RACGP
Royal Australian College *of* General Practitioners

Responding to a COVID-19 case in the practice team

Fact sheet

A patient who attended our practice has tested positive for COVID-19. Am I considered a suspected case?

If you took recommended infection control precautions, including the use of full personal protective equipment (PPE), when consulting a patient with, or who is later confirmed as having COVID-19, this is not considered close contact. Therefore, you are not considered a suspected case.[1] No further action is required.

If you did not wear PPE during the consultation and spent more than 15 minutes face-to-face with the patient, this is considered close contact. You must self-isolate for 14 days from your last interaction with that patient. You will need to contact your local public health unit to seek instruction on managing possible exposure to other staff and patients during this time.

If I am required to self-isolate, or if I test positive, can I continue to consult using telehealth?

Yes. There is no requirement for a GP to only perform telehealth consultations from their practice premises.

A suite of resources to support you in providing telehealth consultations during COVID-19 is available on the RACGP website.

If someone in the practice team tests positive, what do we need to do?

If the person had been in the workplace in the 48 hours* prior to developing symptoms, you will need to contact your local public health unit to seek instruction on managing possible exposure to other staff and patients.

Required actions depend on a number of variables, including when the team member last worked, the nature of the work they performed and the interactions they had with others.

If the affected person had not been in the workplace in the 48 hours prior to developing symptoms, no further action is required.

The team member who tests positive must self-isolate – and therefore not return to the practice – until they meet the criteria for release from isolation (outlined in the Communicable Diseases Network Australia National guidelines for public health units).

As a precautionary approach, for the purposes of contact tracing, cases are considered to be infectious from 48 hours prior to onset of symptoms.[1]

If someone in the practice team tests positive, will the practice be closed?

In most cases, your practice will not have to close.

Your local public health unit will advise what measures need to be taken to continue operating safely. This may involve conducting a terminal clean[2] of the practice and self-isolation for those potentially exposed (during which time GPs may continue consulting using telehealth).

If someone in the practice team tests positive, do we need to clean the entire practice?

This depends on a number of variables, including when the team member last worked and the nature and location of the work they performed. Your local public health unit will provide advice on cleaning requirements.

Effective environmental cleaning of an exposed area requires the combination of mechanical action, detergent and water,

then drying. Wipe down surfaces with both a detergent and a disinfectant. Use a cleaning detergent followed by a disinfectant, or use a two-in-one product with both cleaning and disinfecting properties:

- Detergents remove dirt and organic material, and should be used according to the manufacturer's directions and then allowed to dry.
- Disinfectants kill infectious agents, and should be used after a detergent.[2]

See the Federal Department of Health factsheet Environmental cleaning and disinfection principles for health and residential care facilities for specific product advice.

Even in the absence of a confirmed or suspected COVID-19 case, routine cleaning is advised:

- Clean and disinfect frequently touched surfaces with detergent and disinfectant between each episode of patient care.
- Take care to clean/disinfect surfaces in areas that patients have been in direct contact with or that have been exposed to respiratory droplets.
- Comply with My 5 Moments for Hand Hygiene.[3]

Note: Gross contamination of an area following a patient consultation may require a terminal clean.

If someone in the practice team tests positive, do we need to communicate this to patients?

If there has been a risk of exposure to other team members or patients, your local public health unit will conduct contact tracing and notify those who require testing and self-isolation.

If your practice must undergo temporary changes – such as temporary closure or a temporary transition to telehealth consultations only – you can communicate this to patients directly, as well as via your practice website, call-holding message and other channels (such as social media).

You are not required to advise your entire patient cohort of a positive COVID-19 case in the practice. Only those who have potentially been exposed must be notified.

How can I contact my local public health unit?

ACT Health	02 5124 9213 (Business hours)
	02 9962 4155 (After hours)
NSW Health	1300 066 055
Northern Territory Department of Health	08 8922 8044
	1800 008 002
Queensland Health	Details for the unit closest to you
SA Health	1300 232 272
Tasmanian Department of Health	1800 671 738
Victorian Department of Health and Human Services	1300 651 160
Western Australian Department of Health	08 6373 2222

What are our practice's workplace health and safety obligations?

All general practices should have policies and procedures in place to provide a safe working environment. This includes being committed to the health, safety and wellbeing of the whole practice team. Practices are obliged to meet their responsibilities as employers by adhering to relevant federal and state/territory workplace health and safety laws.

Resources

- The RACGP's *COVID-19 infection control principles*
- The RACGP's *Guide to providing telephone and video consultations in general practice*
- The RACGP's *Standards for general practices (5th edition)*
- Worksafe's COVID-19 resources
- The Department of Health's Coronavirus (COVID-19) information for health professionals, including aged care providers, pathology providers and healthcare managers

References

1. Communicable Diseases Network Australia. Coronavirus Disease 2019 (COVID-19): CDNA National Guidelines for public health units. Version 2.9. Canberra: Department of Health, 2020. Available at www1.health.gov.au/internet/main/publishing.nsf/Content/cdna-song-novel-coronavirus.htm [Accessed 13 May 2020].
2. Department of Health. Environmental cleaning and disinfection principles for health and residential care facilities. Canberra: DoH, 2020. Available at www.health.gov.au/resources/publications/coronavirus-covid-19-environmental-cleaning-and-disinfection-principles-for-health-and-residential-care-facilities [Accessed 13 May 2020].
3. World Health Organisation. My 5 Moments of Hand Hygiene. Geneva: WHO, 2020. Available at www.who.int/infection-prevention/campaigns/clean-hands/5moments/en/ [Accessed 9 June 2020].