



Clinic Screening and Testing Process

Operational flow is a critical component of mass screening and testing clinics. It impacts effectiveness and efficiency of clinical operations, shapes client perceptions of service provision, and impacts the client experience.

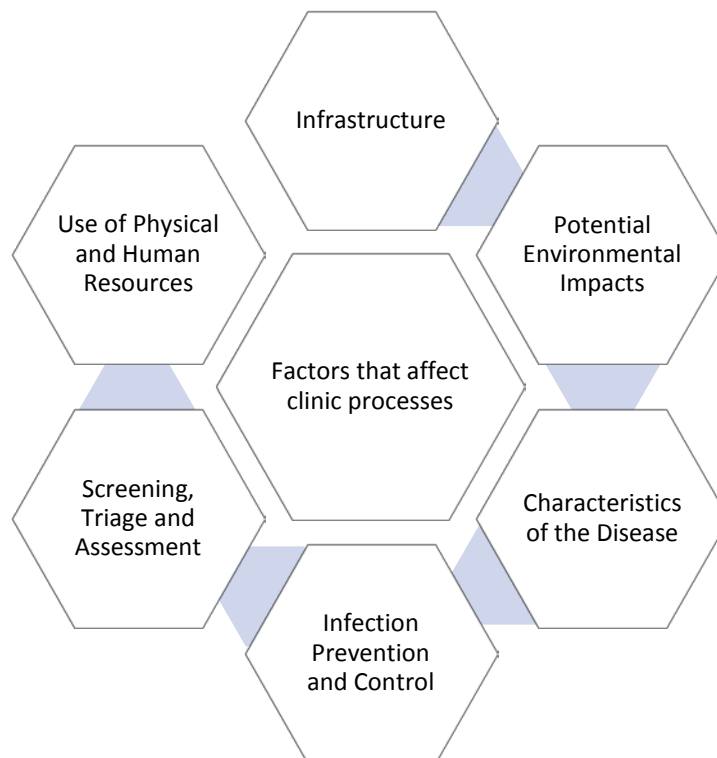


Figure 1. The factors that affect clinic processes include infrastructure (e.g. physical site structures), potential environmental impacts (e.g. cold, heat, rain or snow), characteristics of the disease (e.g. susceptibility, mode of transmission, clinical presentation), infection prevention and control (e.g. personal protective equipment), screening/triage/assessment method, and use of physical and human resources (e.g. supplies, staff training).

Considerations when setting up mass screening and testing clinics:

- Clients should be greeted and engaged early by an individual who is prepared to provide COVID-19 information
- Clients should be informed of their expected wait times and registration process
- Clients may be advised to leave the clinic and told to return when wait times are longer than anticipated
- Clients should be provided with reading materials (COVID-19 related client teaching resources) as they wait
- Signage and posters should be at the site to inform clients of where to go
- Single lines are more efficient than multiple line systems
- Process and capacity should be communicated to the public



Clinic Screening/Testing Flow Algorithm

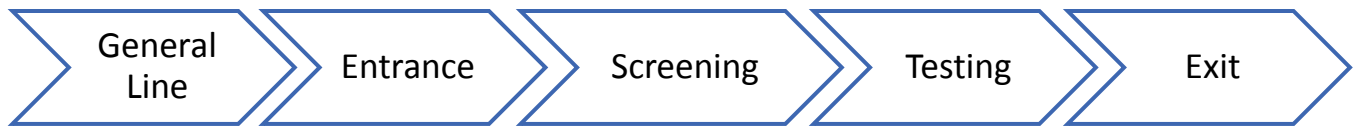


Figure 2. The five steps of a clinic screening and testing process consists of (1) having the clients form a general line, (2) having a knowledgeable individual ready at the entrance to greet the clients, (3) providing the clients with screening questions, (4) having clients who are eligible for testing swabbed, and (5) directing the clients to the exit.

Considerations for the Clinic Screening and Testing Process:

(1) General Line

Clients will line up outside of the entrance to the screening and testing clinic. They should be provided with information about clinic expectations, process and wait times. The healthcare providers (e.g. CHNs, CHRs, HCAs) should reinforce the importance of being at least two metres away from each other and other appropriate public health measures (e.g. respiratory etiquette).

(2) Entrance

Staffing should be dedicated to the entrance to answer questions, conduct triage and distribute paperwork. The client should be instructed to provide the necessary information (e.g. client identifiers). They are then directed to perform hand hygiene, given instructions on how to complete the screening form, and directed to the designated waiting area. The chairs should be placed at least two metres apart from each other.

(3) Screening and (4) Testing

The client will then be called to the screening area. If the client is not eligible to be tested the healthcare provider responsible for the screening will provide public health teaching using the client education materials. Alternatively, if the client is eligible to be tested, then the healthcare provider will direct the client to the swabbing station. Please refer to the *powerpoint for case management and testing* for more information.

(5) Exit



Once the screening or testing is completed, the healthcare provider shall provide public health teaching, and direct the client to perform hand hygiene and leave the clinic through the designated exit. There should be only one designated exit to control the flow of the clinic.