



COVID-19 guidelines for outpatient services

Purpose

This guide is for health professionals in public outpatient services. This guideline will continue to be updated as COVID-19 measures and restrictions change to protect the population from the spread of COVID-19. In addition to this guideline, all restrictions and measures in place to prevent the spread of COVID-19 at the time, must be adhered to. This may include measures such as:

- Lockdowns and mask wearing;
- Changes to the provision of elective surgery;
- Providing services via telehealth/virtually, where appropriate; and
- Rescheduling non-urgent outpatient and community health visits where clinically appropriate.

Background

Outpatient services provide patients with access to:

- medical specialists for diagnostic assessment, screening and treatment
- allied health, nursing and midwifery services
- support for ongoing management of chronic and complex conditions
- pre- and post- hospital care

The ongoing use of telehealth and virtual care will enable continued provision of outpatient care through the changing phases of COVID-19 restrictions.

Key Considerations for Outpatient Services and COVID-19

Models of Care and Digital Technology

Outpatient services should continue to review models of care, including the use of digital technology modalities, and incorporate risk assessment and mitigation processes including those listed below.

- Continuing to prioritise digitally enabled models of care (including telehealth outpatient services) into the home, closer to home and within virtual group and community settings where clinically appropriate and technically viable. The increased availability and uptake of digital health care during the COVID-19 response has been significant and has enabled services to continue.
- Review clinic scheduling and physical set up to encourage physical distancing where possible.

Infection Prevention & Control

- Hospital sites should continue to implement practices to ensure infection prevention and control (IPC) measures are stringently followed as per the guidelines on [COVID-19 Infection Prevention and Control in Western Australian Healthcare facilities](#) (IPC guidelines) when delivering outpatient services. This includes both standard precautions (e.g. hand hygiene, respiratory hygiene and environmental cleaning) and transmission-based precautions as required.
- Measures to encourage good personal hygiene should be considered by all outpatient services, including access to hand washing facilities and/or alcohol-based hand sanitiser and signage to encourage frequent hand hygiene and cough etiquette.

Physical Distancing

Outpatient services should promote infection prevention and control measures including physical distancing where possible:

- Reduce face-to-face contact through the continuation of digital health care delivery where clinically appropriate and technically possible.
- Where possible promote adequate space to allow physical distancing between people in reception areas, waiting rooms and consultation rooms, for example by spacing chairs, using floor markings and signage.
- Support patients to be accompanied by a relative and/or carer (subject to site-specific guidance).
- Ensure clinic profiles, schedules and booking practices reflect an appropriate number of patients per room and establish management plans for those who arrive with relatives /carers/escorts to promote physical spacing within clinic spaces including reception, waiting rooms, consultation rooms and group activity venues.

Outpatient Process and COVID-19

1. Pre-outpatient Appointment

Patients should be screened for COVID-19 symptoms and any self-quarantine requirements prior to attendance at outpatient appointments. Hospitals should continue to follow their local operational COVID-19 screening and IPC guidelines.

For patients who meet COVID-19 suspect or confirmed case criteria:

- If clinically appropriate and technically possible, consider changing the outpatient to a telehealth/virtual appointment using a digital health modality e.g. telephone, videoconferencing.
- If a digital health modality is not indicated, if clinically appropriate, rescheduling of the appointment is recommended pending a negative test result or after any required isolation period. If this is not possible, continue to the guidelines below.

2. At the Outpatient Clinic Appointment

Outpatient services should continue with established COVID-19 screening processes when patients present for their appointments. For example, place signage at reception asking patients if they have a current diagnosis for COVID-19, flu-like symptoms, are awaiting COVID-19 test results, required to self-quarantine, or have been in contact with a person with confirmed COVID-19 in the last 14 days.

- If an outpatient appointment is unable to be rescheduled and the patient is presenting with COVID-19-like symptoms, proceed with the appointment following the transmission-based precautions and environmental cleaning as outlined in the [COVID-19 Infection Prevention and Control in Western Australian Healthcare facilities](#). Following clinical assessment, send the patient to a COVID-19 testing clinic.
- If patients are clinically unwell; direct the patient to their General Practitioner or an Emergency Department as appropriate. Advise the Emergency Department of any potential COVID risk.
- If a patient requires clinical assessment before transfer to COVID-19 testing clinic or Emergency Department, follow transmission-based precautions and environment cleaning as outlined in [COVID-19 Infection Prevention and Control in Western Australian Healthcare facilities](#).
- For patients who meet screening criteria, staff should provide a mask for the patient to wear; and inform their manager for further advice and follow-up.
- Subject to any government advice at the time, patients can be accompanied by a support person and/or carer who should also comply with IPC criteria.

3. Post Patient Attendance

Following an appointment, if the outpatient service is advised that a patient has developed COVID-19 symptoms or has been confirmed as COVID-19 positive, staff are to contact their manager and IPC team to ensure exposure management procedures are followed as specified by relevant guidelines.

Version:	Last Updated:	Last reviewed:	Changes:
2.0	10 Aug 2020	21 Dec 2020	Nil Changes
2.1	29 Jun 2021	29 Jun 2021	Content reviewed as per Government of Western Australia guidance

Authority

Department of Health Western Australia.

These guidelines are for staff working in public hospitals in Western Australia. They are based on information available at the time of writing and may change as more information becomes available. These guidelines are a guide only and patients should be managed on a case-by-case basis.

This document can be made available in alternative formats on request for a person with disability.

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