Winnipeg Regional Office régional de la Health Authority Santé de Winnipeg Caring for Health À l'écoute de notre santé					
TITLE: Clinic Liaison Nurse Process					
APPROVED BY: Kim Bailey				TARGET	PAGE
	Date		Date	REVIEW DATE	1 of 4
☑ Population and Public Health	April 18, 2011			2013	

1.0 Purpose:

1.1 To ensure a clear consistent process for the Healthy Sexuality and Harm Reduction (HS/HR) team Clinic Liaison Nurse (CLN).

2.0 Scope and Goal:

2.1 This guideline is intended for Nurses who perform the CLN role within the HS/HR team.

3.0 Background

- 3.1 The CLN is an integral member of the HS/HR team. The CLN:
 - receives information and follows up with health care providers regarding situations where people have tested positive for, or been named as contacts to sexually transmitted and blood borne infections (STBBIs);
 - collects pertinent information necessary for case management, surveillance and evaluation;
 - participates in completion of communicable disease investigations by gathering and documenting information about contacts from health care providers and their support staff;
 - determines the priority of each report (e.g., report of disease in a child or pregnant woman, untreated infection);
 - informs the Public Health Nurses (PHNs) of cases requiring follow-up and provides health care providers with information about management of STBBIs.
- 3.2 The CLN manages some 'out of region' STBBI cases tested within the Winnipeg Health Region; this may include referring public health management to other jurisdictions through Manitoba Health.

4.0 Procedure:

- 4.1 **Find** the "CLN" silver keys in key cabinet in photocopy room for:
 - ✓ Office door (main key opens all doors)
 - ✓ Black cabinet
- 4.2 **Pull** files from the black file cabinet
 - ✓ PHN files are found in front of alphabetized area
 - ✓ CLN files are found in alphabetized area

Winnipeg Regional Health Authority Caring for Health À l'écoute de notre santé					
TITLE: Clinic Liaison Nurse Process					
APPROVED BY: Kim Bailey				TARGET	PAGE
	Date		Date	REVIEW DATE	2 of 4
☑ Population and Public Health	April 18, 2011			2013	

- ✓ Awaiting call back files are found in black plastic file holder. Check date to ensure files are appropriately dealt with by diarized date.
- 4.3 **Organize**: the "pulled" charts; along with charts from PHN for the day by clinic or physician/nurse practitioner.
 - 4.3.1 Check black plastic file holder for all charts diarized to see what's there. For example, if calling a clinic such as Klinic and another Klinic chart is in for the next day, when calling Klinic advise re: new client and that awaiting callback for another client message left yesterday, re-diarize for 2 days batching together.

4.4 Prioritize:

- 4.4.1 CPL (may generate a call to another Dr. office and thus, add to "4.3" above)
- 4.4.2 Urgent stickers (PNT, children, pregnant, CT/GC of the eye)
- 4.4.3 New CT/GC (esp. Dr. McCarthy, prenatal GC, Remand/ MYC, AFM...) see Appendix I
- 4.4.4 Call backs or repeat calls for follow up
- 4.4.5 Hep C
- 4.4.6 HIV and Syphilis are batched (with other charts for the same place), then returned to the appropriate PHN to negotiate process for follow up.
- 4.5 Fax
 - 4.5.1 Fax: "pre-fab" copies in grey drawer for many of the following:
 - ✓ 4 Rivers (Main and Broadway), MYC, MCC
 - ✓ Fax & phone STI nurse @ MCC Mon. for Tues. and Thurs. for Fri.
 - ✓ Community Hospitals (CT and GC only)
 - 4.5.2 Blank fax form (cover sheet) in grey drawer
 - 4.5.3 Request for client information (CT/GC); fax form for info that can be sent to any Dr's office.
 - 4.5.4 Hep C fax for clinics requesting fax
- 4.6 **Phone calls:** list is constantly being revised advise Admin if new or corrected phone # is obtained.
 - 4.6.1 If no answer, leave the central call back number 940-2509. "Please call back with the chart for: name, clinic number, DOB... advise it is ok to

Winnipeg Regional Office régional de la Health Authority Caring for Health À l'écoute de notre santé					
TITLE: Clinic Liaison Nurse Process					
APPROVED BY: Kim Bailey				TARGET	PAGE
	Date		Date	REVIEW DATE	3 of 4
☑ Population and Public Health	April 18, 2011			2013	

leave detailed message on our confidential voicemail. Diarize 2 days for call back.

4.6.2 To minimize confusion don't leave your name ("whoever answers should be able to help...")

4.7 Upon reaching clinic staff:

4.7.1 Confirm demographic information

✓ Name, AKA's, DOB, address, postal code & phone number

4.7.2 Details of follow-up:

- ✓ Reason for testing (eg. symptoms, routine, prenatal, client requested testing...)
- ✓ Other tests STBBI blood work (Syphilis, HIV, Hep B+C, and the date done.
- ✓ Treatment (date and medication, dosage and frequency)
- ✓ Interview (clinic or PHN to do)
- ✓ NSTD date sent
- ✓ PG (EDD, TOC planned-date?) *Refer to Manitoba Health Communicable Disease Control Protocol re: TOC
- **Add RUSH sticker if PNT or other urgent concern (e.g. eye, 12 and under, LGV, there is a neonate who is an untreated GC contact...)

4.7.3 Date and file chart:

- ✓ Indicate in pencil the clinic and/or Dr's name and call back dateusually 2 working days unless 4 Rivers Clinics or a Community Hospital, which is 5 working days.
- ✓ File in the awaiting call back black plastic receptacle.
- **4.7.4 Return to PHN:** when finished or when there have been 2 attempts to contact the clinic (by phone call and/or fax)
- **4.7.5 Transfers within:** If a chart is open to "CLN" (ie. Out of Towner tested in WRHA) is found to have a Winnipeg address give to admin to reassign to area PHN also CLN are not case managers for complex charts eg.

Winnipeg Regional Office régional de la Health Authority santé de Winnipeg Caring for Health À l'écoute de notre santé					
TITLE: Clinic Liaison Nurse Proc	ess				
APPROVED BY: Kim Bailey				TARGET	PAGE
	Date		Date	REVIEW DATE	4 of 4
☑ Population and Public Health	April 18, 2011			2013	

Syphilis, HIV, CT/GC of the eye, children 12 and under. These charts are assigned to OCN#1 even if they do not have WRHA address.

4.7.6 Transfer out of town: eg. CLN chart that requires tx or interview... As there is no NSTD to make notes on CLN should do the following:

- ✓ Write closure note on the lab slip with info, from testing site (tx, symptoms, bw done, ph#...), write "refer to MB Health" for interview or whatever is needed.
- ✓ Photocopy lab slip for Mb Health
- ✓ Stamp lab slip with "sent to MB Health" with date
- ✓ Put in Mb Health hanging folder located in admin office
- ✓ Hold for 2 weeks in case an NSTD comes
- ✓ If none received write closure note on CDC form and progress notes.

4.7.7 New cases for CLN:

- ✓ Initial and date STI cover. Diarize.
- ✓ Post it note with doctor's name and phone number.
- ✓ Memo date as per guidelines and file in black cabinet.

4.7.8 Lock up:

- ✓ "In basket" contents, awaiting callbacks, message book etc. in the black cabinet and lock cabinet
- ✓ ***Remember to put the key back for the next person***
- ✓ Log off computer