Coronavirus (COVID19) Practice Plan

1. Appointment booking

* Internet booking – add notice:

*“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 [practice number].”*

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

***“Have you travelled overseas in the last 14 days?”***

and/or

**“*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 Coronavirus infection
  + Severity of infection

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| Suggested questions | |
| * ***“Describe your symptoms? Fever, cough, shortness of breath?”*** | |
| * ***“Have you recently travelled to any of these countries in the past 14 days? Where and how long ago?”*** | |
| * **China** * **Hong Kong** * **Indonesia** * **Japan** * **Singapore** | * **Thailand** * **South Korea** * **Iran** * **Italy.** |
| **[At risk country list should be checked daily on the Department of Health website]** | |
| * ***“Have you been in close contact with a confirmed case of Coronavirus?”*** | |

* If telephone triage indicates low risk of Coronavirus infection, book a normal appointment.
* If telephone triage indicates high risk of Coronavirus 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, or
  + attend a local emergency department
* 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 (if possible) 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
* Any practice staff who will be within 2 metres of the patient should don personal protective equipment (PPE) for **droplet** **and** **contact** **precautions**:
  + Gown
  + Surgical mask
  + Eye protection
  + Gloves
  + (If taking respiratory samples from a patient with a suspected pneumonia, additional **airborne** **precautions** should be taken – P2/N95 mask, face shield, and 30-minute room vacancy.)
* Reception or nursing 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.
* Ask the patient to rub their hands with antiseptic gel (available outside the practice entrance).
* Direct the patient directly to the appropriate room for assessment.

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 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
* PPE can be disposed in general waste.
* The assessment room should be physically cleaned with 1000ppm chlorine cleaning product; paying attention to door hands. The room can be used after 5 minutes drying time (unless **airborne** **precautions** are required, then 30 minutes).