



COMMUNITY BASED CLINIC HEALTH SCREENING OF PATIENTS

All clients may now be seen in person. Clients and visitors should clean hands and put on a medical grade mask before entering the clinic. All clients should be screened for symptoms upon arrival to the clinic.

HAS THE CLIENT TESTED POSITIVE FOR A VIRAL RESPIRATORY ILLNESS?

- Tested positive or been diagnosed with a viral respiratory illness? (For example: COVID-19, RSV or Influenza?)

NO

YES

DOES THE CLIENT HAVE ANY OF THE FOLLOWING SYMPTOMS?

- Difficulty breathing that is new or worse than usual?
- New onset cough or worsening of chronic cough?
- Fever or chills?
- A sore throat?
- Vomiting not yet diagnosed (within the last 48 hours)?
- New sudden onset of diarrhea that is unusual for the client (>3 episodes in 24 hours)?
- Rash with fever, undiagnosed rash in an immunocompromised person or undiagnosed generalized rash?

NO

YES

In accordance with guidance from BC's Office of the Human Rights Commissioner, exceptions to the policy need to be applied for people under 12 years old, people unable to wear a mask because of a health condition or physical or mental impairment, and people unable to put on or remove a mask without help from another person.

IMPLEMENT ADDITIONAL PRECAUTIONS*

- Ensure client cleans hands and is wearing a medical grade mask
- Follow clinic protocols for booking or triaging for Additional Precautions
- Notify appropriate clinician
- Clinician to do Point of Care Risk Assessment*
- Clinician to wear medical grade mask, eye protection, gown & gloves*
- Room requires additional cleaning after visit

IN ADDITION TO CLIENTS WHO SCREEN POSITIVE, THE FOLLOWING KNOWN CONDITIONS SHOULD BE BOOKED FOLLOWING "ADDITIONAL PRECAUTIONS" PROTOCOL*

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| • Chicken pox | • Norovirus |
| • Shingles in an immunocompromised patient | • Measles |
| • Shingles in the mouth or throat | • Mumps |
| • Disseminated shingles | • Rubella |
| • Influenza, RSV or other viral respiratory tract infection | • Pertussis |

USE ROUTINE PRACTICES

- Book appointment time as usual
- Triage as usual
- Assign room as usual
- Follow clinic masking policy
- Clinician to do a Point of Care Risk Assessment

*Clinician should always do a Point of Care Risk Assessment (PCRA) to determine appropriate level of PPE based on the patient's diagnosis & symptoms, task being performed and environment of care.

SAMPLE CLINIC PROTOCOL FOR ADDITIONAL PRECAUTIONS

Client arrives at the clinic

- Sees sign asking them to mask and perform hand hygiene if they have symptoms of infectious disease
- Is shown or asked screening questions by ambassador/MOA/nurse/other HCW
- Tells staff member if they answer "yes" to any screening questions
- Staff member to notify triage staff or clinician (if present) and direct client to designated waiting area**

Client Triage and/or Registered

- Triage or registered in order of arrival or per clinic protocol
- MOA or nurse reviews the screener questions
- If client screens "positive" nurse or MOA asks any clarifying questions (e.g. rash)
- MOA registers client and communicates needed precautions to clinician

Multiple options are acceptable depending on clinic set-up:

Client returns at designated appointment time

Client proceeds to designated outside entrance for the 'Additional Precautions' Room

Client roomed immediately (in whichever room is available)

Client returns to designated waiting area** to wait

**Waiting Rooms and Designated Waiting Areas:

Note: Waiting rooms no longer requires 2 metre spacing for clients who are not symptomatic. The recommendation for general waiting rooms is for respectful distancing and to avoid overcrowding.

For clients who answer "yes" to screening questions, ensure the client cleans their hands and is wearing a medical mask. It is recommended they be seated in a designated spot in the waiting room away from other clients while awaiting further assessment and/or their appointment.

SAMPLE CLINICAL PROTOCOL FOR ROOMING CLIENT ON ADDITIONAL PRECAUTIONS

1. Prepare designated exam room by removing excess supplies and equipment.
2. Client proceeds to exam room wearing a medical mask.
3. Clinician to clean hands, apply new medical grade mask, eye protection, gown and gloves (or other PPE as indicated by PCRA).
4. If clinician requires supplies from cabinets, they should remove gloves and clean hands before retrieving supplies, then don a new pair of gloves before continuing with patient care.
5. If clinician requires extra supplies or equipment from outside room, they should phone for another staff member to bring it to them OR clinician should remove PPE at the door (at least 6 feet away from client), clean hands and leave room to retrieve required supplies. New PPE must be put on before entering designated exam room again.
6. Client to leave room after exam wearing a medical mask.
7. Clinician to dispose of all waste in garbage. Place any specimens in lab biohazard bags.
8. Clinician to remove all PPE at the door and clean hands. (Follow Island Health PPE doffing guidelines.)
9. Ensure biohazard bag containing specimens is wiped down with disinfectant wipe prior to removing from room.

Room is cleaned

- After client leaves room, room should be cleaned following the guidance on the *Cleaning and Disinfection in Community Clinic Settings* poster