Student Practice Education Guideline for Health-Care Settings During the COVID-19 Pandemic

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Strategic Context

The Planning Board for Health and Medical Education (PBHME), representing the Ministry of Advanced Education and Skills Training (AEST) and Ministry of Health (HLTH), recognizes the impact that the COVID-19 pandemic has had on B.C.’s health and education systems. It is critical that the province ensures that student practice education continues in a safe and carefully planned way to prepare B.C.’s future health workforce.

Health-care organizations (HCOs) and post-secondary institutions (PSIs) are required to meet all public health requirements for health-care settings, COVID-19 clinical care guidelines and infection prevention and control (IPC) guidance. Enhanced coordination among the health-care and PSI sectors is essential in order to serve British Columbians now and in the future. PBHME is committed to shared decision-making and regular updates to both sectors.

This guideline is intended to complement, not replace any orders, notices, or guidance issued by the provincial health officer (PHO) or HLTH policies. This document is intended to guide practice at all HCOs where student practice education occurs and all PSIs that deliver health programming with a required practice education component.

Student Practice Education

Definition
Student practice education occurs when students learn and practice through hands-on experience that helps them acquire the necessary skills, attitudes and knowledge required to practice effectively in their field.¹

The terms clinical placements, placements, student practice education and/or practice education are used interchangeably throughout the document.

Goal and Objectives

Goal
To provide guidance to the HCO and PSI sectors to promote student practice education/clinical placement continuity for all health-care disciplines in B.C. The desired outcome of student practice education activities is supporting the development of a competent, skilled health workforce in B.C., ultimately leading to improved health outcomes in the population.

Objectives
1. Create an integrated, flexible approach to support HCOs and PSIs in delivering student practice education and promoting practice education continuity. This principled approach (see Appendix 1: Principles for Practice Education Coordination and Planning) is adaptable in response to evolving pandemic phases, changes in COVID-19 transmission in the placement settings and regions, PHO orders, HLTH/AEST policies and relevant HCO and PSI policies/guidelines.

¹ Practice Education (PE) Definition, former provincial PE Committee, B.C. Academic Health Council, 2011.
2. Outline roles and responsibilities of the health and education sectors for student practice education during the COVID-19 pandemic (Appendix 2: Summary of Roles and Responsibilities).

3. Outline a decision-making process to manage significant delays or placement suspensions (see Appendix 3 and Appendix 4 PSI Health Program Delay Process).

4. Ensure students are prepared and supported to practice safely according to the most up-to-date PHO orders, BC Centre for Disease Control (BCCDC), HLTH COVID-19 clinical care guidelines, policies and IPC guidance, including the appropriate use of personal protective equipment.

5. Ensure HCOs and PSIs follow existing provincial Practice Education Guidelines, and all legislated and regulatory standards currently applicable to practice education HCO settings (e.g., WorkSafeBC).

6. Support HCOs and PSIs with updated information as B.C. continues through the pandemic.

Scope and COVID-19 Assumptions

Scope
This document provides guidance for HCOs and PSIs to collaboratively plan and manage student practice education for all health-care disciplines in B.C.

This guidance document provides the framework for practice education and promotes:
- Quality and safety of students’ practice education experience.
- Evidence-based practice for HCO settings per BCCDC/Ministry of Health clinical practice guidelines on BCCDC’s COVID-19 webpage for health professionals. Alignment with current regulations, standards and legislation for HCO settings.
- Ongoing clarification of roles and responsibilities for all practice education partnerships.
- Common, inclusive language for a broad range of disciplines (regulated/unregulated).
- Clarity, consistency and equity for planning and practice education placement processes.
- Collaborative planning to minimally disrupt learning continuity for students in health programs.

Should significant changes be considered, partners will follow the joint decision-making process (Appendix 3: Decision-making process for significant delays or suspensions).

COVID-19 Assumptions

- COVID-19 is likely going to continue to circulate in B.C., throughout Canada and the world. Transmission is likely to affect different communities in B.C. at different times and to varying degrees.
- While elimination of the COVID-19 virus will not likely occur in the near future, immunization and IPC measures are important practices that health-care workers, including students on clinical placements, must follow to reduce transmission risks for themselves, their patients, other staff students, volunteers, and visitors.

COVID-19 Requirements: Student Practice Education

PHO orders and notices and guidance: All students and faculty participating in clinical placements in HCO settings must meet all PHO orders and notices, along with any other specific Ministry of Health guidance relevant for their profession and clinical care setting.

Practice Education Guidelines: Student practice education in B.C. is guided by 22 Practice Education Guidelines (PEGs). These PEGs support the safety of patients, staff, faculty and students. All of the existing PEGs continue to be applicable with specifications for COVID-19 outlined below.
Hierarchy of Infection Prevention and Control and Exposure Control Measures for Communicable Diseases, Specifically COVID-19 and Student Practice Education

1. Public health measures (e.g., PHO orders and provincial policies)

Proof of COVID-19 vaccination status information: Requirements for providing proof of vaccination status information at care locations and preventive measures are provided in the PHO Hospital and Community COVID-19 Vaccination Status and Preventive Measures Order — Nov 18, 2021.

Mask use in health-care facilities during the COVID-19 pandemic: The Ministry of Health’s mask policy requires that regardless of immunization status, all persons working or training in care locations must wear a medical mask at all times, including in common areas and break rooms unless eating and/or drinking. Please see the policy for more information. The policy states all health care facilities must provide medical masks for health-care workers, non-clinical staff, students, faculty, patients and visitors where indicated in this policy.

Other related mask use resources (e.g., vehicle ride along and PSI laboratory): Please see the PHO Order on Face Coverings. ²

2. Administrative Measures (e.g., screening for symptoms and risk factors and IPC practices)

Student/faculty daily assessment:
Students and faculty must complete the COVID-19 Health-Care Worker Self-Check and Safety Checklist including a self-assessment prior to each shift as per WorkSafeBC requirements. Local HCO sites may have additional requirements for self-assessment or screening.

Other resources: COVID-19 Entrance Screening Tool for Health Care Facilities

Point-of-care risk assessment (PCRA) prior to patient, client or resident interaction
Prior to every patient/client/resident interaction, students/faculty/staff must complete a PCRA to assess any infectious risks posed by a patient, situation or procedure to themselves and others. The PCRA helps students/faculty/staff select the appropriate actions and PPE required to minimize the risk of exposure.

Infection Prevention and Control

HLTH policy: Infection Prevention and Control for all Health Authorities - Updated Sept. 1, 2021
This policy outlines the ministry’s recommendations for IPC practices to prevent and control COVID-19 in all health authority facilities, programs and services, as well as community physician offices and outpatient clinics.

3. Personal measures (e.g., staying home when sick, respecting personal space)

Respecting personal space: Where possible during students practice education, education or work experience, students and faculty should respect the personal space of others.

Illness during a practice education shift and testing for COVID-19:
- If students or faculty should develop COVID-19 like symptoms while on-site, they must leave the practice setting immediately and follow the current guidelines for testing, care and follow-up.
- Students/faculty that test positive for COVID-19 should follow the provincial guidance on BCCDC’s “If you have COVID-19” webpage.

Personal Protective equipment (PPE):
- HCOs will provide appropriate PPE for all students and faculty.

4. Outbreak management and other PHO orders with implications for practice education

**Outbreak management:** Outbreak management is under the jurisdiction of the local/regional medical health officer (MHO) or their official delegate.
- Students may be restricted during outbreaks by the MHO to reduce crowding and risk of transmission.
- Health Career Access Program (HCAP) students: HCAP Practicums- Variance of the Facility Staff Assignment Order – May 16, 2021 – this order remains in effect until rescinded by the PHO. See Appendix 5 for additional information for HCAP students and faculty.

**PHO staff facility – single site order:** See Appendix 5.

5. Other student practice education considerations

**Student assignment:** The HCO/PSI may adjust the care area or patient assignment to best match the learning objectives, promote patient, staff and student safety, as well as preserve PPE supplies where appropriate.
- When appropriate, students may provide care to presumptive-positive patients or patients with confirmed COVID-19, when the required competencies, supervision and IPC practices are in place.
- The PHO has outlined the requirements for assignments in long-term care, seniors’ assisted living and provincial mental health facilities with the Long-Term Care Facility Staff Assignment Order. Detailed considerations for student practice education are outlined in Appendix 5.

**Dress code:** Students/faculty should plan to have a change of clothes and shoes to travel to and from the placement site and clothes to work in. Students/faculty must wash placement clothes between shifts.

**Local policy/guidelines:** PSIs and HCOs should share any site/program specific guidance related to COVID-19 response with students/faculty prior to the start of the student practice education experience.

**Preceptor/clinician supervision:** Preceptors or clinicians who supervise students should review and provide relevant site or program guidelines with the student and on-site faculty (see Appendix 6).
Resources and Supports

Provincial resources:
- **BCCDC**: [http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care](http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care)
- **B.C. government**: [https://www2.gov.bc.ca/gov/content/covid-19/info/response](https://www2.gov.bc.ca/gov/content/covid-19/info/response)

PSIs/ HCOs resources
- Resources for student practice education in B.C. can be found at: [https://spe.healthcarebc.ca/](https://spe.healthcarebc.ca/)
- Each PSI has resources in place to support students during the pandemic. To learn more, visit the website for each PSI.
- HCOs have developed specific policies, procedures, learning resources and information to support students and faculty returning to clinical settings. Resources are posted on the following websites:

<table>
<thead>
<tr>
<th>COVID-19 resources by health authority / HCO</th>
<th>Student education resources by health authority/ HCO</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Nations Health Authority</td>
<td>First Nations Health Authority</td>
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<tr>
<td>Fraser Health</td>
<td>Fraser Health</td>
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<td>Interior Health</td>
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<td>Island Health</td>
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<td>Northern Health</td>
<td>Northern Health</td>
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<tr>
<td>Providence Health Care</td>
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<tr>
<td>Provincial Health Services Authority</td>
<td>Provincial Health Services Authority</td>
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<tr>
<td>Vancouver Coastal Health</td>
<td>Vancouver Coastal Health</td>
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Transition to Practice during the COVID-19 Pandemic

Students graduating from health programs during the pandemic may have different practice education experiences compared to other students before the pandemic. It is important that both PSIs and HCOs recognize and consider new approaches that may be required to support a successful transition to practice, such as PSIs providing post-graduate support and HCOs providing enhanced transition-to-practice support.
Appendix 1: Principles for Practice Education Planning and Coordination

Safety
- HCOs and PSIs continue to prioritize safety, training and support for staff, faculty and students to protect them against the spread of COVID-19 including:
  - Following PHO orders and the Ministry of Health’s policies on COVID-19.
  - Ensuring all staff, faculty and students meet immunization requirements.
  - Implementing IPC measures (public health, environmental/administrative, personal measures and PPE) to help create a safe placement environment for all.
  - Ensuring faculty and students conduct a daily COVID-19 Health-Care Worker Self-Check and Safety Checklist before each practice education shift.
  - Emphasizing to staff, faculty and students that they must stay home when they are sick.
  - Providing pandemic education and resources to support care (e.g., clinical care/IPC guidelines).

Responsibility
- PSIs’ health programs have a social mandate to prepare the health workforce and ensure a continuous supply of competent graduates. This mandate is more critical and immediate during a global pandemic.
- PSIs’ health programs recognize the ethical and moral commitment of faculty and students to balance duty to care and perceived or actual risks to their own health during the pandemic.
- HCOs recognize their role in supporting the education and preparation of students through the provision of practice education experiences. HCOs are encouraged to consult with PSI partners, and their leadership team to identify strategies to promote practice education continuity.

Collaboration
- Collaboration between AEST, HLTH, PSIs, HCOs and regulatory bodies is an essential component for maintaining practice education continuity throughout the pandemic. Collaboration should be facilitated, centrally supported and coordinated on a provincial basis.
- A collaborative approach will facilitate identification of new opportunities where students can develop competencies appropriate to the level/nature of the practice education requirements.

Competency-based
- Practice education is delivered within a competency-based approach that allows flexibility in determining the range of experiences, settings and the clinical hours required to achieve competence. Emerging health needs and a surge in services or reduction of services may present alternate opportunities to develop essential competencies.

Prioritization
- Students in health programs that lead to employment in a Ministry of Health-priority profession or have competencies critical to the pandemic response/recovery (e.g., surgical renewal, intensive

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care, long-term care, primary and community care) may be given preferential access to placements to ensure graduation and entry into the workforce.

- Students nearing the end of their health education programs are a high priority to complete practice education experiences enabling them to graduate and enter the workforce.
- Graduate or second-credential program students’ practice education experience should only be cancelled under rare and exceptional circumstances.

**Integrated preparedness planning**

- Education and health services may experience changes and fluctuations based on COVID-19 transmission in the community, province, and country. Both sectors will need to develop integrated preparedness plans and monitoring systems that align with emerging health needs and evolving student practice education requirements.
- Integrating planning can promote the adoption of innovative approaches including new settings and designs that are responsive to meet the evolving needs of the health system during the pandemic.
## Appendix 2: Summary of Roles and Responsibilities

<table>
<thead>
<tr>
<th>Topic</th>
<th>PSI action</th>
<th>HCO action</th>
<th>Provincial/government supports</th>
</tr>
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</table>
| Coordination and planning for practice education placements | Enhanced collaborative planning to reduce the impact of COVID-19 transmission on practice education requirements. | Enhanced collaborative planning to reduce the impact of COVID-19 transmission on practice education requirements. | HLTH/AEST: Develop policy and communication with sectors.  
PHSA Health Sciences Placement Network (HSPnet): Monitor aggregate student activity data.  
Guidance updates based on policy or guidelines changes. |
| Practice education placement status (suspend, modify, resume, proceed) | Consider the student’s level and experience, safety, learning environment and continuity, modifications.  
Consider any prioritization of practice education placements as per COVID-19 guidelines.  
Communicate and collaborate with HCO, AEST, HLTH, and the local MHO. | Consider the student’s level and experience, safety, learning environment and continuity, modifications.  
Implement Medical Health Officer site-specific orders.  
Communicate and collaborate with PSI, AEST, HLTH, and the local medical health officer. | HLTH/AEST: Provide policy direction or guidance to the sectors on practice education placement continuity.  
PHO: PHO orders to restrict placements or permit placements with appropriate precautions/measures. PHO orders for all facilities where practice education occurs (e.g., proof of vaccination). |
| Pre-practice education placement requirements | Ensure student records are current for criminal record check, immunization, and orientation. Ensure students are aware of all PHO orders that have practice education requirements (e.g., proof of COVID vaccination).  
Ensure students and faculty are aware of and will implement specific guidelines for COVID-19.  
Communicate any issues with delays or barriers in completing requirements. | Collaborate to resolve any issues with delays or barriers in completing requirements.  
Provide orientation topics and resources. |  |
| Infection, prevention and control practices | Ensure students are adhering to personal safety measures, including the use of PPE, respiratory hygiene, frequent hand hygiene, and physical distancing. | Provide learning resources, policies and protocols and job aids to support IPC practices in clinical settings. | HLTH: Provide [IPC guidance](#) for various health-care settings for health professionals on BCCDC’s webpage. |
| PPE | Fit testing of N95 respirators for all staff as required.  
Provide appropriate PPE to students for labs.  
Teach don/doff procedures.  
Modify placement areas and patient assignments as required. | Provide appropriate PPE to students and faculty for placements.  
Follow IPC practices for COVID-19.  
Modify practice education placement areas and patient assignments as required. | HLTH: Provide [IPC guidance](#) for various health-care settings for health professionals on BCCDC’s webpage. |
Appendix 3: Decision-Making Process: Significant Delays or Placement Suspensions

The decision-making process must comply with any direction given by the PHO and/or MHOs. In monitoring the status of COVID-19 in B.C., the PHO may issue specific orders for the health and education sectors or general guidance to the public that also applies to student practice education settings. MHOs may issue additional orders/guidance for their region of responsibility.

Both PSIs and HCOs have a responsibility to ensure the safety of their students, faculty, staff and patients. As the circumstances of the pandemic evolve, either or both sectors may assess the care and learning environment and decide that practice education rotations need to be suspended, delayed or modified from the original request.

To ensure that the decision is informed by an appropriate assessment of risk, consultation with the local MHO is highly recommended where there could be significant delays or impacts.

Any adjustment to the practice education preparation of students will have significant impacts on the future availability of the health system workforce.

Examples of the above terms:
- Suspended: clinical placements that have started and need to be paused part way through.
- Delayed: a placement that does not start when scheduled (see appendix 4).
- Modified: a placement with significant changes in location or duration.

Longer term delays/suspensions of student practice education: requirement of PSIs/ HCOs

PSIs: If PSIs are considering cancelling or significantly modifying a health program cohort or practice education placement, they should work with AEST and their HCO partners to explore alternatives before a final decision is made. To ensure that the decision is informed by an appropriate assessment of risk, consultation with the local MHO is highly recommended.

HCOs: HCOs considering cancelling or significantly reducing placements should work with their senior leaders, the Ministry of Health, other HCOs and their PSI partners to explore alternatives to mitigate impacts on student progression before a final decision is made. To ensure that the decision is informed by an appropriate assessment of risk, consultation with the local MHO is highly recommended.
Appendix 4: Post-Secondary Institution Health Program Delay Management Process

1. PSI notifies AEST of potential health program delay
2. Workforce demand information is reviewed
3. AEST consults with HLTH program lead
4. System capacity in program area is reviewed
5. HLTH/AEST facilitate discussion with PSI and HCO
6. Consultation with MHO as appropriate.
7. Notify Planning Board for Medical and Health Education – standing information item
8. Further direction from PBHME
9. AEST/HLTH work with PSI and HCOs
10. Ensure communication to all levels
11. Notify other impacted areas as appropriate
12. AEST consults with HLTH program lead
13. Ensure communication to all levels
Appendix 5: Provincial Health Officer Facility Staff Assignment Order Student Practice Education Implications

Table I: Facility Staff Assignment Order – Single Site Order (SSO)

| PHO order: | On April 15, 2020 the PHO issued a Facility Staff Assignment Order that is specific to facilities i.e. long-term care (LTC) facilities, private hospitals, seniors’ assisted living, standalone extended care hospitals and provincial mental health facilities named in the order. The order includes students and on-site faculty and restricts them from having more than one role (e.g., practice education, volunteer and/or employment) at the facilities named in the order. |

| Additional PHO orders Related to the Facility Staff Assignment Order: | Hospital and Community COVID-19 Vaccination Status and Preventive Measures Order (Nov 18, 2021) also applies to the deployment of students and faculty to a residential care facility. |

| Excluded sites: | The SSO PHO order does not apply to acute care or community settings. As the risk differs from facility to facility and in different regions of B.C., the MHO is in the best position to assess local circumstances and to make decisions about the assignment of staff and any exemptions. |

| Order exemption – item G: | The SSO order does not apply to vaccinated students/onsite faculty for dietitians, medical laboratory technologists, medical laboratory assistants, nurse practitioners, paramedics, pharmacists, physicians, resident physicians, speech language pathologists, inter-facility transport staff, delivery persons, trades people, regular and biochemical waste removal people, biomedical engineers, visitors or any other person or class of person who are exempted by the MHO that provide the operator/other with the required proof of vaccination. |

| Other Exemptions for HCAP Students and Practicums: | On May 16, 2021, the PHO issued the HCAP Practicums – Variance of the Facility Staff Assignment Order, which permits students and faculty from the HCAP program a variance from the SSO order. |

| Other Exemptions for HCAP Students and Practicums: | In order for an HCAP student to be placed in a facility other than the one in which the student is working for the purpose of a practicum, and for an HCAP faculty member to supervise students doing a practicum in a facility other than the one in which the faculty member is working, it is necessary to implement variance to the Facility Staff Assignment Order of April 15, 2020 by adding the following provisions under educational institutions: |

4. A post-secondary institution providing HCAP may place a person who is enrolled as a student in HCAP, and who is working in a facility, in one other facility than the one in which the student is working for the purpose of a practicum. 
5. A person who provides instruction in HCAP, and who is working in a facility, may be present in one other facility than the one in which the person is working for the purpose of overseeing students doing a practicum. 
6. In the event that a MHO declares an outbreak of COVID-19 in a facility in which a student to which section 4 applies is either working or doing a practicum, the student may only continue to work or do a practicum in the facility in which the student is working or doing practicum at the time when the declaration is made, until the medical health officer declares that the outbreak is over. |

| Practice education interpretation of the Facility Staff Assignment Order: | Students and on-site faculty can hold practice education, volunteer and/or employment roles in non-order sites (e.g., community and acute care) and at the same time hold practice education, volunteer |
Table I: Facility Staff Assignment Order – Single Site Order (SSO)

and/or employment roles in a facility named in the order and vice versa. Unless exempt under the HCAP Practicums – Variance of the Facility Staff Assignment Order.

**Implications for PSIs and HCOs not exempt:** PSIs and HCOs listed in the SSO will follow the order and any variance or addition to the PHO order while the order remains in effect. Together, the two sectors will identify and inform all affected students and faculty.

<table>
<thead>
<tr>
<th>For students/ on-site faculty that are included in PHO orders (but not exempt), HCOs shall:</th>
<th>For students/ on-site faculty that are included in PHO orders (but not exempt) PSIs shall:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• <strong>Not</strong> permit students currently in a placement within a site named in the order to hold any role at another site named in the order.</td>
<td>• <strong>Not</strong> make arrangements for students to be placed in more than one facility named in the Order.</td>
</tr>
<tr>
<td>• <strong>Not</strong> permit on-site faculty to supervise or hold any other role at a facility named in the order, if the on-site faculty is supervising at another facility named in the order.</td>
<td>• <strong>Not</strong> arrange for on-site faculty to attend at more than one facility named in the order to supervise students.</td>
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</tbody>
</table>

**Moving from single site facility to other facilities not named in the Single site order:**

**Self-isolation:** There is no requirement for fully vaccinated students and on-site faculty to complete the **self-isolation** period before moving to/from a site within/outside of the order (and vice versa), **unless** they have COVID-19 symptoms and/or are following recommendations from the MHO/designate.
Appendix 6: Summary for Responsibilities and Related Resources for Student Supervision in a Placement Site during COVID-19

<table>
<thead>
<tr>
<th>Timing</th>
<th>Clinicians/ preceptors, site leadership, PSI faculty responsibilities: actions/ resources</th>
</tr>
</thead>
</table>
| **Before placement begins:**         | 1. Review the Provincial Health Officer (PHO) Orders, including the Hospital and Community COVID-19 Vaccination Status and Preventive Measures Order, and the Facility Staff Assignment Order and other order variances to determine if your discipline and the sites where you provide services are under a PHO Order. If yes, ensure the student placement is in compliance with the Order.  
3. Review the existing provincial Practice Education Guidelines.  
4. Review the clinical area’s capacity to ensure that there is space, PPE, and a patient census that will meet the learner’s needs.  
   o If there is limited capacity, prioritize placements for students nearing their program completion. |
| **During the placement:**            | 1. Provide all site-specific and infection control COVID-19 guidelines to the student.  
2. Ensure the student follows required processes and protocols:  
   • Complete the COVID-19 HCW Safety Checklist, including a self-assessment prior to each shift.  
   • Complete a PCRA assessment prior to every patient/client interaction.  
   • Follow the process for what to do if the student becomes symptomatic.  
   • Guide students in accessing resources and supports.  
3. Provide appropriate PPE to students and faculty for placements.  
4. Model/monitor all COVID-19 IPC practices, including the Ministry of Health’s policy on mask use in health care facilities, to prevent transmission of the virus.  
5. Modify placement areas and patient assignments as required in concert with the post-secondary institution.  
6. Determine whether students will be able to provide care to presumptive-positive patients or patients with confirmed COVID-19, ensuring the required competencies, supervision and IPC practices are in place.  
7. Follow the direction of the MHO and the outbreak management protocols. |
| **Troubleshooting, should placement continuity issues develop:** | 1. If issues arise during the placement that may affect the successful completion of the placement, clinicians are advised to contact their site leaders and the post-secondary representative as early as possible.  
2. To ensure that the decision is informed by an appropriate assessment of risk, consultation with the local Medical Health Officer is highly recommended.  
   **HCOs (e.g., clinicians or preceptors)**  
   HCOs considering cancelling student placements should work with their senior leaders, HLTH, other HCOs and PSI partners to explore possible alternatives before a final decision is made. |
Guideline Contributors and Reviewers

**Contributors**

- Ministry of Health, Nursing Policy Secretariat
- Provincial Health Services Authority, Academic Education

**Reviewers**

- Office of the Provincial Health Officer
- Ministry of Advanced Education and Skills Training, Post Secondary Policy and Programs
- Ministry of Health, Allied Health Policy Secretariat
- Ministry of Health, Public Health, Prevention and Planning Branch (Communicable Disease)
- Provincial Nursing and Allied Health Council
- Health Authority Practice Education Committee
References


Planning Board for Health and Medical Education: Memorandum to VP’s Academic, VP’s Human Resources, VP’s Medicine, Provincial Nursing and Allied Health Council (March 24, 2020).

Planning Board for Health and Medical Education: Memorandum to VP’s Academic, VP’s Human Resources, VP’s Medicine, Provincial Nursing and Allied Health Council (April 8, 2020).