Footscray Hospital Sunshine Hospital

Williamstown Hospital Sunbury Day Hospital

Use these questions to screen center and home based outpatients and their support people for COVID-19. Wherever possible, these questions should be asked prior to and on the day of the appointment. When conducting a home visit, screening questions should be asked of all individuals present at the home visit.

If screening indicates the individual is suspected to have COVID-19, the individual should be treated as though they are suspected to have COVID-19, and the treating clinician and/or manager shall make a decision regarding the necessity of the appointment and put in place appropriate steps to minimise the risk of COVID-19 transmission.

covi	D-19 screening questions	Answer (please check)
1. 2. 3. 4. 5. 6. 7. 8. 9.	Have you tested positive for COVID-19?; or Are you awaiting COVID-19 test results?; or Have you returned to Australia from overseas in the last 14 days?; or Have you been released from hotel quarantine in the last 14 days?; or Have you returned to Victoria from a DHHS designated red zone or orange zone within the last 14 days?; or Have you been identified as a primary close contact ¹ or secondary close contact ² of someone who has COVID-19 within the last 14 days?; or Have you visited a DHHS listed case exposure or outbreak site (please refer to link here ³) within the last 14 days?; or Have you worked in or volunteered at a hotel quarantine site and/ or other port of entry in the last 14 days?; or Have you got a temperature higher than 37.5°C OR chills?; or Have you got symptoms of a cold or a cough such as: a. breathing difficulties such as breathlessness	Answer (please check) YES to ANY questions □ The individual is suspected to have COVID-19 • Escalate the positive screening result using local processes to determine whether to postpone or proceed with the appointment. Face to face appointments should be postponed unless deemed clinically essential • If proceeding with the appointment consider contacting the Infection Prevention team for risk mitigation strategies • Consider contacting the Infection Prevention team to determine recommendations for COVID-19 testing or isolation • Support persons who answer YES to any questions are prohibited from entering Western Health NO to ALL questions □
	 b. cough c. sore throat d. runny nose e. fatigue or tiredness f. loss of taste or smell? 	The individual is not currently suspected to have COVID-19

¹ Primary close contact is someone who has had face-to-face contact (for more than 15 minutes) or spent time in a closed space (for more than two hours) with someone who has COVID-19 while they were infectious OR someone who has been in an outbreak or other setting where there is a higher risk of transmission of COVID-19

²Secondary close contact means someone who has had face-to-face contact with a primary close contact as least 24 hours after them being exposed to COVID-19

³COVID Outbreak List is located here http://inside.wh.org.au/departmentsandservices/CorporateGovernance/Pages/COVID.aspx **WHAD24.4**