the practice. When they arrive, they are to use hand sanitiser and maintain 1.5m social distancing at all times.
* If telephone triage indicates possible COVID-19 infection:
* The triaging nurse is to speak to the patient’s usual GP, or other available GP.
* The GP will decide if the patient should:
  + Stay at home,
  + attend the practice,
  + attend a local pathology laboratory for viral swab,
  + attend a local emergency department, or
  + attend a local fever clinic or dedicated GP Respiratory Clinic
* The GP may need to perform a telephone consultation to inform their decision.
* The GP may need to complete a pathology request form and fax to a laboratory.
* The decision is communicated to the patient via the triaging nurse, the GP, or reception staff.
* If the patient is to attend the practice, they are clearly instructed:

***“Do NOT enter the practice until you are advised to do so. When you arrive please remain in your car (or other isolated external area) and phone the practice [practice number].”***

1. Assessment in the practice

* After the patient has telephoned the practice confirming their arrival, the GP will decide the most appropriate place to isolate and assess the patient. This decision will be based on the patient’s symptoms and availability of consultation rooms. This could be in:
  + a consultation room
  + a spare room in the practice
  + the patient’s car
  + an isolated outdoor area or area away from other people
* Any practice staff who will be within 1.5 metres of the patient should don personal protective equipment (PPE) for **droplet** **and** **contact** **precautions**:
  + Gown, Gloves, Surgical mask and Eye protection
* Practice staff are to meet the patient at practice entrance and, while the patient is still outside, hand the patient a surgical mask. Ensure they put it on correctly. Remind them of cough etiquette and respiratory hygiene.
* Ask the patient to rub their hands with antiseptic gel (available outside the practice entrance).
* Immediately direct the patient directly to the appropriate location for assessment.
* Use dedicated or disposable equipment where possible

1. After assessment

* The 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.
* The assessment room should be physically cleaned with a 1000ppm chlorine cleaning product; paying attention to door handles, desktops. The room can be used after 5 minutes drying time.
* The GP should remove PPE **in order,** washing hands between each step:
  + **gloves**, pull down from the cuff
  + **gown**, pull off from the back
  + **eye protection**, tilt head forward and remove from arms
  + then **mask**; pull off from the back

SCHHS - [Donning and Doffing: Personal Protective Equipment (PPE)](https://vimeo.com/396832087) Video

* PPE can be disposed in general waste.